INSTRUCTIONS FOR COMPLETING
THE QUARTERLY PROJECT STATUS REPORT

General Instructions

The Quarterly Project Status Report (QPSR) must be completed for all projects included in the Technological Needs Funding Agreement (TNFA) on a Fiscal Year quarterly basis (e.g., July – September, October – December, January – March, and April – June).

The first Quarterly Project Status Report must be submitted no later than thirty (30) days following completion of the first full quarter after the project is added to the TNFA, regardless of project start date.

Examples:

<table>
<thead>
<tr>
<th>Project #1</th>
<th>TNFA Executed May 1, 2010</th>
<th>First QPSR Due:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Original Exhibit A of TNFA)</td>
<td></td>
<td>October 30, 2010</td>
</tr>
<tr>
<td>Project #2</td>
<td>Added to TNFA Jan. 15, 2011</td>
<td>July 30, 2011</td>
</tr>
<tr>
<td>(Added as Exhibit A-1 of TNFA)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Contractor shall submit the Quarterly Project Status Report to the County’s Project Manager. Electronic submissions of the Quarterly Project Status Report bearing an image of the Contractor’s Project Director’s signature are preferred. County’s Project Manager shall assign a DMH Control Number to track the Quarterly Project Status Report. All outstanding Quarterly Project Status Reports shall be reviewed on a regular basis by the County’s Project Director.

A template for the Quarterly Project Status Report is available for download in MS WORD 2003 format from the CPTT Web site at: http://dmh.lacounty.gov/hipaa/edi_homepage.html.

PROJECT INFORMATION

<table>
<thead>
<tr>
<th>DMH Control No.</th>
<th>Leave Blank.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Name</td>
<td>Enter the Project Name as it appears in the TNFA.</td>
</tr>
<tr>
<td>Project ID No.</td>
<td>Enter the Project ID No. as it appears on the project approval notification letter.</td>
</tr>
<tr>
<td>Contractor’s Executive Sponsor and Title</td>
<td>Enter the name and job title of the Executive Sponsor of the Project.</td>
</tr>
<tr>
<td>Contractor Name</td>
<td>Enter the name of the Contractor as it appears in the TNFA.</td>
</tr>
<tr>
<td>Legal Entity No.</td>
<td>Enter the Legal Entity number as it appears in the TNFA.</td>
</tr>
<tr>
<td>Project Status</td>
<td>Place an “X” in the appropriate checkbox.</td>
</tr>
<tr>
<td>Budget Status</td>
<td>Place an “X” in the appropriate checkbox.</td>
</tr>
<tr>
<td>Report for Quarter Ending</td>
<td>Enter the end date of the report quarter as MM/DD/YYYY.</td>
</tr>
<tr>
<td>Project Start Date</td>
<td>Enter the date the project started as MM/DD/YYYY.</td>
</tr>
<tr>
<td>Project End Date</td>
<td>Enter the date the project ended or leave blank if the project is in progress.</td>
</tr>
</tbody>
</table>
### Contractor's Project Director
Enter the name of the Contractor's Project Director as it appears in the TNFA.

### Phone
Enter the phone number of the Contractor's Project Director.

### Email
Enter the e-mail address of the Contractor's Project Director.

### Project Objectives
Provide a brief statement of the Project Objectives, consistent with Contractor's description of Project Goals and Objectives as stated in Exhibit 3 – Technological Needs Project Proposal Description, Section 1.1.

### Consortium Agencies
If the project is part of a consortium, enter the name of all Legal Entities participating in the consortium.

### MAJOR TASK/ MILESTONE

<table>
<thead>
<tr>
<th>Task/Milestone</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Original Start</td>
<td>Enter the Original Start Date for all listed Tasks/Milestones, as indicated on the original project schedule included in the TNFA.</td>
</tr>
<tr>
<td>Revised Start</td>
<td>Enter the Revised Start Date for all listed Tasks/Milestones, whether approved or planned. The Revised Start Date is any actual or planned revision to the Original Start Date identified on Appendix C: Summary Project Schedule of the approved Project exhibit of the TNFA. If the Revised Start Date has not been approved by DMH, a Form of Change Notice and revised Appendix C: Summary Project Schedule must be submitted to DMH.</td>
</tr>
<tr>
<td>Actual Start</td>
<td>Enter the actual date work began on each listed Task/Milestone for all Tasks/Milestones listed on the most recent DMH approved version of Appendix C: Summary Project Schedule for the project and add any new Actual Start dates for Tasks/Milestones for which work has started since the last Quarterly Project Status Report was submitted.</td>
</tr>
<tr>
<td>Original Completion</td>
<td>Enter the Original Completion Date for all listed Tasks/Milestones as indicated on the original project schedule included in the TNFA.</td>
</tr>
<tr>
<td>Revised Completion</td>
<td>Enter the Revised Completion Date for the listed Task/Milestone, whether approved or planned. The Revised Completion Date is any actual or planned revision to the Original Start Date identified on Appendix C: Summary Project Schedule of the approved Project exhibit of the TNFA. If the Revised Completion Date has not been approved by DMH, a Form of Change Notice and revised Appendix C: Summary Project Schedule must be submitted to DMH.</td>
</tr>
<tr>
<td>Actual Completion</td>
<td>Enter the Actual Completion Date for all listed Tasks/Milestones listed on the most recent DMH approved Appendix C: Summary Project Schedule</td>
</tr>
</tbody>
</table>
**Status**

Enter the Status of the Task/Milestone using the following options:

- Not Started
- In Progress
- Complete
- Cancelled

---

**TOTAL PROJECT BUDGET INFORMATION** *(MHSA Funding Only)*

**Budgeted Costs:**

<table>
<thead>
<tr>
<th>Cost Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a) Personnel</strong></td>
<td>Enter total Personnel costs for the project as shown on Exhibit 4 – Budget Summary of the TNFA or the most recent approved Budget Modification.</td>
</tr>
<tr>
<td><strong>b) Hardware</strong></td>
<td>Enter total Hardware costs for the project as shown on Exhibit 4 – Budget Summary of the TNFA or the most recent approved Budget Modification.</td>
</tr>
<tr>
<td><strong>c) Software</strong></td>
<td>Enter total Software costs for the project as shown on Exhibit 4 – Budget Summary of the TNFA or the most recent approved Budget Modification.</td>
</tr>
<tr>
<td><strong>d) Contract Services</strong></td>
<td>Enter total Contract Services costs for the project as shown on Exhibit 4 – Budget Summary of the TNFA or the most recent approved Budget Modification.</td>
</tr>
<tr>
<td><strong>e) Other Expenses</strong></td>
<td>Enter total Other Expenses costs for the project as shown on Exhibit 4 – Budget Summary of the TNFA or the most recent approved Budget Modification.</td>
</tr>
<tr>
<td><strong>f) Total Project Costs</strong></td>
<td>Enter total MHSA IT budgeted funds for the project as shown on Exhibit 4 – Budget Summary of the TNFA or the most recent approved Budget Modification.</td>
</tr>
</tbody>
</table>

**Actual Costs to Date**

<table>
<thead>
<tr>
<th>Cost Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>a) Personnel</strong></td>
<td>Enter total actual (cumulative) Personnel costs incurred from the Project Start Date through the end of the reporting period, including Personnel costs paid from Start-up funds.</td>
</tr>
<tr>
<td><strong>b) Hardware</strong></td>
<td>Enter total actual (cumulative) Hardware costs incurred from the Project Start Date through the end of the reporting period, including Hardware costs paid from Start-up funds.</td>
</tr>
<tr>
<td><strong>c) Software</strong></td>
<td>Enter total actual (cumulative) Software costs incurred from the Project Start Date through the end of the reporting period, including Software costs paid from Start-up funds.</td>
</tr>
<tr>
<td><strong>d) Contract Services</strong></td>
<td>Enter total actual (cumulative) Contract Services costs incurred from the Project Start Date through the end of the reporting period, including Contract Services costs paid from Start-up funds.</td>
</tr>
<tr>
<td><strong>e) Other Expenses</strong></td>
<td>Enter total actual (cumulative) Other Expenses incurred from the Project Start Date through the end of the reporting period, including Other Expenses paid from Start-up funds.</td>
</tr>
<tr>
<td><strong>f) Total Project Costs</strong></td>
<td>Enter total MHSA IT funds expended from the Project Start Date through the end of the reporting period, including expenses paid from Start-up funds.</td>
</tr>
</tbody>
</table>
### INSTRUCTIONS FOR COMPLETING
### QUARTERLY PROJECT STATUS REPORT

<table>
<thead>
<tr>
<th>PROJECT STATUS / MAJOR ACCOMPLISHMENTS / SCHEDULED ACTIVITIES / ISSUES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Project Status</strong></td>
</tr>
<tr>
<td>Provide a general summary of project status as of the end of the most recent quarter completed.</td>
</tr>
<tr>
<td><strong>Major Accomplishments During the Reporting Period</strong></td>
</tr>
<tr>
<td>List major accomplishments during the most recent quarter completed. If no major accomplishments during the reporting period, note as “None”.</td>
</tr>
<tr>
<td><strong>Scheduled Activities For The Next Fiscal Quarter</strong></td>
</tr>
<tr>
<td>List any project-related activities scheduled for the next quarter (e.g., training, user acceptance testing, Go-Live, etc). If no activities are scheduled, note as “None”.</td>
</tr>
<tr>
<td><strong>Issues</strong></td>
</tr>
<tr>
<td>List any issues that may impact the project scope, approach, schedule, and/or budget. If there are no issues to report, note as “None”.</td>
</tr>
</tbody>
</table>

### RISK MANAGEMENT

**Risk Report**

- **a) ID**
  Enter a sequential number for each risk reported beginning with “1”.

- **b) Risk**
  Describe each reported risk in simple terms. A more detailed description of each risk may be provided on an additional comments sheet.

- **c) Probability**
  Enter the appropriate alpha code to describe the probability of the occurrence of each reported risk as follows:
  - “H” = High
  - “M” = Medium
  - “L” = Low

- **d) Impact**
  Enter the appropriate alpha code to describe the likely impact of each reported risk on project success as follows:
  - “H” = High
  - “M” = Medium
  - “L” = Low

- **e) Timeframe**
  Enter the appropriate alpha code to describe the estimation of how long the reported risk will be relevant to the project as follows:
  - “S” = Short Term (< 3 Months)
  - “M” = Medium Term (3 to 6 Months)
  - “L” = Long Term (> 6 Months)

- **f) Response**
  Enter the appropriate description of action(s) that will be taken with regard to each reported risk as follows:
  - “Mitigate” = Action(s) will be taken to reduce negative impact of the risk.
  - “Watch” = Take no direct action(s) and continue to monitor.
  - “Accept” = Accept risk because it is unlikely to occur or its occurrence is unlikely to significantly impact project success.
INSTRUCTIONS FOR COMPLETING
QUARTERLY PROJECT STATUS REPORT

g) Escalated to DMH

Enter the appropriate description of action(s) taken with regard to each reported risk as follows:

- **“Yes”** = DMH informed of risk immediately upon recognition of the risk and through means other than the *Quarterly Project Status Report* because the risk represents a significant threat to project success.
- **“No – M/L”** = DMH was not informed because both the Probability and Impact of the risk are not high.
- **“No – H”** = DMH should have been informed of the risk prior to completion of the current *Quarterly Project Status Report*, but was not informed timely.

POST IMPLEMENTATION EVALUATION REPORT

**General Instructions**
Complete the Post Implementation Evaluation Report (PIER) only at Project Closure as part of the *Quarterly Project Status Report* to be submitted to DMH within thirty (30) calendar days following project completion.

**Objectives Achieved**
Describe the achieved objectives in comparison to the objectives listed in the Project Description Section 1.1 of Exhibit 3 of the TNFA Exhibit A. Include in this section a description of User and Management acceptance of the completed project.

**Lessons Learned**
Describe lessons learned, best practices used for the project, any notable occurrences, or factors that contributed to project success, problems, or other information which would be helpful during future project efforts. Describe problems that were encountered and how they were overcome.

**Corrective Actions**
Leave blank unless the project is deemed to be a limited success or failure, or when there are significant differences between project expectations and project results. If significant differences between project expectations and project results are anticipated, summarize alternatives for improving the outcome.

**Next Steps**
If the project has any planned future phases or enhancements, use this section to describe any planned future phases or enhancements. If the project will be in the Maintenance Phase subsequent to project closure, indicate “Maintenance Phase”. Indicate “None”, if no future actions are planned.

CONTRACTOR APPROVALS

**Prepared By Signature**
Preparer must sign the *Quarterly Project Status Report*.

**Date**
Enter date of signature by the Preparer.

**Phone**
Enter the work telephone number of the Preparer.
**Contractor’s Project Director Signature**

Contractor’s Project Director identified in the TNFA must sign the Quarterly Project Status Report.

**Date**

Enter date of signature by the Contractor’s Project Director.

**Phone**

Enter the work telephone number of the Contractor’s Project Director.
LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
CONTRACT PROVIDER TECHNOLOGICAL NEEDS PROJECTS

SAMPLE Quarterly Project Status Report
For an MHSA-Funded IT Project

DMH CONTROL NO. (DMH Use Only)

<table>
<thead>
<tr>
<th>PROJECT INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Name: Clinical Data and Practice Mgmt. System Project</td>
</tr>
<tr>
<td>Contractor Name: XYZ Agency, Inc.</td>
</tr>
<tr>
<td>Contractor's Executive Sponsor: Mary Doe</td>
</tr>
<tr>
<td>Project Status Budget Status</td>
</tr>
<tr>
<td>On Schedule Within Approved Budget</td>
</tr>
<tr>
<td>Ahead of Schedule Over Budget</td>
</tr>
<tr>
<td>Behind Schedule</td>
</tr>
<tr>
<td>Project Start Date: 04/01/2010</td>
</tr>
<tr>
<td>Project End Date: 06/27/2013</td>
</tr>
<tr>
<td>Project Planning: 05/27/2010 05/20/2010 05/20/2010 09/10/2010 09/01/2010 Complete</td>
</tr>
<tr>
<td>Project Execution &amp; Control: 06/21/2010 06/11/2010 05/10/2010 05/03/2011 Complete</td>
</tr>
<tr>
<td>Ongoing Vendor &amp; Project Support: 05/31/2011 05/31/2011 05/28/2013 In Progress</td>
</tr>
<tr>
<td>Project Closure: 05/29/2013 06/27/2013 Not Started</td>
</tr>
</tbody>
</table>

Revised: August 27, 2010
TOTAL PROJECT BUDGET INFORMATION
(MHSA Funding Only)

<table>
<thead>
<tr>
<th>Category</th>
<th>Budgeted Costs</th>
<th>Actual Costs to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>$15,625</td>
<td>$15,625</td>
</tr>
<tr>
<td>Hardware</td>
<td>$25,125</td>
<td>$25,125</td>
</tr>
<tr>
<td>Software</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Contract Services</td>
<td>$117,348</td>
<td>$103,212</td>
</tr>
<tr>
<td>Other Expenses</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Total Project Costs</strong></td>
<td><strong>$158,098</strong></td>
<td><strong>$143,962</strong></td>
</tr>
</tbody>
</table>

PROJECT STATUS / MAJOR ACCOMPLISHMENTS / SCHEDULED ACTIVITIES / ISSUES

**PROJECT STATUS**
- Clinical Data and Practice Management System has been fully implemented
- Project activities are limited to vendor support of the ASP system, hardware maintenance, and internet services
- Project is anticipated to close on-schedule on June 27, 2013 with full expenditure of MHSA IT funds

**MAJOR ACCOMPLISHMENTS DURING THE REPORTING PERIOD**
- None

**SCHEDULED ACTIVITIES FOR THE NEXT FISCAL QUARTER**
- None

**ISSUES**
- None
LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
CONTRACT PROVIDER TECHNOLOGICAL NEEDS PROJECTS

RISK MANAGEMENT

Risk Report
(Please Provide the Risk Log Along with Mitigation, Contingency Plan for each High Priority Short Term Risk)

<table>
<thead>
<tr>
<th>ID</th>
<th>Risk</th>
<th>Probability</th>
<th>Impact</th>
<th>Timeframe</th>
<th>Response</th>
<th>Escalated To DMH</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ASP User Cost Increase</td>
<td>H</td>
<td>L</td>
<td>M</td>
<td>Accept</td>
<td>N-M/L</td>
</tr>
</tbody>
</table>

Explanation Of Entries

- **Probability And Impact Are Based On Three (3) Possible Entries:**
  - High (H), Medium (M), Low (L)
- **Timeframe, Estimation Of How Long The Risk Will Be Relevant:**
  - Short Term (S) <3 months, Medium Term (M) 3 to 6 months, Long Term (L) >6 months
- **Response:** Possible actions are Mitigate, Watch, or Accepted whereby you can either fix the risk through mitigation, watch it to see how it develops, or accept the risk because it is not likely to occur or has minimal impact
- **Escalated to DMH:** Enter the appropriate description of action(s) taken with regard to each reported risk as follows:
  - “Yes” = DMH informed of risk immediately upon recognition of the risk and through means other than the Quarterly Project Status Report because the risk represents a significant threat to project success.
  - “No – M/L” = DMH was not informed because both the Probability and Impact of the risk are not high.
  - “No – H” = DMH should have been informed of the risk prior to completion of the current Quarterly Project Status Report, but was not informed timely.

List Of Risks That You Might Want To Consider

1. Lack of Clearly-Defined Project Objectives and Business Processes
2. Lack of Clearly Defined Roles and Responsibilities for Stakeholders and Team Members
3. No Project Steering Committee Established
4. Required Funds and Resources are not available in a Timely Manner
5. Lack of Subject Matter Experts with Availability To Share Knowledge in a Timely Manner with The Project Team
6. Lack of Well Defined Requirements or Requirements that are not Finalized
7. Lack of Project Management Methodology and Change Management Process
8. Lack of Knowledge on Technologies Being Used and Stability of Technologies Being Used
9. No Proven Vendor Product (If Package Solution)
10. Excessive Changes after the Completion of the Requirements Phase
11. Lack of User Group Involvement and Buy-In Throughout The Project
12. No Provision for Appropriate Training

Revised: August 27, 2010
Post Implementation Evaluation Report

Please Include the Following Sections in Your Final Status Report

<table>
<thead>
<tr>
<th>OBJECTIVES ACHIEVED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe the Achieved Objectives in Comparison to the Objectives Listed in the Project Description Section 1.1 of Exhibit 3. Also describe the User and Management Acceptance of the Completed Project.</td>
</tr>
<tr>
<td>•</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LESSONS LEARNED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe Lessons Learned, Best Practices used for the project, any Notable Occurrences, or Factors that contributed to the project’s success or problems, or other information, which could be helpful during future project efforts. Describe Problems that were Encountered and How they were Overcome.</td>
</tr>
<tr>
<td>•</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CORRECTIVE ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Note: This section must be included when the project is deemed to be a Limited Success or Failure, or when there are Significant Differences between Project Expectations and Project Results. If this condition applies, summarize alternatives for improving the outcome.</td>
</tr>
<tr>
<td>•</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NEXT STEPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe if the project has any Future Phases or Enhancements; or will it be in Maintenance Phase.</td>
</tr>
<tr>
<td>•</td>
</tr>
</tbody>
</table>
Please submit *Quarterly Project Status Reports* in an electronic format or via fax, including images of “wet” signatures of both the Report Preparer and the Contractor’s Project Director.

Email *Quarterly Project Status Reports* to:

[CPTT@dmh.lacounty.gov](mailto:CPTT@dmh.lacounty.gov)

Or FAX *Quarterly Project Status Reports* to:

[DMH CIOB Attn: CPTT](tel:(213) 252-8744)

### Contractor Approvals

<table>
<thead>
<tr>
<th>Name</th>
<th>Signature</th>
<th>Date</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sandra Sample</td>
<td></td>
<td>1/15/2013</td>
<td>(213) 555-1212</td>
</tr>
<tr>
<td>John Doe, Ph.D., Executive Director</td>
<td></td>
<td>1/17/2013</td>
<td>(213) 555-1212</td>
</tr>
</tbody>
</table>

Prepared By

John Doe, Ph.D., Executive Director

1/17/2013  (213) 555-1212