CHSP NARRATIVE REPORT PREPARATION & SUBMISSION







Quarterly/Year-End Report	Reporting Period	Report Submission Deadline
First Quarter	October 1 st through December 31 st	January 25 th
Second Quarter	January 1 st through March 31 st	April 25 th
Third Quarter	April 1 st through June 30 th	July 25 th
Year-End Report	October 1 st through September 30 th	October 31st

Login Information

- Log into your account at: https://chspportal.org
- If you forgot your password
 - Click on forgot your password?
 - $\,\circ\,$ Follow directions to log in

i About Us	News	Volunteer	Partner Agencies	Login
		User Name		
		Password		a
			Login	
			Forgot your pa	ssword?

How to Start a Report

Click on the **Q Report** icon (4th icon)

Click on Start Report (black button)

Home >	Quarterly Reporting	1							
6	B	Ĵ							
					Rep	orts			
Applicatio	on Cycle	Fu	nding Year	R	eporting Period	I	Team		
Select	Application Cycle		Select a Funding	Year 🔻			Select a Tea	am	•
Start F	Report								
Delete	Application Cycle	Funding Year	Reporting Period	Report	Team	Program	Submitted By	Submitted Date Time	Status
×	Application Cycle 2018 - 2020	Fiscal Year 2018/2019	<u>Quarter 1</u>	Submitted Electronically	01-Children Services	хуг			In Progress
×	Application Cycle 2018 - 2020	Fiscal Year 2018/2019	<u>Quarter 1</u>	Submitted Electronically	01-Children Services	хуг			In Progress
×	Application Cycle 2017 - 2018	Fiscal Year 2017-18	<u>Year-End</u>	Submitted Electronically	01- Childrens Services	S			In Progress
×	Application Cycle 2017 - 2018	Fiscal Year 2017-18	Quarter 2	Submitted Electronically	02- Community Support	XYZ			In Progress

How to Start a Report

From the dropdown options

- Select the correct Funding Year
- Select your CHSP Team
- Enter your Program Name as listed in your contract
- Select the Reporting Period
- Click Next

	Start R	leport	
Select the Funding Year, Reporting Pe	riod, Funding Source,	and Team. Then click next to begin completin	g the report form.
* Agency		* Funding Year	
CHSP County Train	ing 🔻	Fiscal Year 2017-18	•
	* Team Select a Team	•	
* Program		* Reporting Period Select the Reporting Period	•
	Next	Cancel	

Progress Navigation

You will see each section and subsection of the report if you click on the vertical navigation bar on the right side of your screen; this bar expands and contracts as you click on it.

A **green** checkmark on the subsections means that you completed this portion of the report.



Section 1: Persons Served A and B: Demographics & Income Guidelines



 Complete appropriate fields and click Continue. Please note that this section requires you to provide unduplicated (new clients) numbers served during the reporting period only; all subsection totals must match, except for the number of Hispanic persons served.

Click Save as needed and Continue

Section 1: Persons Served C: Census Tract Data



- Complete this section only if your program receives Promise Zone (Team 10) funding. The total number you report here should match the total unduplicated number you listed in the previous Section 1: Persons Served A: Demographics
- Click **Save** and **Continue**

Section 1: Persons Served D: Anticipated vs. Actual YTD

🔒 Qu	arterly Rep	orting								
Home >	Agency >	Quarterly Reporting >	Quarterly Report							
				Secti	ion 1: Perso	ns Served				
	D Total Number of Anticipated Versus To-Date Persons Served									
D			Total Nur	nber of Antio	ipated vers	us To-Date l	Persons Served			
	Anticipated N	umber of Unduplicated	Persons Served as Sta	ated in the Cont	tract, Attachmo	ent A				
	Cumulative Number of Unduplicated Persons Served To-Date									
					<	Back	Continue	>		

- The number entered for Anticipated Number of Persons to be Served as Stated in the Contract, Attachment A, should be the exact number listed in the Contract. Refer to your contact: Question C3 (or C2 for Promise Zone Contracts)
- The Cumulative Number of Unduplicated Persons Served To-Date should reflect the total number of unduplicated clients served since October 1^{st.}
- Click Save as needed and Continue

Section 2: Program Accomplishments A and A2: Implementation Timeline

Quarterly Reporting	Ι	n Progress
Home > Agency > Quarterly Reporting > Quarterly Report		
Section 2: Program Accomplishments		
A Implementation Timeline	Print 🖷	Save to PDF
Program Implementation Timeline: List program tasks, activities, and outputs EXACTLY as stated in your current Agency Agreement Implementation Timeline. Add each of the tasks, activities, and outputs listed in your Program Implementation Timeline by using th button. For each, describe in detail specific achievements.	CHSP Cour	ity Training
Add Task, Activity, or Output	Fiscal Yea	r 2017-18 È End
Outcome Measurement Framework: List program outcomes and measurable indicators EXACTLY as stated in your current Agency A	Team : 01- Childrens Services	XYZ
AZ Measurement Framework. Add each by using the Add Program Outcome button. For each describe in detail specific accomplishmer	Section 1: Persons Section 1: Persons Section 1: Persons Section 1: Persons Section 2: Program A	sation erved [–] s & Income Guidelines Data s Actual YTD ccomplishments [–]
Seck Continue	Implementati Obstacles/Cha Major Accomp CRT Findings CRT Obstacles Section 3: Verification	on Timeline allenges blishments

Section 2: Program Accomplishments A: Program Implementation Timeline

- The Task/Activity/Output field should be the exact language from the Program Implementation Timeline chart in the contract.
- The **Specific Achievement** field should **list** specific information such as the number of clients served, program activities completed, frequency of activities, description of events, dates if applicable, etc.
- Click Save
- Note: Refer to your contract to ensure you are reporting on the exact deliverables listed in your contact.



Section 2: Program Accomplishments A2: Outcome Measurement Framework

	Outcome Measurement Frame	work	X
In the Program Outcome field, enter EXACTLY as listed in yo measurable indicator(s) related to the Program Outcome EXACTL	ur Agency Agreement/Contract Outcome Measure as listed in your Agency Agreement/Contract Out program accomplishments. Include numbers and	ment Framework. Only enter one at a time. In the Measurable come Measurement Framework. In the Specific Accomplishm d correlating percentages.	e Indicator field, enter the ent field, precisely describe the
* Program Outcome	* Measu	rable Indicators	
	* Specific Accomplishment		
Note: Only made available in the Year-End report.		Cancel	Save

- The Program Outcome field should be the exact language from Attachment C: Program Logic Model/Outcome Measurement Framework Program Outcome chart in the contract.
- The Measurable Indicators field should be the exact language from Attachment C: Program Logic Model/Outcome Measurement Framework Measurable Indicators chart in the contract.
- The Specific Achievement field should precisely describe the program accomplishments, including numbers and correlating percentages.
- Click Save and Continue
- Note: Refer to your contract to ensure you are reporting on the exact deliverables listed in your contact.

Section 2: Program Accomplishments B: Obstacles/Challenges

🔒 Quar	rterly Reporting		Select the Funding Source	~	Update Funding Source	In Progress
Home > (Quarterly Reporting >	Quarterly Report				
		Section 2	: Program Accomplishments			
в		(Dbstacles/Challenges		Print 📑	Save to PDF
Hi	ighlight specific challenge	es and needs facing your program a	nd the actions taken to resolve them		CHSP Co	unty Training
				gation	Fiscal Yea	ar 2019/2020 ar End
				ss navij	Team : 01-Children Servic	es xyz
				rogre	Na	vigation
				pse p	Section 1: Persons	Served [-]
				ere to colla	Demograph Census Trac Anticipated	iics & Income Guidelines :t Data vs Actual YTD
		© 2021 Community H	uman Service Partnership	ck he	Section 2: Program	Accomplishments [–]
		System by Paul Consult	ing Group Version History	Ü	Implementa Obstacles/(ation Timeline
					Major Acco	mplishments
					CRT Finding	js
		<	Back	>	CRT Obstac Section 3: Verificat	ion

- Highlight specific challenges and needs facing your program and the actions taken to resolve them
- Click **Continue**

Section 2: Program Accomplishments C: Major Accomplishments

Quarterly Reporting	Funding Source Select the Funding Source	~	Update Funding Source	In Progress
Home > Quarterly Reporting > Quarterly Report				
	Section 2: Program Accomplishments			
C Major	Accomplishments and Sustainable Partn	erships	Print 📑	Save to PDF
List major collaborative accomplishments and d	scuss efforts toward developing sustainable partners	ships ach	CHSP Co	unty Training
		gation	Fiscal Yea Ye	ar 2019/2020 ar End
		ss navig	Team : 01-Children Servic	es xyz
		progree	Na	vigation
		ere to collapse	Section 1: Persons Demograph Census Trac Anticipated	Served [–] iics & Income Guidelines :t Data vs Actual YTD
© 2021 System b	Community Human Service Partnership y Paul Consulting Group Version History	Click he	Section 2: Program Implement Obstacles/C Major Acco	Accomplishments [-] ation Timeline Challenges mplishments
	Continue	>	CRT Finding CRT Obstac	s les

- List major collaborative accomplishments and discuss efforts toward developing sustainable partnerships achieved during this reporting period.
- Click **Continue**

Section 2: Program Accomplishments D: Citizens Review Team Findings and E: CRT Obstacles

Home > Quarterly Reporting > Quarterly Report

Section 2: Program Accomplishments

Citizens Review Team Findings

If the Citizens Review Team issued a finding or serious concern (i.e., a concern that directly impacts the capacity of the agency to effectively deliver the program) in your current CHSP award letter, please state the specific finding or serious concern in the chart below. When completing the sections below regarding the finding or serious concern as well as the corrective action plan/task, state the precise language included in the contract. In the timeline for completion section, state the date that the task was completed.

Add Finding or Concern

The Agency does not have a CRT Finding or Serious Concern for this reporting period

Section D: Refer to your contract. If there are any Citizens Review Team Findings listed in your contract, please enter the exact language, and provide an update on measures taken to resolve the concerns. If no concerns are noted in your contract, click the box The Agency does not have a CRT finding or Serious Concern for this reporting period.

* Or

• Section E: Discuss any significant obstacles encountered in the resolving CRT findings or concerns

Click Save and Continue

Section 3: Verification

Quarterly Reporting			I	n Progress	
Home > Agency > Quarterly Reporting > Quarterly Report					
	Section 3: Verification				
* Report Prepared By	* Agency Contact Person	-	Print 🖶	Save to PDF	2
* Agency Contact Person's Phone Number	* Agency Contact Person's Email	vigation .	Fiscal Year Year	r 2017-18 End	
Signature of Agency Director:		gress nav	Team : 01- Childrens Services	XYZ	
		o collapse pro	Navig Section 1: Persons Ser Demographics	ation rved [–] s & Income Guidelines Data	2
Sign above Clear		Click here to	Anticipated vs Section 2: Program Ac Implementatio Obstacles/Cha	Actual YTD ccomplishments [-] on Timeline llenges	
	Kernel Submit		Major Accomp CRT Findings CRT Obstacles Section 3: Verification	lishments	

Complete all fields, sign click Save and Submit

• It is important that all parties who need to sign off on Applications and/or Reports are registered in the CHSP Portal. Please reach out to your Contract Manager for further assistance, if applicable.

