

Community Corrections Partnership (CCP) Block Grant (State General Funds) Quarterly Report Instructions

1. **Grant ID:** This is the year and number which identifies the year of the funding and county.
2. **County/Jurisdiction:** Each county must fill out a separate quarterly report since funds are allocated by county. List the County name/Jurisdiction or District name
3. **Project Name:** Project is CCP Block Grant
4. **Quarterly Report #:** Money should be spent within four quarters so indicate which quarter the report is for. If money is carried over, report up to quarter 8. Quarters for this block grant follow state fiscal year quarters.
 - a. Quarter 1 – July – September
 - b. Quarter 2 – October – December
 - c. Quarter 3 – January – March
 - d. Quarter 4 – April – June
5. **Final Report:** Indicate yes when it is the last report and no for all other reports
6. **Request for Funds** – Counties are responsible for keeping an accurate accounting of their own award, the money received, the money requested, and the funds remaining. Note: Counties are not to request total award upfront, the maximum amount which will be given up front is one-half of the total award, if the county requests the full amount.
7. **Certification** – The county member will sign, date, and include all contact information and the Juvenile Justice Programs Office Staff will complete the section “For Office Use Only”.
8. **Participant Information** – Money spent on direct services for youth is reported here. If no money was spent on direct services, and was spent on other things, this entire section is NA.

This is to report how money is being spent. Counties should continue to provide additional quarterly reports until the money from that fiscal year is spent, usually up to 8 quarters. When reporting on participants, the premise is the participants who benefited from the current fiscal years funding.

 - a. **Number of New Participants** – All new participants should be counted in each quarter. Youth who have successfully/unsuccessfully/disgorged from the program in past, has reoffended, has a new charge, and placed back into the program: is new.

Note: Existing participants from the previous fiscal year are to be counted as new **IF** new money from the current fiscal year is paying for services.
 - b. **Number of carry over participants** – All participants who are ongoing in that quarter. Quarter 1 should always be zero.
 - c. **Number of participants who successfully completed program** – Counties may use 8 quarters to report on youth from past fiscal years. This is to count the successful youth for this fiscal year. Quarter 1 should always be zero.

- d. **Total Satisfied/Total successful** – Quarter 1 should always be zero. This is the total number who successfully completed the program who were satisfied with the program.
 - e. **Percentage of successful participants who reoffended within 30, 90, 180 days** – This information will most likely be within the court system. Counties may submit a separate report from the court or county created, if needed.
 - f. **Number of participants who completed the program unsuccessfully** – This is the number of youth who were not successful. Quarter 1 should always be zero.
 - g. **Number of participants who were discharged from program prior to completion** – this can occur for a variety of reasons such as medical reasons. These are those who were not successful or unsuccessful. Quarter 1 should always be zero.
9. **Brief Description of Project, Project Goal, and Project Objective:** Provide a description of what was provided in that quarter. This can remain the same from quarter to quarter, or change depending on the needs of the youth in the particular county.
10. **Performance Measure Data:** This is separated by youth information and staff information. If money was spent on youth, the youth section should be filled out. If money was spent on staff, then the youth section is NA and the staff section is completed.
- a. **Youth Information:** The number of lines reported should (this should equal the total from #8.a, year to date total. May use a separate Word or Excel Document.
 - i. Youth number – identifying number for a youth, each system is different, so whatever number identifies the youth in the counties system
 - ii. Primary Charge/Reason – What is the charge or reason the youth is in this program?
 - iii. Gender/Age – Gender and age of the particular youth.
 - iv. Race – See race codes on page 3 of the quarter report and indicate race based on those codes.
 - v. Placing County – The county reporting may not be the placing county so indicate the placing county for each youth.
 - vi. Number of times youth has been placed out of the home prior to this placement, and list the prior placements. May use a separate Word or Excel Document for this, but must be tied to the youth by youth number.
 - vii. Current placement or project name. What is the placement or project name?
 - viii. Estimated length of time for current placement or project. This may be located on the treatment or youth plan. How long is the youth anticipated to be in the program or project?
 - ix. Substance Abuse diagnosis – list the youth's diagnosis/s.
 - x. Mental Health diagnosis – list the youth's diagnosis/s.
 - xi. Dual Substance Abuse/Mental Health – Indicate yes or no.
 - b. **Staff Information:** This may be separate or in addition to youth information. If no youth were served and money was spent only on staff activities, it is to be captured here. Only fill out what is needed to show how money was spent.
 - i. Number of positions funded – indicate the total number of staff who receive some or all of their funding with this block of money.

- ii. Average number of hours per week – indicate the average number of hours per week the block of money funds the staff member/s.
- iii. Average number of youth these staff members work with – indicate the average youth seen by the staff member/s.
- iv. Average monthly salary of staff member/s – indicate the average monthly salary of those funded by this block amount of money.
- v. Average length of time staff stay in positions – This can be in years, months, or days. Indicate the average and the unit of time used.
- vi. Number of trainings for staff conducted in the quarter – indicated the total number of trainings provided to staff using these funds
- vii. Number of staff trained – if a training was held, how many staff were trained
- viii. Percentage of staff trained - total number of staff/staff trained
- ix. Percentage of staff trained who were satisfied - total number of staff satisfied/total staff trained
- x. Did the county meet stated quota – County has goals for the quarter, did the county meet the goals stated for this amount of money for this quarter?
- xi. Did the county achieve desired outcomes – County has objectives for each goal, did the county meet the objectives for the quarter.
- xii. If no to x or xi, explain why?

Reports are due to the state by the 15th of the month following the end of the quarter.

- a. Quarter 1 – July – September – Due October 15
- b. Quarter 2 – October – December – Due January 15
- c. Quarter 3 – January – March – Due April 15
- d. Quarter 4 – April – June – Due July 15

Counties may email or mail directly to Jill A. Mueller, address and email listed on the Quarterly Report Form.