

3. Discuss any significant changes in refugee employment or other service outcomes, in regards to the numbers of refugees accessing RCA/RMA.				
4. Please provide numerical breakdown of new RCA enrollees during this reporting period:				
New arrivals	Secondary migrants	Former Matching Grant clients	RCA re-applicants	Total
5. Provide the reason and number of exemptions from registration for employment services by RCA recipients during this period.				
Reason of exemption:				Total number
6. Discuss any results in medical screening and health assessments (e.g. timeliness, best practices and innovative methods and procedures). Respondents should include (in both the narrative and on supplemental charts) additional information about initial health assessments, medical screenings, treatments, follow up and other information that profiles the health and medical conditions, including behavioral health of the refugee population as well as any plans to address medical and health-related concerns.				
			M	F
Number of refugees screened in 30 days from arrival				
Number of refugees screened 31-90 days from arrival				
Number of refugees not screened in 90 days				
Describe main reasons for refugees not being screened: (e.g. out-migrated, patient refused, etc.)				
Number of adult refugees referred to:				
Primary care				
Mental Health Services				
Dental Care				
Vision Care				
Disability Services				
High Public Concern Services (i.e. infectious diseases, HIV, suicide, etc)				

Number of children (under 18) referred to primary care: (non-URM)			
List top five (5) health issues for all referrals (children and adults):			
Report any high cost of medical events covered by RMA (over \$10,000)			
Type of event	Cost	Care to continue or event completed	Recipient's ethnicity and/or country of origin
Based on refugee health issues and costs, describe the programs and policies that the State will maintain, modify, or change to address specific health issues and improve health services to refugees (e.g. training, new procedures and protocols, etc.)			
7. Discuss any planning and preparation activities for emergency operations and continuity of operations in the event of a pandemic influenza or other disaster.			
Date of your most recent plan or update of the plan?			
List activities in this reporting period:			

8. Indicate what outcome measures the State uses to measure performance among vendors, such as performance targets, performance improvement measures, etc.

9. List monitoring activities (RSS, TAG, RMA, RMS) undertaken during the reporting period in the following chart and attach the required reports.

Agency Name	Program	Location	Date	Purpose	Report Attached (Yes/No)

10. Discuss results of corrective action plans implemented during previous reporting period:
