

Coalition Performance Progress Report
ACF- OFVPS-FVPS-PPR COVER PAGE
Office of Family Violence Prevention and Services (OFVPS)
Administration for Children and Families
U.S. Department of Health and Human Services
Domestic Violence Coalition Grant Report

1. Federal Agency and Organization Element to Which Report is Submitted OFVPS/ACF/HHS	2. Federal Grant or Other Identifying Number Assigned by Federal Agency Click here to enter text.	3a. DUNS Number: Click here to enter text.
		3b. EIN Click here to enter text.
4. Recipient Organization (Name and Complete Address Including Zip Code) Click here to enter text.		5. Recipient Identifying Number or Account Number Click here to enter text.
6. Project Reporting Period Start Date: <i>(Month, Day, Year)</i> Click here to enter text.	7. Reporting Period End Date <i>(Month, Day, Year)</i> Click here to enter text.	8. Final Report? <input type="checkbox"/> Yes <input type="checkbox"/> No 9. Report Frequency <input type="checkbox"/> Annually
10. Performance Narrative <i>(performance narrative is covered in the attached PPR forms)</i>		
11. Other Attachments Click here to enter text.		
12. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.		
12a. Typed or Printed Name and Title of Authorized Certifying Official Click here to enter text.	12c. Telephone <i>(area code, number and extension)</i> Click here to enter text.	
		12d. Email Address Click here to enter text.

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to gain quantifiable data from grantees to monitor compliance with program requirements, to assist grantees, and to collect information on program services and outcomes that are used to prepare statutorily required biennial reports to Congress on the effectiveness of FVPSA Program funding in preventing and responding to family violence. Public reporting burden for this collection of information is estimated to average 8 hours per respondent, including the time for reviewing instructions, gathering, and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information FVPSA is required to collect and report data on the provision of family violence, domestic violence, and dating violence services, including assistance and programs supported by Federal funds (42 USC 10404 (b)(3)(B)) and establish reporting requirements (42 U.S.C. 10404 (a)(3)). ACF collects this information through the FVPSA Performance Progress Reports (PPRs). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0XXX and the expiration date is 05/31/2024. If you have any comments on this collection of information, please contact Holi Dahl [holi.dahl@acf.hhs.gov].

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12b. Signature of Authorized Certifying Official	12e. Date Report Submitted (<i>Month, Day, Year</i>) Click here to enter text.
	10. Agency Use Only

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Instructions for Completion

This is the paper copy of the form to be completed for your reference. To submit this Performance Progress Report to OFVPS, you will enter the information electronically into the Online Data Collection System (OLDC) at <https://extranet.acf.hhs.gov/ssi>. For help accessing OLDC, please contact 866-577-0771.

FVPSA Funds

Purpose

This report is a compilation of all the domestic violence programming/services provided by state and territorial domestic violence coalitions – whether or not the programming/service is provided with FVPSA funds. Because of the manner in which coalitions utilize the FVPSA funds in their respective agency, it is not feasible to consistently and accurately identify the specific grant activities (including the level of effort) that are funded by FVPSA dollars. Therefore, in consultation with FVPSA state administrators, tribal program coordinators and coalition representatives, it was determined that this report would include a count of all domestic violence programming/services provided, including those supported through other funding sources. The FVPSA program will use the percentage of FVPSA funding received by the coalition to the total coalition budget in order to determine the level of services supported by FVPSA funding. Grantees are required to report the total coalition budget and the FVPSA grant amount.

Dual Coalition

Check here if your coalition is both an HHS-designated sexual assault (Centers for Disease Control) and domestic violence coalition (Administration on Children and Families/Family and Youth Services Bureau/FVPSA Program).

Total Coalition Budget

This is the total annual organizational budget for your coalition including sexual assault funding if a dual program. This number will include funding from other sources in addition to your FVPSA grant amount. For example, the total coalition budget would include all funding sources of the coalitions, i.e., FVPSA dollars (including any pass-through amounts), state dollars, private foundations.

Total FVPSA Amount

Fill in the total State Domestic Violence Coalition FVPSA award amount for the year of this report.

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Amount of Pass-Through Dollars

If your coalition receives funds from the state to fund local domestic violence shelter and supportive services, enter that here. This includes FVPSA, State General Funds, VOCA, VAWA, and other funds for domestic violence that are passed through the coalition directly to local programs.

Percentage of the Budget Funded by FVPSA

$(\text{Total FVPSA Coalition Grant Amount}) / (\text{Total Coalition Budget} - \text{Pass-Through Dollars}) = \text{Percentage of the Budget Funded by FVPSA}$

State FVPSA Dollars to the Coalition

In addition to the FVPSA Coalition Grant, OFVPS provides formula funding to each state. Some state offices contract part of this money to the state domestic violence coalition. If your coalition receives FVPSA

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dollars from the state, check yes here and give a brief explanation of what those dollars are for, e.g., training and TA, support of a statewide data collection system.

Coalition Members

Number of Organizational Members Table

This chart asks you to place each of the organizational members of your coalition into categories. The left column contains categories for types of service provider members. The top row contains categories for types of organizations. Each member should have only one category of type of service provider (left column) and one type of organization (top row) reported as a number in the corresponding cell. For example, a coalition may have 6 members who are domestic violence service providers so the total for the first row would be 6. If one of the programs is within a government agency, a 1 would be reported in the first row/second column. If 2 of the programs are tribal specific programs, then 2 would be reported in the first row/fourth column. The next rows would be filled out similarly.

Definitions:

Domestic Violence Service Providers– these are the domestic violence service providers whose primary purpose is to serve victims of domestic violence.

Sexual Assault/ Domestic Violence Dual Service Providers – these are providers that provide both domestic violence and sexual assault services to victims.

Sexual Assault Service Providers or Rape Crisis Centers – these providers provide services to victims of sexual assault.

Other victim service providers – these are providers that serve victims in some way, but do not fit in the above categories.

Other Organizational Members – these are providers that don't fit into the above four categories, but not individual members.

Government Agency – these organizations are located within the state or local government structure.

Culturally-specific Program – these organizations provide services that offer full linguistic access and culturally specific services and resources, including outreach, collaboration and support mechanisms primarily directed toward culturally specific communities. These programs are not exclusive to the targeted population.

Tribal-specific – these organizations fit the above definition for culturally-specific with a focus on serving Native Americans.

All others – these organizations do not fit into the previous three categories.

Example – Coalition X has a total of 67 organizational members, not including any individual members. 17 of

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these members are DV service providers (not dual programs). Of those 17, four are located within a local government human service program, one is the Latino Women's DV Program, and another is the Pamunkey Indian Tribal DV Program. Eleven of them are stand-alone DV non-profit organizations. Note that this is not a count of individual members.

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Number of Organizational Members

Type of Service Provider	Government Agency	Culturally-specific Program	Tribal-specific	All Others	TOTAL
Domestic Violence Service Providers	4	1	1	11	17
SA/DV Dual Service Providers		2		16	18
Sexual Assault Service Providers or Rape Crisis Centers	2			20	22
Other Victim Service Providers	8		2		10
Other Organizational Members					
TOTAL	14	3	3	47	67

Number of Domestic Violence Service Providers in the State/Territory

This is the total number of domestic violence service providers whose primary purpose is to provide domestic violence services to victims. This is a count of all the providers in the state, not only the ones that are members of your coalition. A primary-purpose domestic violence service provider is one that operates a project of demonstrated effectiveness, carried out by a nonprofit, nongovernmental, private entity or a tribe or tribal organization, that has as its project's primary purpose the operation of shelters for victims of domestic violence and their dependents; or provides counseling, advocacy, or self-help services to victims of domestic violence.

How many of the primary purpose domestic violence service providers are members of your coalition?

This is the number of primary-purpose domestic violence service providers that are members of your coalition.

Narrative Questions

1. Describe in narrative format your progress during the reporting period in completing the activities described in your most recent application.

Note: If you report serving on a board, commission or other planning group (e.g. Governor's Commission on Domestic Violence, Criminal Justice coordinating Council, etc.) please briefly describe

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what was accomplished during the reporting period.

2. Please write a success story about your coalition's work that is ready for publication on the ACF website.
 - o Topic(s): An example of a survivor who has a positive life outcome or story to tell, with help from program services; a news item reporting a workshop, conference, new program or other event held/to be held; a story focusing on the work of a fatality review team which led to a systems change impacting survivor outreach and awareness of services. Stories reflecting themes or issues related to underrepresented, or underserved communities (such as LGBTQ /Two Spirit survivors, Native survivors, or communities of color) are especially welcome.
 - o Length: Submissions should be between 500 and 750 words, roughly
 - o Writing should be in third person narrative, and double-checked for proper grammar, spelling, and punctuation.
 - o As always, use good standards of confidentiality and privacy when reporting on individual survivors. Please change names, ages, and all other personally-identifying information.
 - o A photo/image to accompany the submission is most welcome. If one is not provided, ACF will choose one from stock images.
3. How does the coalition identify training and technical assistance priorities? What is the process and who is involved?
4. Describe your coalition's efforts in organizational capacity-building and development of your members.
5. What are the top areas in which other coalitions, state or national audiences look to your coalition as a leader, unique expert or innovator? (optional)
6. What other state coalitions do you look to as experts, leaders, or innovators on a specific topic? Name the coalition and the topic. (optional)
7. What other things regarding your work would you like OFVPS to know? (optional)

Summary of Activities Table

8

OMB Approval Number: XX/XX/XXXX
Expiration Date: 05/31/2024

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This table is included as a way to help OFVPS know ‘at a glance’ which coalitions are working on different program areas and priorities. Throughout the year, OFVPS gets requests, which need to be responded to quickly from senior leadership, members of congress and others asking what OFVPS is doing around ‘fill in the blank’ issues. Rather than the piece meal approach used now which involves OFVPS staffs’ prior knowledge of your coalition and multiple email queries to all the coalitions, this table will serve as an overall view of the work of the coalitions by topics and allow the OFVPS to easily identify coalitions working on an issue and, hopefully, easily gather the information to respond.

Statutorily-defined Program Areas and FYSB Priority Areas

The alphabetical list in the left-hand column is comprised of both program areas identified in FVPSA legislation as required work of the coalition and topics that have been identified as priority issues for ACF or have received multiple requests for information in the past. Additional notes about each topic are noted as a foot note.

Level of Involvement

This second column asks you to identify your level of involvement with each topic in the first column. For each topic, you must choose one level of involvement. OFVPS *does not expect* that each coalition will be involved in every topic. Determining your level of involvement is somewhat subjective. **Highly Involved** in a topic would indicate to OFVPS that your coalition is doing something that may be: widespread, innovative, unique or replicable to other states. When senior leadership request information on a certain topic, we will first look at those states that checked Highly Involved on that topic.

The statutorily-defined program areas will not allow you to check **Not Involved**, as you are mandated to address these issues, though you do not have to check Highly Involved.

Types of Activities

For any of the topics that you indicate you have some level of involvement, check all the types pertaining to that topic. At least one type of activity should be checked if the topic has any level of involvement checked.

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Training – this is training provided to general audiences or allied professionals. It could be face to face, as a webinar or a conference call.

Capacity Building / Technical Assistance – this is checked if you provided programming/services to increase the capacity of individuals or organizations to address this specific topic.

Products – if you developed any products on this topic such as a brochure, manual, newsletter, training curriculum, training material, report, fact sheet, website, video, e-learning module, or recorded webinar, check this box.

Public Awareness – if you conducted any awareness events around this topic, check this box. An awareness event might be rallies, speak outs, Take Back the Night, vigils, Clothesline Project, silent witness, information tables or media campaigns on radio, TV or newspaper.

Policy / Systems Advocacy – Policy/systems advocacy is any effort to influence public policy or systems by providing information, speaking to decision makers, demonstrating benefits for policy or systems change and other such activities that encourage the adoption of the desired policy or systems change.

Number of People Trained

This information is helpful for OFVPS to respond to queries. This column is to be completed only if Training is checked in the Types of Activities section. Estimate the number of people trained about the topic listed in the first column. OFVPS understands that you may not have this information to report.

However, if it is available, report it here.

Short Response

Write a short narrative response (less than 50 words) on your efforts in this topic area. This can be a list, bullets or 2 sentences to give OFVPS a little bit more information. You may also cut and paste information from your longer narrative responses above in order to provide the snapshot intended for this section.

References

In this column you will supply information about where OFVPS can get more information or specificity on your work in this area. You will probably reference areas of your PPR Report, your application, an annual report, a website, or something else. Please include specific directions as to how to find the information in the referenced document. For example, you may say, “see response to question 6 in the narrative section of this report. Additional information is on page 5 of our application.” If you are linking to a website, please provide the exact url to the page or the document. For example, to find out more about the coalition grant program, the url would be <http://www.acf.hhs.gov/programs/fysb/programs/family-violence-prevention->

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[services/programs/state-dv](#), not just [www.acf.hhs.gov/fvpsa](#).

Other Topics

Check any of the boxes if your coalition provided training, TA, or capacity building on the topic.

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Example

Statutorily-defined Program Areas and ACF Priority Area	Level of Involvement				Types of Activities				Number of People Reached (Training only)	Short Response (Involved and Highly Involved only)	References	
	Not Involved	Low Involvement	Involved	Highly Involved	Training	Capacity Building /TA	Products	Public Awareness				Policy/ Systems
Anti- Oppression / Anti- Racism			X		X	X				130	We held an anti-racism 2-day conference in June. We have an anti-oppression workgroup which meets quarterly. We provided TA to 2 member programs when internal problems arose.	Link to materials from conference at www.url.com ; See page 6 of our workplan for more info on workgroup and TA provided.
Child custody and visitation		X							X		We sit on an advisory board for DSS that focused on incorporating domestic violence screening in the child welfare intake process.	Website for advisory board is at www.url.com ; See Goal 3 Obj 2 of our workplan that reports on the outcomes.

Training

Report the total number of participants trained.

This report is a compilation of all the domestic violence programming/services provided by state and territorial domestic violence coalitions – whether or not the programming/service is provided with FVPSA funds. OFVPS understands that FVPSA dollars fund only a portion of the activities reported below, which is appropriately indicated in any report out by OFVPS.

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Report the number of training events for each type of listed trainings, regardless of topic.

Computer-based or e-learning module – This is different than a webinar. It is a stand-alone program housed on a website where users may access it on their own time. The count for this would be the number of times users completed the training.

Conferences sponsored by the coalition – These events are coordinated by the coalition.

Workshops/seminars/presentations – These events are ones hosted by other organizations where your coalition is asked to present. Count each time you present, even if it is to the same or a similar audience.

Teleconferences – This type of training uses the telephone only as a conference call.

Videoconferences – These events involve technology that brings participants together in separate locations where a camera is used to see each participant.

Webinars – This type of training uses a shared technology platform so content can be shared by the presenter to multiple users at different locations using their own computers.

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Coalition PPR

FVPSA Funds

Dual Coalition yes

no Total Coalition _____

budget

Total FVPSA coalition grant amount _____

Amount of pass through dollars _____

Auto calculate % of budget funded by FVPSA _____ [Total FVPSA coalition grant amount / (Total Coalition Budget-- Pass Through Dollars)]

Does your coalition receive additional FVPSA dollars through the state to support the work of your coalition? yes no

If so, what do those dollars support, e.g., training and TA, support of a statewide data collection system?

[Click here to enter text.](#)

Coalition Members

Number of Organizational Members

Type of Service Provider	Government Agency	Culturally - specific Program	Tribal-specific	All Others	TOTAL
Domestic Violence Service Providers					[Auto Sum]
SA/DV Dual Service Providers					[Auto Sum]
Sexual Assault Service Providers or Rape Crisis Centers					[Auto Sum]

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Other Victim Service Providers					[Auto Sum]
Other Organizational Members					[Auto Sum]
TOTAL	[Auto Sum]	[Auto Sum]	[Auto Sum]	[Auto Sum]	[Auto Sum]

Total number of primary purpose domestic violence service providers in the state/territory _____
 How many of the primary purpose domestic violence service providers are members of your coalition? _____

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Narrative Questions

1. Briefly describe your progress during the reporting period in completing the activities described in your most recent application.
2. If you report serving on a board, commission or other planning group (e.g., Governor's Commission on Domestic Violence, Criminal Justice coordinating Council, etc.) please briefly describe the coalition's participation in the group and identify the purpose of the group, body or commission, and what it accomplished during the reporting period.
3. Please write a success story about your coalition's work during the reporting period (i.e., partnership, award, trainings, collaboration, etc.).
4. What are the top areas in which other coalitions or national audiences look to your coalition as a leader, unique expert, or innovator?
5. What other DRVN/Resource Center did you consult or collaborate with during this reporting period.
6. Is there additional information you would like to share with OFVPS that was not asked or included above?

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to gain quantifiable data from grantees to monitor compliance with program requirements, to assist grantees, and to collect information on program services and outcomes that are used to prepare statutorily required biennial reports to Congress on the effectiveness of FVPSA Program funding in preventing and responding to family violence. Public reporting burden for this collection of information is estimated to average 8 hours per respondent, including the time for reviewing instructions, gathering, and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information FVPSA is required to collect and report data on the provision of family violence, domestic violence, and dating violence services, including assistance and programs supported by Federal funds (42 USC 10404 (b)(3)(B)) and establish reporting requirements (42 U.S.C. 10404 (a)(3)). ACF collects this information through the FVPSA Performance Progress Reports (PPRs). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0XXX and the expiration date is 05/31/2024. If you have any comments on this collection of information, please contact Holi Dahl [holi.dahl@acf.hhs.gov].

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Summary of Activities

Statutorily-defined Program Areas and ACF Priority Area	Level of Involvement				Types of Activities						Number of People Trained	Short Response (Involved and Highly Involved only)	References
	Not Involved	Low Involvement	Involved	Highly Involved	Training	Capacity Building / TA Products ¹	Public Awareness ²	Policy/ Systems Advocacy					
Accessibility Accommodation or Disability Assistance												Write a short narrative response (less than 50 words) on your efforts in this area. Or cut and paste from other parts of your report.	For additional information go to:
Anti-Oppression / Anti-Racism													
Child Custody and Visitation													
Children's Programming/ Exposure to DV													
Child Support													
Child Welfare													
Confidentiality ³													
Criminal or Civil Justice Systems ⁴													
Disaster Preparedness & Response													
Economic Empowerment ⁵													
Engaging Men													
Evidence-Informed Practices Promotion													

¹ Brochure, Manual, Newsletter, Training curriculum, Training material, Report, Fact sheet, Web site, Video, e-learning module, recorded webinar, Other

² Rallies, speak outs, Take Back the Night, vigils, Clothesline Project, silent witness, information tables, media campaigns

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³ HIPAA, privileged communication, technology issues, FVPSA personally identifying information and confidentiality requirements

⁴ Law enforcement, courts, judicial, probation and parole, etc.

⁵ Financial literacy, Earned Income Tax Credit

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Statutorily-defined Program Areas and ACF Priority Area	Level of Involvement				Types of Activities							Number of People Trained	Short Response (Involved and Highly Involved only)	References
	Not Involved	Low Involvement	Involved	Highly Involved	Training	Capacity Building / TA	Products ¹	Public Awareness ²	Policy/Systems	Advocacy				
Responsible Fatherhood													Write a short narrative response (less than 50 words) on your efforts in this area. Or cut and paste from other parts of your report.	For additional information go to:
Healthcare ⁶														
Healthy Relationships														
HIV/AIDS														
Home Visiting														
Housing ⁷														
Immigration														
Incarcerated / Formerly Incarcerated														
Mental Health & Behavioral Health														
Online Harassment, Abuse, or Safety														
Primary Prevention														
Public benefits ⁸														
Reproductive Health and Coercion														
Runaway and Homeless Youth														
Substance Use (i.e., disorder, coercion)														
Trafficking														
Trauma-informed Programming														
Workplace Violence														
Other:														
Other:														

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⁶ ACA screening provisions, healthcare outreach, nurse training, emergency room personnel training, ACA insurance exchange collaborations, etc.

⁷ Emergency/immediate, transitional, and permanent housing

⁸ TANF, food stamps and others

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Statutorily-defined Program Areas and ACF Priority Area	Level of Involvement				Types of Activities					Number of People Trained	Short Response (Involved and Highly Involved only)	References
	Not Involved	Low Involvement	Involved	Highly Involved	Training	Capacity Building / TA Products ¹	Public Awareness ²	Policy/ Systems Advocacy				
											Write a short narrative response (less than 50 words) on your efforts in this area. Or cut and paste from other parts of your report.	For additional information go to:
Underserved and culturally-specific populations ¹												
Black or African-American												
Asian/ Asian American												
Immigrant/ Refugee												
Hispanic or Latino												
LGBTQ/Two Spirit												
Men												
Native American / Alaskan Native												
Native Hawaiian/Other Pacific Islander												
Older Victims												
Teen (ages 13 to 24)												

¹ Culturally and linguistically specific services refers to community-based services that offer full linguistic access and culturally specific services and resources, including outreach, collaboration and support mechanisms primarily directed toward culturally specific communities. Underserved populations means populations who face barriers in accessing and using victim services, and includes populations underserved because of geographic location, religion, sexual orientation, gender identity, underserved 2 racial and ethnic populations, and populations underserved because of special needs including language barriers, disabilities, immigration status, and age. Individuals with criminal histories due to victimization and individuals with substance use disorders and mental health issues are also included in this definition (45 CFR § 1370.2).]

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Person with a Disability													
Rural, Geographically Isolated, Frontier ²													
Limited English Proficiency (LEP) or Language Interpretation													
Clients needing Language Translation Services													
Other culturally specific populations													

² To determine if a program is designated as frontier, go to www.ruralhealthinfo.org. Click on the *Am I Rural?* Tool. Run a report based on the program address. If the program receives a Frontier and Remote Area Code, then you may select frontier.

Coalition Performance Progress Report

Other Topics

Does your coalition provide training, technical assistance, or capacity-building on the below topics?

- | | |
|--|--|
| <input type="checkbox"/> Access to Services (ADA, language, programming)
<input type="checkbox"/> Batterers Intervention programming and standards
<input type="checkbox"/> Board Governance and Training
<input type="checkbox"/> Coordinated Community Responses
<input type="checkbox"/> Employment and job training
<input type="checkbox"/> Evaluation
<input type="checkbox"/> Faith/Religion
<input type="checkbox"/> Fatality Reviews
<input type="checkbox"/> Fundraising | <input type="checkbox"/> Grants and Funding
<input type="checkbox"/> Military (programming, advocacy, system response)
<input type="checkbox"/> Mandatory Reporting
<input type="checkbox"/> Non-profit Administration and Management
<input type="checkbox"/> Research
<input type="checkbox"/> Shelter Operational Policies, Protocols, or Rights and Responsibilities
<input type="checkbox"/> Stalking
<input type="checkbox"/> Sustainability
<input type="checkbox"/> Wellness
<input type="checkbox"/> Other |
|--|--|

Trainings

Total number of participants trained _____

Type of Training	Number of Events
Computer-based or e-learning module	
Conferences sponsored by the coalition	
Workshops/seminars/presentations	
Teleconferences	
Videoconferences	
Webinars	
Other:	