

**Subject:** New submission from Community Development Combined  
**Date:** Friday, January 5, 2024 at 12:56:00 PM Eastern Standard Time  
**From:** jnytko@govsol.org  
**To:** jnytko@govsol.org

<b>General Information</b>
<b>Date of application:</b> 01/05/2024
<b>Organization name:</b> Black Nurses Coalition, Inc
<b>Organization TIN or EIN:</b> Black Nurses Coalition
<b>If available, provide your Unique Entity Identifier (UEI):</b> C1ADVF387CD5
<b>Organization physical address:</b> 42 North Swan St. Albany, New York 12210 <a href="#">Map It</a>
<b>Is the mailing address different from the physical address?</b> Yes
<b>Organization mailing address (if different):</b> 266 Livingston ave Albany, New York 12210 <a href="#">Map It</a>
<b>Contact Information</b>
<b>Primary contact name:</b> Brenda Robinson
<b>Primary contact title:</b> CEO
<b>Primary contact phone:</b> 5185960936
<b>Primary contact email:</b> <a href="mailto:blacknursescoalition@gmail.com">blacknursescoalition@gmail.com</a>
<b>What is the preferred method of contact?</b> Email
<b>Website (if available):</b> <a href="https://WWW.BLACKNURSESCOALITION.ORG">https://WWW.BLACKNURSESCOALITION.ORG</a>
<b>Organization Info and Structure:</b>

**Is the organization a nonprofit?**

Yes

**Date of establishment:**

11/15/2013

**Give a brief description of your organization. Please include information on the organization’s activities or mission statement (150 words or less):**

The Black Nurses Coalitions, Inc has a mission and vision to eliminate health care disparities and increase diversity in health care.  
The Black Nurses Coalition was started in 2013 by Dr. Brenda Robinson incorporated in 2015. We answered needs whether it was assisting with bathing, cooking, cleaning or visits to the hospital. The BNC assist those in need and has always been involved with community health events. Our services have grown exponentially.  
The mission of the Black Nurses Coalition is to decrease /eliminate health care disparities among minorities and low socio-economic individuals. We seek to improve health awareness of people of color and increase the knowledge of healthcare resources, as well be a community resource. BNC is dedicated to serve marginalized community and level the healthcare field for minorities. We provide free healthcare, services, resources, chronic disease management, Covid-19 vaccines and education, primary care and numerous healthcare programs provided free to the community to combat healthcare disparities. We have provide programs such as: Annual Breast Cancer Walk, Pink Out breast cancer education program, Go Red at area Baptist Churches for heart disease, BNC Health Academy-free Health camp 2 weeks in summer- fun, educational introduction health care for underserved youth; free office hours; free clinic hours, Pop-ups health opportunity through the tri-city area, Phone Buddy program, to name a few things. All culturally competent services delivered our underserved communities in Albany.

**Provide the total number of full-time employees (if applicable):**

1 fulltime contracted staff

**Provide the total number of part-time employees (if applicable):**

2 part-time contracted staff boarding 1/2024

**Provide the total number of volunteers (if applicable):**

6

**What is the organization’s current annual budget?**

175,000

**Have you or the organization ever received any form of COVID-19 relief funds or loans specific to the negative impacts of the Pandemic?**

No

**Did your organization lose revenue as a result of the COVID-19 Pandemic? If yes, provide the amount of lost revenue (2020-2022)**

No dollar amount but lost manpower (volunteers)

**Project Proposal**

**Applicants may choose to apply for up to 2 program areas. Please select the primary program area for which you would like to apply.**

Behavioral Health, Substance Abuse, Telehealth

**What amount of funding is being requested (Must be at least \$100,000 and should not exceed program area totals)?**

268,000

**Is this a new project or expansion of an existing initiative, please describe.**

This project is an expansion of “NY Level-Up Now” which provides Mental Health component to care delivery. As BNC, manages chronic disease management in a variety of ways, lack of mental health serviced in our marginalized

communities is evident. This project will provide mental health services, many of which is already done in our clinic and community setting, and increase our ability to serve the underserve community. It will formalize many elements of our care delivery such as care givers support, time spent with individuals and capture the culturally sensitive mental health care that often is the larger part of the clinic /community visit or encounters in our setting. Education and stress reduction in a way that "meets people where they are" is a super power of the Black Nurses Coalition and partners. Our care delivery may be in a clinic, telehealth. on the phone, at a library; we are conventional and unconventional. MH tx and talking about our mental well being is a large part of our present practice and needed extended hours, as it should be as literature also supports. This program will be purposely seek out, offer, share this needed service; and also capture what cultural competent providers and programs does and what can be done in our communities to level the MH field. So, as BNC knows, it is not just the vitals signs and biomedical piece but mental health; mind and body.

**Please provide an executive summary of the proposed program or project for which you are requesting funds. Include a description of the target population, as well as the goals and objectives of your proposed project (500 words or less).**

"Ny Level Up Now" will provide mental health access to underserved, minority communities in Albany NY. This program delivers culturally competent care, serves marginalized community, and has trusted primary care providers, community health workers and other staff. According to the National Library of Medicine, Primary care providers are the first line of care for a person with mental illness. Primary care providers are usually the provider who diagnose, treat, and/or refer. Nami (National Alliance Mental Health ) reports 2,802,000 New Yorkers have a mental health condition and less than half received treatment. Minorities are less likely to receive treatment.

Primary care providers provide depression screening, counseling, a mental health diagnosis or reason for visit, psychotherapy, or psychotropic medications. "Primary care physicians also spend more time at clinical visits talking to patients about mental health than biomedical. Likewise, NPs deliver significant amount of mental health services especially to low income and minority populations" (SAMHSA).

Black people have the highest less of stress than other groups. Black adults, also supported by Health and Human Services Office of Minority Health, in the U.S. are more likely than white adults to report persistent symptoms of emotional distress; Black adults living below the poverty line are more than twice as likely to report serious psychological distress than those with more financial security. Only 1 and 3 Black adults received treatment according to HHS. According to Dr. Robinson, this number is under calculated because Black people often do not participate in surveys and research, black people are skeptical due to past maltreatment, lack of cultural sensitivity in healthcare, and mental health has a huge stigma; which are also barriers to treatment. Systemic racism in healthcare and discrimination must also be factored in the statistics.

An estimated 21.0 million adults in the United States had at least one major depressive episode. According to NAMI, of the 763,000 adults in New York who did not receive needed mental health care, 36.1% did not because of cost, and NY Level-up MH, will remove the cost barrier also. There are many statistics that support a huge chasm in MH care for marginalized people of color and NY Level-Up MH will have a positive impact and a strong resource in the community.

Goal 1: Identify and treat depression in the targeted population. Objective: Administer a Depression Screen, PHQ-9, to individuals. Objective: Follow up with all positive scoring on PHQ-9, treatment and referrals as needed.

Goal 2-Provide stress reduction. Objective: Provide educational and preventative forum/groups. Objective: Teach stress reduction techniques Objective: provide coaching as needed.

Goal 3: Provide culturally competent care: Objective: Providers, staff, volunteers will be 80% from the community served. Objective: 90% of staff race will reflect in the community. Obj: telehealth opt.

Goal 4: Support Caregivers and reduce stress. Objective: Implement support group via in person or otherwise.

Objective: provide culturally competent health information. Objective: provide a call and/or message line for questions, support or advocacy requests for caregivers. Objective: Include caregivers on existing wellness check list as appropriate.

**Please explain why this program or project is needed within the County.**

As mentioned in the executive summary, this program is needed in Albany to provide access, equity, and culturally competent mental health care to underserved, minority, populations. This program provides prevention, outpatient services, equitable access for marginalized community and evidenced based services. Covid-19 disproportionately impacted people of color and Covid-19 is still having a devastating impact. "We are aware that unequal treatment has existed well before Covid-19, for decades. Those who were barely treading water are now below the water line and are no longer keeping a float", Dr. Brenda Robinson, 2022. As the National Alliance on Mental Illness (NAMI) reports, "7 in 10 youths in the juvenile justice system have a mental health condition, 1 in 4 persons arrested have mental illness, 2 in 5 adults in jail for prison have mental illness and 1,723 lives were lost to suicide and 558,000 adults thought of suicide, and 56.8% New Yorker had depression and were not treated last year.....this is why this program, NY Level-Up MH , is needed in Albany.

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**All funded activities must meet the objective of responding to the public health and negative economic impact of the pandemic. Please describe how your proposal will help address this objective and assist with recovery (250 words or less).**

NY Level Up-MH meets the public health and objective and the negative economic impact of the pandemic. This program is expanded from our trusted program in the community. Primary Care has already been proven to be the first line in prevention, identifying and treating mental health, especially in minority communities. For example, mental health depression screening using the evidence based PHQ-9 tool will be used for each individual. Evidence based stress reductions education and techniques and forum are incorporated in this program. Just as important or even more so, culturally competent care delivery is standard for this program. Shortages in MH services are noted in Albany and across the United States. Our activities are direct care, hands on, free, telehealth, conventional and unconventional and provides access where there is none. We have expanded to address mental health with eyes wide open and aware of the impact of COVID-19 which has exhausted many individuals and programs. Increase access, prevention, diagnosis, treatment, support groups, as noted in the executive summary meets all the objectives of this funding.

**If an award is made, describe how Albany County stakeholders will benefit. Where possible, please use measurable outcomes to quantify impact.**

If NY Level-Up MH is given an award, some measurable outcomes are:

1. Culturally competent care deliverables and will be measure by pre and post survey.
2. Access to MH appointment via Primary care which will be measurable by # of designated appointments blocked for MH , and dx codes; # individuals seen.
3. 85% of all individuals encountered will receive n Depression Screening with follow as appropriate.
4. Office hours designated for appt. and telehealth.
5. 85% of program staff and volunteers will be from the minority community served and race.
6. Caregivers support group established; monthly meeting, call or group implemented.
7. MH Community Outreach and education events: at minimum 6 events per year.
8. Website MH update-

**Please describe your organization's ability to implement the project you propose including organizational structure, staff members involved, a summary of similar initiatives you have undertaken and the date they were completed:**

Our organization has been delivery culturally competent health care for over a decades and is capable of successfully caring out this program. Our staff/volunteers /directors have over have decades of experiences and included Nurse practitioners Medical Doctors, Nurses, community works, from all levels of education including Masters degrees (overwhelmingly), and Doctorates and many board certifications. The BNC has the staff structure to complete this program. We have two committed healthcare providers, contracting staff and volunteers to make this program successful. We have did a brief 2-week pilot and found a large amount of time, well over the primary ca physical needs, were focused on mental of 80% of patients seen during that 2-week period. 2022-2023 BNC has been successful mini wellness initiative, Health Equity Now, which included Blood pressure screening and Diabetic education with objectives accordingly. We met and went well over our deliverables for the program. Highlights our program, We screened 325 minorities for hypertension and diabetes, 45 people of color has at least 1 follow up visit and started on blood pressure medication. The was 125 screening and BNC added the follow up component of 30 minorities and we exceeded all goals. Our education goas was 75% of encounter sand we far exceeded at 91%. This is just one example of our hard work and feet to the street in Albany. Complete 11/2023

In 2021, A large project we had was to partner with an area doctor and transform care delivery to serve those who are hard to reach, underserved and marginalized. Against all odds, we have a partnership. One huge deliverable was to have unconventional hours in the evening and weekend hours to accommodate the population targeted. WE did a survey and met of goal of 70 respondents from the underserved minority areas. Our service hour goal was 100% successful and we offer evening and weekend hours.

BNC Breast Cancer Awareness program has grown from 110 saved to over 465 served, inleading our Annual Breast Cancer Walk and Pink Out educational events. This does not include dour Edna Joyce Garden of Hope which elevates breast cancer disparities in black women and the importance of healthy eating completed n August 2023. 2020-2023 Phone Buddy program, telehealth care and supply delivery. We continued to provide service during the height of Covid-19 which included telehealth, supply delivery when underserved communities were devastated, wellness check, and some direct care when all other offices were closed. We served over 600 people. This included free supplies, like masks and sanitizers, and many calls to educate and console resident inf fear during the height of the pandemic.

**How will you track performance goals and define success? Include at least two key performance indicators and expected annual outcomes/impact?**

We will track performance via excel spread sheet and google docs as appropriate.

Some key performance indicators are:

1. Numbers of Depression Screening completed 85% of all individuals encountered. Impact: Depression identified

and not left untreated or supported.

2. Specific designated Primary Care appointment hours designated to MH. 50% of appt time designated to mental health, treatment accordingly. Impact: Increased access to mental health.

3. Caregiver support implemented. Caregivers support group established; monthly meeting, call or group implemented.

4. MH medication reconciliation of 90% individuals/patients. Impact: prevent polypharmacy and incorrect medication.

**Project start date:**

07/01/2024

**Project End date:**

12/31/2025

**Please provide key project milestones inclusive of the anticipated timelines and descriptions**

Milestone	Anticipated Timeline	Task Description
Depression Screen incorporated every encounter	10/31/24	Identify depression (#1 MH issue) by screening
Health Care Providers contracted	12/2024	MH Providers needed for care
Caregiver support implemented	12/2024	Support group implemented
MH Website update	1/1/2025	Hands on resources
Appointment management	2/2025	Average time allotted effect for MH at clinic visit established

**If you are funding a multi-year initiative, please provide a breakdown of funding level per year below:**

2024	2025	2026
95,900	90,400	90,400

**Use this space to provide a narrative supporting and clarify anything from the proposed project budget above. In addition, if "Other Funds" or "Other Uses" are included above, please specify the source(s) below.**

Coverage for the many folks who are uninsured, under insured or with no health insurance at all and no funds to pay for medications is the justification for the added \$15000. Marginalized communities need the assistance.

**Explain why ARPA funds are needed to complete the proposed program/project. Would the proposal be possible without ARPA assistance? Describe how your proposal would be impacted if you are awarded a smaller grant than requested?**

As a small CBO located and working directly in the underserved community, ARPA funds are needed to expand our program. BNC has not obtained any other Covid-19 funding and also though we did not reflect monetary lost revenue during the height the pandemic, we has exhausted a lot of our volunteers/ manpower. We need funding to move this program forward and this includes funds for staff and other elements of this program. If we are awarded a small award amount, we would regroup and reevaluate our objectives, deliverables . Quality over quantity when it comes to MH care deliver and programming is priority.

**ARPA funds must be expended by December 31, 2026. Please describe how your project will be sustained if it will continue beyond this date.**

By December 2026, we will have a model program for MH in underserved communities and have data. Positive outcomes will create sustainability and attract other funding sources . We will also develop other partnerships and grants. We do have goal to keep this program accessible and also remove the barrier of coast for individuals.

**List any project partners/subrecipients:**

Albany Housing Authority is always a planned partner as we serve undeserved individual. Public housing is a large part of our service area and often our base for days at a time.

Look forward to partner with the Sheriff Homeless Program (SHIP).. BNC partners with our elected officials such as Councilman Kelly Kimbrough and Councilman J. Robinson.  
Our Black Churches are always part of our programing due t the nature of health care delivery in minority underserved communities.  
Arbor Hill Neighborhood Associations have been a constant partner. We hope to partner with North Albany Neighborhood Association.

**Please list any matching funds:**

BNC Funds noted on Budget

**Tax Information or Additional Information**

**Please upload IRS Form W-9**

- [20240105125208\\_001-1.pdf](#)

**Risk Assessment:**

**Has the organization adopted and/or implemented policies relating to: records retention, conflict of interest, code of ethics, and/or nondiscrimination policies**

Yes

**If you selected "Yes" above, please specify:**

We have institute policies for Record retention, conflict of interest, code of ethics and anti discrimination. We also have mandatory education.

**Is the organization properly insured?**

Yes

**If you selected "Yes" above, please specify the types of insurance held and the limits:**

CHUBB Non profit insurance; iOrganization: BLACK NURSES COALITION, INC. 266 LIVINGSTON AVE ALBANY, NY 122101513 Item 2. Limits of Liability: (A) Maximum Limit of Liability for this Coverage Section for all Claims each Policy Year: \$2,000,000.00 (B) Sublimit for all Excess Benefit Transaction Excise Tax: \$100,000.00

**Does the organization have a financial management system?**

No

**Has there been any change in your organization's key staffing positions in the last 2 years?**

No

**Has the organization previously done work for the Federal government (i.e. Is the entity experienced in managing Federal funds)?**

Yes

**If you selected "Yes" above, please specify:**

CDBG 2023, 2022, 2021, 20230, 2019, 2018..SUCCESSFUL; NYS DEPT HEALTH MINI GRANT 2023,SUCCESSFUL

**Certifications**

**Acknowledgment 1**

I Have Read and Understand the U.S. Treasury's Compliance and Reporting Guidance for State and Local Fiscal Recovery Funds (see below link)  
U.S. Treasury's Compliance and Reporting Guidance for State and Local Fiscal Recovery Funds:  
<https://home.treasury.gov/system/files/136/SLFRF-Compliance-and-Reporting-Guidance.pdf>

**Acknowledgment 2**

Should the County Allocate ARPA Funds, I am Able to and Pledge to Adhere to ALL Compliance and Reporting Requirements of the U.S. Treasury as it relates to any State and Local Fiscal Recovery Funds

**Acknowledgment 3**

I Understand the County Will Contact me if/when Additional Information is Needed and that Information will be Promptly Provided to the County to Support Reporting Requirements

**Acknowledgment 4**

If for Any Reason I am Unable to Comply with the U.S. Treasury's Compliance and Reporting Requirements I will Immediately Notify the County in writing by email or letter

**Acknowledgment 5**

All Information Submitted in this Application is True & Accurate

**Electronic Signature Agreement**

I agree

By checking the "I agree" box, you agree and acknowledge that 1) your application will not be signed in the sense of a traditional paper document, 2) by signing in this alternate manner, you authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten signature, and 3) you may still be required to provide a traditional signature at a later date.

**Type name**

BRENDA ROBINSON