



**ADRC PARTNERSHIP NAME:**

**DATA REPORTER NAME:**

**DATA REPORTER EMAIL ADDRESS:**

**NAME OF EACH ADRC CORE PARTNER (list names below):**

**HOW MANY UNDUPLICATED PARTNER ORGANIZATIONS ARE PART OF YOUR ADRC? (list names below):**

**NAME OF EACH REPORTING EXTENDED PARTNER. (List names and *which of the four service functions they deliver, if any*). For reference, the four service functions are: Enhanced Information and Referral, Options Counseling, Short-Term Service Coordination, and Transition Services.**

**Fiscal Year:**

**Reporting Period:**

## SECTION I: CONSUMER DEMOGRAPHICS\*

Consumer Age	Core Partner AAA	AAA Do Not Collect	Core Partner ILC	ILC Do Not Collect	Other Core Partner	Other Core Partner Do Not Collect	Extended Partners	Extended Partners Do Not Collect
0-13 Years								
14-24 Years								
25-59 Years								
60 Years and Older								
65 Years and Older								
Declined to State or Missing								

Consumer Ethnicity	Core Partner AAA	AAA Do Not Collect	Core Partner ILC	ILC Do Not Collect	Other Core Partner	Other Core Partner Do Not Collect	Extended Partners	Extended Partners Do Not Collect
Not Hispanic/Latino								
Hispanic/Latino								
Declined to State or Missing								

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.

<b>Consumer Race</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
American Indian or Alaska Native								
Asian Indian								
Black or African American								
Cambodian								
Chinese								
Filipino								
Guamanian								
Hawaiian								
Japanese								
Korean								
Laotian								
Other Asian								
Other Pacific Islander								
Samoan								
Vietnamese								
White								
Declined to State or Missing								

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.

<b>Consumer Gender Identity</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
Female								
Male								
Transgender Female to Male								
Transgender Male to Female								
Genderqueer/Gender Non-Binary								
Not Listed								
Declined to State or Missing								

<b>Consumer Sex at Birth</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
Female								
Male								
Declined to State or Missing								

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.

<b>Consumer Sexual Orientation or Sexual Identity</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
Straight/Heterosexual								
Bisexual								
Gay/Lesbian/Same-Gender Loving								
Questioning/Unsure								
Not Listed								
Declined to State or Missing								

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.

<b>Characteristics of Consumers</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
Homeless								
Veteran								
With a Disability								
Live Alone								
SSI Beneficiary								
Low Income								
Medicaid/Medi-Cal Beneficiary								
Dementia/Alzheimer's Diagnosis								
CalFresh Beneficiary								
Caregiver								
Food Insecure								
Victim of Abuse								
Risk for Institutionalization								
In-Home Supportive Services Recipient								
Other – Please Specify:								
Other – Please Specify:								
Other – Please Specify:								

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.

<b>Veteran's Status**</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
Served in the United States military								
Is the spouse, legal partner, parent, or child of a person who is serving in or who has served in the United States military								
Gave consent to be contacted regarding eligibility to receive veteran's benefits								

\*\*Answer yes or no as applicable.

**Consumer Demographic Data Collection Notes (Optional).** Please add notes here if your ADRC wishes to explain any of the data elements collected.

## SECTION II: ADRC SERVICE FUNCTIONS\*

<b>Enhanced Information and Referral Services</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
Total Calls Received								
Total Completed Initial Intakes and Assessments								
Total Warm Transfers								
Total Service Referrals Offered								
Total Follow-Ups Made								

<b>Enhanced Information and Referral Services</b>	<b>AAA Service Not Offered</b>	<b>ILC Service Not Offered</b>	<b>Other Core Partner Service Not Offered</b>	<b>Extended Partners Service Not Offered</b>
Total Calls Received				
Total Completed Initial Intakes and Assessments				
Total Warm Transfers				
Total Service Referrals Offered				
Total Follow-Ups Made				

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.



<b>Options Counseling</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
Total Individuals Identified as a Candidate for Options Counseling								
Number of Consumers Served with Options Counseling "Unduplicated"								
Total Warm Transfers and Referrals for Options Counseling								
Total Interviews and Assessments Completed								
Total Plans Developed								
Total Plans Completed								
Total Actions Developed ( <i>Optional</i> )								
Total Actions Completed ( <i>Optional</i> )								
Total Follow-Ups Completed								

<b>Options Counseling</b>	<b>AAA Service Not Offered</b>	<b>ILC Service Not Offered</b>	<b>Other Core Partner Service Not Offered</b>	<b>Extended Partners Service Not Offered</b>
Total Individuals Identified as a Candidate for Options Counseling				
Number of Consumers Served with Options Counseling "Unduplicated"				
Total Warm Transfers and Referrals for Options Counseling				
Total Interviews and Assessments Completed				
Total Plans Developed				
Total Plans Completed				
Total Actions Developed ( <i>Optional</i> )				
Total Actions Completed ( <i>Optional</i> )				
Total Follow-Ups Completed				

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.

<b>Short-Term Service Coordination</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
Total Individuals Identified as a Candidate for Short-Term Service Coordination								
Short-Term Service Coordination Total Number of Consumers Served "Unduplicated"								
Total Warm Transfers and Referrals for Short-Term Service Coordination								
Total Plans Developed								
Total Plans Completed								
Total Actions Developed ( <i>Optional</i> )								
Total Actions Completed ( <i>Optional</i> )								
Total Follow-Ups Completed								

<b>Short-Term Service Coordination</b>	<b>AAA Service Not Offered</b>	<b>ILC Service Not Offered</b>	<b>Other Core Partner Service Not Offered</b>	<b>Extended Partners Service Not Offered</b>
Total Individuals Identified as a Candidate for Short-Term Service Coordination				
Short-Term Service Coordination Total Number of Consumers Served "Unduplicated"				
Total Warm Transfers and Referrals for Short-Term Service Coordination				
Total Plans Developed				
Total Plans Completed				
Total Actions Developed ( <i>Optional</i> )				
Total Actions Completed ( <i>Optional</i> )				
Total Follow-Ups Completed				

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.

<b>Transition Services</b>	<b>Core Partner AAA</b>	<b>AAA Do Not Collect</b>	<b>Core Partner ILC</b>	<b>ILC Do Not Collect</b>	<b>Other Core Partner</b>	<b>Other Core Partner Do Not Collect</b>	<b>Extended Partners</b>	<b>Extended Partners Do Not Collect</b>
Total Individuals Identified as a Candidate for Transition Services								
Total Warm Transfers and Referrals for Transition Services								
Total Plans Developed								
Total Plans Completed								
Total Actions Developed (Optional)								
Total Actions Completed (Optional)								
Total Follow-Ups/Home Visits Completed								
Transition Services Completed from Nursing Facility								
Transition Services Completed from Intermediate Care Facilities for Individuals w/ Intellectual Disabilities								
Transition Services Completed from Hospitals								
Transition Services Completed from Other Institutional Settings								

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.

<b>Transition Services</b>	<b>AAA Service Not Offered</b>	<b>ILC Service Not Offered</b>	<b>Other Core Partner Service Not Offered</b>	<b>Extended Partners Service Not Offered</b>
Total Individuals Identified as a Candidate for Transition Services				
Total Warm Transfers and Referrals for Transition Services				
Total Plans Developed				
Total Plans Completed				
Total Actions Developed (Optional)				
Total Actions Completed (Optional)				
Total Follow-Ups/Home Visits Completed				
Transition Services Completed from Nursing Facility				
Transition Services Completed from Intermediate Care Facilities for Individuals w/ Intellectual Disabilities				
Transition Services Completed from Hospitals				
Transition Services Completed from Other Institutional Settings				

\*Mark an "X" in the do not collect boxes and service not offered boxes as applicable.

**Service Function Data Collection Notes (Optional).** *Please add notes here if your ADRC wishes to explain any of the data elements collected in the four-service function areas and indicate the service function area with each note.*

## SECTION III: OUTREACH ACTIVITIES / APPLICATION AND ELIGIBILITY ASSISTANCE

### OUTREACH ACTIVITIES

Types of Activities	Number of Outreach Activities	Number of Outreach Contacts
Assistive Technology		
CalFresh		
Emergency Preparedness, Response, and Recovery		
Housing		
Medi-Cal		
Medicare		
MIPPA		
SSI		
Transportation		
Veterans		
Other: LTSS		



## APPLICATION AND ELIGIBILITY ASSISTANCE

Types of Activities	Number of contacts assisted with applications and/or eligibility
Assistive Technology	
CalFresh	
Emergency Preparedness, Response, and Recovery	
Housing	
Medi-Cal	
Medicare	
MIPPA	
SSI	
Transportation	
Veterans	
Other: LTSS	

**Outreach/Enrollment Activity Data Collection Notes (Optional).** *Please add notes here if your ADRC wishes to explain any of the data elements collected. Add “other” categories from outreach activities / application and/or eligibility assistance.*