# Supported Employment

FY25 Treatment and Recovery Grant

Quarter Program Report

**To:** DOH Finance & Management Services Grants & Contracts Section

**Attention:**

**Agency:**

**Grant Number:**

**Form submitted by:**

**Date:** Submitted on  **Quarter:** Select quarter reported

**Instructions:**

Step 1: Complete the Cumulative Financial Report (CFR) in GEMS. If expenditures are over or under budget for the quarter, the reason must be noted in the narrative section of the CFR form.

Step 2: Complete the Supported Employment Quarter Program reporting questions below.

Step 3: Submit and upload this the Supported Employment Quarter Program Report into GEMS.

*\*Including any relevant attachments*

# Supported Employment Quarter Program Reporting Questions:

1. Total Number of people on caseload of Individual Placement and Support (IPS) staff:
2. Number of people (unduplicated) from IPS caseload working integrated competitive employment at any time during the quarter:
3. Number of people working successfully in integrated competitive employment who transitioned off the IPS caseload during the quarter:
4. Number of people NOT working successfully in integrated competitive employment who transitioned off the IPS caseload during this quarter:
5. Number of people who are employment specialists with an IPS caseload:  *(excluding the supervisor)*
6. Total FTE employment specialists with an IPS caseload:  *(excluding the supervisor)*
7. Number of IPS clients on supervisor’s caseload:
8. Number of new enrollees admitted to the IPS program during this reporting quarter:
9. Number of new job starts for all IPS participants during the quarter:
10. Number of IPS clients who enrolled in education programs this quarter:
11. Type of employment
    1. Full-Time:
    2. Part-Time:
    3. Seasonal:
    4. Day Labor:
    5. Self-Employment:
12. Average earnings per participant that is employed: *(earnings/number of people that are employed)*
13. Cost per client:
14. How many employers/businesses did you provide outreach to this quarter:  *(job development)*
15. How many individuals in the IPS program have been incarcerated for any period of time in the last 90 days:
16. How many individuals were on probation or parole this quarter:
17. Please provide an update on your agencies overall status and any challenges faced and successes achieved during the time period covered by this quarterly report:
18. List any training needs of your organization:
19. Are there any current challenges your agency is dealing with that could impact the program’s sustainability through the fiscal year? select one

If yes, describe the challenges: