

RPG2 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 this 6-month 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. PLEASE NOTE THAT THIS IS AN UPDATED VERSION (4) OF THE SAPR FOR USE BEGINNING WITH THE REPORT DUE OCTOBER 31, 2014.

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 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. **Please submit Word files if possible, and do not submit scanned documents unless absolutely necessary.**

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. Have you enrolled your first participant in RPG program services? If not, when (month/year) do you plan to do so?
2. In Table 1, report what your enrollment goals were for this reporting period; the number of cases, and adults and children within cases who enrolled in the services delivered as part of your RPG project or through your partnerships during this reporting period; and the total, cumulative number of participants enrolled in the services delivered as part of your RPG project or through your partnerships to date. Note: The **RPG Case** refers to the family, household, or group of individuals enrolling in RPG services as a unit.

Table 1. Enrollment Goals and Actual Enrollment

| | Enrollment Goals During the 6-month Reporting Period | Actual Enrollment During the 6-month Reporting Period | Total Enrollment to Date |
|----------|--|---|--------------------------|
| Cases | | | |
| Adults | | | |
| Children | | | |

3. In Table 2, list the number of cases that have exited services, by exit reason (select the primary reason), during this reporting period and the total number of cases that have exited to date. Please only include exits in which all parties in the case have exited (e.g., child, parent, and foster parent).

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

| Primary Reason for Exit | Total Cases that Exited During the 6-month Reporting Period | Total Cases Exited 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 describe) | | |

4. Have you added, changed, or discontinued any evidence-based programs or practices (EBPs) since the last reporting period? If so,

please use the table 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 list any EBPs you have discontinued, and describe why it was discontinued or will no longer be available to RPG participants.

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 list any services you have discontinued, and describe why it was discontinued or will no longer be available to RPG participants.
6. Please describe whether you engaged in any of the following activities since the last reporting period.
 - a. If you have an implementation team to support RPG implementation, describe their key activities during this reporting period.¹
 - b. During this reporting period, did you engage with systems beyond your partner agencies (such as health care or early care and education) to facilitate implementation of your RPG project? If so, with what systems did you engage and why? If these systems provide services or work with your RPG participants, please describe the services and how did you coordinate services with these systems?
 - c. During this reporting period, did you monitor program implementation to determine if the RPG project or an EBP 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 based on the monitoring information to your Steering or Oversight Committee or other leadership or partner group during this reporting period?

¹ 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).

- d. Have you added any new partners during this reporting period? If so, please identify each new partner in Table 3 below.
- e. Did you establish new formal agreements (such as MOUs or data sharing agreements) with any agencies during this reporting period? If so, please list each agency with whom you established a formal agreement in Table 3, and describe the agreement.

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

| Name of Agency (list agency name, not individual person) that was added to your RPG partnership or with whom you established a formal agreement | 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 purpose/content of the formal agreement |
|---|---------------------------------------|--|--|--|--|
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- f. Have any partners discontinued their involvement in the RPG project since the last reporting period? If yes, please list each discontinued partner, describe why each one is no longer involved, whether the change will affect referrals, service delivery, or access to services in any way and, if so, how.
 - g. Describe how leadership (county, regional, and /or state) from substance use, child welfare, and the courts has been involved in your program during this reporting period.
 - h. Please describe the significant programmatic activities during this reporting period.
7. Have the organizations or programs from which you receive referrals for RPG changed since the last reporting period? If yes, please describe these changes. Has the enrollment process

changed since the last reporting period? If so, please describe the change.

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, including identifying the assessment instruments dropped or added. 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 the major successes you achieved in implementing or operating your RPG project since the last reporting period (challenges are discussed later in the report). How did you achieve them? What innovations have you developed, if any?
11. Please summarize the status of your sustainability plans and any sustainability activities during this reporting period. Include successes, challenges, and your assessment of whether you will be able to sustain all or part of your program after RPG funding ends.

B-04. Dissemination Activities

12. What dissemination activities were conducted during this 6-month reporting period? ² 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/ | Purpose | Results (Was your goal achieved? If so, describe.) | Partners involved? | Additional comments |
|----------|-----------------|--|---------|--|--------------------|---------------------|
| | | | | | | |

² 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); policy advocacy, or conference presentations.

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|--|--|-----------------------|--|--|--|--|
| | | materials distributed | | | | |
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B-06. Activities Planned for the Next Reporting Period

13. Using Table 5, please list the key activities you plan to engage in over the next six months, including, but not limited to, whether 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 |
|----------|-------------|---|
| | | |
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B-02. Problems

14. Please indicate whether your project faced any of the following programmatic challenges or barriers that affected your ability to provide services as planned. For each problem you faced, please describe how you addressed the barrier and your progress in resolving it.

- a. Lower referrals or enrollment 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 (such as difficulties engaging and/or retaining program participants or other challenges)

B-05. Other Activities

- 15. Were any project changes that require federal approval (such as a change in budget, project director, or other key staff) made during this 6 month reporting period? If so please describe the change and the reason for the change. Include changes you have discussed with your FPO or GMS.
- 16. Have you 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), in your partnership, program, or evaluation? If so, please describe how you have used the information or plan to do so. Include, for example, how information affected services for your clients, client engagement and retention, your cross-systems collaborative relationships, the measurement of program performance and outcomes, sustainability planning, program management, or other efforts related to overall program results.
- 17. Please answer the following questions related to evaluation activities:
 - a. What main activities for your local evaluation or the cross-site evaluation did the project engage in during this 6-month reporting period?

- b. Using Table 6, describe 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 |
|---------------------|-------------|---|
| | | |
| | | |
| | | |

- c. Please describe any challenges or barriers related to your local evaluation or the cross-site evaluation encountered during this 6-month reporting period. How did they affect your participation in the cross-site evaluation and/or your local evaluation? For each please describe how you addressed the barrier and your progress in resolving it.

B-03. Significant findings and events.

18. Describe any significant changes in your state or service area during this 6-month reporting period that have affected or may affect your project or the program outcomes you are measuring in your evaluation.³
19. Has your program experienced any significant challenges during this 6-month 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.).
20. Has your program gained any new sources of funding during this 6-month reporting period? If yes, please list the new sources of funding and describe how the funds will be used to support your RPG project.

³ Significant challenges 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.

21. In Table 7, indicate whether your program became involved in any other federal initiatives during this 6-month 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. |