

FAA Program Data Reporting Guidelines FY22 - Economic Stability

Service Category	Agency Name	Program Name	Outcome Statement from LM	Total Amount Awarded for FY20	Database Assigned	How will outcome be determined?	Demographics Expected
Economic Stability / Poverty	CILO	FIND	12 of 60 or 20% of households served will increase disposable income for basic living expenses and will maintain an increase for 90 days or more by the end of the fiscal year.	\$78,500.00	ClientTrack	<p>Outcome is POSITIVE IF: Income has increased from baseline AND is maintained for 90 days after this</p> <p>Outcome is NEGATIVE IF: Income DECREASES from baseline OR income is NOT maintained for a minimum of 90 days</p> <p>Outcome is considered UNCOLLECTED IF: Client is new to program and does not have enough time to increase their disposable income during the fiscal year</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>
Economic Stability / Poverty	Community Child Care Center of Delray Beach	Family Strengthening	18 of 50 or 36% of participants served will increase disposable income for basic living expenses and maintain an increase for 90 days or more	\$100,000.00	ClientTrack	<p>Outcome is POSITIVE IF: Income has increased from baseline AND is maintained for 90 days after this</p> <p>Outcome is NEGATIVE IF: Income DECREASES from baseline OR income is NOT maintained for a minimum of 90 days</p> <p>Outcome is considered UNCOLLECTED IF: Client is new to program and does not have enough time to increase their disposable income during the fiscal year</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>
Economic Stability / Poverty	Hab Cntr for Handicapped	Employment Program for Adults with Disabilities ES/P	4 of 20 or 20% of individuals served will increase disposable income for basic living expenses and maintain an increase for 90 days or more.	\$60,054.00	ClientTrack	<p>Outcome is POSITIVE IF: Income has increased from baseline AND is maintained for 90 days after this</p> <p>Outcome is NEGATIVE IF: Income DECREASES from baseline OR income is NOT maintained for a minimum of 90 days</p> <p>Outcome is considered UNCOLLECTED IF: Client is new to program and does not have enough time to increase their disposable income during the fiscal year</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>

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Economic Stability / Poverty	Palm Beach Habilitation Center	Achieving Economic Stability	10 of 30 or 33% of individuals served will increase disposable income for basic living expenses and maintain an increase for 90 days or more.	\$60,054.00	ClientTrack	<p>Outcome is POSITIVE IF: Income has increased from baseline AND is maintained for 90 days after this</p> <p>Outcome is NEGATIVE IF: Income DECREASES from baseline OR income is NOT maintained for a minimum of 90 days</p> <p>Outcome is considered UNCOLLECTED IF: Client is new to program and does not have enough time to increase their disposable income during the fiscal year</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>
Economic Stability / Poverty	The Lord's Place	Cafe Joshua Job Training & Employment	10 of 20 or 50% of individuals served will increase disposable income for basic living expenses and maintain an increase for 90 days or more.	\$50,000.00	ClientTrack	<p>Outcome is POSITIVE IF: Income has increased from baseline AND is maintained for 90 days after this</p> <p>Outcome is NEGATIVE IF: Income DECREASES from baseline OR income is NOT maintained for a minimum of 90 days</p> <p>Outcome is considered UNCOLLECTED IF: Client is new to program and does not have enough time to increase their disposable income during the fiscal year</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>
Special Needs / Developmental Disabilities	CLO	SAIL	105 of 150 or 70% of participants will increase knowledge of a life skill evidenced by pre-and post-test scores, staff observation, and documented self-reporting during contract period.	\$154,581.00	SAMS	<p>Outcome is POSITIVE IF: On a monthly basis, participants have displayed improvement in at least one life skill from pre to post test by at least 20%.</p> <p>Outcome is NEGATIVE IF: On a monthly basis, youth participants DO NOT display improvement in at least one life skill from pre to post test by at least 20%.</p> <p>Outcome is UNCOLLECTED IF: Participant is not in program for necessary assessment period OR youth participant is unable to complete post test.</p>	<p>The following demographics should be filled out:</p> <ol style="list-style-type: none"> 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income

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Special Needs / Developmental Disabilities	Seagull Industries	SAIL	40 of 50 or 80% of participants will achieve employment skills as evidenced by annual goal in the employment plan.	\$30,000.00	SAMIS	<p>Outcome is POSITIVE IF: By the end of the contract year, participant has shown improvement in employment skills in their annual post survey from their intake pre survey.</p> <p>Outcome is NEGATIVE IF: By the end of the contract year, participant has NOT shown improvement in employment skills in their annual post survey from their intake pre survey.</p> <p>Outcome is UNCOLLECTED IF: Participant has not been in the program for the necessary assessment period OR Agency loses contact with participant OR participant exits prior to agency post survey assessment for the outcome.</p>	<p>The following demographics should be filled out: 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income</p>
Economic Stability / Poverty	El Sol	Worker Development Project	96 of 400 or 24% of individuals served will increase disposable income for basic living expenses and maintain an increase for 90 days or more.	\$55,034.00	ClientTrack	<p>Outcome is POSITIVE IF: Income has increased from baseline AND is maintained for 90 days after this</p> <p>Outcome is NEGATIVE IF: Income DECREASES from baseline OR income is NOT maintained for a minimum of 90 days</p> <p>Outcome is considered UNCOLLECTED IF: Client is new to program and does not have enough time to increase their disposable income during the fiscal year</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>
Economic Stability / Poverty	Families First	Kin Support	12 of 25 or 48% of families will increase disposable income for basic living expenses and maintain an increase for 90 days or more.	\$62,500.00	ClientTrack	<p>Outcome is POSITIVE IF: Income has increased from baseline AND is maintained for 90 days after this</p> <p>Outcome is NEGATIVE IF: Income DECREASES from baseline OR income is NOT maintained for a minimum of 90 days</p> <p>Outcome is considered UNCOLLECTED IF: Client is new to program and does not have enough time to increase their disposable income during the fiscal year</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>

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Economic Stability / Poverty	Farmworkers Coordinating Council	Family Preservation & Economic Stabilization	280 of 350 or 80% of families served will increase disposable income for basic living expenses and maintain an increase for 90 day or more.	\$165,850.00	ClientTrack	<p>Outcome is POSITIVE IF: Income has increased from baseline AND is maintained for 90 days after this</p> <p>Outcome is NEGATIVE IF: Income DECREASES from baseline OR income is NOT maintained for a minimum of 90 days</p> <p>Outcome is considered UNCOLLECTED IF: Client is new to program and does not have enough time to increase their disposable income during the fiscal year</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>
Economic Stability / Poverty	Glades Initiative	Connecting The Glades	30 of 60 or 50% of individuals served will increase disposable income for basic living expenses and maintain an increase for 90 days or more.	\$142,053.00	ClientTrack	<p>Outcome is POSITIVE IF: Income has increased from baseline AND is maintained for 90 days after this</p> <p>Outcome is NEGATIVE IF: Income DECREASES from baseline OR income is NOT maintained for a minimum of 90 days</p> <p>Outcome is considered UNCOLLECTED IF: Client is new to program and does not have enough time to increase their disposable income during the fiscal year</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>
Economic Stability / Poverty	United Way	VITA	4,720 of 5,900 or 80% of individuals served will increase their disposable income for basic living expenses by receiving a refund and decrease usage of paid tax preparation services.	\$28,904.00	N/A	<p>Outcome is POSITIVE IF: Tax filers receive a refund, an Additional Child Tax Credit, an Earned Income Tax Credit (EITC), or a Child Tax Credit</p> <p>Outcome is NEGATIVE IF: Tax filers DO NOT receive a refund, an Additional Child Tax Credit, an Earned Income Tax Credit (EITC), or a Child Tax Credit</p> <p>Outcome is considered UNCOLLECTED IF: N/A</p>	<p><u>ALL FIELDS REQUIRED BY CLIENT TRACK DATABASE</u></p> <p>AND</p> <p><u>FOR FAA:</u> Client ID (automated by CT) Enroll Date Exit Date (if applicable in FY) Birth Date Gender Race Ethnicity Veteran Status Address Zip Code Living Situation @ Entry Living Situation @ Exit Financial/Income Assessment Work History/Employment Assessment</p>

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Special Needs / Developmental Disabilities	CILO	ALERT	35 of 50 or 70% of youth/young adults with disabilities will learn at least one job readiness or life skill evidenced by pre- and post- test results in combination with staff observation of participant performing said tasks in real life setting.	\$56,777.00	SAMIS	<p>Outcome is POSITIVE IF: On a monthly basis, youth participants have displayed improvement in at least one job readiness or life skill from pre to post test.</p> <p>Outcome is NEGATIVE IF: On a monthly basis, youth participants HAVE NOT displayed improvement in at least one job readiness or life skill from pre to post test.</p> <p>Outcome is UNCOLLECTED IF: Youth participant is not in program for necessary assessment period OR youth participant is unable to complete post test.</p>	<p>The following demographics should be filled out: 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income</p>
Special Needs / Developmental Disabilities	Habilitation Center for the Handicapped	Providing Day Programming for Adults with SNDD	40 of 50 or 80% of FAA clients will achieve at least one (1) objective of one (1) goal from their Annual Plan.	\$75,000.00	SAMIS	<p>Outcome is POSITIVE IF: By the end of the contract year, client has achieved at least one (1) objective of one (1) goal from their Annual Plan.</p> <p>Outcome is NEGATIVE IF: By the end of the contract year, client has NOT achieved at least one (1) objective of one (1) goal from their Annual Plan.</p> <p>Outcome is UNCOLLECTED IF: Client has not been in the program for the necessary assessment period OR client passes away OR agency loses contact with client</p>	<p>The following demographics should be filled out: 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income</p>
Special Needs / Developmental Disabilities	Palm Beach Habilitation Center	Computer Training Program	56 of 80 or 70% of participants will increase their computer skills by completing at least three (3) personal achievement goals.	\$73,389.00	SAMIS	<p>Outcome is POSITIVE IF: By the end of the contract year, participant has completed at least three (3) personal achievement goals.</p> <p>Outcome is NEGATIVE IF: By the end of the contract year, participant has NOT completed AT LEAST three (3) personal achievement goals.</p> <p>Outcome is UNCOLLECTED IF: Participant has not been in the program for the necessary assessment period OR participant passes away OR agency loses contact with participant</p>	<p>The following demographics should be filled out: 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income</p>

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Special Needs / Developmental Disabilities	Palm Beach Habilitation Center	Seniors in Transition and Retirement Services	24 of 30 or 80% of participants will remain active in their community rather than entering a nursing home or institutional level of care.	\$215,327.00	SAMS	<p>Outcome is POSITIVE IF: By the end of the contract year, participant has NOT exited to a nursing home or institutional level of care AND/OR their annual assessment indicates that they are still active in their community. If participant passes away but was still active in their community at that time, outcome is still positive.</p> <p>Outcome is NEGATIVE IF: By the end of the contract year, participant HAS/WILL exit to a nursing home or institutional level of care AND/OR their annual assessment does NOT indicate they will continue to remain active in their community.</p> <p>Outcome is UNCOLLECTED IF: N/A - By the end of the contract year and based on monthly measurements as reported by agency, outcome should be able to be answered with a "yes" or "no".</p>	<p>The following demographics should be filled out: 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income</p>
Special Needs / Developmental Disabilities	Palm Beach Habilitation Center	Supported Employment	32 of 40 or 80% of program participants will be able to maintain their community-based employment situation.	\$67,113.00	SAMS	<p>Outcome is POSITIVE IF: By the end of the contract year, participant has successfully maintained OR obtained and maintained employment. If participant passes away while still employed, their outcome is positive.</p> <p>Outcome is NEGATIVE IF: By the end of the contract year, participant has NOT maintained OR obtained and maintained employment.</p> <p>Outcome is UNCOLLECTED IF: Agency loses contact with participant OR participant exits prior to agency assessment on outcome</p>	<p>The following demographics should be filled out: 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income</p>
Special Needs / Developmental Disabilities	Seagull Industries	Achievement Center	99 of 110 or 90% of participants will increase independence as evidenced by achieving one short term objective from their Individualized Implementation Plan (IIP).	\$278,393.00	SAMS	<p>Outcome is POSITIVE IF: By the end of the contract year, participant has achieved at least ONE (1) short-term objective (STO) from their Individualized Implementation Plan (IIP).</p> <p>Outcome is NEGATIVE IF: By the end of the contract year, participant has NOT achieved at least ONE (1) short-term objective (STO) from their Individualized Implementation Plan (IIP).</p> <p>Outcome is UNCOLLECTED IF: Participant has not been in the program for the necessary assessment period OR Agency loses contact with participant OR participant exits prior to agency assessment on outcome</p>	<p>The following demographics should be filled out: 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income</p>

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Special Needs / Developmental Disabilities	The Arc of PBC	PALS	52 of 65 or 80% of students will achieve at least one goal from their Implementation Plan (IP) and/or Employment Stability Plan (ESP) during the program year.	\$83,845.00	SAMS	<p>Outcome is POSITIVE IF: By the end of the contract year, student has achieved at least ONE (1) goal from their Implementation Plan (IP) and/or Employment Stability Plan (ESP).</p> <p>Outcome is NEGATIVE IF: By the end of the contract year, student has NOT achieved at least ONE (1) goal from their Implementation Plan (IP) and/or Employment Stability Plan (ESP).</p> <p>Outcome is UNCOLLECTED IF: Student has not been in the program for the necessary assessment period OR Agency loses contact with student OR student exits prior to agency assessment for the outcome</p>	<p>The following demographics should be filled out: 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income</p>
Special Needs / Developmental Disabilities	The Arc of the Glades	Adult Developmental Services System of Care	35 of 47 or 75% of the individuals served will achieve at least one STO during the program year.	\$201,474.00	SAMS	<p>Outcome is POSITIVE IF: By the end of the contract year, individual has achieved at least ONE (1) short-term objective (STO) in one of the quarters throughout the year.</p> <p>Outcome is NEGATIVE IF: By the end of the contract year, individual has NOT achieved at least ONE (1) short-term objective (STO) in one of the quarters throughout the year.</p> <p>Outcome is UNCOLLECTED IF: Individual has not been in the program for the necessary assessment period OR Agency loses contact with individual OR individual exits prior to agency assessment for the outcome</p>	<p>The following demographics should be filled out: 1. Agency Case Code (HIGHLY recommended by CSD staff but NOT required) 2. Client First Name (or abbreviation IF program cannot legally provide this information) 3. Client Last Name (or abbreviation IF program cannot legally provide this information) 4. Date of Birth 5. Race 6. Ethnicity 7. Household Arrangement (Living Arrangement at Program Entry) 8. Gender 9. Veteran Status 10. Address (Street #, Street Name, Street Suffix, Street Direction if applicable, Apt/Bldg/Unit if applicable, Unit # if applicable, City, Zipcode) (can OMIT IF program cannot legally provide this information) 11. Involvement (Everyone should be PRIMARY) 12. Primary Reason for Participation 13. Primary Activity Service 14. # in Household 15. # Adults in Household 16. # Children in Household 17. # in Household who served in US Armed Forces 18. Household Income</p>