Complete this form and submit it to IDPH by the 15^{th} day of the month by uploading it to the Iowa Grants Claim Component.

Contractor Name:

Month/Year Reported:

1. Spotlight

High level summary of key activities, barriers, trends, etc. during the month.

2. Network Support

Brief description of activities conducted during the month for each Covered Service listed below that contributed to the reimbursement requested on the Claim Form.

- a. Collaboration and Community Outreach
- b. Needs Assessment
- c. Health Promotion
- d. Data and Continuous Quality Improvement
- e. Workforce Development
- f. Meetings, Trainings, and Technical Assistance

2. Prevention Services

Brief description of activities conducted during the month for each Covered Service listed below that contributed to the reimbursement requested on the Claim Form.

- a. Information Dissemination
- b. Education
- c. Alternatives
- d. Problem Identification and Referral
- e. Community-Based Process
- f. Environmental

3. Waitlist

- a. How many **pregnant women** are on your agency waitlist?
- b. How many **injecting drug users** are on your agency waitlist?

4. Interim Services

- a. Describe interim services provided to any **pregnant woman** on the wait list.
- b. Describe interim services provided to any **injecting drug user** on the wait list.

5. Women and Children Treatment (if contracted for)

Description of activities conducted during the month, as specified below. The Program must provide or arrange the referenced required services. Please document if services are provided or arranged and please include documentation of such. If "no" or partial, please explain further.

- a. Number of **women patients** who received the following Enhanced Treatment/Ancillary Support Services:
 - Primary medical care, including prenatal care =
 - Child care while receiving Women and Children services =
- b. Number of **children** who received the following Enhanced Treatment/Ancillary Support Services:
 - Primary pediatric care, including immunizations =
 - Therapeutic interventions for children =
- c. Describe gender-specific substance abuse treatment and other therapeutic interventions for women that address relationships, sexual and physical abuse, and parenting.
- d. Describe case management and transportation service to assure women and their children have access to needed services.
- e. Describe how program treats family as unit. Provide examples.
- f. Describe assistance establishing eligibility for public assistance programs, employment and training programs, education and special education programs, drug-free housing, prenatal care and other health care services, therapeutic day care for children, and other early childhood programs.