

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



November 9, 2005

ALL COUNTY LETTER NO. 05-34

TO: ALL COUNTY WELFARE DIRECTORS
 ALL COUNTY FISCAL OFFICERS
 ALL INDEPENDENT LIVING PROGRAM COORDINATORS

REASON FOR THIS TRANSMITTAL

- State Law Change
 Federal Law or Regulation Change
 Court Order
 Clarification Requested by
 One or More Counties
 Initiated by CDSS

**SUBJECT: INDEPENDENT LIVING PROGRAM ANNUAL NARRATIVE REPORT AND
 PLAN FOR FEDERAL FISCAL YEAR 2005**

The purpose of this All County Letter is to forward the Independent Living Program (ILP) Annual Narrative Report and Plan (Report) for Federal Fiscal Year (FFY) 2005 (October 1, 2004 – September 30, 2005) for completion. This Report is required by the Department of Health and Human Services, Administration on Children, Youth and Families (ACYF), in accordance with provisions specified in Program Instruction ACYF-CB-PI-05-04, requesting details associated with your county's ILP and transitional housing programs. The attached document was developed in compliance with Assembly Bill 1979 (Chapter 271, Statutes of 2002) that requires counties to describe their ILP plans, and to specify the minimum standards achievable within existing resources, which counties must meet in the administration of their ILP program.

Information provided to the California Department of Social Services (CDSS) in the Report is used for inclusion in the federal Title IV-E Annual Needs and Services Report and may be shared with other counties and stakeholders for the purpose of identifying promising practices. The Report also complements the ILP Annual Statistical Report (Form SOC 405A) by providing counties the opportunity to narratively clarify the statistical data. The SOC 405A report was forwarded to counties under separate cover by the Data Systems and Survey Design Bureau (DSSDB) under All County Letter No. 05-31, dated October 6, 2005.

Counties participating in the Transitional Housing Placement Program (THPP) and/or the Transitional Housing Placement-Plus Program (THP-Plus) are required to report data commencing with the current FFY Report. Part VIII of the Report has been revised to allow data reporting for this period.

Two bills introduced in the current legislative session will impact counties' foster care transitional housing programs. Senate Bill 436 (Migden – Chapter 629, Statutes of 2005) would require any county participating in THPP to provide the County Department of Social Services a description of currently available transitional housing resources in relation to the number of emancipating pregnant or parenting foster youth in the county,

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and a plan for meeting any unmet transitional housing needs of this same population in its Annual Report. Assembly Bill 824 (Chu – Chapter 636, Statutes of 2005) will raise the age limit from 21 to 24 years for foster youth who may be in receipt of transitional housing placement program services. The provisions of these bills will become effective January 1, 2006. Counties will be expected to capture this information and include it in the FFY 2006 Report.

Please complete the FFY 2005 Report and submit it no later than **January 13, 2006**, to:

**California Department of Social Services
Independent Living Program Policy Unit
744 P Street, M.S. 14-78
Sacramento, California 95814**

Failure to submit a complete Report by the above date may result in financial consequences for your county. The Federal John H. Chafee Foster Care Independence Program specifies that a penalty may be assessed against the State in an amount equal to five percent of the amount of the State's ILP allotment for failing to operate in an approved manner. If this penalty should be assessed, CDSS will withhold ILP funding for those counties that have not submitted a complete Report timely.

If you have any questions regarding the Report, please contact Sonya St. Mary, Manager, or Marsha Tagawa, Program Consultant, ILP Policy Unit, at (916) 651-7465. Questions regarding the SOC 405A report may be directed to the DSSDB at (916) 651-8269.

Sincerely,

MARY L. AULT
Deputy Director
Children and Family Services Division

Attachments



**INDEPENDENT LIVING PROGRAM
ANNUAL NARRATIVE REPORT AND PLAN
FEDERAL FISCAL YEAR 2005**



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INSTRUCTIONS

The Independent Living Program (ILP) Annual Narrative Report and Plan (Report) requests information regarding your county's ILP and transitional housing programs for Federal Fiscal Year (FFY) 2005 (October 1, 2004 – September 30, 2005). Each participating county is responsible for providing the requested information. When completing this Report, it is advisable that counties' program and fiscal staff work closely with ILP coordinators and probation officers, and to allow sufficient time to coordinate the gathering of information from fiscal staff as well as any contractors. **Please answer all of the questions contained in each section and all attachments. If your Report is missing sections, or if the required information in each section and all attachments is not complete, the Report will not be accepted as complete.** If you require more space to answer these questions, you may submit additional sheets as an addendum. A definition section has been included for reference.

The information you provide is included in California's Title IV-E Annual Progress and Services Report in accordance with the provisions of the U.S. Department of Health and Human Services, Administration on Children, Youth and Families (ACYF), Program Instruction ACYF-CB-PI-05-04, requirements.

The FFY 2005 ILP Annual Narrative Report and Plan is to be completed and submitted to the California Department of Social Services (CDSS), ILP Policy Unit, on or before **January 13, 2006**. Please mail your county's Report to:

California Department of Social Services
Independent Living Program Policy Unit
744 P Street, M.S. 14-78
Sacramento, California 95814

This report is divided into three sections:

- Narrative
- Budget Expenditures
- Statistical Information

DEFINITIONS

Contracted Services: Services provided based on a written agreement between a county and another entity (governmental or non-governmental).

Eligible Foster/Probation Youth: For the purposes of this report, Eligible Foster/Probation Youth shall include Child Welfare and Foster/Probation Youth for which your county has jurisdiction, under Welfare and Institutions Code Section 300 or 600 et. seq., whether residing in-county or placed out-of-county.

Aftercare Services: Those support services for emancipated youth that have not yet attained 21 years of age, which include but are not limited to, education assistance and counseling, job placement and retention training, vocational training, crisis counseling, legal assistance, housing assistance, emergency assistance, and any other service/activity directly related to aftercare for the foster/probation youth.

Emancipated Youth: Emancipated youth, for the purposes of this report, are former foster/probation youth that were in care after age 18.

Emancipated Youth Stipend: The Emancipated Youth Stipend is funded 100 percent by the State General Fund and is a separate source of funds from a county's ILP allocation. Emancipated Youth Stipends are used to address the special needs of emancipated foster/probation youth. Any Emancipated Youth Stipend expenditures paid in excess of a county's Emancipated Youth Stipend allocation will be a county-only cost.

Federal Fiscal Year (FFY): FFY beginning on October 1, and ending on September 30.

Health: Health-related activities/services/classes for foster/probation youth in ILP or emancipated youth receiving aftercare. Health-related activities/services/classes include health insurance, medical emergencies, home health and safety management, nutrition, family planning, parenting skills, sexuality and sexual behavior, drug/alcohol/smoking use, prenatal drug/alcohol exposure, eating disorders, hygiene and personal care, and any other activities/services/classes directly related to the health of the foster/probation youth.

ILP Activities: Utilization of the Transitional Independent Living Plan (TILP) goals, such as assistance in obtaining a high school diploma and pursuing post secondary education, career exploration, employment development, vocational training, job placement and retention; daily living skills, including financial management and budgeting, consumer and resource use; self-development and survival skills; preventive health and safety activities, including substance abuse, pregnancy prevention, nutrition, smoking prevention and/or cessation, personal and emotional support through counseling and mentors; and, transitional housing experiences, including the Transitional Housing Placement Program (THPP) and household management training.

Incentives: Reasonable rewards, as documented in the TILP, utilized to motivate youth to participate in, and successfully complete, independent living training.

Room & Board: Food purchases; payment of rental deposits and/or utility deposits; payment of rent and/or utility bills; emergency assistance (a county's interpretation) for eligible emancipated youth who are at least 18 years of age, but have not yet attained 21 years of age.

A county may spend less than, but cannot exceed, 30 percent of the total of their ILP allocation for the room and board needs.

Transitional Independent Living Plan (TILP): Refers to the TILP in the Child Welfare Services Case Management Services (CWS/CMS) application, which is the required emancipation preparation document (described in Manual of Policies and Procedures (MPP) Division 31.206.37 and 31.525) that describes the specific skills acquired and needed by foster/probation youth in order to transition successfully.

Transportation Assistance: Any and/or all transportation costs associated with ILP. Costs may include, but are not limited to, transporting children to and from court proceedings, medical appointments/services, sibling visitation, or costs directly related to work, training, or education.

Transitional Housing Placement Program (THPP): For the purpose of this report, THPP is defined as a CDSS Community Care Licensing Division-licensed foster care facility type (as described in Welfare and Institutions Code (W&IC) Section 16522 et. seq.) which provides real-life independent living experiences for foster/probation youth who are ILP participants and 16, but not more than 18, years old unless the requirements of W&IC Section 11403 are met.

Transitional Housing Program-Plus (THP-Plus): Authorized by AB 1119 (Chapter 639, Statutes of 2002). THP-Plus provides State General Funds to participating counties for the expansion of transitional housing to emancipated foster/probation youth 18 through 21 years of age.

Work-Related Activities/Expense: Work and training-related costs incurred by the ILP participants. Costs may include, but are not limited to, work uniforms, training, tools, books, and union dues.

Independent Living Program Annual Narrative Report and Plan Federal Fiscal Year (FFY) 2005¹

REPORT INFORMATION

Name of County: _____

County personnel responsible for this report:

Name:	Title:
Name of Agency:	
Mailing Address:	Street Address (if different):
E-mail:	Phone: () - x.
Fax Number: () -	Other: () -

Name of person(s) completing the Narrative:

Name:	Title:
Name of Agency:	
Mailing Address:	Street Address (if different):
E-mail:	Phone: () - x.
Fax Number: () -	Other: () -

Name of person (s) completing the Budget Expenditures:

Name:	Title:
Name of Agency:	
Mailing Address:	Street Address (if different):
E-mail:	Phone: () - x.
Fax Number: () -	Other: () -

Name of ILP Manager/Administrator:

Name:	Title:
Name of Agency:	
Mailing Address:	Street Address (if different):
E-mail:	Phone: () - x.
Fax Number: () -	Other: () -

¹ FFY 2005 (October 1, 2004-September 30, 2005)
ILP Annual Narrative Report and Plan, FFY 2004-2005

Name of ILP Aftercare Administrator:

Name:	Title:
Name of Agency:	
Mailing Address:	Street Address (if different):
E-mail:	Phone: () - x.
Fax Number: () -	Other: () -

Name of County THPP/THP-Plus Administrator:

Name:	Title:
Name of Agency:	
Mailing Address:	Street Address (if different):
E-mail:	Phone: () - x.
Fax Number: () -	Other: () -

Name of ILP Coordinator:

Name:	Title:
Name of Agency:	
Mailing Address:	Street Address (if different):
E-mail:	Phone: () - x.
Fax Number: () -	Other: () -

Name of Probation Officer:

Name:	Title:
Name of Agency:	
Mailing Address:	Street Address (if different):
E-mail:	Phone: () - x.
Fax Number: () -	Other: () -

NARRATIVE

Part I – Independent Living Program (ILP) Description

A. Program Description

1. How many foster/probation youth who were wards/dependents of your county were eligible for ILP participation during the fiscal year?
2. Describe the age groups your county ILP serves.
3. Describe how your ILP has been designed to help eligible foster/probation youth make the transition to self-sufficiency.
4. Describe how your program ensures that the participants recognize and accept their personal responsibility for preparing for and then making the transition from adolescence to adulthood.
5. Describe any ILP enhancements, new programs, protocols or services that resulted in greater quality of services and/or larger numbers of eligible foster/probation youth receiving ILP services over the past FY.

B. Assessment

1. Describe what assessment tool(s) your county utilizes to assess the needs and strengths of each eligible foster/probation youth; e.g., Ansell-Casey Life Skills, Daniel Memorial, Community College Foundation, etc.
2. If your county has developed an assessment tool(s), provide a brief description.
3. Who conducts the assessments?

C. Transitional Independent Living Plan (TILP) Implementation

1. Who implements the TILP?
2. When is the TILP implemented?
3. How is the TILP implemented?

C. Transitional Independent Living Plan (TILP) Implementation (Continued)

4. Do you utilize the TILP in the CWS/CMS application?

Yes No

If no, explain.

5. How often are TILPs updated and by whom?

6. How is information provided to the social worker/probation officer for updating and implementing the TILP?

7. When ILP services are determined not appropriate for the youth:

A. How is this information incorporated into the case plan and the TILP?

B. How often are re-determinations made for the appropriateness of services?

C. How are the TILP goals achieved for non-ILP participants?

8. Did the county pass its last ILP compliance review report?

Yes No

If no, please attach a copy of the county ILP corrective action plan.

D. Access to Services

1. How do eligible foster/probation youth access ILP services?

2. Does your county have waiting lists for ILP participation, activities or services?

Yes No

If yes, describe each activity that has a waiting list, reason for the waiting list, and efforts being taken to eliminate the wait.

3. How does your county ensure equitable access to ILP services for all age-appropriate eligible foster/probation youth?

4. How are youth that previously refused ILP services being encouraged to participate?

D. Access to Services (Continued)

5. If the process for delivering and/or assessing the need for services is different based on the type of jurisdiction, type of placement or residence, describe each process.

E. Services

1. Describe how you provide specific ILP services to assist eligible foster/probation youth to obtain educational or vocational goals; e.g., high school, post high school, vocational training, etc.
2. Describe how you provide specific ILP services for eligible foster/probation youth to teach career and employment development and job experiences; e.g., referral to a One Stop Career Center, résumé development, job search assistance, transportation needs, on-the-job experiences, job placement and retention, community service activities, apprenticeship, internship, computer/internet skills, etc.
3. How do you provide emergency services to homeless foster youth?
4. Describe specific ILP services provided to eligible foster/probation youth that would enable them to increase their knowledge and skills for successful daily independent living; i.e., household management training, consumer budgeting personal/social self-development skills, etc.
5. Describe how ILP assists foster/probation youth to find a mentor; e.g., collaboration with Americorp, Job Corp, etc.
6. Describe ILP services provided to ILP foster/probation youth that assists them in meeting their transportation needs; e.g., drivers' education training, auto repair, bus passes, etc.
7. Describe ILP services which provide eligible foster/probation youth with health and safety activities; e.g., smoking avoidance, substance abuse prevention, pregnancy prevention, mental health referrals, nutrition education, and avoidance of incarceration.
8. Do youth have a personal savings account (not including an ILP Savings Account)?
Yes No
9. Do youth have an ILP Savings Account?
Yes No

If no, explain.

E. Services (Continued)

10. Describe how ILP collaborates with other organizations; e.g., other county organizations, private nonprofits, foundations, associations, other State of California Departments, community based organizations, private employers, faith-based organizations, community colleges and/or universities.

11. Regarding Native American youth in ILP:
 - A. How many Native American youth 16 years to 21 years old are in foster/probation care in your county?

 - B. Are these youth participating in ILP?
Yes No

 - C. Describe how your county's ILP collaborates with California Indian Tribes to ensure that Native American youth participate in ILP, and whether these ILP services are culturally appropriate for them.

F. Evaluation

1. How do you evaluate the effectiveness of your ILP?

G. Plans for ILP

1. What changes did you make to your ILP in FFY 2004-2005?

2. What changes do you plan to make in FFY 2005-2006² to enhance your ILP?

² October 1, 2005-September 30, 2006
ILP Annual Narrative Report and Plan, FFY 2004-2005

Part II – ILP Aftercare

A. Program Description

1. Describe your ILP aftercare program.
2. Does your ILP aftercare program include services for emancipated youth whose final dependency/wardship was of another county?
Yes No

B. Assessment

1. Describe what type(s) of assessment tool(s) your county utilizes to assess the needs and strengths of emancipated youth; e.g., Ansell-Casey Life Skills, Daniel Memorial, Community College Foundation, etc.
2. If your county has developed an assessment tool(s), provide a brief description.
3. Who conducts the aftercare assessment?
4. Does your county utilize a transitional independent living plan for emancipated foster/probation youth?
Yes No

Explain:

C. Access to Services

1. Describe how emancipated youth access ILP aftercare services.
2. Describe your process for referring and verifying that eligibility has been determined for emancipated youth in the Former Foster Youth Medi-Cal Program.
3. Describe your outreach efforts to inform youth of the Chafee Education and Training Voucher Program and any supportive services offered to aid them in applying for the grant, as well as ensuring they maintain passing grades and other objectives while attending school or training.

D. Services

1. Describe how you provide ILP aftercare services to assist emancipated youth to obtain their educational or vocational goals; e.g., high school, post high school, vocational training, etc.
2. Describe how you provide specific ILP aftercare services for emancipated youth to teach career and employment development skills and job experiences; e.g., referral to a One Stop Career Center, résumé development, job search assistance, transportation needs, on-the-job experiences, job placement and retention, community services activities, apprenticeships, internships, computer/internet skills, etc.
3. Describe specific ILP aftercare services provided to emancipated youth that would enable them to increase their knowledge and skills for successful daily independent living; e.g., household management training, assistance with locating safe and affordable housing, consumer budgeting, interpersonal/social and self-development skills, etc.
4. Describe how ILP assists emancipated youth to find a mentor; e.g., collaboration with Americorp, Job Corp, etc.
5. Describe ILP services provided to emancipated youth that would assist with transportation needs; e.g., drivers' education training, bus passes.
6. Describe ILP services that provide emancipated youth with health and safety activities; e.g., smoking avoidance, substance abuse prevention, pregnancy prevention, access to the Former Foster Youth Medi-Cal Program, mental health referral, nutrition education, and avoidance of incarceration.
7. Do your emancipated youth have personal savings accounts?
Yes No
8. Does your county refer youth to the Social Security Administration for Social Security Insurance (SSI) benefits?
Yes No
9. How does your county assist emancipated youth who are in need of basic necessities such as food?
10. Does your county have housing programs and/or services for emancipated youth?
Yes No
 - a) If yes, describe those programs and/or services:
 - b) If no, describe how your county assists emancipated youth to find housing.

E. Evaluation

1. How do you evaluate the effectiveness of your ILP aftercare program?

F. Plans for ILP Aftercare

1. What changes do you plan to make in FFY 2006³ to enhance your aftercare program?

³ FFY 2005 (October 1, 2005-September 30, 2006)
ILP Annual Narrative Report and Plan, FFY 2004-2005

Part III – Transitional Housing Placement Program and Transitional Housing Program–Plus Description

1. Describe THPP and/or THP-Plus housing services to youth.

FFY 2004-2005 BUDGET EXPENDITURES

Part IV – ILP Accounting of Funding Allocation

Name of County: _____

Total ILP Allocation: _____

ILP Administration Expenditures (CDSS Program Code 182)

Administration (ILP)	Budgeted County Cost	Budgeted Contracted Cost	County Expenditures	Contracted Expenditures
Salaries (Include: position, classification, FTE, PTE)				
Operating Cost				
Case Management (ILP)				
Salaries (Include: position, classification, FTE, PTE)				
Operating Cost				
Total Cost				

ILP Services Expenditures (CDSS Program Code 184)

Services (ILP)	Budgeted County Cost	Budgeted Contracted Cost	County Expenditures	Contracted Expenditures
Personnel Salaries (Include: position, classification, FTE, PTE)				
Education/Vocational Training				
Employment Training				
Daily Living Skills Training				
Mentoring				
Transportation				
Health and Safety Activities				
Total Cost				

Part V – Emancipated Youth Stipend (EYS)

Name of County: _____

Total EYS Allocation: _____

EYS Expenditures (CDSS Program Code 111)

Stipend Needs (ILP)	Budgeted County Cost	Budgeted Contracted Cost	County Expenditures	Contracted Expenditures
Transportation Assistance				
Work Activities Expense/ Non-Assistance				
Health Related – Non-Medical				
Cost Related to the Child(ren) Of the Emancipated Youth				
Housing Assistance Services				
Emancipated Youth Aftercare Services				
Total Cost				

Part VI – Housing Programs

Name of County: _____

	Budgeted County Cost	County Expenditures
Chafee 30 percent housing for emancipated foster youth Only		
THPP		
THP-Plus		
Other Transitional Housing Programs		
Total Cost		

STATISTICAL INFORMATION

If you responded “**unknown**,” “**do not track**,” “**N/A**,” or similar responses to any question(s) below, please attach a full explanation for each incomplete question and how you propose to begin capturing this data.

Part VII – Outcomes for Emancipated Foster Youth

1. How many youth were discharged from foster/probation care during the reporting period?	1.
2. How many youth received aftercare services during the reporting period?	2.
3. How many youth in question 1 are counted in question 2?	3.
4. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period: a. Were employed full-time? b. Were employed part-time? c. Were not employed? d. Were enrolled in school? e. Held a job, internship, etc. for at least 3 consecutive months?	4. a. b. c. d. e.
5. In addition to money acquired from employment, how many youth discharged from foster/probation care or receiving aftercare services during the reporting period: a. Received SSI funds? b. Received scholarship funds? c. Received stipend funds? d. Received TANF funds? e. Received support from family or spouse? f. Received Chafee room and board? g. Received other funds?	5. a. b. c. d. e. f. g.
6. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period: a. Had a personal savings account? b. Had an emancipation savings account?	6. a. b.
7. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period reported that they had experienced a period of time when they did not have enough money to buy food?	7.
8. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period: a. Lived with family members or relatives for at least 9 of the past 12 months? b. Lived in their own housing (by themselves, with a spouse or roommate, in supervised independent living, or in a college dormitory) for at least 9 of the past 12 months? c. Felt unsafe in their home or neighborhood while living in a or b?	8. a. b. c.

Part VII – Outcomes for Emancipated Foster Youth (continued)

9. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period reported that they had no place to sleep or slept in a shelter for at least one night during the reporting period?	9.
10. How many youth discharged from foster/probation care or in receipt of aftercare services during or prior to the reporting period: a. Received a high school diploma? b. Received a General Equivalency Diploma (GED)? c. Received an Associate of Arts degree (AA)? d. Received a Bachelor of Arts degree (BA)? e. Received a vocational certificate or license?	10. a. b. c. d. e.
11. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period: a. Were enrolled in high school? b. Enrolled in a post-high school vocational training program or college? c. Had all passing grades on their most recent report cards?	11. a. b. c.
12. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period reported at least one adult in the community that they could go to for: a. Emotional support? b. Job/school advice or guidance?	12. a. b.
13. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period were known to have used illegal drugs during the reporting period?	13.
14. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period were incarcerated during the reporting period?	14.
15. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period were parents?	15.
16. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period received their health/mental health records at the time of discharge from foster care?	16.
17. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period had health insurance during the entire reporting period?	17.
18. How many youth discharged from foster/probation care or receiving aftercare services during the reporting period who require ongoing medication for maintenance of physical or mental health, reported that they knew how to access resources to continue receiving their medications?	18.

Part VIII – Transitional Housing Placement Programs

	THPP	THP-Plus
1. How many youth, for whom your county has jurisdiction, participated in THPP/THP-Plus during the reporting period either in your county or in another county?	1.	1.
2. Does your county have a Department approved THPP/THP-Plus plan?	2.	2.
3. How many licensed THPP/THP-Plus providers are in your county? Attach a list that includes the name, address, phone, and e-mail address of each THPP/THP-Plus provider in your county.	3.	3.
4. How many THPP/THP-Plus participants during the reporting period held a job, apprenticeship, etc., for at least 3 consecutive months?	4.	4.
5. How many THPP/THP-Plus participants during the reporting period: a. Were enrolled in high school? b. Received a high school diploma or GED?	5. a. b.	5. a. b.
6. How many THPP/THP-Plus participants during the reporting period were parents whose child/children lived with the participant?	6.	6.
7. How many youth (former THPP/THP-Plus participants) participated in THPP/THP-Plus during: a. The 2004 fiscal year? b. The 2005 fiscal year?	7. a. b.	7. a. b.
8. How many former THPP/THP-Plus participants were enrolled in high school during the reporting period: a. Of the 2004 fiscal year participants? b. Of the 2005 fiscal year participants?	8. a. b.	8. a. b.
9. How many former THPP/THP-Plus participants received a high school diploma or GED during the reporting period: a. Of the 2004 fiscal year participants? b. Of the 2005 fiscal year participants?	9. a. b.	9. a. b.
10. How many former THPP/THP-Plus participants are enrolled in a post-high school vocational training program or college during the reporting period: a. Of the 2004 fiscal year participants? b. Of the 2005 fiscal year participants?	10. a. b.	10. a. b.
11. How many former THPP/THP-Plus participants experienced homelessness during the reporting period: a. Of the 2004 fiscal year participants? b. Of the 2005 fiscal year participants?	11. a. b.	11. a. b.
12. How many former THPP/THP-Plus participants were parents during the reporting period: a. Of the 2004 fiscal year participants? b. Of the 2005 fiscal year participants?	12. a. b.	12. a. b.

	THPP	THP-Plus
13. How many former THPP/THP-Plus participants held a job, apprenticeship, internship, etc., for at least 3 consecutive months during the reporting period:	13.	13.
a. Of the 2004 fiscal year participants?	a.	a.
b. Of the 2005 fiscal year participants?	b.	b.