

Exhibit "D"

Public Health: **Program Outcomes and Performance Measures** **Quarterly Report to Clark County**

This form is due by **XX**. You may submit the form: **INSERT SUBMISSION OPTION.**

For any questions related to this form, please email
CCFiscalRecoveryFunds@ClarkCountyNV.gov.

Quarter/Year: _____

Agency: _____

DUNS Number: _____

Agency Address: _____

Project Name: _____

Identification Number: _____
(Provided by Clark County)

Project Expenditure Category (E.C.): _____
(Please enter the E.C. number provided by Clark County.)

Status of Completion: _____
(Not Started, Completed Less than 50%, Completed 50% or More, or Completed)

Primary Location of Project: _____

Required Reporting of Performance Indicators:

The following are required performance indicators per the United States Department of Treasury (Treasury) if they are applicable to your project. To the extent possible, provide data disaggregated by race, ethnicity, gender, income, and other relevant factors. If necessary to provide the data disaggregated, please attach an additional sheet of paper.

If necessary to allow Clark County and Treasury to interpret the results and understand any changes in performance indicators over time, you may attach a brief narrative.

Required Performance Indicators per Treasury		Quarter:	Calendar Year-To-Date	Program To-Date
Payroll for Public Health and Safety Employees (E.C. 1.9)	Number of government FTEs responding to COVID-19 supported under this authority			

Additional Performance Indicators

Please complete the table below to detail both the output and outcome measures that you have identified for your project. To the extent possible, provide data disaggregated by race, ethnicity, gender, income, and other relevant factors. If necessary to provide the data disaggregated, please attach an additional sheet of paper.

If necessary to allow Clark County and Treasury to interpret the results and understand any changes in performance indicators over time, you may attach a brief narrative.

Required Performance Indicators per Treasury		Quarter:	Calendar Year-To-Date	Program To-Date

Projective Narrative

1. In 50-250 words, provide a description of the project in sufficient detail to provide understanding of the major activities that occurred over the past quarter. Please detail the upcoming major activities.
2. Please list the areas where your services are being provided. Please provide a breakdown of zip codes where services are being provided, if available.
3. Provide a brief description of the structure and objectives of assistance program(s).
4. Provide an update on the timeline related to your program.
5. Promoting Equitable Outcomes: Your organization is required to report and describe efforts to date and intended outcomes to promote equity.¹ Each update should include qualitative and quantitative data.
 - a. Describe any strategies employed to maximize programmatic impact and effective, efficient, and equitable outcomes. Describe how programs were designed with equity in mind. Describe any strategies used to prioritize economic and racial equity.
 - b. Are there particular historically underserved, marginalized, or adversely affected groups that you are serving?
 - c. How equal and practical is the ability for residents or businesses to become aware of the services being provided?

¹ For the purposes of the Fiscal Recovery Funds, "equity" is defined in the [Executive Order 13985 On Advancing Racial Equity and Support for Underserved Communities Through the Federal Government](#), as issued on January 20, 2021.

- d. Are there differences in levels of access to benefits and services across groups? Are there administrative requirements that result in disparities in ability to complete applications or meet eligibility criteria?
 - e. Are intended outcomes focused on closing gaps, reaching universal levels of service, or disaggregating progress by race, ethnicity, or other equity dimensions where relevant for the policy objective?
 - f. Describe any constraints or challenges that impacted project success in terms of increasing equity.
6. What challenges has your organization encountered? How are you addressing them?
 7. Provide an overview of the outreach that was done in the community to provide an awareness about the services being provided.
 8. Describe any collaborations built among and between agencies and persons serving this population.
 9. If your organization has received other federal recovery funds and are using such funds to assist with the implementation of programs and services, please detail how the other federal recovery funds are being used. In your response, please detail how the use of all federal recovery funds assist with overall approach for the pandemic recovery.

Public Health (E.C. 1): Describe how funds are being used to respond to COVID-19 and the broader health impacts of COVID-19 and the COVID-19 public health emergency.

10. Evidence-Based Projects: Evidence-based uses are: 1) Evidence-based community violence intervention programs to prevent violence and mitigate the increase of violence during the pandemic; 2) Evidence-based educational services and practices to address the academic needs of students, including tutoring, summer, afterschool, and other extended learning and enrichment programs; and 3) Evidence-based practices to address the social, emotional, and mental health needs of students.
 - a. If your program is an evidence-based program, provide an update on the goals of the evidence-based project.
 - b. Detail the type of evidence that you are using to implement programs and services. Please include the citations of the evidence that you are using as an attachment to this reporting document.
 - c. Identify the dollar amount of total project spending that is allocated towards evidence-based interventions for each project in the Public Health (E.C. 1) Expenditure Category.²

² Of note, recipients are only required to report the amount of the total funds that are allocated to evidence-based interventions in the areas of Public Health, Negative Economic Impacts, and Services to Disproportionately Impacted Communities that are marked by an asterisk in Appendix 1: Expenditure Categories of [Treasury's Compliance and Reporting Guidance](#).

- d. If your evidence-based program has produced results, please report the results below. You may attach supporting documentation.

11. Program Evaluations:

- a. If you are conducting a program evaluation, please describe the program evaluation. In your response, please include whether it is randomized or quasi-experimental design; the key research questions being evaluated; whether the study has sufficient statistical power to disaggregate outcomes by demographics; and the timeframe for the completion of the evaluation.
- b. Please include the link to the completed evaluation, if relevant.

12. Project Inventory:

- a. For each project, list the name and provide a description that includes an overview of the main activities of the project, the approximate timeline, primary delivery mechanisms and partners, if applicable, intended outcomes. Please include a link to the website of the project if available.
 - i. **Project [Identification Number]:** [Project Name]
(Identification Number provided by Clark County.)
 - ii. **Funding Amount:**
 - iii. **Project E.C.:** [E.C. Number, E.C. Name]
(E.C.. provided by Clark County.)

Table of Expenses by Expenditure Category

List the amount of funds used in each E.C. The table should include cumulative expenses to date within each category, and the additional amount spent within each category since the last annual Recovery Plan.

Expenditure Category		Cumulative Expenditures to Date (\$)	Amount Spent Since Last Quarterly Report
1	Expenditure Category: Public Health		
1.1	COVID-19 Vaccination		
1.2	COVID-19 Testing		
1.3	COVID-19 Contact Tracing		
1.4	Prevention in Congregate Settings (Nursing Homes, Prisons/Jails, Dense Work Sites, Schools, etc.)		
1.5	Personal Protective Equipment		
1.6	Medical Expenses (including Alternative Care Facilities)		
1.7	Capital Investments or Physical Plant Changes to Public Facilities that Respond to the COVID-19 Public Health Emergency		
1.8	Other COVID-19 Public Health Expenses (including Communications, Enforcement, Isolation/Quarantine)		
1.9	Payroll Costs for Public Health, Safety, and Other Public Sector Staff Responding to COVID-19		
1.10	Mental Health Services		
1.11	Substance Use Services		
1.12	Other Public Health Services		