

METHAMPHETAMINE INITIATIVE (METH) ANNUAL GRANT REPORT

An agency receiving funds under METH is required to submit an annual report. **The deadline for this report is July 31st.** Numbers reflected must represent the entire fiscal year.

OCJP suggests that you print this report first and fill it out on paper before completing the report online. This report will not save your work for you to return to later. Use only numbers in the data fields, do not type in words unless field is meant for text.

Reported numbers are to reflect ONLY victims served under the METH grant not your entire agency.

Section 1 - Agency Information

Agency Name

Edison Grant Number

Reporting Person

Phone Number

Email Address

OCJP Program Manager

Reporting Begin Date Reporting End Date

Section 2 - Victims Served

Indicate the number of children and non-offending parents/caregivers served by your METH Initiative project during this reporting period. Each child and non-offending parents/caregiver should be counted only once. Numbers are to reflect **ONLY** children and non-offending parents/caregivers served under the METH grant not your entire agency.

	Number of Victims Served
Methamphetamine Endangered Children	<input type="text"/>
Other Drug Endangered Children <i>(See below to list other drugs)</i>	<input type="text"/>
Non-offending Parent/Caregiver	<input type="text"/>
Total	<input type="text"/>

If number was listed in "Other Drug Endangered Children" category, list drugs involved below. Separate multiple listings with comma(s).

List other drugs involved

Section 3 - Services Provided

Provide the total number of children and non-offending parents/caregivers *(not the number of services provided)* receiving each type of service through your project. See below for definitions of each service. Numbers are to reflect **ONLY** children and non-offending parents/caregivers served under the METH grant not your entire agency.

Service Provided	Number of Children Served	Number of Non-offending Caregivers Served
<p>1. Crisis Counseling - In-person or telephone counseling, emotional support, guidance and counseling provided by advocates, counselors, mental health professionals. Such counseling may occur immediately after a crime or be provided on an ongoing basis.</p>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<p>2. Therapy - Intensive professional psychological and/or psychiatric treatment related to counseling to provide emotional support in crisis arising from the occurrence of crimes. This includes the evaluation of mental health needs as well as the actual delivery of psychotherapy.</p>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<p>3. Group Treatment - Coordination and provision of supportive group activities and includes self-help, peer, and social support.</p>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<p>4. In-Person Contact Information/Referral - In-person contact(s) to discuss services, referrals, available support, etc. with the child or non-offending parent/caregiver. This does not include contacts during which counseling is the primary function of the meeting.</p>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<p>5. Telephone Contact Information/Referral - Telephone contact(s) to discuss services, referrals, available support, etc. with the child or non-offending parent/caregiver. This does not include calls during which counseling is the primary function of the telephone call.</p>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<p>6. Personal Advocacy - Assisting in securing rights, remedies, and services from other agencies, locating financial assistance, intervening with others on behalf of the child or non-offending parent/caregiver, etc.</p>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<p>7. Follow-up Contact - Telephone contacts, written communication, and in-person contacts, to offer emotional support, provide empathetic listening, check on the child's or non-offending parent/caregiver's progress, etc.</p>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<p>8. Criminal Justice Support/Advocacy - Support, assistance, and advocacy provided at any stage of the criminal justice process, to include post-sentencing services and support.</p>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<p>9. Victims Compensation Information - Includes making the child or non-offending parent/caregiver aware of the availability of crime victim compensation, or assisting in completing the required forms, or gathering the needed documentation, etc. It also may include follow-up contact with the victim compensation agency on behalf of the child or non-offending parent/caregiver.</p>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

10. CPIT Meetings - Attending one or more CPIT meetings on behalf of a METH project client. Only report <u>children</u> served.	<input type="text"/>	<input type="text"/>
11. Financial Assistance – Includes financial assistance for transportation, food, clothing, etc. (METH funds only).	<input type="text"/>	<input type="text"/>
12. Transportation - Providing or arranging for transportation for children and non-offending parents/caregivers to receive services or participate in the criminal justice system.	<input type="text"/>	<input type="text"/>
13. Safety Planning - Discussing with a child or non-offending parent/caregiver various methods of lowering risk and remaining safe when around the offending parent.	<input type="text"/>	<input type="text"/>
14. Parenting Education - Providing information to non-offending parents/caregivers on basic parenting topics and techniques.	<input type="text"/>	<input type="text"/>
15. Drug Education - Providing information to a child or non-offending parent about the effect of Methamphetamine and other drug use on the individual and the family.	<input type="text"/>	<input type="text"/>
16. Other (list service type(s) below)	<input type="text"/>	<input type="text"/>

If a number was listed in "Other" category, list the types of services below. Separate multiple listings with comma(s).

Specify other service(s) provided

Section 4 - Public Presentations

Presentations concerning drug-endangered children, the METH grant project services, or any other topic related to this METH grant that are made in schools, community centers, or other public places.

Total number of public presentations

Total number of individuals attending

Section 5 - Victim Census

A. Indicate the number of children and non-offending parents/caregivers provided services according to their race or national origin (*total must equal the total in Section 2*). Numbers are to reflect **ONLY** children and non-offending parents/caregivers served under the METH grant not your entire agency.

Race/Ethnicity	Number of Children Served	Number of Non-offending Caregivers Served
White or European American	<input type="text"/>	<input type="text"/>
Black or African American	<input type="text"/>	<input type="text"/>

Hispanic or Latino	<input type="text"/>	<input type="text"/>
Asian or Pacific Islander	<input type="text"/>	<input type="text"/>
American Indian	<input type="text"/>	<input type="text"/>
Unknown/Other	<input type="text"/>	<input type="text"/>
Total	<input type="text"/>	<input type="text"/>

B. Identify the number of children and non-offending parents/caregivers served by gender (*total must equal the total in Section 2*). Numbers are to reflect **ONLY** children and non-offending parents/caregivers served under the METH grant not your entire agency.

Gender	Number of Children Served	Number of Non-offending Caregivers Served
Female	<input type="text"/>	<input type="text"/>
Male	<input type="text"/>	<input type="text"/>
Total	<input type="text"/>	<input type="text"/>

C. Indicate the number of child victims served according to age group (*total must equal the total in Section 2*). Numbers are to reflect **ONLY** children served under the METH grant not your entire agency.

Age Group	Number of Children Served
0-1 years	<input type="text"/>
2 - 4 years	<input type="text"/>
5 - 9 years	<input type="text"/>
10 - 12 years	<input type="text"/>
13 - 18 years	<input type="text"/>
Total	<input type="text"/>

Certification

Please double check that all report questions have been answered before the certification and submission of this report.

I certify that this report reflects only those activities paid for by METH grant funding from the Office of Criminal Justice Programs. I certify that all reported data is accurate based on agency data collection procedures and that reported data is only for the time period of July 1, 2013 – June 30, 2014.

Type Name and Date Below

Attention! Don't forget to print a copy of this report for your records before you submit your data. The printed copy will be your record of submission. To print, go to File on the toolbar, then choose Print Preview, then Print.

Submit AFTER printing Report

methannualgrantreport.htm