INSTRUMENT #3

PREP PERFORMANCE REPORTING SYSTEM DATA ENTRY FORM

AUGUST 6, 2020

The 98 estimated grantees will report measures on participant demographics, behaviors, intentions, and perceived effects; attendance, reach, and dosage; implementation challenges and needs for technical assistance; and structure, cost, and support for program implementation. The contractor (Mathematica) will develop tools grantees can use to aggregate data originating from sub-awardee providers and to organize all of the performance measures data elements to facilitate entry into the national system. However, these tools are considered voluntary and to be used at the discretion of the grantees. Grantees may elect to use alternative means to collect and aggregate the data that will be submitted. The only requirement is that all grantees enter the required measures into the national system systematically, and for that they will use an online form that contains all of the items in this instrument.

Measures of Demographics and Behaviors Collected at Program Entry

REPORT PERIOD	[reporting period]
Grantee:	Enter grantee name
Provider:	Enter provider name
Program:	Enter program name

	Enter Count		Enter Count
Total Entry Surveys Completed (Middle School):		Total Entry Surveys Completed (High School or Older):	
Total Entry Surveys completed using the original intended mode of data collection (Middle School):		Total Entry Surveys completed using the original intended mode of data collection (High School):	
Total Entry Surveys completed using an alternative mode of data collection due to COVID-19 (Middle School):		Total Entry Surveys completed using an alternative mode of data collection due to COVID-19 (High School):	

Did the program have to stop collecting Entry Survey data due to COVID-19?	Y/N
Did the program change their mode for collecting Entry Survey data due to COVID-19? For	Y/N
example, did the mode shift to online, phone, or mail due to COVID-19?	
If yes: what mode(s) of data collection did the program shift to due to COVID-19?	
MARK YES OR NO FOR EACH	
Online, web-based survey	Y/N
Telephone survey	Y/N
Mail survey	Y/N
Other (specify:)	Y/N

THE PAPERWORK REDUCTION ACT OF 1995

Public reporting burden for this collection of information is estimated to average 14 to 18 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Measures of Demographics, Intentions, and Perceived Effects Collected at Program Exit

REPORT PERIOD	[reporting period]
Grantee:	Enter grantee name
Provider:	Enter provider name
Program:	Enter program name

	Enter Count		Enter Count
Total Exit Surveys Completed		Total Exit Surveys Completed (High	
(Middle school):		school and older):	
Total Exit Surveys completed using		Total Exit Surveys completed using the	
the original intended mode of data		original intended mode of data	
collection (Middle School):		collection (High School):	
Total Exit Surveys completed using		Total Exit Surveys completed using an	
an alternative mode of data collection		alternative mode of data collection due	
due to COVID-19 (Middle School):		to COVID-19 (High School):	

Did the program have to stop collecting Exit Survey data due to COVID-19?	Y/N
Did the program change their mode for collecting Exit Survey data due to COVID-19? For	Y/N
example, did the data collection mode shift to online, phone, or mail due to COVID-19?	
If yes: what mode(s) of data collection did the program shift to due to COVID-19?	
MARK YES OR NO FOR EACH	
Online, web-based survey	
Telephone survey	Y/N
Mail survey	
Other (specify:)	

		Enter Count			Enter Count
	Age 10			Male	
	Age 11		Sex	Female	
	Age 12		Ň	Total	
	Age 13			Missing	
	Age 14				
a.	Age 15		Language(s) spoken at home	English	
Age	Age 16			Spanish	
	Age 17 [*]			Other:	
	Age 18 [*]		gué t h	Total	
	Age 19*		an,	Missing	
	Age 20 or older [*]		D L		
	Total		sbe		
	Missing				

Enter

			Count
	C	Yes	
ani	No		
	isp Lat	Total	
	H T	Missing	

	American Indian or Alaska Native	
	Asian	
	Black or African American	
	Native Hawaiian or Other Pacific Islander	
Race	White or Caucasian	
	Total	
	Missing	

	Living with family [parent(s), guardian, grandparents, or other relatives]	
	In foster care, living with a family	
	In foster care, living in a group home	
	Couch surfing or moving from home to	
	home	
su	Living in a place not meant to be a	
tio	residence, such as outside, in a tent city or	
Vulnerable Populations	homeless camp, in a car, in an abandoned	
ıdo	vehicle, or in an abandoned building	
εP	Staying in an emergency shelter or	
pld	transitional living program	
era	Staying in a hotel or motel	
ulu	In juvenile detention, jail, prison or	
٨١	another correctional facility, or under the	
	supervision of a probation officer	
	None of the above	
	Total	
	Missing	
	Total (unduplicated) youth in foster care	
	Total (unduplicated) runaway or homeless	
	youth	
	Total (unduplicated) youth in adjudication	
	system	

		Count
	Grade 5⁺	
	Grade 6 ⁺	
	Grade 7 ⁺	
[Grade 8⁺	
	Grade 9	
	Grade 10 [*]	
	Grade 11 [*]	
	Grade 12 [*]	
	School does not assign grade levels	
	Dropped out of school and is not	
le	working on getting a high school	
Grade	diploma or GED*	
9	Working toward GED [*]	
	Has high school diploma or GED but	
	is not currently enrolled in college or	
	technical school*	
	Has high school diploma or GED and	
	is currently enrolled in college or	
	technical school [*]	
	Not currently enrolled in school ⁺	
	the cartenty enoned in school	
	Total	
	Missing	

Enter Count

Measures of Demographics, Intentions, and Perceived Effects

Collected at Program Exit

REPORT PERIOD	[reporting period]
Grantee:	Enter grantee name
Provider:	Enter provider name
Program:	Enter program name

			Er	iter C	ount		
Enter the number of respondents who report the program made them much more, somewhat more, about the same, somewhat less, or much less likely to exhibit the following adult behaviors or sexual activities.	Much more likely	Somewhat more likely	About the same	Somewhat less likely	Much less likely	Missing	Total
Resist or say no to peer pressure							
Manage emotions in healthy ways							
Work together to find a solution when disagree with a friend							
Choose to spend time with friends that keep them out of trouble							
Make decisions to not use drugs and alcohol							
Be respectful of others							
Think about the consequences before making a decision							
Make plans to reach their goals							
Care about doing well in school							
Graduate high school or get GED							
Get more education and/or training after high school or completing GED							
Get a steady full-time job after school							
Save money to get things they want							
Feel confident about how to open a bank account							
Feel confident about how to prepare a budget							
Feel confident about how to track expenses							
Understand the costs associated with raising a child							
Talk with parent, guardian, or caregiver about things going on in their life							
Talk with parent, guardian, or caregiver about sex							
Feel comfortable talking with parent, guardian, or caregiver about sex							
Speak up or ask for help if being bullied in person or online, via text,							
while gaming, or through other social media							
Speak up or ask for help if others were being bullied in person or							
online, via text, while gaming, or through other social media							
Better understand what makes a relationship healthy							
Look for information and resources about dating violence							
Resist or say no to someone they are dating or going out with if they							
pressure them to participate in sexual acts							
Talk to a friend if someone they are dating or going out with makes							
them uncomfortable, hurts them, or pressures them to do things they don't want to do							
Talk to a trusted adult if someone they are dating or going out with							

	_	_	E	nter C	ount		
Enter the number of respondents who report the program made them much more, somewhat more, about the same, somewhat less, or much less likely to exhibit the following adult behaviors or sexual activities.	Much more likely	Somewhat more likely	About the same	Somewhat less likely	Much less likely	Missing	Total
makes them uncomfortable, hurts them, or pressures them to do things they don't want to do							
Talk to a trusted adult if someone other than the person they are							
dating or going out with makes them uncomfortable, hurts them, or pressures them to do things they don't want to do							

Enter Count

How true is each statement:	Not true at all	Somewhat true	Very true	Missing	Total
Plans to delay having sexual intercourse until graduates high school or receives GED					
Plans to delay having sexual intercourse until graduates college or completes another education or training program					
Plans to delay having sexual intercourse until married					
Plans to be married before having a child					
Plans to have a steady full-time job before getting married					
Plans to have a steady full-time job before having a child					

				Enter (Count	
					No	
					response	
					because	
					completed	
					middle	
					school	
			Not		version of	
	Yes	No	sure	Missing	survey	Total
As a result of being in the program, plans to abstain						
from sexual intercourse for at least the next 3						
months*						

				En	ter Count	:		
How important are each of these reasons in respondent's decision to not have sex for at least the next 3 months:	Not at all important	Not too important	Somewhat important	Very important	Question does not apply because they plan to abstain for next	No response because completed middle	Missing	Total
How it might affect plans for the future [*]								
Possible emotional consequences (for example, feeling sadness or regret) [*]								
Possible social consequences (for example, get a bad reputation or have rumors spread about you, have to deal with drama, make your relationship with someone you are dating or going out with worse, or get in trouble with your parents)*								
Risk of getting a sexually transmitted infection (STI) *								
Risk of getting pregnant or getting someone pregnant*								

Enter the number of respondents who report the program made them much more, somewhat more, about the same, somewhat less, or much less likely to exhibit the following behaviors.	Much more likely	Somewhat more likely	About the same	Somewhat less likely	Much less likely	Missing	Question does not apply because	No response because completed middla cahaal vareian af eurvav	Total
Have sexual intercourse in the next 3 months [*]									
Use (or ask your partner to use) a condom if having sexual intercourse in the next 3 months [*]									
Use (or ask your partner to use) birth control <u>other</u> than condoms if having sexual intercourse in the next 3 months*									

Enter Count

Measures of Demographics, Intentions, and Perceived Effects Collected at Program Exit

REPORT PERIOD	[reporting period]
Grantee:	Enter grantee name
Provider:	Enter provider name
Program:	Enter program name

			Enter	Count	t	
Enter the number of respondents who assessed their program experience according to the scale to the right. How often in this program	All of the time	Most of the time	Some of the time	None of the time	Missing	Total
Felt interested in program sessions and classes						
Felt the material presented was clear						
Felt discussions or activities helped to learn program lessons						
Had a chance to ask questions about topics or issues that came up in the program						
Felt respected as a person						
Were picked on, teased, or bullied						
Any youth were picked on, teased, or bullied						

	_	_	Enter	Count	t	
Enter the number of respondents who assessed their program experience according to the scale to the right. How satisfied were they with	Very satisfied	Somewhat satisfied	A little satisfied	Not at all satisfied	Missing	Total
The amount of information they received about abstaining from sex						
(choosing to not have sex)						
The amount of information they received about condoms and birth control						

Measures of Attendance, Reach, and Dosage

REPORT PERIOD	[reporting period]
Grantee:	Enter grantee name
Provider:	Enter provider name
Program:	Enter program name

Enter the number of youth during the reporting period who: Total Before Since Reach (unduplicated) COVID-19 COVID-19 Attended at least one program session Number of middle school participants Number of high school participants Attended a session in school during school Attended a session in school after school **Program Setting** Attended a session in a community-based organization Attended a session in a clinic Attended a session in a foster care setting Attended a session in a juvenile detention center Attended a session in a residential mental health treatment facility Attended a session online¹ Attended a session in another setting Indicate whether more than 50 percent of youth Majority nonulation attending the program were: In foster care Homeless or runaway Pregnant or parenting In adjudication systems Attendance/ dosage Enter the appropriate count below The number of youth who completed at least 75 percent of scheduled program hours

¹¹Online includes any programming that is facilitated online rather than by an in-person facilitator, regardless of the physical setting where participants are located

Enter Count

Measures of Attendance, Reach, and Dosage

REPORT PERIOD			[reporting period]								
Grantee:			Enter grantee name								
Provider:	Provider:		Ente	er prov	vider 1	name					
Program:			Ente	er prog	gram i	name					
-	~										
					Coh	ort:					
	1	2	3	4	5	6	7	8	9	10	
Enter a unique identifier for each cohort that received the program during this reporting period.											
For those cohorts that completed the program during the reporting period, how many hours of											
programming, overall, were delivered?											
Did PREP programming end prematurely for this cohort due to COVID-19?											
(Y/N)											
If programming for this cohort ended prematurely due to COVID-19, enter the number of intended											
program hours that were delivered to the cohort at the time implementation ended.											
Did PREP program implementation shift from in-											
person to online programming for this cohort due to COVID-19? (Y/N)											
If programming for this cohort shifted to an online format, enter the percent of participants who shifted											
to online PREP programming. (If an exact percent is											
not readily available, please enter your best estimate.)											

Measures of Implementation Challenges and Needs for Technical Assistance

REPORT PERIOD	[reporting period]
Grantee:	Enter grantee name
Provider:	Enter provider name

Use the scale at the right to indicate how provider assessed the implementation challenges below.	Not a Problem	Somewhat a problem	A serious problem
Recruiting youth			
Keeping youth engaged			
Getting youth to attend regularly			
Recruiting qualified staff			
Ensuring facilitators understand content			
Covering program content			
Staff turnover			
Negative peer reactions			
Youth behavioral problems			
Natural disasters			
Program facilities			
Obtaining buy-in or support from key stakeholders			

Use the scale at the right to indicate if the provider has expressed interest in receiving technical assistance for the implementation factors below.	Not interested, already rereived	Not Interested	Somewhat Interested	Very Interested
Recruiting youth				
Keeping youth engaged in program sessions				
Getting youth to attend regularly				
Recruiting qualified staff				
Training facilitators				
Retaining staff				
Minimizing negative peer reactions				
Addressing youth behavioral issues				
Obtaining buy-in or support from key stakeholders				
Evaluation (e.g., how to select or manage an evaluator, data collection, data analysis,				
and report writing)				
Parent support and engagement				
Other				

Measures of Structure, Cost, and Support for Program Implementation

REPORT PERIOD	[reporting period]
Grantee:	Enter grantee name

PREP Operational Status Related to COVID-19	
Did your PREP program experience any interruptions of operations or services due to	
COVID-19?	Y/N
If yes:	Number of months:
For how long did the program experience interruptions of operations or services due to COVID-19?	
Were your operations able to resume to full pre COVID-19 capacity?	Y/N
If not, what is the percent capacity of operations at present?	%

PREP Funding	
Total amount of PREP grant funding obligated (including any rollover funds) during	
[reporting period]	\$
Of that total, percentage obligated for:	
Direct service provision (youth programming)	%
 Training, technical assistance, and monitoring conducted at the grantee level 	%
Evaluation and/or research	%
Retained for administrative purposes at the grantee level	%

Grantee Staffing	Count
Number of grantee staff involved in overseeing PREP before COVID-19 occurred	
Did the number of staff involved in overseeing PREP decrease due to COVID-19?	Y/N
If yes: how many staff were affected?	
Number of grantee FTEs involved in overseeing PREP before COVID-19 occurred	
Did the number of FTE involved in overseeing PREP decrease due to COVID-19?	Y/N
If yes: how many FTE were affected?	

Grantee Observation, Training and Technical Assistance	(Y/N)
Grantee or its designee observed program delivery to monitor quality and fidelity to	, ,
program models	
Type of organization that conducted observations (mark all that apply):	
• Grantee	
• Developer	
 Training or technical assistance partner 	
• Evaluation partner	
Program provider	
Grantee or its designee provided technical assistance to support program implementation	
Type of organization that provided technical assistance (mark all that apply):	
• Grantee	
• Developer	
 Training or technical assistance partner 	
Evaluation partner	
Program provider	
Grantee or its designee conducted training of facilitators who deliver the program (or of	
other staff who might train facilitators)	
Type of organization that conducted program facilitator training (mark all that apply):	
• Grantee	
• Developer	
 Training or technical assistance partner 	
• Evaluation partner	
 Program provider 	

Provider Count	Count
Number of providers funded	
Number of new providers	

Measures of Structure, Cost, and Support for Program Implementation

REPORT PERIOD	[reporting period]
Grantee:	Enter grantee name
Provider:	Enter provider name

	Amount
PREP award amount (for current reporting period only)	\$
Amount of non-PREP funding received during current reporting period to support	
PREP programming	\$

	(Y/N)
Is provider new for the [reporting period]?	
Did provider serve youth during the [reporting period]?	

	Count
Number of PREP facilitators working for provider	
Number of PREP facilitators trained in delivering core program model	
Number of PREP facilitators observed once	
Number of PREP facilitators observed twice or more	

Measures of Structure, Cost, and Support for Program Implementation

REPORT PERIOD	[reporting period]
Grantee:	Enter grantee name
Provider:	Enter provider name
Program:	Enter program name

Program Delivery			
Program model implemented			
Number of intended program delivery hours			

Indicate which, if any, of the following youth groups are target populations for the provider's program		
Target Population	Youth in foster care	
	Homeless or runaway youth	
	Youth living with HIV/AIDS	
	Pregnant or parenting youth	
	Hispanic/Latino youth	
	African American youth	
	Native American youth	
	LGBTQ youth	
	Youth in adjudication systems	
	Male youth	
	Youth in high-need geographic areas	
	Out of school or dropout youth	
	Youth in residential treatment for mental health issues	
	Trafficked youth	

Indicate which of the following adulthood preparation subjects (APS) are covered by the program		Y / N
p u "	Healthy relationships	
	Adolescent development	
Adulthood Preparation Subjects	Financial literacy	
dult epa Subj	Parent child communication	
Pr A	Educational and career success	
	Healthy life skills	

For each APS selected, indicate whether content is (mark all that apply):		Y / N
of od ion ts tt	Included in the program's evidence-based or evidence-informed APP curriculum	
Source o Adulthoo Preparati Subjects Content	Covered by incorporating an entire additional existing curriculum	
	Covered by adding selected lessons from another existing curriculum	
	Covered by original content that we or a partner organization created	