BJA BUREAU OF JUSTICE ASSISTANCE

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x The Data Entry has been Certified.

REVIEW

Reporting Period: 07/01/2020 - 09/30/2020   **Award #: 20-A4959OA17**
Project Amount: $184,364

If any changes need to be made to a complete report, contact your **grantee/PMT** helpdesk to request your report be unlocked.

Search: [_____]   Print

Category	Question	Option	Response	Alert
Grant Activity				
	1. Was there grant activity during the reporting period?	Yes	√	
		If No, please select from the following responses:		
Site/Project Information				
	4. Please provide the name and contact information for the Project Director that your agency will be working with as part of this COAP program.	Name:	Kala Hodge	
	B. Contact information:	Telephone number:	276-238-9700	
		E-mail:	kala.hodge@mountrogers.org	
	5. Has there been a change in your COAP Project Director during the reporting period?	Yes	√	
		No		
		Please explain	Former Program Director resigned her position	
	6. Does your COAP project include a researcher or research partner?	Yes		
		No	√	
	9. Do you have a webpage for your program?	Yes		
		No	√	
	10. What geographic area is served by your grant activities?	A geographic area within a single city/county		

Category	Question	Option	Response	Alert
		A single city/county		
		Multiple geographic areas within a single state (e.g., multiple cities or counties)	√	
		The entire state		
		Multistate		
	11. How would you describe the geographic area served by your grant activities?	Urban (i.e., a large city with 50,000 or more people)		
		Suburban (i.e., a territory outside of a large city with a population of 2,500 to 50,000 people or more)		
		Rural (i.e., a territory that encompasses all people and housing not included within a suburban, urban or tribal area)	√	
		Mixed (i.e., some combination of the above designations)		
	12. Are any of your funds going to a tribal territory? A tribal territory is one that contains a concentration of people who identify with a federally recognized tribe.	Yes		
		No	√	
	13. In which of the following ways were data analysis findings applied to your program during the reporting period?	Analysis was not conducted this reporting period	√	
		Analysis was conducted this reporting period, but findings were not applied in any way		
		Informed our understanding of the problem of focus		
		Informed decisions to improve program implementation		
		Incorporated into program evaluation (e.g., outcome, process)		
		Presented as results/recommendations to the program leadership, staff, or workgroup		
		Communicated as results/recommendations to groups outside of the workgroup (e.g., local government, community organizations, media)		

Category	Question	Option	Response	Alert
	14. Please indicate the major obstacles the program faces when providing treatment and recovery support services in your area.	We are not facing any major obstacles to providing services		
		Lack of public transportation	√	
		Limited availability of appropriate substance abuse treatment services		
		Limited availability of recovery support services		
		Limited public support for services and/or facilities		
		Limited hours of service		
		Limited client participation/commitment		
		Other	√ COVID 19 limited the in person contacts	
	15. What obstacles, if any, did you encounter over the last reporting period that has had an impact on your project?	No obstacles or barriers (N/A)		
		Access to data		
		Level of referrals to our program	√	
		Collaboration/coordination between partner agencies		
		Hiring project staff		
		Staff turnover		
		Retaining treatment providers		
		Competing agency priorities		
		Funding		
		Legal obstacles		
		Concerns about confidentiality		
		Differences in program implementation between partners		
		Technology challenges		
		Federal grant administration issues (e.g., unable to secure approval)		
		TTA provider		
		Other		

Category	Question	Option	Response	Alert
	16. Please indicate the extent to which you use the following strategies with regard to your problem of focus (e.g., identifying overdose survivors, increasing the use of diversion or alternatives to incarceration programs). Select **N/A** if the stated strategy is not relevant to your problem of focus. Select **Unavailable** if the stated strategy is not available in your area of service.	Strategy		
	16. Screening to identify individuals at high-risk for overdose	N/A		
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently	√	
	16. Screening to identify individuals with substance use disorders	N/A		
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently	√	
	16. Screening to identify crime victims	N/A		
		Unavailable		
		Never		
		Rarely		
		Sometimes	√	
		Frequently		
	16. Law enforcement diversion programs	N/A		
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently	√	
	16. Prosecutor led diversion programs	N/A	√	

Category	Question	Option	Response	Alert
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Pretrial diversion programs	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Treatment courts (e.g., drug court)	N/A		
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently	√	
	16. Probation services designed to meet the needs of individuals with substance use disorders	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Jail or prison-based substance use treatment programs	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Reentry programs	N/A	√	
		Unavailable		
		Never		

Category	Question	Option	Response	Alert
		Rarely		
		Sometimes		
		Frequently		
	16. Victim services programs	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Peer recovery services	N/A		
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently	√	
	16. Treatment services in rural communities within our service area	N/A		
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently	√	
	16. Naloxone distribution/deployment	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Overdose prevention programs	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		

Category	Question	Option	Response	Alert
	16. Medication-Assisted Treatment (MAT)	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Public education campaigns	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Outreach to other professionals	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Hot spot analysis (e.g., identifying geographic areas with a cluster of individuals at high-risk for substance use or overdose)	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Targeted educational interventions in hot spots	N/A	√	
		Unavailable		
		Never		
		Rarely		
		Sometimes		
		Frequently		
	16. Substance abuse prevention coalitions	N/A		

Category	Question	Option	Response	Alert
		Unavailable		
		Never		
		Rarely		
		Sometimes	√	
		Frequently		
	17. What kind of services are you delivering or do you plan to deliver **remotely**? Enter **N/A** if your program does not and will not offer the particular service remotely.	Service		
	17. Screening and assessment	N/A		
		Currently Deliver Remotely	√	
		Plan to Deliver Remotely		
	17. Group therapy	N/A		
		Currently Deliver Remotely	√	
		Plan to Deliver Remotely		
	17. Individual therapy	N/A		
		Currently Deliver Remotely	√	
		Plan to Deliver Remotely		
	17. Prescribing and monitoring of medication	N/A		
		Currently Deliver Remotely	√	
		Plan to Deliver Remotely		
	17. Supervision check-ins	N/A		
		Currently Deliver Remotely	√	
		Plan to Deliver Remotely		
	17. Online curriculum	N/A	√	
		Currently Deliver Remotely		
		Plan to Deliver Remotely		
	17. Court check-ins	N/A		
		Currently Deliver Remotely	√	
		Plan to Deliver Remotely		
	17. Recovery support services	N/A	√	
		Currently Deliver Remotely		
		Plan to Deliver Remotely		
	17. Other	N/A	√	
		Currently Deliver Remotely		

Category	Question	Option	Response	Alert
		Plan to Deliver Remotely		
	18. Please rate the following COAP workgroup partners based on this statement: "This partner was actively involved in the COAP initiative this reporting period." If you have multiple partners in a category, please rate them as a whole. If a partner fits in more than one category, please rate it in the one category that fits the best for that partner. Please do not rate yourself. **Leave as "N/A" if you do not have a COAP workgroup.**	This partner is actively involved in the COAP program:		
	18. County/city leadership	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Tribal leadership	N/A	√	
		Disagree		
		Strongly Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Federal law enforcement agencies	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. State law enforcement agencies	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
	18. Local law enforcement agencies	N/A	√	

Category	Question	Option	Response	Alert
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. High Intensity Drug Trafficking Area	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Pretrial service organization	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Proecutor's office	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree	√	
	18. Public defender's office/defense attorney	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree	√	
	18. Courts	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		

Category	Question	Option	Response	Alert
		Strongly Agree	√	
	18. Probation/Parole	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
	18. Jail/Corrections administrators	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Reentry services provider	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Health care providers/public health	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Mental health providers	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Substance use disorder treatment providers	N/A	√	
		Strongly Disagree		
		Disagree		

Category	Question	Option	Response	Alert
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Child protective services	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
	18. Community-based service providers (e.g., housing/employment	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Substance abuse prevention groups	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Recovery community representatives/peers	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Subject matter experts	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		

Category	Question	Option	Response	Alert
	18. Foundations/Philanthropic organizations	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Researcher, evaluator, or statistical analysis center	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Victim advocates	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Faith community	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
	18. Business community	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	18. Neighborhood commmunity groups	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		

Category	Question	Option	Response	Alert
		Agree		
		Strongly Agree		
	18. Other (please describe)	N/A	√	
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree		
	19. Please rate your level of agreement with the following statement.	The following stakeholders exhibit a high level of collaboration with one another:		
	19. Criminal courts and child welfare agencies	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
	19. Local and State law enforcement	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
	19. Local and Federal law enforcement	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
	19. State and Federal law enforcement	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	

Category	Question	Option	Response	Alert
		Strongly Agree		
	19. Criminal justice agencies and substance use treatment providers	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
	19. Healthcare providers and substance use treatment providers	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
	19. Probation/parole and substance use treatment providers	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree		
		Strongly Agree	√	
	19. Victim services and local first responders (e.g. police, fire and emergency medical services (EMS])	N/A		
		Strongly Disagree		
		Disagree		
		Neither Agree nor Disagree		
		Agree	√	
		Strongly Agree		
Training and Technical Assistance				
	20. Did the COAP project provide or facilitate training to project workgroup members or other groups or organizations (e.g., *first responders, victim service providers, and child protective services professionals*) during the reporting period?	Yes		

Category	Question	Option	Response	Alert
		No	√	
	22. Did you/your agency/entire workgroup receive any technical assistance from a BJA-funded provider during the reporting period?	Yes		
		No	√	
Training Development				
	24. Were COAP grant funds used to develop a training course or curricula?	Yes	√	
		No		
Training Development Details				
	25. What type of training course/curriculum was developed?	Certification training (training required to obtain a certification)		
		In-service/annual training (training required to keep certification active or maintain proficiency)		
		Skill building (training that increases the skill or knowledge of employees in a particular area)	√	
		Leadership/management (training for managers or administrators)		
		Conference		
		Other		
	26. Please describe the developed training course/curriculum.		System Navigator developed a recovery plan for the ...**more**	
	27. How many hours is the training course/curriculum designed to last?		20	
	28. What is the intended mode of delivery for your training course/curriculum?	Classroom based (e.g., in-person, face to face)		
		Web based (e.g., webinar)		
		Prerecorded (e.g., training videos)		
		Self-study (e.g., manuals, guidebooks, or other materials)	√	
		Other		
Outreach, Awareness, and Prevention Activities				

Category	Question	Option	Response	Alert
	29. Did the COAP funded program conduct any training, outreach, awareness, or prevention activities during the reporting period?	Yes		
		No	√	
Diversion, Recovery Support and Substance Use Treatment Services				
	39. Please indicate if you used COAP funds to operate any of the following types of programs during the reporting period? Please select only those programs that you are directly supporting with COAP funds.	First responder/law enforcement diversion program.		
		Pretrial diversion program overseen by a pretrial supervision agency.		
		Prosecutor diversion program overseen by a prosecutor's office.		
		Court-based diversion program.		
		Family drug court program.		
		Tribal healing-to-wellness court.		
		Jail-based program focused on programming while inmates are in custody.		
		Jail-based reentry program focused on preparing inmates to leave jail custody.		
		Prison reentry program focused on preparing inmates to leave prison.		
		Probation program.		
		We are not using COAP funds to operate any of the above activities.	√	
	46. What recovery support services are COAP grant funds supporting in whole or in part?	The program is not providing recovery support with COAP funds		
		Peer support or recovery coaching	√	
		Family counseling		
		Food and nutrition assistance		
		Housing support services	√	
		Employment assistance	√	
		Case management	√	
		Faith-based support		

Category	Question	Option	Response	Alert
		Vocational training		
		Education (e.g., GED support)		
		Family reunification services		
		Transportation assistance	√	
		Assistance with benefits applications		
		Tribal/Cultural healing		
		Other		
	47. Through what mechanisms are referrals to recovery support services made?	Individuals receive written information (e.g., card, flyer, brochure or handout) about treatment and/or services resources.		
		Individuals receive a written referral to a treatment and/or services provider by the program.		
		Individuals receive a treatment and/or services appointment at a specific date and time by the program.	√	
		Individuals receive a "warm handoff" via a personal introduction by the program to treatment/recovery/peer/case managers in real time for assessment and coordination of treatment planning.		
		Other	√	
		Please describe	Individual sign a release of information, CM makes **...more**	
	48. Please enter the number of individuals receiving **recovery support services** through referrals to other agencies/community support groups or through your program. Please count the number of individual with a SUD/OUD. Family members referred to recovery support services should be counted in question 51.	Number of People		
	During the reporting period, how many individuals were referred to recovery support services through your program or other agencies/community support groups?	Number	18	
		Cumulative Total	7	
	Of those, how many individuals received recovery support services?	Number	18	
		Cumulative Total	7	

Category	Question	Option	Response	Alert
	Of those individuals that were referred to or received recovery support services, how many were identified as crime victims.	Number	1	
		Cumulative Total	0	
	49. For those participants receiving recovery support services during the reporting period, how many are receiving services for:	Less than 30 days?	1	
		30 days or more?	17	
	50. For those participants who stopped receiving recovery support services during the reporting period, how many received services for:	Less than 30 days?	0	
		30 days or more?	1	
	51. How many friends/family members of program participants were referred to recovery support services during the reporting period?		0	
	52. Of those (from question 51), how many were identified as crime victims?	Number identified as crime victims	0	
		Not Tracked	0	
	53. What substance use or co-occurring treatment services do you fund using your COAP funds?	The program is not providing substance use or co-occurring treatment services with COAP funds		
		Outpatient substance abuse treatment	√	
		Intensive outpatient substance abuse treatment	√	
		Residential substance abuse treatment		
		Partial Hospitalization Program (PHP)		
		Inpatient withdrawal management (detoxification)		
		MAT		
		Mental health assessment and/or treatment		
		Family therapy		
		Trauma treatment		
	55. Through what mechanisms are referrals to substance use or co-occurring treatment services made?	Individuals receive written information (e.g., card, flyer, brochure or handout) about treatment and/or services resources.		

Category	Question	Option	Response	Alert
		Individuals receive a written referral to a treatment and/or services provider by the program.		
		Individuals receive a treatment and/or services appointment at a specific date and time by the program.	√	
		Individuals receive a "warm handoff" via a personal introduction by the program to treatment/recovery/peer/case managers in real time for assessment and coordination of treatment planning.		
		Other (please explain)		
	56. Please enter the number of individuals receiving **substance use or co-occurring treatment services** through referrals to other agencies or through your program.	Number of People		
	During the reporting period, how many individuals were referred to substance use or co-occurring treatment services either through your program or other agencies you referred them to?	Number	7	
		Cumulative Total	7	
	During the reporting period, how many individuals were *assessed* for substance abuse or co-occurring disorders?	Number	6	
		Cumulative Total	8	
	Of those, how many individuals received substance use or co-occurring treatment services?	Number	6	
		Cumulative Total	7	
	57. On average, how long does it take for an individual to begin receiving substance use or co-occurring treatment services after receiving a referral?		5	
	58. For those participants receiving substance use or co-occurring treatment services during the reporting period, how many are receiving services for:	Less than 30 days?	0	
		30 days or more?	6	
	59. For those participants who *stopped* receiving substance use or co-occurring treatment services during the reporting period, how many received services for:	Less than 30 days?	1	

Category	Question	Option	Response	Alert
		30 days or more?	0	
	60. Since the beginning of the program, how many subsequent **overdose events** did program participants experience (fatal or nonfatal) in the specified period of time following their referral into the program?	In the first 2 weeks:	0	
		In the first month:	0	
		In the first 3 months:	0	
		In the first 6 months:	0	
	61. Since the beginning of the program, how many **individual participants** experienced subsequent overdose events (fatal or nonfatal) in the specified period of time following their referral into the program?	In the first 2 weeks:	0	
		In the first month:	0	
		In the first 3 months:	0	
		In the first 6 months:	0	
	62. Please indicate the number of program participants who had the specified number of contacts with their case manager during their first 30 days. A contact could include an in-person meeting, phone call, or series of electronic messages.	0 contacts within 30 days:	0	
		1-2 contacts within 30 days:	1	
		3-4 contacts within 30 days:	0	
		5 or more contacts within 30 days:	7	
Opioid Data Collection Activities				
	63. Did your COAP program use grant funds to develop or enhance data collection and analysis?	Yes		
		No	√	
Supporting Crime Victims and Child Welfare				
	65. Did your COAP program use grant funds to develop partnerships with a victim service provider(s) to provide assistance to crime victims impacted by the opioid epidemic?	Yes		
		No	√	

The Data Entry has been Certified.

CONFIRMATION

***This Data Entry has been completed and certified by Penny Dean on 10/13/2020.
Unlock (index.cfm?event=certify&rdcrid=136869)

For technical assistance, contact the BJA PMT Help Desk at bjapmt@ojp.usdoj.gov (mailto:bjapmt@ojp.usdoj.gov) or call toll-free 1 (888) 252-6867.