**FY24 Mobile Outreach: Youth/Family and Adult**

**Transmittal Coversheet Checklist and Quarterly Report**

**To:** DOH Finance & Management Services, Grants & Contracts Section

**Attention Grant Administrator**: Click or tap here to enter text.

**Date Submitted**: Click or tap to enter a date.

**Organization**: Click or tap here to enter text.

**Grant Number**: Click or tap here to enter text.

**Form Submitted by**: Click or tap here to enter text.

**Quarter:** Choose an item.

The checklist below will help ensure your organization’s quarterly report submission contains all necessary reports and appropriate documentation.

Upload this completed checklist and the required documentation listed below as a single PDF into GEMS. Once you have uploaded this documentation you will be able to complete your CFR.

**Cumulative Financial Report** (CFR) for the quarter

**Program Reports** (Select one or more as appropriate)

Mobile Outreach: Youth/Family and Adult

***Instructions****: Please provide a complete response to each question. The response should provide a detailed description for the specific grant funded program versus a broad overview of the organization. Each response should be relevant to this quarter and not contain information already provided in past quarterly reports, unless providing a status update.*

Please identify any challenges or barriers encountered this quarter for the Mobile Outreach program funded through this grant and provide a description of how the program has been (or will be) impacted. Please include any actions taken to address challenges. Click or tap here to enter text.

Please describe successes achieved this quarter for the program funded through this grant. Click or tap here to enter text.

Please list any requests for technical assistance. Requests should include when the technical assistance is needed and a point of contact for the request.

Click or tap here to enter text.

Please provide a list of any audits or accreditation reviews that have occurred this quarter or will be occurring in the next quarter. Click or tap here to enter text.

**RBB Measures**

**Efficiency Measure:** Average response time to initial call out

*Data Collection*: Start time when call is received and end time when the agency arrives to scene as documented in miscellaneous note.

*Collection Method*: AKAIMS

**Actual:** Click or tap here to enter text.

**Efficiency Measure**: Average after action client follow up time. Follow up with clients is required within 48 hours after the end of the initial mobile outreach call. The follow up time is measured by the number of hours between end time of initial encounter and the start time of follow up encounter within 48 hours.

*Data Collection*: The total of all follow up times divided by the total number of clients served.

*Collection Method*: Quarterly Reports

**Actual:** Click or tap here to enter text.

**Effectiveness Measure:** Percentage of mobile crisis responses resolved in the community.

*Data Collection*: # of encounters that were resolved without having to transfer to higher level of care including 23-hour observation divided by the total number of mobile outreach calls.

*Collection Method*: Quarterly reports.

**Actual:** Click or tap here to enter text.

**Effectiveness Measure:** Percentage of calls responded to within 2 hours.

*Data Collection*: Total number of calls responded to within 2 hours (start time when call is received and end time when the agency arrives to scene as documented in miscellaneous note) divided by the total number of calls.

*Collection Method*: Quarterly reports

**Actual:** Click or tap here to enter text.

**Please confirm that the minimal data set has been completed for all mobile outreach clients served:**

Yes, all minimal data set has been submitted in AKAIMS for all mobile outreach clients served.

No, all minimal data set has not been submitted in AKAIMS for all mobile outreach clients served.

\*If answered no, please provide an explanation: Click or tap here to enter text.