SUBMITTING THE ANNUAL PROGRESS REPORT

A GUIDE FOR PARTNERGRANTS

PURPOSE AND DUE DATE

The purpose of the Annual Progress Report is to provide detailed information about the fiscal, organization and programmatic performance of the previous program period that just ended.

The Annual Progress Report (APR) must be submitted within 45 days after the end of the program period. Any final Claim must be submitted before submitting the Annual Progress Report, which means final Claims for expenses incurred and paid during the previous program period must be submitted within 40 days follow the end of the previous program period.

CREATING THE REPORT:

Log-in to the PartnerGrants system at https://partnergrants.austintexas.gov , using the User ID and Password.
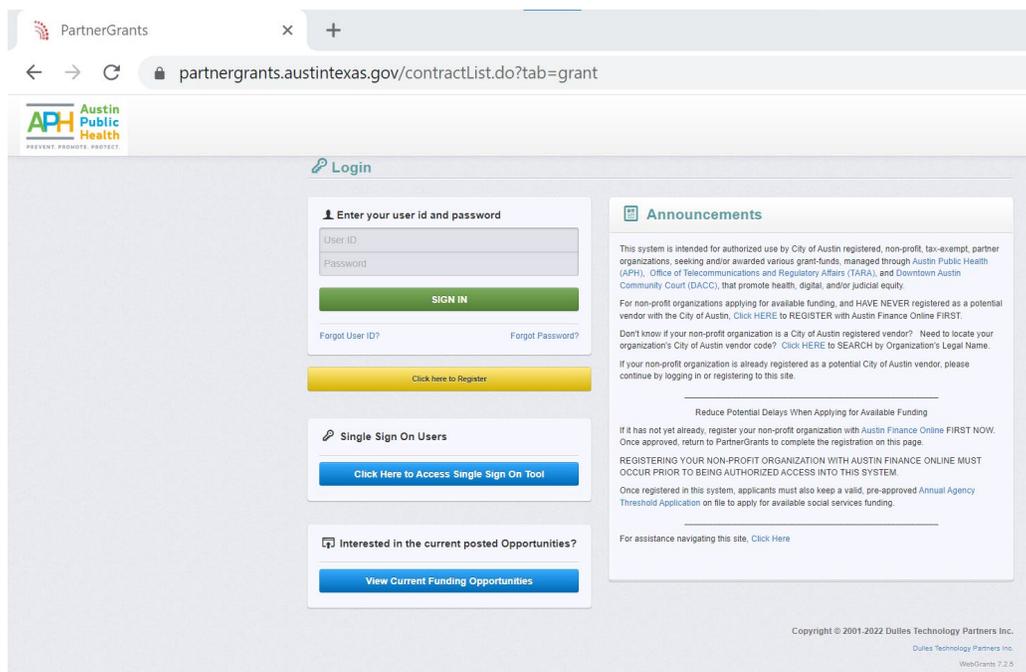
At the Main Menu select the Grants tab, then select the record ID for the Grant whose program period is ending.

From the Grant Components screen, select the Status Reports link.

On the Status Reports screen, at the right of the screen, select the Add Status Report button to create a new report.

In the General Information section, in the dropdown box for Sub Type, select Annual Progress Report.

Enter the Title as 'AgreementName Fiscal Year[22] Annual Progress Report'.

The Fiscal Year will be whichever of the City's fiscal year funding was used for the grant program period that is ending. "The Report From" will be the starting and ending date of the program period for this Grant ID. Select 'Save Form' at the right of the screen.

The next screen will already be in 'Editing' mode. Select Contract Progress Report.

COMPLETING THE REPORT

The next screen will already be in 'Editing' mode.

The Report consists of 5 sections:

- Program Financial Summary
- Program Summary
- Tax Status Certification
- Capital Inventory
- Progress Files

PROGRAM FINANCIAL SUMMARY:

The Status Report will be in 'Editing' mode.

If you are returning to this section, scroll down to the Program Financial Summary section, select 'Edit Form', and complete the fields, then select 'Save Form'.

If this is your initial entry, scroll down to the Program Financial Summary section to complete the fields, and then select 'Save Form'.

Period Project Amount (required) – the total amount of funding from Austin Public Health that was allocated for the budget for the program period that was just completed.

Period Project Expenditures (required) – All City funds that were spent in the program period. May not exceed the Total Program Period Amount.

Period Payments Received Plus Outstanding Invoices – All City funds that were claimed and reimbursed as well as the amount of any outstanding invoices that have yet to be paid.

Period Unexpended Balance – This is an automatic calculation equal to the City funds that were not spent and will be released back to the City.

Period Over-Payment – This is an automatic calculation equal to the amount to be refunded to the City. In this case, remit a check payable to the City of Austin with this report. Contact your City Contract Manager for instructions.

Period Matching Funds Contributed (if applicable) – For programs that have requirements for matching funds, the total amount of matching funds contributed must be entered here.

Non-Zero Amounts (conditionally required): Provide a list of any **Period Unexpended Balance** or any **Period Over-Payment** and an explanation for the over- or under payment that will require reimbursement to the City. Once the section has been completed, select 'Save Form' at the right of the screen.

Scroll down to the Program Summary section.

PROGRAM SUMMARY:

If you are returning to this section, scroll down to the Program Summary section, select 'Edit Form', and complete the fields, then select 'Save Form'.

If this is your initial entry, scroll down to the Program Summary section and complete each narrative section to the best of an agency's ability – none of them should be left blank. The instructions for what should be input is listed above. Complete the fields, and then select 'Save Form'.

If you have the following information readily available, please quantify, or describe, the unmet needs of clients who requested services from your agency during the contract year. Note: Do not cite community-wide unmet need data derived by other organizations. The unmet need, as experienced by your agency, may be described in any manner for which you have data. Examples include:

The number of clients who requested your services but were served only partially or not at all due to resource limitations.
The length of time clients are maintained on waiting lists prior to service initiation.

Unmet Needs:

This field is limited to 1000 characters.

Identify (and explain, if possible) any significant trends you have noted in your client populations and the communities you serve.

Trends*:

This field is limited to 1000 characters.

Please tell us what is new in your issue area. Include any changes implemented during the contract year and/or any changes that you are contemplating for the future. Examples include: changes to program practices, new strategies, new collaborative efforts, national or regional trend information, promising program practices.

Issue Area Updates*:

This field is limited to 1000 characters.

Suggestions to improve the contracting process.

Contracting Process Suggestions *:

This field is limited to 1000 characters.

Please provide any additional comments here.

Additional Comments:

This field is limited to 1000 characters.

The Culturally and Linguistically Appropriate Standards (CLAS) section includes a listing of 15 standards that an agency should engage and make progress. Directly below is the narrative section.

CLAS

Please provide an update on your organization's progress in implementing and sustaining CLAS.
On which of the 15 standards is your organization making progress:

1. **Quality Care and Services:** Provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.
2. **Organizational Governance and Leadership:** Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices and allocated resources.
3. **Diverse Governance:** Recruit, promote and support a culturally and linguistically diverse governance, leadership and workforce that are responsive to the population in the service area.
4. **Educate and Train:** Educate and train governance, leadership and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.
5. **Offer Language Assistance:** Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.
6. **Availability of Language Assistance:** Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
7. **Competence of Language Assistance:** Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
8. **Provide Materials:** Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.
9. **Establish Appropriate Goals:** Establish culturally and linguistically appropriate goals, policies and management accountability, and infuse them throughout the organizations' planning and operations.
10. **Conduct Ongoing Assessments:** Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into assessment measurement and continuous quality improvement activities.
11. **Impact of CLAS on Health Equity:** Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.
12. **Assessments of Community Health Assets and Need:** Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.
13. **Partner With the Community:** Partner with the community to design, implement and evaluate policies, practices and services to ensure cultural and linguistic appropriateness.
14. **Create Resolution Processes:** Create conflict- and grievance-resolution processes that are culturally and linguistically appropriate to identify, prevent and resolve conflicts or complaints.
15. **Communicate the Organization's Progress:** Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents and the general public.

Click the (CLAS) field to render the dropdown list and select an area. Repeat this action for multiple selections (must select at least 3 areas).

Culturally and Linguistically
Appropriate Standards (CLAS)*:

CLAS

1. Quality Care and Services
2. Organizational Governance and Leadership
3. Diverse Governance
4. Educate and Train

CLAS Successes*:

5. Offer Language Assistance
6. Availability of Language Assistance
7. Competence of Language Assistance
8. Provide Materials

The next three fields are for an agency to list the CLAS Successes, Challenges, and Trends – these should be completed to the best of an agency's ability and should not be left blank. Once complete, click 'Save Form'.

CLAS

CLAS Successes*:

This field is limited to 1000 characters.

CLAS Challenges*:

This field is limited to 1000 characters.

CLAS Trends*:

This field is limited to 1000 characters.

Save Form

Scroll down to the Tax Status Certification section and complete the field and choice selection.

TAX STATUS CERTIFICATION:

Enter the Previous Calendar Year Ending in the appropriate box and then check either Yes or No to certify that an agency is fully current on all tax payments and has complied with all requirements of the law. Once the Tax Status Certification form is complete, select 'Save Form' at the right of the screen.

Scroll down to the Tax Status Certification section and complete the field and choice selection.

CAPITAL INVENTORY:

If this is an initial Status Report, this component will be disabled.

If your program has capital inventory purchased with City funds, this component will be enabled. Select the '+ Add Row' button on the right of the menu. Repeat this action for additional entries as needed; otherwise, select 'Mark as Complete'.

Enter the information required for the capital item purchased with City funds. Select Save Form.

Scroll down to the Progress Files section and select the '+ Add Row' button.

PROGRESS FILES:

Upload any files or supporting documentation as needed along with a description of the document. After the information has been entered, select the 'Save Row' button.

SUBMITTING THE REPORT:

Scroll through the reports to check your work. Then select 'Mark as Complete'. This will return you to the Status Report Details and the Components section in PartnerGrants.

Select the 'Submit Status Report' button. This action will render a pop-up stating that submitting the report will lock all the sections from further editing. Select OK to lock the report and submit it to the City for review.