**Maine CDC Lead Poisoning Prevention Contracts**

2017-2018 Narrative Reporting Template

**Instructions:** Use this template to provide a narrative update on progress you have made toward meeting the deliverables specified in your Lead Poisoning Prevention in High-Risk Areas contract. Please add each quarter’s progress to the document so that at the end of the final quarter, there will be one document with all progress recorded. Reports are due 30 days following the end of the reporting period as shown in the table below.

|  |  |  |
| --- | --- | --- |
| **Quarter** | **Reporting Periods** | **Report Due Date** |
| Q1 | 1/1/2017-3/31/2017 | 5/01/2017 |
| Q2 | 4/1/2017-6/30/2017 | 8/1/2017 |
| Q3 | 7/1/2017-9/30/2017 | 11/1/2017 |
| Q4 | 10/1/2017-12/31/2017 | 2/1/2018 |
| Q5 | 1/1/2018-3/31/2018 | 5/01/2018 |
| Q6 | 4/1/2018-6/30/2018 | 8/1/2018 |
| Q7 | 7/1/2018-9/30/2018 | 11/1/2018 |
| Q8 | 10/1/2018-12/31/2018 | 2/1/2019 |

**High-Risk Area:** [Insert High-Risk Area Name]

**Partner**: [Organization Name]

**Reporting Period:** [Quarter]

**Date Report Submitted:** [Insert Date You Submit the Report]

**Submitted By:** [Insert Name of Person Completing Report]

# Progress Report

1. **Have there been any changes to key project staff? If yes, please provide contact information for new key project staff, or describe how project activities will be continued, plans for hiring, etc.**
2. **Provide any feedback or ideas on program management, training needs, or any other area for Maine CDC.**
3. **Services for Property Owners**
   * + - 1. Have direct, interpersonal contacts with property owners to provide education and/or trainings on how to identify, take precautionary actions, and manage Lead Hazards to prevent lead exposure in rental properties.

**Q1 Progress:** [Describe contacts, events, trainings, etc. you have held during the quarter.]

* + - * 1. Provide property owners with information about changes to Maine’s definition of Lead Poisoning.

**Q1 Progress:** [Describe what you have done over the last quarter.]

1. **Services for Parents**
   * + - 1. Have direct, interpersonal contacts with expecting parents and parents of young children.

**Q1 Progress:** [Describe contacts, events, trainings, etc. you have held during the quarter.]

* + - * 1. Provide expecting parents and parents of young children with information about preventing childhood lead poisoning through Mass and Small Media activities, including:

conducting Earned and Paid Mass Media activities

**Q1 Progress:** [Describe earned and paid mass media activities during the quarter, including the target audiences, estimated reach, and any outcomes that resulted from the efforts. Attach copies of media placements as an appendix to this report.]

distributing Small Media materials developed by the Department

**Q1 Progress:** [Complete and submit separately the Quarterly Small Media Materials Use form. Provide any narrative information here about your efforts to distribute materials.]

identifying and working with local retailers where paint and paint removal supplies are sold to promote lead-safe home improvement projects using countertop Small Media Materials provided by the Department in accordance with Maine’s Lead Poisoning Control Act

**Q1 Progress:** [Describe what you have done over the last quarter.]

* + - 1. **Building Local Capacity**

Conduct activities to establish broad local support for Lead Poisoning prevention and increase local capacity to take actions to address the causes of Lead Poisoning.

**Q1 Progress:** [Describe what you have done over the last quarter to build local capacity.]

* + - 1. **Training Webinars**

**Q1 Progress:** [Please list the names and dates of the webinars attended in the reporting period, the number of people from your organization that attended.]

* + - 1. **Meetings (Sharing Summits and Site Visits)**

**Q1 Progress:** [Please list the names and dates of any meetings attended in the reporting period, the number of people from your organization that attended.]

* + - 1. **Process Measures**

*Please summarize progress made on the following process performance measures.*

|  |  |  |
| --- | --- | --- |
| **Measure** | **2018 Target** | **Current Measurement** |
| 1. Number direct contacts with property owners |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |
| 1. Number of direct contacts with expecting parents or parents of children under age 6 living in rental housing built before 1950 |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |
| 1. Number of residents reached through local Earned Mass Media placements |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |
| 1. Number of residents reached through local Paid Mass Media placements |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |
| 1. Number of Small Media materials distributed |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |

*Process Measures, continued*

|  |  |  |
| --- | --- | --- |
| **Measure** | **2018 Target** | **Current Measurement** |
| 1. Percentage of key project staff that have completed required trainings |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |
| 1. Percentage of key project staff that attended required meetings in Augusta |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |

* + - 1. **Intermediate Measures**

*Please summarize progress made on the following intermediate performance measures.*

|  |  |  |
| --- | --- | --- |
| **Measure** | **2018 Target** | **Current Measurement** |
| 1. Number of property owners who report taking action to identify and address potential Lead Hazards in their units following awarded Bidder(s) activities |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |
| 1. Number of units where property owners have taken actions to address potential Lead Hazards in their units following awarded Bidder(s) activities |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |
| 1. Number of home lead dust tests performed in rental units\* |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |
| 1. Percentage of rental units tested with elevated levels of lead dust\* |  | Q1: |
| Q2: |
| Q3: |
| Q4: |
| Q5: |
| Q6: |
| Q7: |
| Q8: |
| 1. Percentage of measures on local capacity self-assessment tool that have full capacity\*\*\* |  | April 2017:  April 2018: |

\* Data collected and analyzed by Maine CDC quarterly. Contact Maine CDC to obtain data.

\*\*\*Provide progress on this measure annually upon completion of annual self-assessment.