



NH DHHS Child Care Recovery and Stabilization Program FINAL REPORT for all CCRSP and CCCAS Award Recipients - due SUNDAY, January 24th, 2021 by midnight

NH DHHS CCRSP/CCCAS FINAL REPORT - Required

Welcome to the CCRSP/CCCAS FINAL REPORT. This required report is designed to document your program status over the last 10 months, how you utilized your CARES Act funding with the allowable uses (income loss and COVID-related expenses) and the challenges you faced and will continue to face in the near future. We appreciate the time you will put into completing this document. We have done our best to avoid redundancy from other information you have already provided. Please refer to the detailed instructions included with the Part One email or go to the <https://www.nh-connections.org/covid-19/recovery-stabilization/> as of Thursday, January 7, 2021 - all instructions and the webinars will be posted.

IMPORTANT NOTE ABOUT CONFIDENTIALITY: The publicly released summary report based on the answers you share in this report are not going to be shared with program identifiable characteristics. This information will be shared as aggregate data and not identify specific programs, but share trends, issues, geographical insights, etc.

DUE DATE January 24, 2021 midnight - no exceptions.

1. Program Contact Information

Organization Name	<input type="text"/>
DBA	<input type="text"/>
Mailing Address	<input type="text"/>
Address 2	<input type="text"/>
City/Town	<input type="text"/>
State/Province	<input type="text"/>
ZIP/Postal Code	<input type="text"/>
Person Completing Final Report	<input type="text"/>
Email Address	<input type="text"/>
Contact Phone Number/Ext	<input type="text"/>

2. Program Specific Information (multi-site use separate worksheet)

Actual Program Address

Address Two

City/Town

County

Zip/Postal Code

Program Contact Person and Title

Program Contact Person Email

Program Contact Phone Number/Ext

Vendor Number

Child Care Scholarship Resource Number

3. Program is a

- Single location - non-home based
- Single location - home based
- Multi-site location with less than 10 sites
- Multi-site location with more than 10 sites

4. Program Type - (check all that apply)

- Licensed child care center
- Licensed preschool only
- Licensed family child care
- Licensed school age program (before/after no summer)
- Licensed school age program (before/after and summer)
- Summer program or camp only (camp with no fall programming)
- Summer program or camp that added fall programming
- Other (please specify)
- City/town recreation program (summer only)
- City/town recreation program with summer and fall
- License-exempt facility
- License-exempt family, friend, or neighbor
- Head Start
- For profit (see definition)
- Non-profit (501c3, file 990)
- Faith-based organization
- Multi-generational program
- Overnight/weekend care
- Franchise location
- Part of national organization (ex. Boys and Girls Club, YMCA, etc.)
- Part of community based organization with other services
- Private school with early childhood component

5. Program Open and Closure Status - Please indicate your program status for the designated months in 2020 and, if fully or partially closed, check all reasons that apply. Multi-sites use separate worksheet

	Open Full Month	Open Partial Month (closed for 5 days or longer)	Closed Full Month	Opted to close, not serving essential workers or precautionary closure	COVID exp/case staff	COVID exp/case child(ren)	Lack of available staff	Enrollment too low	Seasonal Closure
March	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
April	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
May	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
June	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
July	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
August	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
September	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
October	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
November	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
December	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Children Regularly Attending During the COVID-19 Pandemic Period from March 1, 2020 to December 30, 2020 - on average how many children, both full and part time (unique children) attended 50% more of their regularly scheduled time in the following months? This is not just enrolled, but actually attended. *Multi-sites use separate worksheets*

	Infants/Toddlers	Preschoolers	Kindergarteners	School Age (1st through 5th)	Middle School (6th through 8th)
March	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
April	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
May	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
June	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
July	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
August	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
September	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
October	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
November	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
December	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

7. Did you continue to charge families for full or part child care tuition even when you were closed or they were not attending?

Yes

No

Other (please specify)

8. Staff Regularly Working During the COVID-19 Pandemic Period from March 1, 2020 to December 30, 2020 - on average how many staff, both full and part time attended worked at least 50% more of their regularly scheduled time in the following months? *Multi-sites use separate worksheet*

	Direct Staff (teachers, teacher assistants, lead teachers, camp counselors, etc.) Full Time	Direct Staff (teachers, teacher assistants, lead teachers, camp counselors, etc.) Part Time	Support Staff (specialists, receptionist, cook, bus driver, etc.) Full Time	Support Staff (specialists, receptionist, cook, bus driver, etc.) Part Time	Management - Full Time	Management - Part Time
March	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
April	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
May	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
June	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
July	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
August	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
September	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
October	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
November	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
December	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

9. Did you pay staff under the following circumstances? Check all that apply.

- I paid my staff when the program was closed due to COVID outbreaks
- I paid my staff when they did not need to work due lower enrollment numbers
- I paid my staff when we were closed by choice
- I paid my staff when they were unable to work due to being at home with their own children

Other (please specify)

10. A snapshot of your program's income changes - see instructions for calculating using the CCRSP/CCCAS Final Report Optional Calculation Worksheet or using your own format - *this is considered an estimate and not the number that would be used for auditing or tax filing purposes*

Total Net Program

Income after expenses
2019

Total Net Program

Income after expenses
2020 (projected)

Difference Between 2019
and 2020 income
(indicate = if increase or -
if decrease)

11. Briefly explain the difference in 2019 and 2020 income, if necessary

12. A snapshot of your eligible COVID-19 Related Expenses and Income Losses - see instructions for calculating using the CCRSP/CCCAS Final Report Optional Calculation Worksheet or using your own format - *this is considered an estimate and not the number that would be used for auditing or tax filing purposes*

Estimated Total COVID-
Related Expenses

Estimated Total COVID-
Related Income Losses

Total Qualified COVID -
Related Expenses and
Income Loss (less
income)

13. Please estimate the percentage of CCRSP and CCCAS funds you allocated to each of the categories below. The total should equal 100% for each funding source.

	Income Losses	COVID-Related Non-Staff Expenses	COVID-Related Staff Expenses	Total %
CCRSP Round 1 and 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
CCCAS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

14. Please indicate what areas of your business were impacted and to what degree.

	Does not apply	No Impact	Minimal Impact	Moderate Impact	Major Impact
Income loss due to decision to close during early days of COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Does not apply	No Impact	Minimal Impact	Moderate Impact	Major Impact
Income loss due to lower enrollment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Income loss due to COVID outbreak of staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Income loss due to COVID outbreak of child(ren)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Income loss due to COVID related challenges for you or your family	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lower enrollment due to compliance with Public Health Guidelines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lower enrollment by families	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff lay-offs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inability to hire new staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff unable to return to work due to remote schooling their own children or other challenges at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increased COVID-related expenses for operations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increased general expenses due to COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents not able to pay part or all of tuition due to job loss	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inability to host fundraisers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Changes in state guidelines for Child Care related to COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program configuration (smaller groups, fewer children)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Need to care for school age children full day and provide remote learning access	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Please indicate the biggest challenges that impacted your program during the COVID-19

pandemic and to what degree.

	Does not apply	No Impact	Minimal Impact	Moderate Impact	Major Impact
Not having enough income to pay staff due to COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staffing shortages due to COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents having difficulty paying tuition due to COVID (work shutdowns, illness, school closures)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parents not needing child care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty accessing cleaning supplies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty accessing PPE (masks, gloves, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fear among staff and families around COVID, illness and child care settings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern over potentially having to close the business	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Schools not being in session	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maintaining enough income to stay in business	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maintaining enough income to pay for space and utilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Schools not being in session consistently or at all	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Finding a work/life balance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing more technical assistance around financial management and planning	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing more technical assistance with technology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Does not apply	No Impact	Minimal Impact	Moderate Impact	Major Impact
Ability to access or use technology (email, online surveys and forms)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confusion about the many funding sources loans vs. awards, rounds one and two, etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

16. Please indicate all the ways the ECCP Staff Incentives, CCRSP and CCCAS, Disaster, Absentee and School Age funding helped your program and to what degree between March 1 and December 30, 2020

	Uncertain or not applicable	Did not help at all	Helped somewhat	Helped quite a bit	Was a major help
Covered some of the COVID-related income losses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Covered all of our COVID-related income losses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Paid for some or all of our additional staffing costs related to COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Paid for some or all of our COVID-related expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Paid for some or all of our additions/changes we needed to make the program safer during COVID (e.g. plexi-glass barriers, separate play areas, individual toys or materials, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Kept our business operating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Supported families that couldn't pay some or all of their tuition expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prevented us from using all of our savings or reserve funds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increased general expenses due to COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. Looking towards the winter and spring, please indicate , for the following statements, whether you

agree, disagree, do not have an opinion or it does not apply.

	Strongly Agree	Agree	Somewhat Disagree	Strongly Disagree	Do not have an opinion, do not agree or disagree	Does not apply to me or my program
If we do not receive more financial assistance from outside sources, we are likely to shut down in the next three months	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If we do not receive more financial assistance from outside sources, we are likely to shut down in the next six months to a year	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If we do not receive more financial assistance from outside sources, we will continue operating, but at a reduced service level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If we do not receive more financial assistance from outside sources, we will exhaust our personal savings and/or business reserve within the next six months to a year	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We will be okay whether we receive additional financial assistance or not	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We were having financial challenges before COVID and now it is worse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We are facing a staffing crisis that could result in a partial or full shutdown due to COVID	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We were facing a staffing crisis before COVID and now it is worse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We are fully staffed and will likely continue to be	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Strongly Agree	Agree	Somewhat Disagree	Strongly Disagree	Do not have an opinion, do not agree or disagree	Does not apply to me or my program
Our enrollment is staying low due to COVID - parents not working	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Our enrollment is staying low due to COVID - children are attending school remotely so parents are staying home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We are having challenges meeting our families' needs for school age care during the day when children are attending remotely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Our enrollment is staying low due to following the DHHS Division of Public Health Group Size Guidelines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Our enrollment is remaining steady	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We have a waiting list	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We have or anticipate having a waiting list in the next 3 to 6 months	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We are worried our quality will suffer without added supports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If we do not get access to cleaning supplies, masks, gloves soon we will not be able operate safely	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We need more technical assistance in financial management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We need more technical assistance in technology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We will need more technical assistance with managing smaller programs and facing ongoing COVID challenges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Strongly Agree	Agree	Somewhat Disagree	Strongly Disagree	Do not have an opinion, do not agree or disagree	Does not apply to me or my program
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We are concerned our families will not be able to pay for child care over the next six months or year

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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We are concerned that our previously enrolled children will not return over the next 6 months or year

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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18. OPTIONAL RESPONSE - If you would like to share any stories, examples or reflections about the impact of COVID on your business, families, staff or the broader community along with creative solutions and ongoing challenges you faced or see having to face in the future, please feel free to write in this area. Please do not include identifying information about children, staff and family for confidentiality reason. YOU MAY SEND A SEPARATE EMAIL to Dianne.Chase@dhhs.nh.gov if you need more space or wish to include video or pictures (with appropriate releases). A satisfaction survey related to DHHS, Public Health, etc. will be distributed separately.