

# ACL Traumatic Brain Injury State Partnership Grants Performance Progress Reporting (PPR) Tool Guidance Document

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## Purpose and General Instructions

ACL designed the Performance Progress Reporting (PPR) system to provide opportunities for Traumatic Brain Injury State Partnership Program grantees to submit information about the activities they are carrying out using grant funds. ACL's primary purpose for requesting this information is to understand how TBI State Partnership Program grantees use grant funds and the impact these funds have across all participating states.

The questions included in this report are the ones ACL would like all grantees to be able to answer in the future, to the extent they are applicable to the grantees' work. However, ACL understands that grantees have different reporting capacities and may not be able to respond to every question. Grantees are encouraged to report as comprehensively as they can and use the notes fields to describe the data they report as needed so ACL can interpret it correctly. Grantees should only report on data that directly connect to their current grant activities.

Grantees should focus on reporting about the activities that are funded with **program funds only**. Program funds are defined as those funds awarded to the grantee by ACL plus any funds or other resources (e.g., facilities, staff time) used as the required match for the grant award. Grantees should not report activities that program funds do not support—even if they are related to other program-funded activities. If a mixture of grant funds and funds from other sources are used to carry out an activity, grantees should report on that activity in the most appropriate way they can. For example, if grant funds and other funds are blended together and the people being reached with these funds include a mix of people with TBI and others, grantees may report about these activities in different ways. Noted below are two scenarios:

**Scenario 1:** One grantee may be able to access data from all funded partners and report the total number of people with TBI reached or served with grant funds.

**Scenario 2:** Another grantee may only have data about the total number of people served including people with TBI and others and cannot distinguish between those reached with grant funds and other funds.

Both grantees in Scenarios 1 and 2 should report the data they have about the people reached and use the notes field to describe the parameters and limitations of their data as appropriate.

The PPR data will be reported using the *Verity Analytics ACL TBI Performance Progress Reporting Application*, referred to as the online reporting system throughout this document. Grantees can use the PDF version of the PPR to help plan for their electronic submission.

Grantees will enter their reporting data semiannually (every six months). At the end of the project period, grantees will submit a final report, which will be a culmination of all the grant years.

## Definitions of Terms

Below are definitions for the most commonly used terms in the PPR, presented in alphabetical order.

**Funded Partner:** Partners who receive grant funds and partners who use funds that have been designated as state matching funds.

**I&R/A Contact:** Information and Referral/Assistance, generally defined as an individual contact made by a consumer, caregiver, or professional by telephone or as a walk-in, email, or in-person support. I&R/A differs from resource facilitation in that there is not typically a “case” established and the support is considered a one-and-done interaction; however, individuals may make use of the support more than once.

**ICFs/MR:** Intermediate Care Facilities for Individuals with Intellectual Disabilities. This is a disability benefit that is offered through Medicaid funding.

**Integrated Employment:** Competitive jobs held by people with TBI in typical workplace settings where the majority of persons employed are not persons with disabilities.

**Program Funds:** Funds provided by ACL as well as state matching funds.

**Subawarded Partners:** Partner organizations to whom ACL grantees provide a portion of their grant funding to facilitate their implementation efforts.

**Unduplicated People:** The number of distinct individuals.

## A. Grant Activities — All grantees respond on grant-funded activities only

*This section must be completed by all grantees. Within Section A, grantees should identify the activities they are carrying out using program funds as outlined in their grant work plan. In subsequent sections, grantees will report further about the areas of activity they select. Grantees do not have to report further about activities that are not selected.*

1. Within the online reporting system, the responses to this question will determine which additional reporting sections are required for the PPR. For example, if you indicate that you performed screening activities during the reporting period, the Screening Reporting Section will appear in the navigation menu, and you will be prompted to respond to the questions in that section.

For the optional activities (“Other”), you should select only those activities that are carried out by the lead grantee agency using program funds or by a partnering agency funded by the lead agency with grant funds. Do not select an activity, even if it is being carried out in your state, if it is funded entirely by other sources.

Please note that “program funds” refers not only to funds provided by ACL but also to state matching funds.

Please review the following examples to help determine which activities you should select in Question 1.

**Example 1:** The lead grantee agency uses TBI State Partnership Program funds from ACL to support provision of I&R/A to their grant’s target population. Grantee should select I&R/A from answer options.

**Example 2:** The lead grantee agency uses program funds from ACL to pay another entity to support provision of I&R/A to their grant’s target population. Grantee should select I&R/A from answer options.

**Example 3:** The lead grantee agency does not use program funds from ACL to support provision of I&R/A, but they are using funds designated as state matching funds for this grant for I&R/A. Grantee should select I&R/A.

**Example 4:** The lead grantee agency coordinates closely with another entity in the state that provides I&R/A for people with TBI. This entity is a partner and a collaborator, but they do not use grant funds to provide I&R/A. They may receive grant funds to work on other activities, but they do not use any program funds (direct or matching) to provide I&R/A. Grantee should NOT select I&R/A.

2. Identify whether you targeted or limited some or all your grant activities to support people in a particular setting or population during the reporting period. If all activities are designed to support all people with TBI more generally in the state, then “No” should be selected and go to Q4 (the online system will do this automatically). But if all or some of your activities were

targeted to specific settings/populations, then select “Yes” and proceed to Q3 (the online system will do this automatically).

3. If you selected “Yes” in response to Q2, please identify the populations or settings that were targeted during this reporting period. Select all that may apply.
4. Please estimate to the best of your ability. In the online reporting system, the percent (%) of counties targeted and reached will be auto calculated and it is based on the total number of counties in the state.
5. Select “Yes” if your project promoted the use of any evidence-based practices, interventions, or programs as part of your grant activities during this reporting period. Programs should meet the **ACL Definition of Evidence-Based Programs<sup>1</sup>**:
  - Demonstrated through evaluation to be effective for improving health and well-being or reducing disease, disability and/or injury; *and*
  - Proven effective using Experimental or Quasi-Experimental Design;\* *and*
  - Research results published in a peer-review journal; *and*
  - Fully translated\*\* in one or more community site(s); *and*
  - Includes developed dissemination products that are available to the public.

*\*Experimental designs use random assignment and a control group. Quasi-experimental designs do not use random assignment.*

*\*\* “fully translated in one or more community sites” means that the evidence-based program in question has been carried out at the community level (with fidelity to the published research) at least once before.*

6. Please identify the evidence-based practices, interventions, or programs promoted as part of your grant activities during this reporting period.
7. This question is not mandatory; it is intended to give you a space to describe efforts that might not be reflected in the existing activity framework.

## B. Partnership Activities (all grantees respond)

*This section must be completed by all grantees.*

8. For **8a and 8b**, this information will be auto populated in the online system but can be edited as needed. You will need to select what type of organization is appropriate for the lead organization.

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<sup>1</sup> Based on: <https://acl.gov/programs/health-wellness/disease-prevention#future>

9. For 9, only include partners that receive program funds for grant-funded activities (i.e., funded partners). “Program funds” refers to not only funds provided by ACL but also to state matching funds. “Community-Based Services Organization (e.g., CAA, ADRC, AAA, CIL)” includes other non-profit organizations. Select all types of organizations represented by your funded partners.
10. You may have a dozen or more organizations represented on your Advisory Council. For this question, please include only those organizations you see as key or strategic partners in your recent and current grant-funded systems change work. Organizations should be considered unfunded partners if you work with them regularly to coordinate grant-related activities, co-sponsor activities with them, and/or routinely collaborate with them (outside of Advisory Council meetings) in furtherance of your grant goals but they do not use program funds. “Community-Based Services Organization (e.g., CAA, ADRC, AAA, CIL)” includes other non-profit organizations. Please select all categories of unfunded partners that may apply. If there were unfunded partners that do not fit easily into one of the categories provided, report them in one of the “Other” categories and provide an appropriate description.
11. This question is not mandatory.

## C. Planning and Infrastructure (all grantees respond)

*Within the online reporting system, only the grantees that checked off this activity in Section A (Grant Activities) will receive this section for completion.*

12. Please check all of the characteristics that apply to your advisory council. This question will auto-populate after it has been responded to the initial time; please review this information at each reporting period and edit the response as needed.
13. Please check all that apply.
14. Please check all that apply.
15. This question is to help ACL learn more about the efforts grantees are taking to ensure that their advisory boards are representative of the communities being served by the TBI SPP program in their state. In 15a, please describe what it means for your advisory board/council to be representative for your program. For example, some states may be attempting to ensure that their advisory boards reflect state demographics; others may be more focused on representation from individuals with different levels of severeness of injury. 15a is where you identify what type(s) of representativeness you are trying to achieve. In 15b, please briefly describe what efforts or actions your program is doing to ensure that representativeness identified in 15a is achieved.
16. Grantees may use initials or other non-identifying indicators such as “Board Member 1”, “Individual #2”, etc. **Do not note names.** Please identify the individual’s affiliation **using the affiliations provided within the reporting tool** (e.g., person who has experienced a TBI (Survivor), family member of a person who has experienced a TBI, Center for Independent Living/State Independent Living Council representative, Aging and Disability Resource Center representative, etc.). Individuals can have more than one affiliation. Grantees can add as many

advisory council members as they need in the online reporting system. Members must be entered one at a time. To enter information for member 1, hit the “Add Advisory Council Member” button, then proceed with entering information for the member, the name (or initials or other non-identifying indicator) and selecting (checking off) their affiliation. After having completed the information for member 1, hit the “Add Advisory Council Member” button again to enter information for member 2, and so forth. If an advisory council member’s role is not listed, select “Other” and provide a description in the text field. The column “Other” should be used to enter the roles represented by the individual (e.g., Provider, , etc.) and not to include the person’s employment or job title. Do not include under “Other” any affiliations that fit into one of the affiliations provided. Also, if your state has an advocacy organization that is designated for brain injury but is not an affiliate of a national organization, please list them under “Other”. If a grantee is using subcommittees or some other means of fulfilling the lived experience advisory requirement, enter them and check all boxes that apply like you would with any other member, but be sure to also check “Other” and type “subcommittee member”. The totals for each column will be auto calculated in the online reporting system.

17. Please describe accomplishments made in planning and infrastructure domain as it relates to your grant activities. This is an open text field in the online reporting system that allows 10,000 characters.
18. This question is not mandatory and should only relate to your current grant activities. If you want to provide to ACL a copy of your needs assessments, state plans, evaluation reports, or any other documents discussed in response to this question, please upload those documents into GrantSolutions.

## D. Information & Referral/Assistance (if applicable to grant activities)

*Only respond to Section D if you indicated in Section A Question 1 that activities in that area are carried out as part of your ACL project using program funding. Within the online reporting system, only the grantees that checked off this activity in Section A (Grant Activities) will receive this section for completion.*

19. An I&R/A contact is generally defined as an individual contact made by a consumer, caregiver, or professional by telephone or as a walk-in, email, or in-person support. I&R/A differs from resource facilitation in that there is not typically a “case” established and support is considered a one-and-done interaction; however, individuals may make use of the support more than once. One person may contact the I&R/A provider multiple times in the reporting period so “Total Contacts” is likely to be a significantly larger number than total number of individuals served. “Funded partners” refers to partners receiving grant funds as well as using funds that have been designated state matching funds. I&R/A providers generally track total number of contacts overall. They may or may not track the number of contacts that related to an individual who has experienced a TBI unless this is a requirement for them. In the online reporting system, grantees can select to report a “Number” in 19a and specify the number or, if a number is not available, they may select “Unknown.” Grantees should select “Zero” if the number is known and the number is zero; otherwise, grantees should report the number or

select “Unknown.” 19b is not mandatory, but provides a field for you to note anything important to know about the numbers reported in 19a. For example, if “unknown” is selected in 19a, 19b might note that none of the funded partners currently collect this information.

20. The answer options call for the identification of commonly made referrals based on the experience of I&R/A providers. To be considered “commonly” occurring, it would be your estimate that 50% or more of people calling about a TBI-related issue are referred to one of these types of services. If there were services regularly or commonly referred to that do not fit easily into one of the categories provided for this question, report them in one of the “Other” categories and type in an appropriate description.
21. This question is not mandatory.

## E. Screening (if applicable to grant activities)

*Only respond to Section E if you indicated in Section A Question 1 that activities in that area are carried out as part of your ACL project using program funding. Within the online reporting system, only the grantees that checked off this activity in Section A (Grant Activities) will receive this section for completion.*

22. Unduplicated in **22a.a.** refers to the number of distinct individuals that you or your funded partners screened to identify a history of TBI in this reporting period. In the online reporting system, grantees can select to report a “Number” and specify the number or, if a number is not available, select “Unknown.” Grantees should select “Zero” if the number is known and the number is zero; otherwise, grantees should report the number or select “Unknown.” The number in **22a.b.** (“Of the people screened for a TBI, how many were positive”) **should not be larger** than the number in **22a.a.** Please note that the numbers provided for the veteran breakout or the sum of the age breakdowns (22a.c.) **should not be larger** than the total number of people included under **22a.b.** Q22b. is not mandatory.
23. Select as “Yes” for all the instruments that apply, and “No” if an instrument is not being used. If the instrument you or your funded partners used for screening is not listed, select “Other” and name the tool in the accompanying text field.
24. This question is not mandatory.

## F. Resource Facilitation (all grantees respond)

25. For Resource Facilitation typically a “case” is established, and the support is not considered a one-and-done interaction. If you would like to provide context on the numbers you provided for this question, use the “Notes about data provided” text field (25b). This category of activity could include development of resources such as databases, resource directories, and communications tools to improve service delivery. It could also mean providing assistance through an accessible, holistic, and person-centered process that engages individuals in



decision making about their options, preferences, values, and financial resources and helps connect them with programming, services and supports of their choosing.

In the online reporting system, grantees can select to report a “Number” and specify the number or, if a number is not available, select “Unknown.” Grantees should select “Zero” if the number is known and the number is zero; otherwise, grantees should report the number or select “Unknown.” The numbers provided for the veteran breakout (25a.b.4.) or the sum of the age breakdowns (25a.b.1 through 3) **should not be larger** than the total number of unduplicated people who have experienced a TBI who were provided resource facilitation (25a.a.) during the reporting period. If you would like to provide context on the numbers you provided for this question, do so in the “Notes about data provided” text field (Q25b.). Q25b. is not mandatory.

26. The answer options call for the identification of commonly made referrals based on the experience of Resource Facilitation providers. To be considered “commonly” occurring, it would be your estimate that 50% or more of people calling about a TBI-related issue are referred to one of these types of services. If there were services regularly or commonly referred to that do not fit easily into one of the categories provided for this question, report them in one of the “Other” categories and type in an appropriate description.
  
27. This question is not mandatory.

## G. Training, Outreach and Awareness (if applicable to grant activities)

*Only respond to Section G if you indicated in Section A Question 1 that activities in that area are carried out as part of your ACL project using program funding. Within the online reporting system, only the grantees that checked off this activity in Section A (Grant Activities) will receive this section for completion.*

28. Question 28 is asking for you to provide information about the training activities directly funded by the grant. For each training activity, enter into the table the a) name of the activity, b) the mode of providing the training or activity, c) types of people trained or reached by that activity, d) topics covered by the training, e) the number of individuals that attended or participated in the training (the number that were reached). If the number of individuals that attended the training or reached is not available, select “Unknown”. If you would like to provide context on the numbers you provided for this question, do so in the “Notes about data provided” text field (28b). Q28b. is not mandatory. Additional rows can be added as needed in the online reporting system.
  
29. Materials can include digital and paper-based resources. Some of these materials can be uploaded in the Grant Note section in GrantSolutions. ACL is looking for materials that are informative/educational and that can advance the TBI programs. Submissions should be saved and uploaded into GrantSolutions as one document.

30. This question is not mandatory.

## H. Other (if applicable to grant activities)

*Within the online reporting system, only the grantees that checked off this activity in Section A (Grant Activities) will receive this section for completion. (This section will be replicated in the online reporting system if more than one "Other" activity was checked off in Section A.)*

31. You can provide a narrative description of activities that were accomplished in this area.
32. In the online reporting system, grantees can select to report "Numbers" that participated in the activity. Grantees should select "Zero" if the number is known and the number is zero; otherwise, grantees should report the number or select "Unknown." The numbers provided for the veteran breakout (32a.b.4.) or the sum of the age breakdowns (32a.b.1 through 3) should not be larger than the total number of people who have experienced a TBI and who participated in the activity (32a.a.). If you would like to provide context on the numbers you provided for this question, do so in the "Notes about data provided" text field (Q25b). Q25b. is not mandatory.

## I. Narrative Responses – All grantees respond

*This section must be completed by all grantees.*

33. You can provide a narrative response to this question.
34. You can provide a narrative response to this question.