

Health Disparities Reduction and Minority Health Section

Final Program Report Form

NOTICE: This report form is adapted for various agencies. Some areas of this form will not affect your agency.

1. Agency Name:	2. Report Prepared by:
3. Telephone:	4. Email:

5. Project Name:

6. Report for: ☐ Qtr. 1 ☐ Qtr. 2 ☐ Qtr. 3 ☐ Qtr. 4 ☒ **Final** **Submission date:**

7. How many FTEs are supported by this grant?	8 Total additional funding/staffing leveraged through this grant? Please indicate funding source and amount:
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9. Please provide information on your partnership. Discuss any expansion or attrition issues experienced.

of original (at start of grant) partners: _____

new partners added this quarter:* _____

List new partners:

partners dropped or inactive this quarter:_____

List partners dropped/inactive:

Total partners as of this quarter: _____

*** Please attach copy of partnership agreement for each new partner**

<p>10. Total number of people participating in program interventions this quarter</p> <p>Total: __ 810 __</p> <p>African American: _____</p> <p>Asian American/Pacific Islander: _____</p> <p>Caucasian/White: _____</p> <p>Native American/Alaskan Native: _____</p> <p>Hispanic/Latino: _____</p> <p>Arab American/Chaldean Ancestry: _____</p> <p>Unknown: _____</p> <p>Male: _____</p> <p>Female: _____</p> <p>Child/youth (0-18yrs) : _____</p> <p>Adult (18-64 yrs) : _____</p> <p>Seniors (65 and over): _____</p>	<p>11. Estimated number of people reached by media/social marketing activities</p> <p>Total: __ 3870 __</p> <hr/> <p>12. Number of tailored Culturally and Linguistically Appropriate written/educational materials, forms, and other documents developed and/or disseminated:</p> <p>Total: __ 6 __</p> <p><u>List:</u></p> <hr/> <p>13. Number of presentations/consultations intended to raise awareness and promote the adoption/implementation of the Enhanced CLAS Standards provided by the grantee:</p> <p>Total: __ 11 __</p> <p><u>List:</u></p>
<p>14.</p> <p>INTRODUCTION/PURPOSE/INTENDED OUTCOMES:</p> <ul style="list-style-type: none"> • <i>Describe the project and its purpose. Identify the interventions provided and the population(s) served and target area(s). Please include a list of the project objectives and intended outcomes.</i> 	
<p>15.</p> <p>INTERVENTION:</p> <ul style="list-style-type: none"> • <i>Discuss the proposed intervention/activities of the project.</i> 	

16.

EVALUATION METHOD:

- *Discuss the logic model, data and evaluation methods used to evaluate your project and the results of the evaluation.*

17.

PROJECT RESULTS:

- *Discuss the results of the project.*
- *Also, discuss how the project addressed the OMH's expectation to increase the number of organization that adopt and implement the enhanced CLAS Standards. Please include related to any policies adopted within your organization or your partner organization as a result of this initiative.*

18.

EMERGING EVIDENCE OF INTERVENTION EFFECTIVENESS:

- *Discuss any emerging evidence of the intervention and its effectiveness. As a result of the intervention how did it affect the targeted population?*
- *What are the implications for replication of your program outcomes in other communities?*

19.

RECOMMENDATIONS/LESSONS LEARNED:

- *Discussion any recommendations you would make as a result of the project and lessons learned.*

20.

SUSTAINABILITY PLAN:

- *Discuss current and future plans to sustain project activities/efforts.*

21.

POLICY IMPLICATIONS:

- *What are the policy implications (Local & State) of your program results?*
- *What roles can the State play in regards to those policy implications?*
- *What strategies have you used to educate policy makers regarding your program impact?*

