

FaDSS Guidance– PROMISE JOS Monthly Summary Instructions

Purpose

To provide a summary of pertinent information to PROMISE JOBS concerning participants co-enrolled in the PROMISE JOBS and FaDSS programs. Information about progress on or barriers to the FIA goals and relevant information about other FaDSS goals should be included.

Process

- Using the provided PROMISE JOBS Monthly Summary Template, document the necessary information and email the summary to the assigned PROMISE JOBS Case Manager by the 10th of the month following the Report Month. The template can be attached to the email or the report can be sent within the body of the email.
- The report itself gets uploaded into the family record in Iowa FaDSS.
- Collaboration contacts are not necessary when sending monthly PROMISE JOBS summaries.
- Reminder: a summary should be completed for each FIA responsible individual in the household.
- Include the date the report was emailed to PROMISE JOBS on the report or save the email that was sent and upload it into Iowa FaDSS.

Confidentiality Notice

Include the confidentiality notice shown below in the email correspondence. Specialists are responsible for following their agency requirements to ensure confidentiality.

THIS MESSAGE CONTAINS CONFIDENTIAL INFORMATION. UNAUTHORIZED USE OR DISCLOSURE IS PROHIBITED.

FaDSS Monthly Summary Format:

Report Month: Enter the month for which you are reporting. Months are reported by full weeks, not by calendar days. A full week runs from Saturday through the following Friday. The weeks included in a report month are determined by the number of Fridays in the month. Please reference the PROMISE JOBS report calendar provided annually to grantees.

Participant: Enter the participant's name. Participants include any household members that have an FIA. Include both parents of a two parent household, minor parents and any child that is FIA responsible. A separate report should be completed for each FIA responsible individual in the household.

DHS Case #: Enter the participants DHS number.

State ID#: Enter the participant's DHS State ID number.

1. Information being requested from FaDSS. If FaDSS needs current information on the family that PROMISE JOBS may be able to provide, FaDSS can request the needed information here. This includes the need for a current FIA listing FaDSS as an activity, updated address or phone

number, or other information.

2. What progress or updates are there in achieving specific FIA and FaDSS goals and activities? Include progress in overcoming current barriers. Review the current FIA and FaDSS goals. Include a summary of the progress that has been made on these goals and any progress made towards overcoming currently identified barriers. Are there any new barriers since the last summary? If yes, describe the barrier and how it is being addressed, include any referrals or services provided that have been made. A barrier is identified as a circumstance that limits a participant’s ability to participate fully in achieving their goals and is expected to last long term unless specific strategies or interventions are implemented.
3. Describe any temporary or incidental circumstances impacting the family's ability to participate in their FIA activities or FaDSS goals. These circumstances may have arisen during the month, but allow participation to be easily resumed. Circumstances include, but are not limited to illness of the participant or participant's family member, family emergency, bad weather, leave due to the birth of a child, court appearance, attendance at school functions of the participant's children, or attendance at required meetings with HHS.
4. Participation Time: (week= Saturday through Friday with the Friday falling in the reporting month). This section is only completed for FIA responsible parents who have the Parenting component activity included in their FIA. No other hours get reported to PROMISE JOBS. Only include the time the participant spends on these activities with direct support from FaDSS. Do not include time spent with a third party.

Include the age of the participant who is receiving parent skill development. If parenting skills are provided at the same time as other activities, such as a home visit, only include the time spent on parenting skills development.

Parenting Skills

Age of participant:

Week 1	Week 2	Week 3	Week 4	Week 5

PLEASE CALL IF YOU HAVE QUESTIONS

I verify the above activities and hours of participation.

Include the Specialist’s name and the date the monthly summary was emailed to PROMISE JOBS.