RICHARD WHITLEY, MS Director



IHSAN AZZAM, Ph.D., M.D. Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

BUREAU OF BEHAVIORAL HEALTH WELLNESS AND PREVENTION

Quarterly Reporting

Management Memorandum 20-003

DATE: December 10th, 2019

TO: All Bureau of Behavioral Health Wellness and Prevention (BBHWP) Funded Subrecipients

and Contractors.

FROM: Brook Adie, MSW, Bureau Chief

SUBJECT: Policy and Procedures for Completing required quarterly reports for Block Grant and

Strategic Prevention Framework Grant funding.

The Division of Public Behavioral Health (DPBH), Bureau of Behavioral Health Wellness and Prevention (BBHWP) is providing policy and procedures for subrecipients who are required to complete quarterly reports per funding source. Effectively immediately, all quarterly reports will be uploaded to the BBHWP's secured file transfer protocol (SFTP) site and an email communication to your prevention analyst to begin the quarterly report analysis process. Please review the below policy and procedure for each specific funding source instructions on how to complete the report and required documentation that must accompany the submitted quarterly report.

Policy (2 CFR 200.328 Performance and Reporting Program Performance)

It is the responsibility of the BBHWP to receive and review quarterly reports submitted by subrecipients as required to receive on going funding support on work performed in the field of primary prevention and under the terms and conditions of their funding source and written agreement within their subgrant.

BBHWP/SAPTA team and its contracted evaluator are to obtain the data needed to make a determination
if subrecipients are achieving desired outcomes, work performed outlined in subaward objectives, and
evidence-based programs there must be specific data and detailed information regarding each activity
conducted, populations reached, training needed and obtained, success, barriers, and initiative plans for
the upcoming quarter.

Responsibility of the Subrecipient

It is the responsibility of the subrecipients to ensure their quarterly reports are compliant with the following policies and guidelines:

- Funded programs are required to submit to the BBHWP standardized quarterly/biannual reports that summarize all actual services and activities provided during each subgrant year within the required timeframe determined by the Bureau of Behavioral Health Wellness and Prevention.
- Quarterly progress reports are due to the BBHWP by the 30th of each month following the end of the quarter, unless specific exceptions are provided in writing by the Bureau Chief.
- Subgrantees are required to collect and compile information on a monthly basis for accurate reporting quarterly and/or biannually.
- Beyond the State Priorities, Six Strategies and Primary Prevention expenditures by Institute of Medicine (IOM) Categories defined in the Project Description of the agreed RFP-subaward, subgrantees are required to capture data from their direct service providers as it relates to targeted substances, special population categories, race, gender, age and ethnicity

Requirements of Substance Abuse Block Grant (SABG) Quarterly Report

The subrecipient will collect and report quarterly and annually community-level data to determine progress toward addressing individual grant prevention priority(ies). Subrecipients must include in their data collection and reporting activities that supporting evidence to preserve or change activities, strategies and continuously evaluate data and systems for effectiveness. The State has provided a template with an example for completion of the SABG quarterly report.

Quarterly Report Tables referenced in the SABG quarterly report template are a direct correlation to the December Annual Substance Abuse Block Grant Report.

• Tab 1: Titled (SOW Goals & Progress Tables 33-35)

- o First column: Annual Smart Output and Outcome Goals & Evidence Based Program (EMB) to be used.
- o Second column: Quarterly Report Progress Narrative
- Third column: Dates of Implementation (Start and end)
- o Fourth column: Evaluation Data/Documentation to be collected (Describe the data to be collected).
- o Fifth column: Actual Number of Events for each quarter.
- o Sixth column: Number of Unduplicated People Served per quarter.
- O Seventh column: Number of People reached per quarter.
- o Eighth column: Was it EBP (Yes or No)
- o Ninth column: Which IOM category does the output/outcome goal fall into.
- o Tenth column: Quarterly Expenditure (Total should equal quarterly RFR).
- o Eleventh column: Open for Analyst Comments & Feedback

• Tab 2: Titled (CSAP Demo By Quarterly Tables 31-32)

- o Individual-Based Programs and Strategies; Measure: Number of Persons Served By Age, Gender, Race, and Ethnicity (complete per quarters)
- Population-Based Programs and Strategies; Measure: Number of Persons Served By Age, Gender,
 Race, and Ethnicity (complete per quarters)
- Tab 3: Titled (Quarter1- Tables 33-35), (Quarter 2- Tables 33-35), (Quarter 3-Tables 33-35) and (Quarter 4-Tables 33-35)

- o Name of Coalition
- o Grant HD Number: HD #12345
- Work Order #: If Any
- Statement 1: Use the tables below to report on activities completed this reporting period. Feel free to add or delete lines as needed. Please list the name of each Non-EBP provided. Use the goal number from your SOW and the goals worksheet in this file.
- Occupiete the amount of funding for each activity completed this quarter, with relation to each IOM for reporting purposes. The number served and dollars expended should coincide with the SOW goals sheet. For federal reporting purposes, please distinguish between funding allocations.
- o Tables 33-35 defined:
 - ➤ Table 33 Number of Persons Served by Type of Intervention
 - ➤ Table 34 Number of Evidence-Based Programs by Types of Intervention.
 - Table 35 Number of Evidence-based Programs and Strategies, and Total SA Block Grant Funds Spent on Evidence-Based Programs/ Strategies.

Requirement of Strategic Prevention Framework- Partnership for Success (PFS) Quarterly Report

The subrecipient will collect and report quarterly and annually community-level data to determine progress toward addressing individual grant prevention priority(ies). PFS is designed to ensure that prevention strategies and messages reach the population most impacted by substance misuse.

PFS requires the subrecipients:

To assess population needs (nature of the substance abuse problem, where it occurs, whom it affects, how it is manifested), the resources required to address the problem, and the readiness to act to address needs and problems identified. Key elements of the PFS grant program is to address one of the nation's top substance abuse prevention priorities; underage drinking among persons aged 9 to 20. The SPF-PFS grant program is intended to prevent the onset and reduce the progression of substance abuse and its related problems while strengthening prevention capacity and infrastructure at the state, tribal, and community levels. Substance use prevention quarterly report must show services allowable with grant funds aim to prevent the initiation of substance use and misuse and do not include treatment or recovery services.

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Name of Coalition

Reporting Period: Timeframe of funding source

Overview: Describe accomplishments **AND** barriers your organization encountered while performing activities during this reporting period in the following areas:

- Assessment:
- Capacity:
- Planning:
- <u>Implementation</u>:
- Evaluation:
- Health Disparities: Cultural Competence:
- The subrecipient will collect and report on a quarterly and annually basis at the community-level, using data to determine progress toward addressing individual grant prevention priority(ies).
- Subrecipients must include in their data collection, and reporting activities that support evidence to preserve or change activities, demonstrating strategies and improvement through continuously evaluate data and systems for effectiveness.

Required Essentials: Document / Narrative

- All activities must be clearly outlined and connected to the coalitions Strategic Prevention Framework-Partnership For Success (PFS) Scope of Work (SOW).
- Address how the coalition strategies address behavioral health disparities among racial and ethnic minorities and other populations when evaluating for primary prevention.
- Provide written documentation indicating the correlation between PFS quarterly activities, elements within your logic model and accountability of the service/s provided and described in the outline your PFS scope of work.

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Training and Technical Assistance:

- Training Needs: Description of training/technical assistance (TTA) needs. Include the topic of training needed and a brief description of the need for this TA.
- Training Provided: Training and technical assistance activities provided by the coalition to support your community. Please use the table below to report training delivered.

Chart column defined:

- Date: The date of training provided or date of executed activity for technical assistance.
- Audience: Who attended or received the technical assistance.
- Number Attending: How many attended the training or how many received the technical assistance.
- Topic: What was the name of the training, type of technical assistance.

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Evidence-Based Practice (EBP) Programs Provided

• EBP Programs (**only**) provided by the coalition this quarter.

Chart column defined:

- Dates(s) Offered: The date of when the EBP program took place.
- Name of the EBP Program: The title of the EBP program as it matches to PFS subaward.
- <u>(Important Note)</u> Unduplicated* Number Served: The number of unduplicated people served during the fiscal year.
- Number Reached: How many were serviced. Example; 205 were served.
- Target population:
- Evaluation updates on the progress of your local evaluation and/or work must be submitted to both your evaluator-if applicable and the states EBP evaluator.
- SAPTA Program Analyst comments and feedback to the coalition: This box is open for the PFS subject matter expert to provide comments and/ or feedback to the coalition.

Requirements of State General Fund Substance Abuse Primary Prevention (SAPP) Quarterly report

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SAPP funds are used as a maintenance of effort (MOE) for the SABG; to increase services and to support infrastructure and the implementation of evidence-based/evidence-informed direct service substance abuse prevention programs, practices, and strategies at the community level.

- All activities associated with this funding must be for the implementation of those activities that meet an identified need within the community and are prioritized in the coalition's Comprehensive Community Prevention Plan (CCPP).
- The subrecipient will collect and report quarterly and annually community-level data to determine progress toward addressing individual CCPP priority(ies). Subrecipients must include in their data collection and reporting activities, that supporting evidence to associated strategies, and continuously evaluate data and systems for effectiveness.
- Of the strategies funded with State General Funds, all must either be evidence-based or reviewed and approved through the Bureau.

If you have any questions, please do not hesitate to contact your program subject matter expert:

PFS Sara Bacon at (775) 684-2217, sbacon@health.nv.gov
 SAPP Bill Kirby at (775) 684-4054, bkirby@health.nv.gov
 SABG Meg Matta at (775) 684-2227, mmatta@health.nv.gov
 Manager Tracy Palmer at (775) 684-4069, t.palmer@health.nv.gov

To view the BBHWP policies and procedures and the corresponding quarterly reports please visit BBHWP webpage at http://dpbh.nv.gov/Programs/ClinicalSAPTA/dta/Partners/MOT/.