



# COMMUNITY PLAN QUARTERLY PROGRESS REPORT

<p><b>QUARTER</b></p> <p><input type="checkbox"/> Jul 2005                      <input type="checkbox"/> Oct 2005</p> <p><input type="checkbox"/> Jan 2006                      <input checked="" type="checkbox"/> Apr 2006</p> <hr/> <p><b>Meetings Held:</b> 4</p> <p><b>Committee Members:</b> 15-20</p>	<p><b>PRIORITY ISSUE COUNCIL</b></p> <p><input type="checkbox"/> <b>Transportation</b></p> <p><input type="checkbox"/> <b>Medical Care</b></p> <p><input type="checkbox"/> Primary Care                      <input type="checkbox"/> Dental Health                      <input type="checkbox"/> Mental Health</p> <p><input type="checkbox"/> <b>Alcohol and Drug Abuse</b></p> <p><input type="checkbox"/> Adult                      <input type="checkbox"/> Youth</p> <p><input type="checkbox"/> <b>Family Issues</b></p> <p><input type="checkbox"/> Housing                      <input type="checkbox"/> Independent Living                      <input type="checkbox"/> Parent/Community Education</p> <p><input checked="" type="checkbox"/> Self-Sufficiency                      <input type="checkbox"/> Youth Development</p>
<p><b>Briefly list strategies completed.</b></p> <p>1. Began to develop a Plan to support families moving toward Self-Sufficiency</p> <p>2. Held a Case Managers luncheon to get feedback/input from them on what needs to be done in the area of self-sufficiency</p> <p>3. Involved Social Work staff from University in the work of the committee</p> <p>4.</p>	
<p><b>List other accomplishments toward plan progress.</b></p> <p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p>	
<p><b>List concerns/barriers to progress.</b></p>	
<p><b>What additional support do you feel you will need from CCC during the next quarter?</b></p>	
<p><b>Submitted by:</b> Nancy Jernigan</p>	<p><b>Date:</b> 4/4/06</p>

*(Request to Modify Plan and Progress Report forms should also be attached if not submitted during this quarter.)*