

# **RPG GRANTEE SEMI-ANNUAL ACF PERFORMANCE PROGRESS REPORT**

## **Appendix B - Program Indicators ACF-OGM-SF-PPR**

### **SF-PPR-OGM-B**

Appendix B of the semi-annual ACF performance progress report provides information on the programmatic and evaluation activities conducted by the grantee during the reporting period as well as activities planned for the next reporting period. Information from the report will be used by the Children's Bureau to meet grants management requirements and to inform the first annual report to Congress. Semi-annual progress reports are due within 30 days of the end of each 6-month reporting period.

Reporting Period 1: October 1 – March 31; Report Due: April 30

Reporting Period 2: April 1 – September 30; Report Due: October 31

Grantees are to submit their original Semi-Annual Progress Report electronically to the Grants Management Specialist (GMS) and their Federal Project Officer (FPO) through Grant Solutions.

An electronic courtesy copy (in either Word or PDF) of the report is to be submitted to your Cross-site Evaluation Liaison (CSL) and Program Management Liaison (PML) when you submit the electronic copy through Grant Solutions.

### **Suggested Report Format:**

**Grantee Name and Address:**

**Grant Number:**

**Period Covered by Report:**            through

**Principal Investigator or Project Director:**

**Report Author's Name and Telephone Number:**

**Name of Federal Project Officer:**

**Name of Grants Management Specialist:**

### **B-01. Major Activities and Accomplishments During This Period**

1. When (month/day/year) did or when do you plan to enroll your first client in RPG program services?

- In Table 1, list your enrollment goals for the reporting period; the number of participants enrolled in the services delivered as part of your RPG project or through your partnerships during this reporting period; and the total number of participants enrolled in the services delivered as part of your RPG project or through your partnerships to date.

Table 1. Enrollment Goals and Actual Enrollment

	Enrollment Goals During the Reporting Period	Actual Enrollment During the Reporting Period	Total Enrollment to Date
Adults			
Children			
Families			

- In Table 2, list the number of participants that have exited services, by exit reason (select the primary reason), during this reporting period and the total number of participants that have exited to date. *Specify the unit (e.g., families, children, biological mothers, etc.)*

Table 2. Reasons Participants Have Exited Services during this Reporting Period and To Date

Exit Reason	Exits During the Reporting Period	Total Exits To Date
Program Completed		
Declined Further Participation		
Moved Out of Service Area		
Unable to Locate		
Excessive Missed Appointments		
Child No Longer in Custody		
Other (please specify)		

- Have you added, changed, or discontinued any new evidence-based programs or practices (EBPs) since the last reporting period? If so, please use the table(s) in

Attachment B-01a to provide information about any new EBPs you plan to implement or are implementing. Complete one table for each new or changed EBP. Please use the list of EBPs previously included in your semi-annual progress reports, provided by Mathematica (Attachment B-01a, Table 1a).

5. Do you plan to or have you added, changed, or discontinued any other services, such as screening or case management, since the last reporting period? If so, please use the table(s) in Attachment B-01b to provide information for any additional services you plan to provide or are providing. Complete one table for each new or changed additional service. Please use the list of other services previously included in your semi-annual progress report, provided by Mathematica (Attachment B-01b, Table 1b).
6. Please describe whether you engaged in any of the following activities during this reporting period. After reporting period 1, please describe any updates regarding these activities.
  - a. If you have an implementation team to support RPG implementation, describe their key activities during this reporting period.<sup>1</sup>
  - c. To facilitate implementation of your project, did you have to engage with systems beyond your partner agencies (such as health care or early care and education)? If so, with what systems did you engage and why, and how did you coordinate services with these systems (if they provide services or otherwise work with your RPG participants)?
  - d. Did you monitor program implementation to determine if the project is being carried out as planned? For example, did you collect and analyze quality assurance or fidelity data? If so, please describe your monitoring process. Did you provide updates/briefings to your Steering or Oversight Committee or other leadership or partner group?
  - e. Have you added any new partners this reporting period? If so, please add information about each new partner to Table 1. Please use the list of partners included in your previous semi-annual progress reports, provided by Mathematica (Attachment 3).
  - f. Did you establish formal agreements (such as MOUs or data sharing agreements) with any agencies during this reporting period? If so, please add

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<sup>1</sup> An implementation team is a team of individuals focused on supporting the implementation of the EBP. The team may help increase the buy-in and readiness of staff, coordinate the supports staff may need to implement the EBP with fidelity, assess the fidelity of the implementation of the EBP, and problem-solve implementation challenges. (Metz, Allison and Leah Bartley. “Active Implementation Frameworks for Program Success: How to Use Implementation Science to Improve Outcomes for Children.” *Zero to Three*, March 2012, pp. 11-18).

information about each agency with whom you established a formal agreement to Table 3.

Table 3. Changes in Regional Partnership Membership and Formal Partnership Agreements Established This Reporting Period

Name of Agency (list agency name, not individual person)	Is this is a new or existing partner?	Primary contribution(s) to the RPG project	Did you establish a formal agreement with this agency?	Type of formal agreement (such as MOU, data sharing agreement)	Description of the content of the formal agreement

- g. Have any partners discontinued their involvement in the RPG project since the last reporting period? If so, describe why they are no longer involved and whether these changes will affect referrals, service delivery, or access to services in any way.
  - i. Describe how leadership (county, regional, and /or state) from substance use, child welfare, and the courts support or are engaged in the implementation of your project. How do you keepg them informed (such as joint meetings, individual briefings, memos)? Do you have a process for addressing cross-system challenges and barriers? If so, please describe it.
  - j. Have you engaged in any other significant programmatic activities during this reporting period? If so, please describe them.
7. Have the organizations or programs from whom you receive referrals for RPG changed since the last reporting period? Has the enrollment process changed since the last reporting period? If so, please describe these changes.
  8. Has the list of other community agencies or services to which you refer participants changed since the last reporting period? If so, please describe the changes. Do you track these referrals? Has your process for tracking referrals changed? If so, please describe the changes.
  9. Have the instruments or forms used to assess the needs of children, adults, or families who participate (or are targeted to participate) in your RPG program changed since the last reporting period? If so, please describe the changes. Has the organization that does the assessments changed since the last reporting period, or the way assessment information or results are used? If so, please describe these changes.
  10. Please describe any programmatic implementation successes (such as engaging and retaining families, expanding access to the services array to better address children and

family needs, improving family functioning and child well being, implementing trauma-specific services, and providing access to recovery support services) you have experienced during the reporting period. What innovations have you developed?

**B-04. Dissemination Activities**

11. What dissemination activities were conducted during the reporting period? Dissemination activities may include kickoff meetings or program launches; earned media such as a story in the local paper or other report in a news outlet that is not a paid advertisement or public service announcement; press release or public service announcement developed by your partnership; items on grantee’s or partnership’s website or in own publications; informational presentations or meetings with local organizations; other direct outreach to local organizations (e.g., emails, calls, delivery of brochures); or policy advocacy. How were your partners involved in these dissemination activities? Please place the information about each activity into Table 4.

Table 4. Dissemination Activities

Activity	Target audience	Number of target audience members reached/ materials distributed	Purpose	Results (Was your goal achieved? If so, describe.)	Partnersinvolved?	Additional comments

**B-06. Activities Planned for the Next Reporting Period**

12. Using Table 5, please list the key activities you plan to engage in over the next six months. In particular, please indicate if you plan to hire, train, or provide professional development to EBP staff, hold partnership meetings or activities, establish MOUs or other formal agreements with other organizations, or modify your RPG program. For each activity listed, please describe the activity and the organization(s) responsible.

Table 5. Planned Activities for Next Six Months

Activity	Description	Organization(s) Responsible for This Activity

## **B-02. Problems**

13. Please describe whether your project faced any of the following programmatic challenges or barriers that affected your ability to provide services as planned. For each describe how you addressed the barrier and your progress in resolving it.
  - a. Lower referrals than expected
  - b. Inability to enroll intended target population (please describe how the population you are reaching differs from your intended target population)
  - c. Longer than anticipated program enrollment periods due to the complex needs of families or other reasons
  - d. Staffing challenges, such as finding or retaining qualified grantee or partner agency staff (particularly for implementing EBPs), .
  - e. Challenges implementing EBPs (please indicate which EBP(s))
  - f. Challenges sharing information or data with partners or other issues related to engagement with partners
  - g. Challenges coordinating case management or services with partners or other entities
  - h. Challenges collaborating with RPG partners
  - i. Other challenges

## **B-05. Other Activities**

18. Describe any project changes that require federal approval (such as a change in budget, project director, or other key staff that were made during this reporting period and the reason for the change. Include changes you have discussed with your FPO or GMS.

21. If applicable, describe how you have used (or plan to use) information and knowledge gained from the most recent RPG Grantee Meeting, including any pre-conference meetings (such as evaluators meeting or clinical workshops), to enhance or strengthen your partnership or program. Include, for example, how information was used to improve services for your clients, enhance client engagement and retention, expand or strengthen your cross-systems collaborative relationships, enhance the measurement of your program's performance and outcomes, develop or advance sustainability planning, improve program management, or enhance any other related efforts to affect overall program results.
22. Please answer the following two questions related to evaluation activities:
- What main activities for your local evaluation or the cross-site evaluation did the project engage in during the reporting period?
  - Using Table 6, list the key evaluation activities you plan to engage in over the next six months. For each activity listed, provide a description of the activity and the organization(s) responsible.

Table 6. Planned Evaluation Activities for Next Six Months

Evaluation Activity	Description	Organization(s) Responsible for This Activity

- Please describe any evaluation challenges or barriers encountered during the reporting period and their effect on the evaluation. For each please describe how you addressed the barrier and your progress in resolving it.

**B-03. Significant findings and events.**

23. Describe any significant changes in your state or service area that have affected or may affect your project or the program outcomes you are measuring in your evaluation. (This could include things such as the implementation of other child welfare or substance abuse treatment initiatives, policies or programs; events in the community such as a child death or high profile case that might impact caseloads; changes in judicial officers who hear dependency cases if relevant to your program); changes in agency or community leadership; implementation of other new legislation, policies or procedures that affect your program or target population; changes in child welfare or substance use trends; or other related community developments.
24. Has your program experienced any significant challenges during the reporting period as a result of the current fiscal environment? If so, please provide specific examples of how the fiscal environment has adversely impacted your program (such as reductions or changes in child welfare, substance use treatment or other staffing that affects service

delivery, decreased referrals to your program, reductions or loss of funding sources, etc.).

25. Has your program gained any new sources of funding during the reporting period? If yes, please list the new sources of funding and describe how the funds will be used to support your RPG project.
26. In Table 7, indicate whether your program became involved in any other federal initiatives during the reporting period. If your agency is the lead grantee, enter “G;” if the activity involves one of your key partners, enter “P.”

Table 7. Involvement in Other Federal Initiatives

G/P	Initiative	G/P	Initiative
	Comprehensive Support Services for Families Affected by Substance Abuse and/or HIV/AIDS		Tribal Court Improvement
	Family Connection Grants: Child Welfare/TANF Collaboration in Kinship Navigation Programs		Partnerships to Demonstrate the Effectiveness of Supportive Housing for Families in the Child Welfare System
	Family Connection Grants: Comprehensive Residential Family Treatment Projects		Initiative to Improve Access to Needs-Driven, Evidence-Based/Evidence-Informed Mental and Behavioral Health Services in Child Welfare
	Family Connection Grants: Combination Family Finding/Family Group Decision Making		Integrating Trauma-Informed and Trauma-Focused Practice in Child Protective Service (CPS) Delivery
	Child Welfare-Education System Collaboration to Increase Educational Stability		Abandoned Infants Assistance Act: Comprehensive Support Services for Families Affected by Substance Abuse and/or HIV/AIDS
	Child Welfare-Early Education Partnerships to Expand Protective Factors for Children with Early Child Welfare Involvement		Child Welfare Waiver Demonstration Projects
	Tribal IV-E Plan Development Grants		Other Children’s Bureau or other federally-funded initiative. Please specify.