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| **SECTION 1: PROJECT INFROMATION** | | | |
| **GRANTEE NAME:** City of Oakland, Human Services Department | | | |
| **PROJECT TITLE:** Expanding Behavioral Health Supports to Reduce Group and Gun Violence | | | |
| **AGREEMENT NUMBER:** 852-17 | | **AWARD TOTAL:** $500,000 | |
| **REPORTING PERIOD (check applicable period)** | | | |
| **5/1/18- 9/30/18**  **Due: 11/15/18** | **10/1/18- 12/31/18**  **Due: 2/15/19** | **1/1/19- 3/31/19**  **Due: 5/15/19** | **4/1/19- 6/30/19**  **Due: 8/15/19** |
| **7/1/19- 9/30/19**  **Due: 11/15/19** | **10/1/19- 12/31/19**  **Due: 2/15/20** | **1/1/20- 4/30/20**  **Due: 6/15/20** |  |

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| **SECTION 2: GOALS AND OBJECTIVES** |
| This section lists the goals and objectives contained in the original proposal. It is intended to capture your progress toward implementation of each objective, answering questions like: *Are the necessary staff in place? Are referrals coming at the rate you thought they would? Have services been implemented? Are classes being held? Have staff received training? Are pre- and post-tests being administered consistently? Is the evaluator who will measure this outcome in place? Is the evaluator meeting regularly with partners? Are data collection agreements in place?* This is the not the place to report numerical data; that will be captured on Part 2 of the Progress Report. Provide clear and complete narrative responses, specific to this reporting period. |

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| **Goal (1)** | | Improve the participation and engagement in life coaching services for individuals at highest risk of gun violence. | |
| **Objectives:** | | 1. Participants will meet with Life Coach 2-3 times per week. 2. Participants will engage with Life Coach for 24-30 weeks. 3. Life Coaches will increase their knowledge of CBT and related topics. 4. Participants will access needed resources through a coordinated service network. | |
| 1. | Describe progress toward objectives A-D: | | (Type Response Here) |
| 2. | Describe any challenges toward meeting the stated goal and objectives: | | (Type Response Here) |
| 3. | If applicable, what steps were implemented to address challenges: | | (Type Response Here) |

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| **Goal (2)** | | Improve the cognitive and social-emotional skills of those participants at highest risk of gun violence. | |
| **Objectives:** | | 1. 60 people will participate in CBT program each year (up to 120 total). 2. 80 percent of participants will complete 28 hours of CBT programming (i.e. graduate). 3. Participant scores on social-emotional (SE) metrics improve relative to comparison group. | |
| 1. | Describe progress toward objectives A-C: | | (Type Response Here) |
| 2. | Describe any challenges toward meeting the stated goal and objectives: | | (Type Response Here) |
| 3. | If applicable, what steps were implemented to address challenges: | | (Type Response Here) |

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| **Goal (3)** | | Reduce criminal justice involvement and victimization among participants. | |
| **Objectives:** | | 1. Participants will have a reduced rate of arrest, conviction, and incarceration relative to a comparison group. 2. Participants will have a reduced victimization rate relative to comparison a group. | |
| 1. | Describe progress toward objectives A-B: | | (Type Response Here) |
| 2. | Describe any challenges toward meeting the stated goal and objectives: | | (Type Response Here) |
| 3. | If applicable, what steps were implemented to address challenges: | | (Type Response Here) |

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| **SECTION 3: NARRATIVE QUESTIONS** |
| This section asks common questions of all CalVIP grantees. Provide clear and complete responses, specific to this reporting period, to each question below. |

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

Yes  No

1. **If no, explain why and describe the plan to correct it.**

1. **In relation to the overall grant budget, are match funds being expended as planned and on schedule?**

Yes  No

1. **If no, explain why and describe the plan to correct it.**

1. **Are all grant-funded positions filled (includes the lead agency and any contracted agencies)?**

Yes  No

1. **If no, which grant-funded positions are unfilled, why, and what is the timeline to fill them?**

1. **How does your project ensure services are provided to the target population, as specified in the original proposal?**

1. **What quality assurance methods are in place to ensure all programs/services are delivered as intended and with fidelity to the approaches described in the original proposal?**

1. **If applicable, escribe any grant-funded trainings that during the reporting period. Include the date(s), number of attendees and a list of participating agencies.**

1. **Describe at least one grant-funded accomplishment during this reporting period.**

1. **Describe any significant grant-funded activities occurring in the next reporting period (e.g. trainings, community events, etc.)**

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| **SECTION 4: OTHER/TECHNICAL ASSISTANCE** |
| This section allows grantees to include information not captured in other sections and to request technical assistance. |

1. **Would you like to request technical assistance? Please check one:**

Yes  No

1. **If yes, describe the nature of the request:**

1. **Provide any additional information (not already covered in other sections) that you think is important to share with BSCC, including media coverage, awards or recognition, special events, etc.**

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| **REPORT SUBMISSION** | |
| **PREPARED BY:** | **TITLE:** |
| **EMAIL:** | **TELEPHONE NUMBER:** |
| **DATE SUBMITTED:** | **DATE RECEIVED:** |
| **BSCC CONTACT INFORMATION** | |
| Please email **Parts 1 and 2** to [CalVIP@bscc.ca.gov](mailto:CalVIP@bscc.ca.gov). For questions please contact Angela Ardisana at (916) 323-8580 or <angela.ardisana@bscc.ca.gov>. | |