This report is due October 15, January 15, April 15 and July 15

Please submit to your Worksytems Contract Manager &

CC AHFE Program Manager Jennifer Fox.

See [AHFE EOP Knowledge Base page](https://help.worksystems.org/knowledge-base/a-home-for-everyone-ahfe-eop/) for Quarterly Report Guidance

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| **Contractor Name** |
| **Name of Staff Completing Report** | **Phone Number**  |
| **Reporting Period:**❑ **Q1 (July-September)** ❑ **Q2 (October-December)** ❑ **Q3 (January-March)** ❑ **Q4 (April-June)** |

**I. Program Delivery and Implementation**

Discuss service delivery implementation Briefly describe successes and challenges with 2-3 sentences in each section.

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| **Enrolling Participants – How’s outreach going? Are you taking new participants or is your caseload full?** |
| **Career Mapping & Resource Planning – How are participants using it?** |
| **Training – What trainings are your participants doing?** |

**I. Program Delivery and Implementation, cont.**

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| **Job Placement – What jobs are available? What jobs are participants wanting?** |
| **Housing Stability – Are your participants housed? How are rent assistance referrals going?** |
| **Career Boost – Describe enhanced services delivered to only SNAP participants.** |
| **Communication – Identify any issues with partners, WorkSource staff or Worksystems staff** |

**II. Enrollment Plan & Performance Measures**

Complete the chart below to report on your organization’s progress towards contract goals. For help running reports in ITrac to obtain the required data, refer to the PY24 quarterly reporting guidance available on the AHFE page on the Knowledge Base.

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| **AHFE Career Coaching Program** |
| **Annual Enrollment Capacity** | **Goal** | **Actual****Q1** | **Actual****Q2** | **Actual****Q3** | **Actual****Q4** | **Actual****Year End** |
| Include Intensive phase participants and actively engaged participants in Follow-Up phase. |  |  |  |  |  |  |
| **Performance Measures** |
| Attainment of Unsubsidized Employment | 70% |  |  |  |  |  |
| Attainment of Career Track Employment | 45% |  |  |  |  |  |
| Employment Rate in Q2 following the Exit to Follow-Up Date | 70% |  |  |  |  |  |
| Employment Rate in Q4 following the Exit to Follow-Up Date | 70% |  |  |  |  |  |
| Advancement in employment as demonstrated by gain in earnings, wage or benefits | 30% |  |  |  |  |  |
| **Participant Demographic Plan** |
| Participants served who are people of color | 75% |  |  |  |  |  |
| Survivors of Domestic Violence or Sexual Assault | Priority |  |

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| **Career Boost / SNAP Program** |
| **SNAP E&T Service** | **Annual Goal****# SNAP Recipients Served** | **Actual # Served**(year-to-date) | **Progress towards Annual Goal** (%) | **Actual # Served** (during the quarter) | **Is monthly data the same** **between ITrac Career Boost** **and iMatchSkills?** |
| Job Search Training |  |  |  |  |  |

**III. Narrative for Performance Measures**

Discuss progress toward goals with 2-3 sentences in each section.

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| **Is your enrollment capacity on track this quarter to meet your annual goal? If not, what steps are you taking?** |
| **What needs to be done to adjust your proportion of SNAP vs non-SNAP participants?** |
| **What is helping you progress toward your goals?**  |
| **What challenges are your facing?**  |
| **Discuss how your program’s recruitment connects with the larger AHFE community-wide efforts to address Multnomah County and the City of Portland’s housing crisis.** |

**IV. I-Trac Data Collection & Entry**

Describe your program’s plan and strategies to ensure timely and accurate contract-required data entry.

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| **Describe how staff ensure monthly services are entered into ITrac AHFE records and into ITrac Career Boost records and iMatch Skills for SNAP participants.** |
| **How have staff verified that monthly data is accurate and aligned between ITrac Career Boost and iMatch Skills?** |
| **Count the number of exited participants with auto exits. What is the plan to correct these?***(To get the count, run the report titled “Customer Flow” and click on the line called ‘Participant Exits.’ Look at resulting exit reasons.)* |

**V. Stories**

Share at least two participant stories: one that highlights customer success and what’s working well in your program and one that highlights customer challenges and how we can improve the program. At least one story should be about a SNAP recipient. Use an I-Trac ID# for each story; please do not include names or other personally identifiable information. **Obtain a signed release form for each story** (and photo, if you are able to include one). Attach stories to the end of this report.

**VI. Technical Assistance / Training / AHFE Meetings**

Submit suggestions and requests for technical assistance or training. Share any ideas you have for our monthly AHFE meetings.

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**VII. Contract Budget**

Using the most recent billing workbook, please complete the chart below. Include a written explanation of any variance — positive or negative. Explain how you plan to correct any variance.

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| **Contract Budget by Funding Source** |
| **FUNDING SOURCE** | **Total** **budgeted** | **ACTUAL** **spent ytd** | **Actual** **% spent** |
| WIOA ADULT |  |  |  |
| AHFE |  |  |  |
| AHFE SNAP |  |  |  |
| REINVESTMENT |  |  |  |
| REINVESTMENT SNAP |  |  |  |
| **Contract Budget by Line Item** |
| **LINE ITEM** | **Total** **budgeted** | **ACTUAL** **spent ytd** | **Actual** **% spent** |
| Personnel |  |  |  |
| OPERATING |  |  |  |
| PARTICIPANT EXPENSE |  |  |  |
| **TOTALS** |  |  |  |

The target amount is to spend each quarter about 25% of the total budgeted for the year. So for Quarter 1, an annual budget of $100K would target spending $25K. At the end of Quarter 2, the target is to have spent $50K.

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| **Explain any under or over spending. How do you plan to correct it?** |