

Programmatic Reporting

Grant Award Number:	G1999ONDCP06A
Sub-Contract Number:	049
Sub-recipient:	Pinellas County
Project Title:	The Pinellas County Homeless Overdose Mitigation & Engagement (HOME) Program
Implementing Agency:	Pinellas County Human Services
Award Period:	December 2, 2019 – November 30, 2020

The information collected on this form helps us measure the progress you are making in achieving your project's goals and objectives. It also helps us determine what, if any, technical assistance you may need in implementing your project.

MEASURES DUE ON QUARTERLY BASIS

CIRCLE APPROPRIATE QUARTER

QUARTER 1 – 12/2/19-2/28/20

QUARTER 3 – 6/1/20 – 8/31/20

QUARTER 2 – 3/1/20-5/31/20

QUARTER 4 – 9/1/20-11/30/20

Performance Measures

1. Number of property owners educated.
2. Number of emergency calls for service to identified locations.
3. Number of naloxone boxes distributed to property owners and/or clients/residents in identified locations.

Progress Report Questions

1. If no funds or funds less than 25% expended during this reporting period, please provide an explanation as to why and when you anticipate requesting funds. Your detailed explanation should include each budget category.
2. Every quarterly report should provide a brief narrative assessment to the projects effectiveness thus far. The brief narrative should include qualitative and quantitative evidence, as available, and highlight factors that the author considers to have facilitated or impaired the project's effectiveness.
3. Please list any successes and/or best practices developed through this University of Baltimore funded program.
4. Please explain how this award helped combat opioid overdose through community level intervention.
5. Describe any barriers/challenges to implementing or completing any of the objectives. Include a corrective action taken or planned to overcome describes barriers (include timeline).
6. Are there any obstacles or barriers that will prevent you from spending all grant funds?
7. Summarize the progress of completed goals for the quarter, including program highlights or strategy activities (special events, program achievements, etc.) and dates of completion, if applicable. Also, highlight the status of any objectives that were delayed the previous quarter.
8. Describe, in general, the level of cooperation and collaboration between partner agencies affiliated with this program.
9. Provide any additional information that you feel is relevant.