**Personal responsibility education program (PREP)**

**Instrument 3B**

**performance reporting system data entry form (2023+)**

**December 2022**

The 98 estimated grantees will continue to 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 maintain tools for grantees’ use in organizing the performance measures data that they and their subrecipients collect, thereby expediting data entry into the national data submission system. However, use of the tools is not mandatory. Grantees may elect to use alternative means to collect and organize the specified data for submission. The only requirement is that grantees enter the specified measures into the national system systematically; for that, they will use an online form containing all the items in this instrument, in addition to uploading survey data files containing all items in Instruments 1 and 2.

**Measures Related to Collection of Participant Entry Surveys**

|  |  |
| --- | --- |
| **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): |  |

|  |  |
| --- | --- |
| Did the program receive an approval from their Federal Project Officer to delay their survey data collection start date? | Y/N |
| Did the program receive an approved waiver from their Federal Project Officer for any entry survey items? | Y/N |
| At any point during the reporting period [DATES], was the program unable to collect Entry Survey data due to COVID-19?  | Y/N |
| What mode(s) of data collection did the program use for participant entry surveys during the reporting period? MARK YES OR NO FOR EACH  |  |
| In-person paper-and-pencil survey | Y/N |
| Online, web-based survey  | Y/N |
| Telephone survey | Y/N |
| Mail survey | Y/N |
| Other (specify: )  | Y/N |

**Measures Related to Collection of Participant Exit Surveys**

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

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | **Enter Count** |  |  |  | **Enter Count** |
| Total Exit Surveys Completed (Middle school): |  |  | Total Exit Surveys Completed (High school and older): |  |

|  |  |
| --- | --- |
| Did the program receive an approval from their Federal Project Officer to delay their survey data collection start date? | Y/N |
| Did the program receive an approved waiver from their Federal Project Officer for any exit survey items? | Y/N |
| At any point during the reporting period [DATES], was the program unable to collect Exit Survey data due to COVID-19?  | Y/N |
| What mode(s) of data collection did the program use for participant exit surveys during the reporting period? MARK YES OR NO FOR EACH  |  |
| In-person paper-and-pencil survey | Y/N |
| Online, web-based survey  | Y/N |
| Telephone survey | Y/N |
| Mail survey | Y/N |
| Other (specify: )  | Y/N |

**Measures of Attendance, Reach, and Dosage**

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

|  |  |  **Enter Count** |
| --- | --- | --- |
| **Reach** | **Enter the number of youth during the reporting period who:** |  |
| Attended at least one program session |  |
| Number of middle school age participants  |  |
| Number of high school age or older participants  |  |
| **Program Setting** | Attended a session in school during school |  |
| Attended a session in school after school |  |
| 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 virtual session[[1]](#footnote-3) |  |
| Attended a session in another setting |  |
| **Majority population** | **Indicate whether more than 50 percent of youth attending the program were:** |  |
| In foster care |  |
| Homeless or runaway |  |
| Pregnant or parenting |  |
| In adjudication systems |  |
| LGBTQ youth |  |
| **Attendance/dosage** | **Enter the appropriate count below** |  |
| The number of youth who completed at least 75 percent of scheduled program hours  |  |

**Measures of Attendance, Reach, and Dosage**

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

|  | **Cohort:[[2]](#footnote-4)** |
| --- | --- |
|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| Enter a unique identifier for each cohort that ended the program during this reporting period.  |  |  |  |  |  |  |  |  |  |  |
| How many hours of programming, overall, were delivered to the cohort? |  |  |  |  |  |  |  |  |  |  |

**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 Because Already Received  | 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 the grantee experience any interruptions of PREP administrative operations during the reporting period due to COVID-19? | Y/N |
| Did the grantee experience any interruptions of PREP services to youth during the reporting period due to COVID-19? | Y/N |

|  |  |
| --- | --- |
| **PREP Funding** |  |
| Total amount of PREP grant funding obligated (including any carryover 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[[3]](#footnote-5)
* Evaluation and/or research
* Retained for administrative purposes at the grantee level[[4]](#footnote-6)
 | %%%% |

|  |  |
| --- | --- |
| **Grantee Staffing** | **Count** |
| Number of grantee staff involved in overseeing PREP[[5]](#footnote-7)  | # |
| Number of grantee FTEs involved in overseeing PREP  | # |

|  |  |
| --- | --- |
| **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 |

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

|  |  |
| --- | --- |
| **Provider Staff Administering PREP**  | **Count** |
| Number of provider staff involved in administering PREP programs[[6]](#footnote-8)  |  |
| Number of provider FTEs involved in administering PREP programs |  |
|  |  |
| **Provider Status** | **Y/N** |
| Is provider new for the [reporting period]? |  |
| Did provider serve youth during the [reporting period]? |  |

|  |  |
| --- | --- |
| **Facilitators** | **Count** |
| Number of PREP facilitators working for provider |  |
|  |  |
| **Facilitator Training and Observation** | **Count** |
| Number of PREP facilitators trained in delivering core program model |  |
| Number of PREP facilitators observed exactly 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 | **Y / N** |
| **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** |
| **Adulthood Preparation Subjects** | Healthy relationships |  |
| Adolescent development |  |
| Financial literacy |  |
| Parent child communication |  |
| Educational and career success |  |
| Healthy life skills |  |

|  |  |
| --- | --- |
| For each APS selected, indicate whether content is (mark all that apply): | **Y / N** |
| **Source of Adulthood Preparation Subjects Content** | Included in the program’s evidence-based or evidence-informed APP curriculum |  |
| 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 |  |

1. 1Virtual includes any programming that is facilitated online rather than by an in-person facilitator, regardless of the physical setting where participants are located [↑](#footnote-ref-3)
2. PMMS will include the following hover-over text: “A cohort, in this context, represents a group of youth that all jointly receive a defined PREP program, which could include a specific curriculum and any additional hours of programming added to meet all requirements for the PREP program, including requirements for covering select adulthood preparation subjects. If a provider is delivering a PREP program to multiple groups of youth simultaneously, but these groups meet separately, each group of youth should be considered a separate cohort. A cohort could consist of an individual, if programming is delivered one-on-one.” [↑](#footnote-ref-4)
3. PMMS will include the following hover-over text: “This would include funds for training or TA that is provided by the grantee or its designee for grantee staff, provider staff, or program staff. However, it would exclude funds given to subrecipient program providers and used by those providers for their own training or TA.” [↑](#footnote-ref-5)
4. PMMS will include the following hover-over text: “This would include funds used for grantee administrative purposes but would exclude funds given to subrecipient program providers and used by those providers for administrative purposes.” [↑](#footnote-ref-6)
5. PMMS will include the following hover-over text: “This measure should include grantee staff, such as PREP program directors and program coordinators, who were directly responsible for administering, managing, and overseeing the PREP program. Do not include grantee staff who provide programming directly to youth but do not oversee PREP in this measure. Those staff should be counted in the measure of facilitators on the program provider data page. If staff play both roles, they should be included in both measures.” [↑](#footnote-ref-7)
6. PMMS will include the following hover-over text: “This measure should include provider staff, such as PREP program directors and program coordinators, who were directly responsible for administering, managing, and overseeing the PREP program for the provider. Do not include staff who provide programming directly to youth in this measure. Those staff should be counted in the measure of facilitators later in this section. If staff play both roles, they should be included in both measures.” [↑](#footnote-ref-8)