Expanding Vital Mental Health Services for Underserved Populations Most Impacted by COVID-19 in Buncombe County

RFP for Coronavirus State and Local Fiscal Recovery Funds

All Souls Counseling Center

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Application Form

Question Group
Buncombe County requests proposals for projects to help the community recover from and respond to COVID-19 and its negative economic impacts.

Buncombe County has been awarded $50,733,290 in Coronavirus State and Local Fiscal Recovery Funds (Recovery Funding), as part of the American Rescue Plan Act. To date, Buncombe County has awarded projects totaling $23,093,499, leaving a balance of $27,639,791 available to award.


This infusion of federal resources is intended to help turn the tide on the pandemic, address its economic fallout, and lay the foundation for a strong and equitable recovery.

Buncombe County is committed to investing these funds in projects that:

- Align to county strategic plan and community priorities
- Support equitable outcomes for most impacted populations
- Leverage and align with other governmental funding sources
- Make best use of this one-time infusion of resources
- Have a lasting impact

Proposals shall be submitted in accordance with the terms and conditions of this RFP and any addenda issued hereto.

Click here for the full terms and conditions of the RFP

Organization Type*
Nonprofit

Nonprofit documentation
If nonprofit, attach IRS Determination Letter or other proof of nonprofit status.

   ASCC 501c3 Letter.pdf

Name of Project.*
   Expanding Vital Mental Health Services for Underserved Populations Most Impacted by COVID-19 in Buncombe County
New/Updated Proposal*
Is this a new project proposal or an updated version of a proposal submitted during the earlier (July 2021) Recovery Funding RFP?

Updated version of previously submitted proposal

Amount of Funds Requested*
$962,292.00

Category*
Please select one:
- Affordable Housing
- Aging/Older Adults
- Business Support/Economic Development
- Environmental/Climate
- Homelessness
- K-12 Education
- Infrastructure and/or Broadband
- Mental Health/Substance Use
- NC Pre-K Expansion
- Workforce

Mental Health/Substance Use

Brief Project Description*
Provide a short summary of your proposed project.

This project will expand All Souls Counseling Center’s (ASCC) core program of providing high quality, affordable individual, couples, family, and group mental health counseling to underserved individuals without health insurance or whose current insurance and financial situation makes it prohibitive to pay. Our services are offered on a sliding scale to any adult living in the western counties of North Carolina, with no one turned away for inability to pay. Underserved communities such as people of color, low-income individuals, and the LGBTQ+ community have been disproportionally impacted by the pandemic and their mental health needs are a critical unmet need. Our project will establish a robust outreach program to better engage with these communities. We will also strengthen our clinical and administrative capabilities in the form of a new clinical support role and the implementation of an electronic medical records system to provide more comprehensive care to our clients.
**Project Plan**

Explain how the project will be structured and implemented, including timeframe.

Our project will begin immediately upon the signing of our grant agreement and operate for four years from that date. It has three components:

1. ASCC will establish a strategic outreach program to better engage underserved communities including people of color, low-income individuals, and the LGBTQ+ community. This program will be led by the hiring of a full-time outreach coordinator who will:
   a. Create and maintain connections with community service partners, referral partners, community groups, and faith communities, with a focus on those that engage with underserved communities
   b. Greatly expand the publicity of our services through a wide variety of mediums including email marketing, social media, community events and festivals, local media outlets, and presentations for referral partners such as healthcare centers, service providers, and primary care doctors’ offices
   c. Lead multiple mental health education and awareness events throughout the year, including our annual Mental Wellness Walk, focused on normalizing the process of seeking help for mental health issues to encourage people to access care before they’re in crisis. These events will also be used to share comprehensive information about the mental health resources available in our community.

2. ASCC will add an additional full time mental health clinician to our team to provide direct support to our current Clinical Manager. This added support will enhance our clinical model by providing more comprehensive oversight and will help strengthen our infrastructure to run the daily functions of our clinical services. This role will provide administrative support and clinical oversight from a client's first phone call all the way through the end of treatment. They will screen clients for our services and assign them to therapists, record and manage client data, and offer clinical review of individual cases.

3. ASCC will implement a new electronic medical records system with a subscription to the cloud platform Apricot. Currently, ASCC operates with the use of paper client records and during the pandemic our therapists shifted to remote therapy sessions. We now operate with a hybrid model offering both in-person and virtual therapy sessions, and our paper files create inefficiency as therapists must transport client case files to and from their homes and our office. An electronic medical records system will:
   a. Give us a centralized platform that our staff and therapists can securely access from anywhere to update client data, case notes, and track client payments
   b. Greatly increase efficiency by streamlining data capture and automating much of the work
   c. Free up time for our Business Office Manager to focus on more strategic budgeting, financial goal setting, and comprehensive reporting and data tracking
   d. Provide a platform for clients to see their payment balance, due dates, and history of payments

**Statement of Need**

Describe the need that this project will address. Include data to demonstrate the need, and cite the source of the data.

Mental health has long been a key public health issue in Western North Carolina (WNC), and for those without insurance, access to mental health care can be prohibitively expensive. In most parts of the country, an hour-long therapy session costs between $100-$200 without insurance, according to therapist directory GoodTherapy.org. According to the Kaiser Family Foundation (KFF), in 2019, 13.6% of the population in North Carolina was uninsured, ranking the state 44th among all 50 states and Puerto Rico and DC in terms of the percent covered by any kind of health insurance. In Buncombe County, nearly 30,000 people are uninsured, or 14.6% of the population, according to 2019 US Census data. Even with insurance, North Carolina is one of the most expensive states in the country for obtaining mental health care. An August 2021 study by the site WalletHub ranked NC 49th out of the 50 states and DC in terms of cost of health care coverage.

In addition to the significant negative effects of poor mental health on quality of life, it also incurs indirect costs to society in the form of lower workforce participation rates and decreased productivity. Depression alone is estimated to account for $44 billion in losses to workplace productivity in the US, according to Tufts.
Medical Center and brain health researcher One Mind. One Mind reports that the costs of untreated or insufficiently treated depression are approximately eight times the cost of treating depression and comorbid disorders.

Untreated mental health also puts undue burden on our county’s emergency services. A 2020 study from the Journal of Clinical Psychiatry found that the proportion of emergency department visits for mental health diagnoses increased from 6.6% to 10.9% in the US over a ten-year period. NCDetect, created by the NC Division of Public Health, reported that emergency department visits related to mental health in Buncombe County rose by 28% from Q1 2018 to Q3 2019.

**Link to COVID-19**

Identify a health or economic harm resulting from or exacerbated by the public health emergency, describe the nature and extent of that harm, and explain how the use of this funding would address such harm.

The pandemic has exacerbated the prevalence and severity of mental health issues in our nation and in Buncombe County specifically. In January 2021, about 4 in 10 adults in the U.S. reported symptoms of anxiety or depressive disorder, up from 1 in 10 adults who reported these symptoms from January to June 2019, according to Kaiser Family Foundation surveys. In June 2021, in an open letter to the Governor of North Carolina and legislative leaders, 11 healthcare groups and the NC Chamber warned that the state is nearing a mental health services crisis in the wake of the COVID-19 pandemic. The groups cited a 2021 report by Mental Health America that ranked North Carolina 44th among states for access to mental health care.

In Buncombe County, the Department of Psychiatry at MAHEC in Asheville reported a fourfold increase in depression and anxiety among adults in WNC from July 2020 to July 2021 (Asheville Citizen Times, 7/11/21). Buncombe County’s Family Justice Center reported that domestic and sexual violence survivors seeking services increased 614% for May 2021 when compared to the previous May.

Among our own clients, we have observed the following trends:
- 25% of our clients reported seeking help with PTSD in 2021 compared to 14% in 2020
- 32% reported seeking help with stress management in 2021 compared to 23% in 2020
- 53% reported seeking help with depression in 2021 compared to 41% in 2020

Prior to the pandemic, people of color, low-income individuals, LGBTQ+ individuals, and other underserved communities already faced large disparities in health and healthcare coverage. The pandemic has exacerbated these disparities. Besides the direct health effects of the pandemic, the economic and mental health challenges for these communities were disproportionately felt. By enhancing and expanding our services to better engage with underserved communities in Buncombe County, ASCC can directly address the mental health needs of those most impacted by the pandemic.

**Population Served**

Define the population to be served by this project, including volume and demographic characteristics of those served.

This project will focus on expanding our services and outreach to better engage underserved communities in Buncombe County and WNC as a whole. This project will directly serve 1400 individuals with 19,500 sessions of individual, couples, family, or group therapy over the course of the four-year period of the grant, with an estimated 750 more individuals reached through our education, awareness, and advocacy efforts.

Our services are available to adults from all backgrounds living in the western counties of North Carolina that are uninsured or underinsured. During our 2020-21 fiscal year (July 1, 2020 to June 30, 2021), 82% of
new clients were uninsured, and 61% reported making $25,000 or less per year. Our typical client pool is 70% women; 7% are aged 24 or younger; 69% are between the ages of 25-49; and 24% are between the ages of 50 and 64. 88% of our clients reside in Buncombe County.

Our clients come to us seeking help with issues that include anxiety, depression, PTSD/trauma, addiction recovery, grief and loss, postpartum depression, parenting issues, gender identity and sexual orientation (LGBTQ+ affirming), domestic/family violence, physical/sexual assault, and relationship challenges. Bilingual English/Spanish counseling is available if requested, enabling us to better serve the Latinx community.

Our services are offered on a sliding scale that goes as low as $0 if a client is unable to pay. Of the total number of individual therapy sessions provided during our last fiscal year, 64% were provided free of charge to clients. 89% were provided at $25 or less. For those without insurance in WNC, there are very few options outside of ASCC for more extended, individual therapy. Most other behavioral health providers serving the uninsured rely on limited state funds, which generally allow only a few individual sessions, after which group sessions are the only option. Most of our clients receive individual therapy.

**Results**

Describe the proposed impact of the project. List at least 3 performance measures that will be tracked and reported. If possible, include baselines and goals for each performance measure.

In our past fiscal year (2020-21) we served 274 clients with 3,364 counseling sessions. 933 phone calls were received inquiring about our services. Over the 4-year period of this project, we are committed to achieving the following results:

1. We will increase the number of clients served in year 1 by 40% compared to the numbers served in our 2020-21 fiscal year. We will then increase the number of clients served by 15% in year 2, by 10% in year 3, and by 10% in year 4, each compared to its respective previous year. This breaks down to the following:
   a. We will serve 384 clients in year 1 of the project
   b. We will serve 442 clients in year 2
   c. We will serve 486 clients in year 3
   d. We will serve 535 clients in year 4

2. 80% of our clients will report improvement in their Global Assessment of Functioning Scale scores recorded at the beginning and end of treatment

3. 90% of respondents to our bi-annual Client Survey will report overall satisfaction with the quality of ASCC services

4. Our outreach coordinator, supported by other staff, will lead 4 education and awareness events each project year focusing on relevant mental health topics, destigmatizing the process of seeking help, and publicizing our services. These events will be open to the public and target the underserved communities outlined in our Project Plan, with an emphasis on meeting those communities where they are in locations and venues that are accessible and familiar.

5. Our outreach coordinator, supported by other staff, will create and maintain connections with 50 service partners, referral partners, community groups, and faith-based organizations each year. These connections will include presentations about our services and meetings to create and strengthen referral relationships. Efforts will focus on community groups and partners that work with underserved communities.
**Evaluation***
Describe the data collection, analysis, and quality assurance measures you will use to assure ongoing, effective tracking of contract requirements and outcomes.

ASCN continually tracks the number of clients served and number of counseling sessions offered throughout the year. We will compare our numbers served against our overall goals for this project each year. Likewise, we will closely track the number and type of educational and awareness events as well as outreach presentations and meetings with community partners to compare them against our project goals.

To evaluate improvement in behavioral health issues among our clients, we use the Global Assessment of Functioning (GAF) Scale at the beginning and at the conclusion of treatment. We also conduct an anonymous Client Survey twice per year to hear their reflections on whether treatment has helped them or not. This survey is sent out to all active clients who have been seen for at least 3 therapy sessions. Respondents report on whether they've experienced improvement in managing daily functioning, decreased symptoms, and/or achieved their goals as a result of counseling received at ASCC.

Expanding the reach of our core counseling services will offer numerous benefits to our clients and Buncombe County. General benefits for those in therapy can include improved relationships and better overall health. High quality counseling has been shown to prevent mental health issues from turning into a crisis, reducing utilization of more costly services such as mobile crisis, emergency department visits, inpatient care, and law enforcement.

**Equity Impact***
How will this effort help build toward a just, equitable, and sustainable COVID-19 recovery? How are the root causes and/or disproportionate impacts of inequities addressed?

Even before the pandemic, people of color, low-income individuals, and LGBTQ+ individuals reported less access to needed mental health services. The Substance Abuse and Mental Health Services Administration reports that in 2018, 69.4% of black and 67.1% of Hispanic adults with any mental illness reported receiving no treatment the previous year compared with 56.7% of the overall US population. The Kaiser Family Foundation (KFF) reports that as of 2019, nonelderly individuals of color were more likely to lack health insurance than their White counterparts. That gap was even higher in states that have not expanded Medicaid such as North Carolina.

A brief by the KFF in February 2021 reported that 59% of Hispanic adults and 51% of Black adults said their household lost a job or income due to the pandemic, compared with 39% of White adults. Adults with a household income under $40,000 were three times as likely as those with a household income of $90,000 or more to say they have had trouble paying for basic living expenses during the period of March - May 2021. This brief also reported that communities of color experienced disproportionately high rates of COVID-19 cases and deaths and Black and Hispanic adults were more likely than White adults to report symptoms of anxiety and/or depressive disorder during the pandemic.

Longstanding inequities have created barriers to mental health care and health care coverage for these communities, and our project seeks to expand access to mental health services by directly providing outreach and culturally sensitive services. We're committed to gathering honest feedback about their greatest needs for services and we're actively recruiting more therapists of color and therapists from the LGBTQ+ community to provide better representation for our clients. Likewise, we seek to increase the diversity of our Board of Directors with the goal of increasing our ethnic and LGBTQ+ Board representation by 15% respectively by the end of 2022.
**Project Partners**
Identify any subcontractors you intend to use for the proposed scope of work. For each subcontractor listed, indicate:
1.) What products and/or services are to be supplied by that subcontractor and;
2.) What percentage of the overall scope of work that subcontractor will perform.

Also, list non-funded key partners critical to project.

While there are no subcontractors we intend to use for the proposed scope of work, ASCC maintains partnerships with many service providers in Buncombe County that both send client referrals to us and receive referrals from us. These partners are essential to our ability to link clients to needed services and resources beyond what we provide. We have MOUs that formalize the referral relationship between ASCC and Helpmate, Our Voice, Pisgah Legal Services, Homeward Bound, YWCA Asheville, and Western Carolina Medical Society’s Project Access. In our 2020-21 fiscal year, we made 112 referrals to community partners and we received 130 referrals from partner organizations, private care providers, and private therapists.

Some of our other biggest referral partners include Jewish Family Services, VAYA, October Road, RHA, Family Preservation, Western North Carolina Community Health Services, Council on Aging, Mobile Crisis (when clients have suicidal ideation), A-B Tech, Planned Parenthood, MAHEC, Mission Hospital, Dale Fell Center, Julian F. Keith Alcohol and Drug Abuse Treatment Center, 211, law enforcement, primary care doctors’ offices, and private therapists.

We recently met with Our Voice, YWCA, Land of Sky Regional Council, and the Asheville Police Department Victims Services Unit to solicit feedback on how to better understand the needs of underserved communities and connect with them. We plan to soon meet with organizations such as True Ridge, CIMA, WNCAP, Tranzmission, The Campaign for Southern Equality, Youth Outright, ABCCM, Rescue Mission, and many faith-based congregations. We host an outreach table at the annual Blue Ridge Pride Festival.

Finally, ASCC is part of Buncombe County’s Health and Human Services Safety Net Coalition, which is a network of community service providers that share information. We participate in monthly meetings of the Safety Net Coalition.

**Capacity**
Describe the background, experience, and capabilities of your organization or department as it relates to capacity for delivering the proposed project and managing federal funds.

ASCC’s team is led by 4 experienced staff members who will provide oversight to this project and ensure that our results are achieved. If funded, this project would add a clinical support role and outreach coordinator to our team, providing additional oversight.

Meredith Switzer, M.Ed. was appointed Executive Director in March 2022 after serving as the Interim ED since January. She has over 20 years’ experience in the nonprofit arena and has served in leadership capacities - either on staff, Board of Directors, or Advisory Councils - for more than 15 regional nonprofits. She was recognized as the Asheville Chamber of Commerce “Outstanding Woman in Nonprofit Leadership” in January 2021 and received a COVID Humanitarian Award in October 2021 for her executive leadership at Homeward Bound of WNC during the pandemic.

Clinical Manager Pam Penland provides information and screenings for clients at ASCC, in addition to overseeing the scheduling process and medical records system. Business Office Manager Nicole Almeida oversees financial operations, including billing, contracts, audits, and expense tracking and reporting. Development Director Brendan Hughes coordinates grant writing and reporting, fundraising, donor communications, and marketing.
ASCC has a team of 19 contracted, licensed therapists that have a minimum of 5 years of post-master’s clinical experience providing individual therapy. The majority of our team has more than 15 years of clinical experience, and some have more than 30 years of experience.

ASCC has received grants from private foundations, Buncombe County, and the state of North Carolina and is experienced in managing these funds, tracking data related to results, and reporting on achievements and expenditures. Starting in 2016, we have received federal funding through the North Carolina Governor’s Crime Commission to serve victims of crime and domestic violence and we have continued this work to this day with renewed funding from the Commission.

**Budget**

Provide a detailed project budget including all proposed project revenues and expenditures, including explanations and methodology. For all revenue sources, list the funder and denote whether funds are confirmed or pending. For project expenses, denote all capital vs. operating costs, and reflect which specific expenses are proposed to be funded with one-time Buncombe County Recovery Funds.

Download a copy of the budget form [HERE](#). Complete the form, and upload it using the button below.

Buncombe County COVID Recovery Funding Budget - All Souls Counseling Center.xlsx

**Special Considerations**

Provide any other information that might assist the County in its selection.

Attachment 1 - MOUs with Homeward Bound, YWCA, Project Access, Pisgah Legal Services, Helpmate, Our Voice.pdf

Demand for our services has been high during the pandemic, and our waitlist grew to 67 people at the beginning of 2022. So that we might attract new qualified therapists and ensure that our current team of therapists was financially incentivized to take on more client sessions, we increased our per session pay rate to therapists from $35 to $50 in February, funded with a $90,000 gift from a private donor. Since then, our therapists have taken on more sessions and our waitlist has dropped to 8 people as of April. With this funding, ASCC could continue to offer the more competitive pay rate to our therapists and continue to reduce our waitlist and wait time for services. Keeping our waitlist low will enable us to expand our services to a greater number of clients.

When clients begin therapy, they are usually scheduled for weekly sessions, with the frequency adjusted according to individual client needs. Most clients can resolve their issues within 3-6 months but through the pandemic many have remained in therapy for longer periods due to the added stressors of COVID-19 and our therapists have accommodated these needs. This has led fewer overall clients served with longer periods of treatment for each client. As some of the pandemic’s restrictions begin to be lifted based on guidance from local health authorities, we plan to return to a higher number of clients served with an average duration of 3-6 months of therapy per client. We also plan to expand our group counseling to include additional topics or therapy modalities, such as a grief group for parents that have lost a child to suicide.

If awarded this grant, ASCC will use the time during the grant period to search for other diverse funding sources, including donors, public and private grants, and corporate sponsorships, to ensure the sustainability of this project beyond the grant period. We are currently investigating funding from the Dogwood Health Trust, who provides grants of over $100,000 to WNC nonprofits.
File Attachment Summary

**Applicant File Uploads**
- ASCC 501c3 Letter.pdf
- Buncombe County COVID Recovery Funding Budget - All Souls Counseling Center.xlsx
- Attachment 1 - MOUs with Homeward Bound, YWCA, Project Access, Pisgah Legal Services, Helpmate, Our Voice.pdf
Dear Applicant:

Our letter dated SEPTEMBER 2000, stated you would be exempt from Federal income tax under section 501(c) (3) of the Internal Revenue Code, and you would be treated as a public charity, rather than as a private foundation, during an advance ruling period.

Based on the information you submitted, you are classified as a public charity under the Code section listed in the heading of this letter. Since your exempt status' was not under consideration, you continue to be classified as an organization exempt from Federal income tax under section 501(c) (3) of the Code.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at www.irs.gov.

If you have general questions about exempt organizations, please call our toll-free number shown in the heading between 8:30 a.m. - 5:30 p.m. Eastern time.

Please keep this letter in your permanent records.

Sincerely yours,

Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements
## Organization Name:
All Souls Counseling Center

## Project Name:
Expanding Vital Mental Health Services for Underserved Populations Most Impacted by COVID-19 in Buncombe County

## Amount Requested:
$962,292.00

### Proposed Project Revenue Funders

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<tr>
<th>Proposed Project Revenue Funders</th>
<th>Amount</th>
<th>Confirmed or Pending?</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Proposed Buncombe COVID Recovery Funds</td>
<td>$962,292.00</td>
<td>Pending</td>
<td>Please see project expenses below for a breakdown of the planned use of funds.</td>
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<tr>
<td>North Carolina Governor's Crime Commission (GCC)</td>
<td>$320,000.00</td>
<td>Pending</td>
<td>All Souls Counseling Center (ASCC) applied for two years of funding from GCC in January 2022 and we should be notified of the funding decision by June 2022. We have been funded by GCC since 2016 and expect to continue receiving funding throughout the four years of this project.</td>
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<td>Sisters of Mercy of North Carolina Foundation</td>
<td>$90,000.00</td>
<td>Pending</td>
<td>ASCC has been awarded $45,000 from the Foundation approximately every two years since 2015 and we expect to continue receiving funding throughout the four years of this project.</td>
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<td>WNC Bridge Foundation</td>
<td>$25,000.00</td>
<td>Confirmed</td>
<td>ASCC received this funding in November 2021 through the Marjorie Hickman Fund to support fees paid to our therapists.</td>
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<td>Marjorie Hickman Fund</td>
<td>$90,000</td>
<td>Confirmed</td>
<td>ASCC plans to continue diversifying and growing our base of support through expanded individual, faith community, and corporate gifts</td>
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<td>Contributions from Individuals, Businesses, and Faith-based Congregations</td>
<td>$125,150.00</td>
<td>Pending</td>
<td>ASCC plans to continue diversifying and growing our base of support through expanded individual, faith community, and corporate gifts</td>
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**Total**  $1,612,442.00

### Proposed Project Expenses

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<th>Proposed Project Expenses</th>
<th>Proposed Recovery Funds</th>
<th>Other Funds</th>
<th>Total</th>
<th>Capital or Operating Expense?</th>
<th>Notes</th>
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<tr>
<td>Clinical Support Position's Salary for 4 years</td>
<td>$310,416.00</td>
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<td>$310,416.00</td>
<td>Operating</td>
<td>This amount includes an annual base salary of $60,000, $4,560 for FICA expenditures, $10,800 for Health Insurance Benefits, $444 for Dental Insurance Benefits, and $1800 for Retirement Benefits, for a total yearly expense of $77,604, multiplied by 4 years</td>
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<td>Outreach Coordinator Position's Salary for 4 years</td>
<td>$251,876.00</td>
<td>$ -</td>
<td>$251,876.00</td>
<td>Operating</td>
<td>This amount includes an annual base salary of $50,000, $3,825 for FICA expenditures, $7,200 for Health Insurance Benefits, $444 for Dental Insurance Benefits, and $1500 for Retirement Benefits, for a total yearly expense of $62,969, multiplied by 4 years</td>
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<td>Subscription to Electronic Medical Records Platform &quot;Apricot&quot; for 4 years</td>
<td>$80,000.00</td>
<td>$ -</td>
<td>$80,000.00</td>
<td>Operating</td>
<td>This amount includes the $20,000 yearly cost of the subscription to the electronic medical records cloud based platform &quot;Apricot&quot; multiplied by 4 years</td>
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Fees Paid to Therapists for Individual Therapy Sessions over the 4-Year Project Period

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This amount accounts for all fees paid to our team of contracted, licensed therapists for individual therapy sessions. These are billed at $50 per session. This total amount is calculated based on a providing 4,037 sessions in year 1 of the project; 4,643 session in year 2; 5,107 sessions in year 3; and 5,618 sessions in year 4. Please note that the balance of fees paid to therapists will be funded by a combination of public and private grants and donations from individuals, private businesses, and faith-based congregations. Group therapy sessions are not calculated into these amounts and will be covered by different funding sources.
STATE OF NORTH CAROLINA  
COUNTY OF BUNCOMBE  

MEMORANDUM OF UNDERSTANDING  
Between All Souls Counseling Center and Homeward Bound  

1. Parties. This Memorandum of Understanding (MOU) is made and entered into this 20th day of January 2022 by and between All Souls Counseling Center (ASCC) and Homeward Bound and collectively referred herein as "Parties."  

2. Purpose. The purpose of this MOU is to establish the terms and conditions under which ASCC and Homeward Bound will cooperate to provide services to underserved persons, including those who are victims of crime and domestic violence.  

3. Term of MOU. The initial term of this agreement will commence on October 1, 2022 and be valid through September 30, 2023. Thereafter, this MOU will be renewed automatically on a year-to-year basis. This MOU may be terminated by either party with 30 day's written notice to the other party.  

4. Responsibilities - ASCC agrees to provide the following services:  
   a. Provide mental health counseling by professionally licensed therapists. If ASCC’s intake staff member assesses the client to be inappropriate for ASCC services upon triage/intake, they will refer the client to the appropriate mental health resources.  
   b. Referral of appropriate clients to Homeward Bound.  

5. Responsibilities of Homeward Bound agrees to provide the following services:  
   a. Provide Homeward Bound services to appropriate clients referred by ASCC  
   b. Referral of appropriate clients to ASCC.  
   c. Staff will instruct clients who need ASCC’s services to call ASCC directly to be triaged by ASCC’s intake staff member to obtain services.  

      Additional responsibilities: ASCC and Homeward Bound agree to confer when needed to discuss number of referrals, suggestions for improvement in process of referring clients, suggestions for improvement in working relationship between the Parties.  

   a. Amendments. Either party may request changes to this MOU. Any changes, modifications, revisions or amendments to this MOU which are mutually agreed upon by and between the parties to this MOU shall be incorporated by written instrument, and effective when executed and signed by all parties to this MOU.  
   b. It is understood that this is a MOU by and between contractors and is not intended to and will not be construed to create the relationship of agent, servant, employee, partnership, joint venture or association, or any other relationship other than that of contractors.  
   c. This MOU constitutes the entire agreement of the parties with respect to the subject written hereof, and it may not be amended or modified except in a written agreement executed by both parties.  
   d. Indemnification. ASCC and Homeward Bound hereby agree to indemnify and shall protect and hold each other harmless from and against all liabilities, losses, claims, demands, costs, expenses (including
reasonable attorney fees) and judgments of any nature arising or alleged to arise from or in connection with the services rendered pursuant to this MOU.

e. Assignment. Neither Party shall assign this MOU without the prior written consent of the other Party.

f. Confidentiality. Each party agrees to perform this MOU in a manner that complies with HIPAA and with other federal and state laws, regulations and standards governing the protection, use and disclosure of confidential client information (the “Privacy and Security Laws”). Without limiting the foregoing, each party agrees to limit access to confidential client information to those of its employees and agents who have a need to access such information in order to perform their assigned duties in connection with this MOU. Each party further agrees to notify the other party immediately (within 5 business days), and to take appropriate mitigation measures, upon learning that it or any of its employees or agents has violated the Privacy and Security Laws. Notwithstanding anything to the contrary in this MOU, the parties agree that a breach of the Privacy and Security Laws shall be grounds for immediate termination of this Agreement.

g. Each party agrees to maintain general and professional liability insurance at all times relevant to this MOU. Upon request, certificates of insurance evidencing the validity of the insurance coverage required herein shall be provided to the other party.

8. Signatures. In witness whereof, the parties to this MOU through their duly authorized representatives have executed this MOU on the days and dates set out below, and certify that they have read, understood, and agreed to the and conditions of this MOU as set forth herein.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized representative.

For ASCC:
Executive Director

Name: _______________________________
Signature: _____________________________
Date: ________________________________

For Homeward Bound:
Interim Executive Director

Name: _______________________________
Signature: _____________________________
Date: ________________________________
STATE OF NORTH CAROLINA
COUNTY OF BUNCOMBE

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (MOU) is made and entered into this 24th day of January, 2022 by and between All Souls Counseling Center (hereinafter "ASCC") and Western Carolina Medical Society Foundation Project Access (hereinafter "PA") and collectively referred herein as "Parties".

WITNESSETH:

WHEREAS ASCC wishes to collaborate with PA in providing the mental health services outlined in attachment,

NOW, THEREFORE, in consideration of the foregoing premises, promises and other good and valuable consideration the receipt of which is hereby acknowledged, the parties agree as follows:

1. ASCC agrees to provide the services outlined in this document for patients referred through PA network.

2. ASCC agrees to charge PA patients a $5 co-pay to receive counseling services from a therapist.

3. PA patients will be referred to ASCC by their Primary Care Provider. When a referral occurs, PA staff will contact the patient and notify them of the fee schedule. PA staff will instruct the patient to call ASCC to make an appointment for themselves and notify ASCC that they are a PA patient. PA will fax ASCC a pre-authorized referral form for the patient. The patient will not be seen for an appointment at ASCC until this referral form is received. If the patient is unable to pay for ASCC, ASCC will not turn away the patient.

4. ASCC will notify PA once the patient has enrolled for services so that PA staff may track which PA patients are enrolled and receiving services at ASCC.

5. If the patient is assessed to be inappropriate for ASCC services by the triage/intake staff member at ASCC, recommendations will be made to the patient and/or referring physician regarding other mental health resources available to the patient. ASCC will then notify PA that the patient was not accepted into the program.
6. The initial term of this agreement will commence on October 1, 2022 and be valid through September 30, 2023. Thereafter, this MOU will be renewed automatically on a year-to-year basis. This MOU may be terminated by either party with 30 days written notice to the other party.

7. It is understood that this is a MOU by and between contractors and is not intended to, and will not be construed to create the relationship of agent, servant, employee, partnership, joint venture or association, or any other relationship other than that of contractors. ASCC shall be solely and exclusively responsible for taxes and other benefits associated with the services provided under this MOU.

8. This MOU constitutes the entire agreement of the parties with respect to the subject written hereof, and it may not be amended or modified except in a written agreement executed by both parties.

9. ASCC and PA hereby agree to indemnify and shall protect and hold each other harmless from and against all liabilities, losses, claims, demands, costs, expenses (including reasonable attorney fees) and judgements of any nature arising or alleged to arise from or in connection with the services rendered pursuant to this MOU.

11. ASCC may not assign this MOU without the prior written consent of PA.

12. Each party agrees to perform this MOU in a manner that complies with HIPAA and with other federal and state laws, regulations and standards governing the protection, use and disclosure of confidential patient information (the "Privacy and Security Laws"). Without limiting the foregoing, each party agrees to limit access to confidential patient information to those of its employees and agents who have a need to access such information in order to perform their assigned duties in connection with this MOU. Each party further agrees to notify the other party immediately (within 5 business days), and to take appropriate mitigation measures, upon learning that it or any of its employees or agents has violated the Privacy and Security Laws.

Notwithstanding anything to the contrary in this MOU, the parties agree that a breach of the Privacy and Security Laws shall be grounds for immediate termination of this Agreement.

13. Each party agrees to always maintain general and professional liability insurance relevant to this MOU. Such insurance shall have minimum policy limits of $1,000,000 per claim and $3,000,000 annual aggregate. Upon request, certificates
of insurance evidencing the validity of the insurance coverage required herein shall be provided to the other party.

14. ASCC covenants to PA that it is: (a) excluded from participation in any applicable federal or state health care program, including but not limited to, Medicare and Medicaid for having engaged in any activity set forth in 42 U.S.C. 1320a-7 (OIG, LEIE list); (b) excluded from participation for fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct in other than a health care program operated in whole or in part by any federal, state, or local government agency (GSA, EPLS list); (c) a specially designated national set forth in 31 C.F.R.; 501.701

[U.S. Treasury: Specially Designated Nationals list (SDN), also known as Office of Foreign Assets Control list (OFAC). ASCC will promptly notify PA if it becomes excluded from such programs, if sanctions are imposed against them or if any inquiry or investigation is commenced by any governmental agency or authority regarding any of the items or Services provided by ASCC.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized representative.

For ASCC:
Executive Director

Name: Meredith Switzer (Interim Executive Dir.)

Signature: ____________________________

Date: 1/24/2022

For PA:
Outreach Manager

Name: __Margarita Gonzalez, MPH________

Signature: ____________________________

Date: __________1/24/2022______________
MEMORANDUM OF UNDERSTANDING

1. Parties. This Memorandum of Understanding (MOU) is made and entered into this 13th day of January 2022, by and between All Souls Counseling Center (hereinafter "ASCC") and Helpmate, Inc.

2. Purpose. The purpose of this MOU is to establish the terms and conditions under which ASCC and Helpmate will provide services and function.

WHEREAS, ASCC wishes to collaborate with Helpmate in providing services to underserved persons who are victims of crime, especially those people who are victims of domestic violence.

NOW, THEREFORE, in consideration of the foregoing premises, promises and other good and valuable consideration the receipt of which is hereby acknowledged, the parties agree as follows:

1. ASCC agrees to provide the following services:
   a. Mental health counseling by professionally licensed therapists when referred by Helpmate for counseling.
   b. Referral of appropriate clients to Helpmate
   c. If the client is assessed to be inappropriate for ASCC services by the intake staff member on triage/intake, the intake staff member will recommend to the client other mental health resources available to the client.

2. Helpmate agrees to provide the following services:
   a. Provide Helpmate services to appropriate clients referred by ASCC
   b. Referral of appropriate clients to ASCC
   c. Helpmate staff will instruct their clients to call ASCC to make an appointment for themselves.

3. ASCC will collect data on the number of clients referred as well as the number of clients enrolled for services.

   a. Amendments. Either party may request changes to this MOU. Any changes, modifications, revisions or amendments to this MOU which are mutually agreed upon by and between the parties to this MOU shall be incorporated by
written instrument, and effective when executed and signed by all parties to this MOU.

b. The initial term of this agreement will commence on October 1, 2022 and bevalid through September 30, 2023. Thereafter, this MOU will be renewedautomatically on a year-to-year basis. This MOU may be terminated by eitherparty with 30 day's written notice to the other party.

c. It is understood that this is a MOU by and between contractors and is notintended to and will not be construed to create the relationship of agent,servant, employee, partnership, joint venture or association, or any otherrelationship other than that of contractors. ASCC shall be solely andexclusively responsible for taxes and other benefits associated with theservices provided by ASCC under this MOU.

5. This MOU constitutes the entire agreement of the parties with respect to the subjectwritten hereof, and it may not be amended or modified except in a written agreementexecuted by both parties.

6. ASCC and Helpmate hereby agree to indemnify and shall protect and hold each otherharmless from and against all liabilities, losses, claims, demands, costs, expenses(including reasonable attorney fees) and judgments of any nature arising or allegedto arise from or in connection with the services rendered pursuant to this MOU.

7. ASCC may not assign this MOU without the prior written consent of Helpmate.

8. Each party agrees to perform this MOU in a manner that complies with HIPAA andwith other federal and state laws, regulations and standards governing the protection,use and disclosure of confidential patient information (the "Privacy and SecurityLaws"). Without limiting the foregoing, each party agrees to limit access toconfidential patient information to those of its employees and agents who have a needto access such information in order to perform their assigned duties in connectionwith this MOU. Each party further agrees to notify the other party immediately(within 5 business days), and to take appropriate mitigation measures, upon learningthat it or any of its employees or agents has violated the Privacy and Security Laws.Notwithstanding anything to the contrary in this MOU, the parties agree that abreach of the Privacy and Security Laws shall be grounds for immediatetermination of this Agreement.

9. Each party agrees to always maintain general and professional liability insurance relevant to this MOU. Such insurance shall have minimum policy limits of $1,000,000 per claim and $3,000,000 annual aggregate. Upon request, certificates of
insurance evidencing the validity of the insurance coverage required herein shall be provided to the other party.

10. ASCC declares to Helpmate that it is: (a) excluded from participation in any applicable federal or state health care program, including but not limited to, Medicare and Medicaid for having engaged in any activity set forth in 42 U.S.C. 1320a-7 (OIG, LEIE list); (b) excluded from participation for fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct in other than a health care program operated in whole or in part by any federal, state, or local government agency (GSA, EPLS list); (c) a specially designated national set forth in 31 C.F.R.S 501.701

U.S. Treasury: Specially Designated Nationals list (SDN), also known as Office of Foreign Assets Control list (OFAC). ASCC will promptly notify Helpmate if it becomes excluded from such programs, if sanctions are imposed against them or if any inquiry or investigation is commenced by any governmental agency or authority regarding any of the items or Services provided by ASCC.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized representative.

For ASCC:
Executive Director

Name: _______________________________
Signature: ____________________________
Date: ________________________________

For Helpmate:
Executive Director

Name: April Burgess-Johnson
Signature: ____________________________
Date: 1/13/2022
STATE OF NORTH CAROLINA  
COUNTY OF BUNCOMBE

Memorandum of Understanding

This document constitutes a Memorandum of Understanding (MOU) between Our VOICE, Inc., and All Souls Counseling Center (ASCC). This MOU is made and entered into this 1st day of January 2022 by and between ASCC and Our VOICE, Inc. and collectively referred herein as "Parties." The initial term of this agreement will commence on October 1, 2022 and be valid through September 30, 2023. Thereafter, this MOU will be renewed automatically on a year-to-year basis. This MOU may be terminated by either party with 30 day's written notice to the other party.

History
Our VOICE, Inc, is a non-profit crisis intervention and prevention agency which serves victims of sexual violence and human trafficking, age 13 through adult, in Buncombe County and surrounding counties.

All Souls Counseling Center is a non-profit agency that provides affordable, quality mental health counseling for uninsured and underinsured adult residents of Western North Carolina.

Our VOICE, Inc. and ASCC have worked collaboratively assisting victims of sexual violence, human trafficking, and domestic violence.

Agency Roles and Responsibilities
Our VOICE, Inc. will provide case management and counseling services to individual primary and secondary victims of sexual assault and human trafficking as well as outreach/education services to groups. Our VOICE, Inc. will provide referrals to Helpmate for survivors who have experienced domestic violence as a primary issue.

ASCC will provide mental health services to individuals in Western North Carolina with mental illness that are uninsured or underinsured. ASCC will receive referrals from Our VOICE regarding clients and potential clients that may be appropriate for ASCC's services. ASCC will refer to Our VOICE clients and potential clients who they know to be victims of sexual assault and human trafficking could benefit from the services of Our VOICE, Inc.

To the extent possible, services will be coordinated to provide comprehensive, but not duplicative, services for survivors who have experienced both domestic and sexual violence/human trafficking.

Our VOICE, Inc. and ASCC agree to abide by federal and state guidelines regarding equal opportunity, drug-free workplace, and financial reporting.

Resources
Our VOICE, Inc. will provide the case management and counseling for victims of sexual assault and human trafficking. ASCC Center will provide mental health services to adult individuals with mental illnesses who are uninsured or under-insured.
As authorizing representatives serving these agencies, we agree to abide by the terms and conditions contained in this Memorandum of Understanding between Our VOICE, Inc. and ASCC for the purpose of providing comprehensive community-based services for victims of sexual violence/human trafficking and individuals with longer term mental health illnesses.

For ASCC:
Executive Director

Name: Meredith Switzer
Signature: [Signature]
Date: 1/21/20

For Our VOICE, Inc.:
Executive Director

Name: Robin C. Payne
Signature: [Signature]
Date: 1-25-2022
STATE OF NORTH CAROLINA  
COUNTY OF BUNCOMBE  

MEMORANDUM OF UNDERSTANDING  

1. Parties. This Memorandum of Understanding (MOU) is made and entered into this 7th day of January 2022 by and between All Souls Counseling Center (ASCC) and Pisgah Legal Services.  

2. Purpose. The purpose of this MOU is to establish the terms and conditions under which ASCC and Pisgah Legal Services will provide services and function.  

WHEREAS ASCC wishes to collaborate with Pisgah Legal Services in providing services to underserved persons who are victims of crime, especially those people who need legal assistance.  

NOW, THEREFORE, in consideration of the foregoing premises, promises and other good and valuable consideration the receipt of which is hereby acknowledged, the parties agree as follows:  

1. ASCC agrees to provide the following services:  
   a. Mental health counseling by professionally licensed therapists.  
   b. Referral of appropriate clients to Pisgah Legal Services using its referral form  
   c. If the client is assessed to be inappropriate for ASCC services by the intake staff member on triage/intake, the intake staff member will recommend to the client other mental health resources available to the client.  

2. Pisgah Legal Services agrees to provide the following services:  
   a. Provide legal services to appropriate clients referred by ASCC  
   b. Referral of appropriate clients to ASCC  
   c. Pisgah Legal Services staff will instruct their clients to call ASCC to make an appointment for themselves.  

3. ASCC will collect data on the number of clients referred as well as the number of clients enrolled for services.  

   a. Amendments. Either party may request changes to this MOU. Any changes, modifications, revisions, or amendments to this MOU which are mutually agreed upon by and between the parties to this MOU shall be incorporated by
of insurance evidencing the validity of the insurance coverage required herein shall be provided to the other party.

10. ASCC declares to Pisgah Legal Services that it is: (a) excluded from participation in any applicable federal or state health care program, including but not limited to, Medicare and Medicaid for having engaged in any activity set forth in 42 U.S.C 1320a-7 (OIG, LEIE list); (b) excluded from participation for fraud, theft, embezzlement, breach of fiduciary responsibility, or other financial misconduct in other than a health care program operated in whole or in part by any federal, state, or local government agency (GSA, EPLS list); (c) a specially designated national set forth in 31 C.F.R.S 501.701

U.S. Treasury: Specially Designated Nationals list (SDN), also known as Office of Foreign Assets Control list (OFAC). ASCC will promptly notify Pisgah Legal Services if it becomes excluded from such programs, if sanctions are imposed against them or if any inquiry or investigation is commenced by any governmental agency or authority regarding any of the items or Services provided by ASCC.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized representative.

For ASCC:
Executive Director

Name: Meredith Switzer
Signature: [Signature]
Date: 1/27/20

For Pisgah Legal Services:
Executive Director

Name: James A. Barrett
Signature: [Signature]
Date: 1/27/2022
STATE OF NORTH CAROLINA
COUNTY OF BUNCOMBE

MEMORANDUM OF UNDERSTANDING
Between All Souls Counseling Center and YWCA

1. Parties. This Memorandum of Understanding (MOU) is made and entered into this 1st day of January 2022 by and between All Souls Counseling Center (ASCC) and YWCA Asheville (YWCA) and collectively referred herein as "Parties."

2. Purpose. The purpose of this MOU is to establish the terms and conditions under which ASCC, and YWCA will cooperate to provide services to underserved persons, including those who are victims of crime and domestic violence.

3. Term of MOU. The initial term of this agreement will commence on October 1, 2022 and be valid through September 30, 2023. Thereafter, this MOU will be renewed automatically on a year-to-year basis. This MOU may be terminated by either party with 30 days written notice to the other party.

4. Responsibilities of ASCC. ASCC agrees to provide the following services:
   a. Provide mental health counseling by professionally licensed therapists. If ASCC's intake staff member assesses the client to be inappropriate for ASCC services upon triage/intake, they will refer the client to the appropriate mental health resources.
   b. Referral of appropriate clients to YWCA.

5. Responsibilities of YWCA. YWCA agrees to provide the following services:
   a. Provide YWCA services to appropriate clients referred by ASCC.
   b. Referral of appropriate clients to ASCC.
   c. Staff will instruct clients who are in need of ASCC's services to call ASCC directly to be triaged by ASCC's intake staff member to obtain services.

   Additional responsibilities. ASCC and YWCA agree to confer on a regular basis to discuss number of referrals, suggestions for improvement in the process of referring clients, and suggestions for improvement in the working relationship between the Parties.

   a. Amendments. Either party may request changes to this MOU. Any changes, modifications, revisions, or amendments to this MOU which are mutually agreed upon by and between the parties to this MOU shall be incorporated by written instrument, and effective when executed and signed by all parties to this MOU.
   b. It is understood that this is a MOU by and between contractors and is not intended to and will not be construed to create the relationship of agent, servant, employee, partnership, joint venture or association, or any other relationship other than that of contractors.
c. This MOU constitutes the entire agreement of the parties with respect to the subject written hereof, and it may not be amended or modified except in a written agreement executed by both parties.

d. Indemnification. ASCC and YWCA hereby agree to indemnify and shall protect and hold each other harmless from and against all liabilities, losses, claims, demands, costs, expenses (including reasonable attorney fees) and judgments of any nature arising or alleged to arise from or in connection with the services rendered pursuant to this MOU.

e. Assignment. Neither Party shall assign this MOU without the prior written consent of the other Party.

f. Confidentiality. Each party agrees to perform this MOU in a manner that complies with HIPAA and with other federal and state laws, regulations and standards governing the protection, use and disclosure of confidential client information (the "Privacy and Security Laws"). Without limiting the foregoing, each party agrees to limit access to confidential client information to those of its employees and agents who have a need to access such information in order to perform their assigned duties in connection with this MOU. Each party further agrees to notify the other party immediately (within 5 business days), and to take appropriate mitigation measures, upon learning that it or any of its employees or agents has violated the Privacy and Security Laws. Notwithstanding anything to the contrary in this MOU, the parties agree that a breach of the Privacy and Security Laws shall be grounds for immediate termination of this Agreement.

g. Each party agrees to always maintain general and professional liability insurance relevant to this MOU. Upon request, certificates of insurance evidencing the validity of the insurance coverage required herein shall be provided to the other party.

8. Signatures. In witness whereof, the parties to this MOU through their duly authorized representatives have executed this MOU on the days and dates set out below, and certify that they have read, understood, and agreed to the terms and conditions of this MOU as set forth herein.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized representative.

For ASCC:
Executive Director

Name: Meredith Switzer

Signature: _________________________

Date: 1/27/22

Scanned with CamScanner
For YWCA:
CEO

Name: Diana Sierra
Signature: [Signature]
Date: 1/26/2022