

## Proposition 47 Cohort III Quarterly Narrative Reporting

### Grantee Information

**Grantee**

**Current Reporting Quarter \***

**Prepared by \***

**Preparer's Title \***

**Phone Number \***

**email address \***

**Do you require any technical assistance? \***

Yes  No

### Section 1: Expenditure Status

Please Report the status of your grant expenditure as of the end of the reporting quarter.

**1.1 Amount Invoiced-to-Date \***

(Sum of quarterly invoices)

**1.2 In relation to the overall grant budget, are Prop 47 Cohort 3 grant funds being expended as planned and on schedule? \***

Yes  No

Please explain why not, and describe any corrective actions needed.

**1.3 Leveraged Funds**

How did the project leverage grant funds? Include the source and the amount of leveraged funds (e.g., \$40,000 in Drug Medi-Cal funding was leveraged for..., \$16,500 in Mental Health Services Act funding was leveraged for...).

**1.4 In relation to the overall grant budget, are leveraged funds being expended as planned and on schedule?**

Yes  No

Please explain why not, and describe any corrective actions needed.

### Section 2: Project Inputs and Implementation

Please indicate the status of each of your project implementation activities below and provide a description of progress, accomplishments, and/or challenges your project has faced in the current reporting period. Please use the definitions below to respond to each category or mark "N/A" for any activity that does not apply to your project.

Not started: have not yet been able to focus on project activity.

Planning: have started preparations and plans to being implementing activity.

Implementation Started: Your project has initiated the implementing this component but may not be fully developed and/or needs refinement.

Complete/Established: Project activity is fully in place/completed and supporting project goals.

N/A: Does not apply to your project in particular.

#### 2.1 Partnerships \*

Formal relationships between agencies and/or community organizations to support project goals.

- Not started
- Planning
- Implementation started
- Completed/established
- N/A

Describe partnerships:

#### 2.2 Local Advisory Committee \*

All relevant representatives are included as members of the Local Advisory Committee and meetings are regularly scheduled, noticed, and accessible to the public.

- Not started
- Planning
- Implementation started
- Completed/established

Describe Local Advisory Committee

#### 2.3 Staffing and/or Volunteers \*

Hiring/securing people for positions needed to complete programming.

- Not started
- Planning
- Implementation Started
- Complete/Established
- N/A

Describe staffing and/or volunteers:

**2.4 Training \***

Training provided to staff, law enforcement, community members, etc. to support project goals.

- Not started
- Planning
- Implementation Started
- Complete/Established
- N/A

**Describe training:**

**2.5 Identification, Outreach, and Enrollment Process \***

Process for identifying, conducting outreach, enrolling participants into project intervention(s), and ensuring that participants meet the Proposition 47 required criteria (people who have been arrested, charged with, or convicted of a criminal offense AND have a history of mental health issues or substance use disorder).

- Not started
- Planning
- Implementation Started
- Complete/Established
- N/A

**Describe process:**

**2.6 Programming. \***

Interventions based on strategies that are known or expected to achieve positive participant outcomes, when applicable, programming should be trauma-informed and culturally relevant.

- Not started
- Planning
- Implementation Started
- Complete/Established
- N/A

**Programming Description**

**2.7 Data Collection/Evaluation \***

Systematic and ongoing data collection to measure participation and evaluation measures.

- Not started
- Planning
- Implementation Started
- Complete/Established
- N/A

**Describe data collection/evaluation:**

**2.8 Quality Assurance \***

Methods in place to ensure interventions are being delivered as intended, and with fidelity to the proposed model(s).

- Not started
- Planning
- Implementation Started
- Complete/Established
- N/A

Describe quality assurance:

**2.9 Project Challenges \***

Please describe any project challenges that occurred during the current reporting period with your Proposition 47 Cohort III project. What steps were implemented to address those challenges?

**2.10 Project Highlights \***

Please describe any project highlights and/or accomplishments that occurred during the current reporting period with your Proposition 47 Cohort III project.

**2.11 Impact of COVID-19 Pandemic \***

Please describe any effects COVID-19 and related public health directives (including social distancing, school closures, working from home, cancellation of social events, etc.) will have/have had on your ability to deliver your Proposition 47 Cohort III project. What challenges will your project face and what steps will you implement to address those challenges?

**Section 3: Goals and Objectives**

For this section, please refer to the Goals and Objectives reported in the Project Work Plan submitted with your proposal. Please provide updates for each goal/objective listed on the project work plan, related to the report period.

**3.1.a. Progress Towards Goals 1 \***

Describe progress towards stated goal and objectives during the reporting period.

**3.1.b. Challenges related to Goal 1 \***

Describe any challenges towards the stated goal and objectives during the reporting period.

**3.1.c. Addressing challenges related to Goal 1 \***

What steps were implemented to address challenges related to Goal 1?

**3.2.a. Progress Towards Goal 2 \***

Describe progress towards stated goal and objectives during the reporting period.

**3.2.b. Challenges related to Goal 2 \***

Describe any challenges towards the stated goal and objectives during the reporting period.

**3.2.c. Addressing challenges related to Goal 2 \***

What steps were implemented to address challenges related to Goal 2?

**3.3.a. Progress Towards Goal 3 \***

Describe progress towards stated goal and objectives during the reporting period.

**3.3.b. Challenges related to Goal 3 \***

Describe any challenges towards the stated goal and objectives during the reporting period.

**3.3.c. Addressing challenges related to Goal 3 \***

What steps were implemented to address challenges related to Goal 3?

Section 4: Project Description

In this section we ask you to: describe risk/needs assessments used; identify project activities; tell us how you define when a participant has successfully completed your project and how you define when a service has been successfully completed. Many projects will report this information once, though they will have the opportunity to update this information as necessary throughout the grant period.

**4.1 Risk/Needs Assessment Used \***

Do you formally assess the participants entering then project?

- Yes
- No

**Description of Assessment**

Describe assessment(s) used for identifying a participant's level of risk and/or their needs.

**4.2 Project Activities \***

- Ongoing assessment of risk/needs
- Trauma informed care
- Reentry planning
- Assistance with basic necessities (excluding food)
- Assistance with food
- Case management
- Housing services
- Mental health services
- Substance use services
- Diversion program
- Health services
- Public assistance/social services
- Employment services
- Education services
- Legal services
- Leadership/mentor training
- Mentoring (individual/group)
- Family/individual support services
- Life skills training
- Skill building activities
- Workshops
- Resource sharing with potential participants
- Establishing rapport with potential participants
- Other

**Describe Other activities**

**Housing Services Provider**

Indicate if your project provides direct services or refers participants to outside organizations.

Direct  Referral

**Mental Health Services Provider**

Indicate if your project provides direct services or refers participants to outside organizations.

Direct  Referral

**Substance Use Services Provider**

Indicate if your project provides direct services or refers participants to outside organizations.

Direct  Referral

**Medical Services Provider**

Indicate if your project provides direct services or refers participants to outside organizations.

Direct  Referral

**Public Assistance/Social Services Provider**

Indicate if your project provides direct services or refers participants to outside organizations.

Direct  Referral

**Employment Services Provider**

Indicate if your project provides direct services or refers participants to outside organizations.

Direct  Referral

**Education Services Provider**

Indicate if your project provides direct services or refers participants to outside organizations.

Direct  Referral

**Legal Services Provider**

Indicate if your project provides direct services or refers participants to outside organizations.

Direct  Referral

**Case Management Provider**

Indicate if your project provides direct services or refers participants to outside organizations.

Direct  Referral

**4.3 How do you define "success" for participants in terms of their project activities? \***

Describe the measurable milestone of success your project uses to determine when a participant has successfully completed services (e.g. mental health services, substance use services, diversion program, mentoring, etc.). Note that you will use this definition for identifying those participants who "successfully complete" your project. This definition could be a dosage of services received, passage of a specified period of time, improvement in an outcome measure, or other definition specific to your project.

**Section 5: Outreach, Engagement, and Assessment**

Report the total number of outreach, assessment and engagement activities that your project has completed during the current reporting period.

Outreach activities: promote the project to the community and identify referrals. They can include information/resources provided to potential partners, materials shared with members of the public, meetings and/or forums held for the community to discuss the project's goals and efforts.

Engagement activities: establish a rapport or relationship with potential participants. They can include providing information about the project, benefits of participating, motivational interviewing, and providing basic necessities such as bottled water or snacks.

Assessment activities: include a formal or informal evaluation or identification of the participant's needs and the services they will receive as a participant.

**5.1 Number of Outreach Activities \***

Report the total number of outreach activities that your project has completed during the reporting period.

**5.2 Hours of Outreach Activities \***

Report the total number of hours spent on project outreach activities during the reporting period. This total should only include the activity total, not total number of staff hours. If two staff attended a four-hour community event as part of your outreach efforts, report 4 hours, not 8 staff hours.

**5.3 Engagement Activities \***

Report the total number of potential participants staff engaged during the reporting period. This should be an unduplicated count, in that if a potential participant was engaged multiple times during the reporting period, they should only be counted one time.

**5.4 Assessment Activities \***

Report the total number of potential participants who received an assessment for services during the reporting period.

**5.5 Additional Narrative**

Please provide any additional narrative necessary to detail your project during current reporting period. If providing additional details in reference to a section within this report, please cite relevant section numbers. Any additional data that is project specific, which may help inform project progress, may be included here. Describe below:

**File Attachments**

If you have any additional documents you would like to share with the BSCC, please include them here. Please do not attach an electronic version of your responses using the file attachment options.