Attachment 3. Annual Performance Report (APR) Tool

Form Approve
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Recipient:	
Reporting Period:	
Contact Person:	

RPE has 3 ongoing NOFOs: CE-24-0027, CE-24-0068, CE-24-0120
CE-24-0027 REQUIRES FORMS 1-7
CE-24-0068 REQUIRES FORMS 1-3, 5, AND 6
CE-24-0120 REQUIRES FORMS 1-3

FORM 1: WORK PLAN

Instructions for Recipients:
The Work Plan form collects information about your RPE Program's progress on work plan goals, objectives, and milestones during the reporting period (xx/xx/xxxx to xx/xx/xxxx). The required goals and objectives are prefilled for all recipients.

REQUIRED GOALS AND OBJECTIVES

RPE 0027

GOAL	OBJECTIVE(S)
Goal 1: Build Infrastructure for Sexual Violence Prevention	*Objective 1A. Continue to build internal program capacity to facilitate and monitor the implementation of prevention programs/policies by acquiring, training, and retaining staff.*
	Objective 1B. Conduct/promote training to build capacity of partner organizations to center and engage communities.
	Objective 1C. Conduct or leverage an existing primary prevention capacity assessment with a focus on centering and engaging communities.
	Objective 1D. Participate in CDC-sponsored programs and activities.
	Objective 2A. Develop or enhance an existing state/territory action plan (in collaboration with Sexual Assault (SA) coalitions, Tribal SA coalitions, and

Goal 2. State/Territorial Action Plan	*representatives from underserved communities of the State or Territory) to support state- and community-level implementation and sustainability of sexual violence (SV) prevention.*
	Objective 2B. Leverage multi-sector partners and resources toward SV prevention.
	Objective 2C. Participate in meaningful engagement with state, territorial and tribal SA coalitions, and other collaborators working to prevent SV.
Goal 3. Implement SV Prevention Approaches	*Objective 3A. Identify, implement, and adapt SV prevention strategies that focus on reducing differences in health at the community- and societal-level implementation.*
Goal 4. Data to Action	*Objective 4A. Gather and synthesize publicly available state- and community-level data to inform SV prevention, track differences in health outcomes and conditions that increase rates of SV.*
	Objective 4B. Utilize state and community-level data to improve programmatic activities and identify and select SV prevention strategies for populations and communities with high rates of SV.
	Objective 4C. Develop and implement an evaluation plan (in collaboration with state, territorial and tribal SA coalitions)
	Objective 4D. Use program monitoring and evaluation data and other available data to improve SV prevention strategy implementation

RPE 0068

Goal 1. Build Infrastructure for Sexual Violence Prevention	*Objective 1A. Build internal program capacity to facilitate and monitor the implementation of prevention programs, practices and/or policies.*
	Objective 1B. Conduct, or leverage, an existing primary prevention capacity assessment with a focus on centering and engaging communities.
Goal 2. Collaborate with the SHD to enhance State Action Plan (SAP)	*Objective 2A: Collaborate with the State Health Department (SHD) to enhance the existing state/territory action plan to support state- and community-level implementation of sexual violence (SV) prevention.*
	Objective 2B: Leverage and meaningfully engage multi-sector partners, resources, and other collaborators working to prevent SV.
Goal 3. Implement SV Prevention Approaches	*Objective 3A: Identify, implement, and adapt SV prevention strategies that center and engage communities, reduce differences in health, and focus on community- and societal-level implementation.*
Goal 4. Use Data to Inform Action	*Objective 4A: Collaborate with State Health Departments (SHD) to gather and synthesize publicly available state- and community-level data to inform SV prevention, and track differences in health and high rates of SV.*
	Objective 4B: Use program evaluation data and other available data to select and improve SV prevention strategies for populations and communities with disproportionately high SV rates.
	Objective 4C: Develop and implement an evaluation plan in collaboration with RPE-funded State Health Departments and Tribal Sexual Assault (SA) coalitions.

Goal 1: Assess Capacity for Primary Prevention of Sexual Violence (Year 1)	*Objective 1A: Complete a primary prevention capacity assessment.*
Goal 2. Develop a Tribal Sexual Violence Primary Prevention Action Plan (Year 2)	*Objective 2A: Develop a Tribal Sexual Violence (SV) Primary Prevention Action Plan.*
Goal 3. Implement Primary Prevention Action Plan and Evaluate Progress (Years 2-4)	*Objective 3A: Build capacity.*
	Objective 3B: Strengthen Partnerships/Collaborations.
	Objective 3C: Implement SV prevention program/policies/practices.
	Objective 3D: Increase access to and use of data for program improvement and evaluation.

SECTION: OBJECTIVE #.#

There is a section of this form for each NOFO objective. Report on the objectives and add milestones for each.

MILESTONE TABLE

*For each objective, report on **one** key milestone for the reporting period of (xx/xx/xxxx to xx/xx/xxxx).*

***Milestones** represent significant achievements that contribute to fulfilling the objective. For example, milestones can refer to points at which a large scheduled events or series of events have been planned or completed, and a new phase or phases are set to begin. Milestones related to each objective should be high-level but specific enough to show your achievement (or progress) towards the objectives and associated outcomes. Milestones should be reflective of how you are measuring success in completing the objectives and associated outcomes. Each milestone should be listed under only one objective. If a milestone fits under more than one objective, select the one it is most directly linked to.*

If applicable, provide additional information on any barriers, facilitators, and/or accomplishments/successes experienced during the reporting period.

- *A barrier is an identified person, resource, relationship, or circumstance that hinders progress on a specific outcome or goal.*
- *A facilitator is an identified person, resource, relationship, or circumstance that helps to reach a specific outcome or goal.*
- *Accomplishments or successes are completed actions from your program plan applicable to the program year, for example, descriptions of initial research, participation numbers, events, discoveries, or violence rate differences.*

Helpful information regarding the development of Success Stories can be found on the VetoViolence website: https://vetoviolence.cdc.gov/apps/success-stories/#/create#top

Question	**Question Instructions/Options**

Key Milestones	What key milestones did you achieve for this objective [2000]
Barrier Status	Were there any barriers related to this objective? ☐ Yes ☐ No (Save and Skip to the Facilitators Section)
Barrier Type	If you answer "yes," select the barrier type. Select all that apply: ☐ Lack of buy-in from partners ☐ Lack of community engagement ☐ Insufficient funding or resources ☐ Inability to access/collect data ☐ Implementation issues ☐ Evaluation issues ☐ Staffing Issues ☐ Lack of skills or capacity ☐ State or local climate ☐ Other (please specify):
Barrier Description	If you answer "yes," report on at least one barrier for this objective and how it impacts your program's work [6000]
Facilitator Status	Were there any key facilitators related to this objective? ☐ Yes ☐ No (Save, Validate, and Skip to the Successes Section)
Facilitator Type	If you answer "yes," select the facilitator type. Select all that apply: ☐ Strong partners ☐ Connection to community ☐ Access to funding or resources ☐ Access to data ☐ Strong implementation ☐ Strong evaluation ☐ Adequate, experienced staff ☐ Access to training/technical assistance ☐ Other (please specify): Click or tap here to enter text.
Facilitator Description	If you answer "yes," report on at least one facilitator for this objective and how it impacts your program's work [6000]

Successes Table

Successes Status	Were there any key successes/accomplishments related to this objective? ☐ Yes (Report on at least one program accomplishment/success for this objective that happened during the reporting period) ☐ No (Save, Validate, and Check in)
Success Story Title	Create a brief title summarizing your success [1000] Example: Establishing a Statewide Suicide Prevention Collaborative
Story Development	
The Situation	Briefly describe the problem your work was addressing [1000] Example: During the environmental scan and program inventory, the Team identified a lack of coordinated suicide prevention efforts across the state
The Narrative	Briefly describe your work and how it is addressed or provided more data about the problem. [1000] Example: The Team spent several months meeting and speaking with suicide prevention stakeholders to gather their insight on needs and gaps and to create a robust, multi-sector list of suicide prevention partners. The team facilitated an in-person meeting in October 2022 to conduct a SWOT analysis, identify priorities, share data and resources, and gauge interest in forming a Statewide Suicide Prevention Collaborative
Outcomes and Impact	Briefly describe the outcomes or impact you have achieved with your work after addressing the problem. [1000] Example: 50 partners were invited and 40 partners attended the in-person meeting with representation from multiple sectors and across all regions of the state A SWOT analysis was completed, the group identified three priorities to address in 2023, and the group expressed a desire to continue to meet The newly formed Statewide Suicide Prevention Collaborative met again in January 2022 and developed three working groups based on the priorities identified. Each working group developed an action plan with goals, activities, timeline, and measures for success
Lessons Learned:	Briefly describe any lessons learned or insights you've learned that could help other communities and grow their prevention efforts. [1000] Example: Giving the partners time, support, and a facilitated approach (someone to lead the charge) really catalyzed the creation of the Collaborative and workgroups.

FORM 2: CONTINUATION APPLICATION

Instructions for Recipients

*The Continuation Application Narrative Form collects information about each program, practice, or policy that your organization plans to implement using RPE funding during the **NEXT** budget period of xx/xx/xxxx to xx/xx/xxxx.*

Section 1: List of Work Plan Activities for Next Budget Year: Describe the activities planned for the next budget period. Please include references and reasons for any key changes to the work plan for the next budget period. [6000]
Section 2: Implementation of New or Revised Program or Policy Efforts: Provide a bullet list (including no more than 5-7 bullet points) of the activities PLANNED for the next budget period. Please include references and reasons for key changes to the work plan for the next budget period. [6000]
Section 3: Budget Implications: *Provide comments about any budgetary concerns for the NEXT budget period of xx/xx/xxxx to xx/xx/xxxx.* Provide any comments about budgetary issues that might impede the success or completion of the project as originally proposed and approved for the next budget period. Describe any implications the changes to the work plan may have on the budget. [6000]
Section 4: Technical Assistance Needs: What types of training and technical assistance (TTA) would benefit your program in the next budget period? Include all TTA needed for the next budget period even if you have already submitted a TTA request in the portal. Please describe the areas or topics for TTA (e.g., program, evaluation, surveillance). This information will help us to understand what types of TTA are needed by recipients and will be used to plan program wide TTA for the upcoming budget year. If TTA is not needed, please explain. *Please note that reporting on a TTA need in this table does not constitute a formal request for TTA. Requests for TTA must be submitted separately through the DVP Partners Portal. Reach out to vptac@cdc.gov if you need more information about how to request TTA.* **Would your program like additional training or technical assistance in any specific area?** Yes (Include existing requests already entered in VPTAC. Complete table below) No (Please explain) Click or tap here to enter text.

Training and Technical Assistance Table

If your program would like additional training or technical assistance, enter your requests in the table provided. Create a new row for each distinct TTA request, providing the Topic and Timeframe for each request. You will also need to describe the TTA requested. Please note that this is not a replacement for a TTA request with the VPTAC.

For all TTA requests, please submit to the DVP Partners Portal: https://dvppartnersportal.cdc.gov.

When reporting TTA needed, make sure that:

- Each entry is a distinct TTA request based on the drop-down for the topic.
- The "Other" answer option for topic is selected only if the TTA request does not fall within the existing answer options.

Topic: [Choose one from dropdown]	**Description of TTA Request [1000]**	**Timeframe [Choose one from dropdown]**
• Planning • Partnerships • Communication • Policy • Specific Strategy or Approach • Implementation and/or Adaptation • Surveillance Data • Evaluation and Data • Assures optimal level of health for all, and especially for those at greatest risk • Other (not listed): Please specify topic		Submitted TA Request in portal Immediate Within the next 6 months Within the next year No specific timeframe/Unknown

Section 5: Anticipated Challenges: What general challenges/problems do you anticipate in the next funding year? What do you plan to use to solve or address those challenges or problems? [6000]

FORM 3: TRAINING AND TECHNICAL ASSISTANCE (TTA) AND CAPACITY BUILDING

This form consists of two sections:
Section 1: Technical Assistance: Use this section to describe any technical assistance received by your program during the reporting period.
Section 2: Capacity Building: In this section, provide details about any capacity-building activities undertaken by your program.

The purpose of this form is to collect information about what VetoViolence, other CDC resources, or VPTAC TTA providers recipients used, how often, and which ones were most useful. Please answer the following questions about technical assistance during the reporting period of xx/xx/xxxx to xx/xx/xxxx.

1. During this reporting period, how often have you used VetoViolence or other CDC resources when selecting, planning, implementing, or evaluating your program or strategies? (For example, technical

packages, VETO Violence, technical assistance resources) (Select one)

☐ Frequently (5+ times)
☐ Sometimes (3-4 times)
☐ Rarely (1-2 times)
☐ Never (Skip to Section 2)

2. Which VetoViolence, other CDC resources, or VPTAC TTA providers have you found most useful during this reporting period? [1000]

☐CDC's Resources for Action
☐ ACEs Infographic
☐ Beyond the Headlines: Media Communication Training
☐ Community HealthSim
☐ Connecting the Dots
☐ Dating Matters Interactive Guide to Informing Policy
☐ Dating Matters Training for Educators
☐ Dating Matters Toolkit
☐ EvaluACTION
☐ General Capacity Assessment for Violence Prevention
☐ Making the Case: Engaging Business
☐ Preventing Adverse Childhood Experiences (ACEs)
☐ Principles of Prevention
☐ Select, Adapt, Evaluate!
☐ Social Norms
☐ STRVE: Striving to Reduce Youth Violence Everywhere
☐ Success Stories
☐ Understanding Evidence
☐ Violence Indicators Guide & Database
☐ Violence Prevention in Practice
☐ YVPC Toolkit
☐ Resources (blogs, podcasts, tools, etc.) from VPTAC's TTA Providers (PreventConnect, NSVRC NRCDV)
☐ Haven't used CDC, VetoViolence, or VPTAC resources
☐ Haven't found CDC, VetoViolence, or VPTAC resources useful
☐ Other(s) (please list): Click or tap here to enter text.

3. During this reporting period, how often have you shared these VetoViolence, other CDC resources, or VPTAC TTA with subrecipients or partners?

☐ Frequently (5+ times)
☐ Sometimes (3-4 times)
☐ Rarely (1-2 times)
☐ Never

1. To what extent has your organizational capacity to select, plan, implement, and evaluate strategies increased over the reporting period?

    - Not at all
    - To a small extent
    - To a moderate extent
    - To a great extent

2. To what extent has the capacity of your subrecipients or partners to select, plan, implement, and evaluate strategies increased over the reporting period?

    - Not at all
    - To a small extent
    - To a moderate extent
    - To a great extent

3. To what extent has your organizational capacity to build or improve surveillance infrastructure and capacity increased during this reporting period

    - Not at all
    - To a small extent
    - To a moderate extent
    - To a great extent

4. To what extent has your organizational capacity to use data for action, such as tailored prevention strategy implementation to center and engage communities, improved during this reporting period?

    - Not at all
    - To a small extent
    - To a moderate extent
    - To a great extent

5. Provide any additional information about changes in capacity. (Optional) [2000]

0027 & 0068: Form 4: State/Territorial Action Plan; *0120: Form 4: Tribal Action Plan*

FORM 4: STATE/TERRITORIAL ACTION PLAN

SECTION 1: CHANGES TO THE STATE ACTION PLAN

Instructions for Recipients
This form collects information about progress on the State/Territorial/Tribal Action Plan. Report on any changes to specific section(s) of the State Action Plan during the period of xx/xx/xxxx to xx/xx/xxxx. This section collects information on changes made to the components in the Action Plan. This section is not prefilled.

CHANGES TO THE ACTION PLAN

Were there any changes to the Action Plan during this reporting period?

- Yes (Complete table below)
- No (Save, Validate, and Check in)

CHANGES TO THE ACTION PLAN TABLE

Choose each component of the State Action Plan that was changed, describe the change, the reason for the change, and how the change affects your program's work. Report each change on a separate row.

Type of Change: [Choose one from dropdown]	**Description of Change (1000 characters)**	**Describe the reason for the change and how it impacts your overall work: [1000]**
• Approach or Strategy • Partner • State/Local/Tribal collaboration • Resources/Funding • Training/Technical Assistance • Sustainability • Centering and Engaging Communities • Data Use/Sources • Capacity Assessment • Other (not listed): Specify Click or tap here to enter text.		

SECTION 2: PARTNERSHIP

This section collects information about key partner organizations the RPE program engaged with. Information previously entered will be prefilled in this table. Report on all existing and new partners that your program engaged with during this reporting period. Unless you need to add new partners, you will only need to

update three areas for existing partners: the status of the partnership, whether you provided any CDC funding to the organization during the reporting period, and how your organization engaged this partner during the reporting period.

PARTNERSHIPS & RESOURCES TABLES

Report on the partner status during this reporting period. If there are changes in how the partner is engaged in the recipients' Rape Prevention and Education work, please make updates. Each row is a distinct partner.
When entering any new partners that have not previously been entered, make sure that:

- *The organization name is spelled out. Do not use acronyms.*
- *All current partner organizations, especially those listed in your State Action Plan, are included.*
- *Only choose "other" for organization Type or Sector if your answer does not fall within the existing answer options.*
- *Include state-level, community-level, and tribal partners.*

Name of Key Partner Organization	**Primary Sector**
	Coalition Business/Lab or Education (schools) Justice (e.g., law enforcement, prisons, public safety) Research Evaluation/Academic Health Care/Services Housing Media Public Health Social Services Victim Service Government (Federal, State, Tribal, County, Local) Social Justice/ Community Organizations (e.g., grassroots) Faith-based Other (not listed)

FORM 5: IMPLEMENTATION

Instructions for Recipients
The purpose of this form is to provide information about each state-level program, practice, or policy that your organization implemented using Rape Prevention and Education program funding during the reporting period of xx/xx/xxxx to xx/xx/xxxx. One implementation form should be submitted for each program, practice, or policy.

SEM Levels
Individual *– Prevention strategies at this level promote attitudes, beliefs, and behaviors that prevent violence. Examples include conflict resolution and life skills training.*
Relationship *– Prevention strategies here focus on communication, parenting practices, and other bonds and connections. Examples include parenting and family-focused prevention programs, mentoring, and peer programs.*
Community *– Prevention strategies at this level impact the social, economic, and environmental characteristics of settings. Examples include reducing social isolation; enhancing economic and housing opportunities; and improving the processes, policies, and settings in schools and workplaces.*
Societal *– Prevention strategies at this level impact broad societal factors that help create a level of intolerance for violence. Examples include strategies to change social norms that support violence as an acceptable way to resolve conflicts, state and federal policies that offer economic and other support to families, and policies that support early childhood education to help pave the way for children to achieve lifelong opportunity and well-being.*

Defining differences between strategy, approach, and program, practice, or policy
Strategy *– A strategy is a focus area from the CDC's Resources for Action that lays out the direction or actions to achieve the goal of preventing violence. Example(s): Promote Social Norms that Protect Against Violence.*
Approach *– An approach is a specific way to advance a strategy. Approaches can be accomplished through programs, policies, or practices. Example(s): Bystander Approaches, Mobilizing Men and Boys as Allies.*
Program, practice, or policy *– A program, practice, or policy is a specific group of activities that work together to achieve the intended outcome of an approach. Example(s): Green Dot, Bringing in the Bystander, Coaching Boys into Men.*

As you answer questions about the prevention approach implementation efforts, please reference the table below:

Program, Policy, and Practice Definitions and Examples

Program	*Uses set educational/training (manualized curriculum) materials with a planned audience.*	*Educational sessions, staff/provider trainings.*
Policy	*Includes any work done to inform, assist in development, or put a policy into practice (i.e., Child Income Tax Credits). Does not include work done to implement a recently enacted policy or policy scans. (Note: Advocacy is not allowed under NOFO funded projects.)*	*Policy recommendations, policy training, policy development.*
Practice	*Made up of activities or meetings that do not follow a set curriculum.*	*Made up of activities or meetings that do not follow a set curriculum.*

When creating new Implementation submissions:

1. *Each program, practice, or policy should be reported separately.*
2. *If implementing in multiple settings, complete one form and provide details in Section 5 (Reach).*
3. *If implementing across multiple sub-recipients, submit one form and list specific activities, adaptations and reach for each.*
4. *Report training associated with TA, capacity building, or strategic planning using other forms.*
5. *Name your form submission after the program, practice, or policy being implemented.*

SECTION 1: DESCRIPTION OF IMPLEMENTATION EFFORT

This section collects information about the program, practice, or policy that your organization implemented during the reporting period. In this section, you will need to provide the program, practice, or policy name of the program, practice, or policy, and the associated approaches from CDC's VetoViolence Approach Search tool. One implementation form should be submitted for ***each*** *program, practice, or policy.*

Describe the program, practice, or policy in a way that someone who is not familiar with the effort would understand. This should include what it intends to do, how it's implemented, where it will occur, and evidence of effectiveness. Specific activities implemented as part of this program, practice, or policy will be collected in Section 3.

Name of Effort: [100]
Click or tap here to enter text.

Program, practice, or policy
Indicate which of the following aspects you are implementing as part of this implementation effort? [Select all that apply]

- Program/Practice
- Policy
- Unknown/Unsure

Is this an implementation or adaptation of any of the example programs, policies, or practices listed in DVP's Resources for Action? If so, please select from the list below.
Choose an item.

Please provide a short description of this program, practice, or policy:
Describe the program, practice or policy, in a way that someone who is not familiar with the effort would understand. This should include what it is, how it's implemented, where it occurs, and any evidence of effectiveness (e.g., research evidence, experiential evidence, contextual evidence, indigenous knowledge, etc). program, practice, or policy [6000]

Approach
Please select the Approach for this implementation effort
Choose an item.

SEM Level
Which SEM Level(s) does this Implementation Effort most directly impact? (Select one)
☐ *Individual* ☐ *Relationship* ☐ *Community* ☐ *Societal*

SECTION 2: POPULATION OF FOCUS AND REACH

This section collects information about the population/setting of focus and reach for this program, practice, or policy.

Population Groups: Please select all populations that are applicable to your program from below. It is likely that your implementation effort may reach most populations. However, if applicable, select populations that your implementation effort is specifically focusing on or trying to reach due to high rates of violence. Select "Other" if your answer does not fall within the existing options.

Population of Focus
Provide a description of the population and setting of focus for this implementation effort. If there is more than one implementation setting, please describe any differences in population of focus.

Provide reasons and data sources that were used for selecting the population and setting focus for this prevention effort. Also provide reasons and data sources that were used to show that the selected program, practice, or policy will be effective for reaching populations with high rates of violence.

Provide a narrative description of the population and setting of focus for this implementation effort. If there is more than one implementation setting, please describe any differences in population of focus. Also

describe why this population or setting was selected and how the implementation effort is appropriate for the selected population or setting [6000]

Population Groups

Is there a specific community or population you are focusing on? [Chose one from dropdown]

- Specific Community or Population (Check all that apply below)
- No Specific Community or Population (Skip to Reach tables below)

*If your program focuses on a specific population, please select all that are applicable from below. If your program is not focused on a specific population, you **do** not need to select any of the checkboxes below. Only select "other" if your answer does not fall within the existing options.*

Ethnicity

- Hispanic or Latino
- Not Hispanic or Latino

Race [Select all that apply]

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White

Groups with disabilities/health risks: [Select all that apply]

- Intellectual/developmental disabilities
- Mobility/ambulatory disabilities
- People with disabilities (general)
- Substance use
- Mental illness
- Other: Please Specify

Age groups: [Select all that apply]

- Infants (0-1)
- Young children (2-10)
- Youth (11-17)
- Young adults (18-24)
- Adults (25+)
- Older adults (65+)
- Other: Please Specify

Sexual orientation groups: [Select all that apply]
Which of the following best represents how the groups think of themselves?

- Gay (lesbian or gay)
- Straight, this is not gay (or lesbian or gay)
- Bisexual
- Something else
- I don't know the answer

Economically disadvantaged groups: [Select all that apply]

- Experiencing homelessness

- Experiencing poverty
- Receiving government aid
- Other: Please Specify

Geographical groups: [Select all that apply]

- Tribal
- Rural
- Urban
- Low-income neighborhoods
- Suburban
- Other: Please Specify

Other Groups: [Select all that apply]

- Foster youth
- Single parents
- Incarcerated or formerly incarcerated
- Veterans
- Military (active)
- Victims of crimes/violence
- Perpetrators of crimes/violence
- Gang members
- Students
- Non-English speaking
- Other Population(s) not listed above and not belonging to any grouping above: Please specify

Setting Reach table

This section collects information on the number of settings reached as part of prevention strategies during the reporting period. Enter a new row for each type of setting reached.

Number of Implementing Organization(s) [2000]	**Type of Setting (aggregated data)**	**Geographic Location [Select all that apply]**	**Total Number of Settings Reached Since the Start of the NOFO**	**Description of Setting**
Insert numeric value	Community County Territory State Tribe Non-governmental Organization (NGO) Community-based Organization (CBO) Business Faith-based Organization	Statewide County Tribal Rural Urban Low-income neighborhoods Suburban Other: Please Specify	Insert numeric value	Describe the setting you are reaching *e.g., Community health centers in rural communities*

	Elementary School Middle School High School College/University Bar Other: Please Specify			

Individual Reach table

This table collects information on the number of individuals reached as part of prevention strategies during the reporting period. Enter a new row for each specific population reached.

Number of Implementing Organization(s)	**Total Number of Individuals Reached Since the Start of the NOFO**	**Description of Population [1000]**
Insert numeric value	Insert numeric value	*Describe the population that you are reaching*

FORM 6: EVALUATION

Instructions for Recipients

The Evaluation Form collects information about state-level evaluation and progress on evaluation activities conducted during the reporting period of xx/xx/xxxx to xx/xx/xxxx.

SECTION 1: PROGRESS ON ADDRESSING EVALUATION QUESTIONS

Evaluation Questions Table

This section collects information about your program's progress on the evaluation questions during the reporting period of xx/xx/xxxx to xx/xx/xxxx. For each question, provide a summary of findings, including any quantitative or qualitative results.

Additional quantitative results will be collected in the next section: Outcomes & Indicators.

RPE 0027

Evaluation Questions

- *Q1. To what extent has the recipient accomplished the short term and intermediate outcomes in the NOFO logic model?*
- *Q2. To what extent has the recipient increased internal and partner capacity to facilitate/monitor the implementation of SV prevention strategies and center and engage communities?*
- *Q3. To what extent has the recipient leveraged multisector partnerships and resources toward SV prevention?*
- *Q4. To what extent has the recipient implemented strategies that address conditions for health and safety?*
- *Q5. To what extent has the recipient achieved high-quality implementation of SV prevention strategies*

that center and engage communities at the community and societal levels?
- *Q6. To what extent has the recipient increased use of data-driven decision-making, as well as state/territory- and community-level monitoring of trends related to SV prevention and assessing conditions for health and safety??*
- *Q7. Which factors are critical for implementing selected prevention strategies and approaches?*

RPE 0068
Evaluation Questions
- *Q1. To what extent has the SA Coalition accomplished the short-term and intermediate outcomes in the NOFO logic model?*
- *Q2. Which factors are critical for implementing selected prevention strategies and approaches?*
- *Q3. To what extent has the SA Coalition leveraged multi-sector partnerships and resources toward SV prevention?*
- *Q4. To what extent has the SA Coalition addressed conditions for health and safety and centered and engaged communities in the planning, implementation, and evaluation of SV prevention?*
- *Q5. To what extent has the SA Coalition increased use of data-driven decision-making, as well as state or territory and community-level monitoring of trends, related to SV prevention, and assessing conditions for health and safety?*

Summary of Findings (include any qualitative results) [2000] *Provide a summary of the progress your organization has made in relation to the evaluation question. You may also summarize any qualitative results you have collected related to the evaluation question.*

Resources needed for implementing evaluation plan activities in upcoming year (700 characters)

SECTION 2: OUTCOMES AND INDICATORS

This section collects data on the indicators you are using to measure your selected outcomes.

Outcome and Indicator Table

NEW*: For this NOFO, recipients may be assessing numerous outcomes. However, for the purpose of reporting in the partners portal, we ask that you* ***enter a maximum of 8-10 outcomes with 1-2 indicators per outcome****. To help streamline your efforts, we recommend entering the most relevant, high-priority outcomes, including at least one implementation and one risk/protective factor or violence outcome, if available. Recipients should continue to assess other outcomes, but report on 8-10 high-priority outcomes annually.*

EVALUATION QUESTION(S) ADDRESSED

Select the evaluation question(s) that the outcome addresses. You may select more than one question applicable to the outcome.

OUTCOME
Select the NOFO-level outcome(s) that the indicator(s) address. You may select more than one outcome applicable to the indictor(s).

INDICATORS AND DATA SOURCES
List 1-2 distinct indicators for each outcome, ensuring no overlap across outcomes to maintain clarity and

specificity. Indicators serve as measurable evidence to assess if the prevention efforts are executed as planned and are achieving the intended results. For each indicator provide:

- ***Indicator Description*** *defines the indicator being used to measure the outcome. An indicator is a documentable piece of information, from a specific data source, used to determine if the outcome was achieved.*
- ***Data Source Type*** *identify the corresponding data source type (e.g., needs assessment, surveillance data, law enforcement data, hospital data, surveys, etc.)*
- ***Data Source Name and Description*** *specify the data source name with a brief description*

CURRENT VALUE
Enter a number representing the value of your selected indicator based on the most recently available data at the time of reporting. If data cannot be reported or are not applicable for your selected indicator, you may select from the appropriate "No data to report" category to indicate no data is available.

YEAR 5 GOAL
Enter a number representing the desired goal to be achieved for your selected indicator at the end of the five-year NOFO. This is optional in years 1-2 but will be required starting in year 3.

Primary Evaluation Question(s) Addressed (make sure each evaluation question is addressed)	Description of Outcome [Select one for each row]	Indicator Description [500]	Data Source Type	Data Source Name and Description [500]	Current Value	Year 5 Goal *(optional in years 1-2; required starting in Year 3)*
☐ Question 1 ☐ Question 2 ☐ Question 3 ☐ Question 4 ☐ Question 5 ☐ Question 6	**RPE 0027** ☐ 1.1 Increased capacity to implement and evaluate primary prevention of SV at the community- and societal- levels within state health departments (SHDs) ☐ 1.2 Increased capacity among partner organizations to center and engage communities for SV prevention ☐ 2.1 Increased partner awareness of states/territories efforts to prevent SV ☐ 2.2 Increased partner and community awareness of effective primary prevention strategies and differences in the burden of SV ☐ 2.3 Increased coordination and collaboration among partners and between SHDs,	Click or tap here to enter text.	☐ Needs Assessment ☐ Surveillance data ☐ Law Enforcement data ☐ Hospital Data ☐ Surveys ☐ Interviews ☐ Focus Groups ☐ Administrative data ☐ National data ☐ State-level data ☐ Local-level data ☐ Tribal data ☐ Other (not listed) Please specify: Click or tap here to enter text.	Click or tap here to enter text.	☐ Insert numeric value: Click or tap here to enter text. ☐ No data to report ☐ Data is missing (program unable to collect) ☐ Data is not applicable (program does not collect)	☐ Year 1 (not applicable) ☐ Year 2 (not applicable) ☐ Insert numeric value

	state/territorial and tribal sexual assault (SA) coalitions, and other sectors to prevent SV ☐ 3.1 Increased community-level implementation of SV prevention strategies ☐ 3.2 Increased implementation of prevention strategies among communities and populations with high rates of SV ☐ 3.3 Increased implementation of prevention strategies that seek to prevent SV by addressing conditions that impact health and safety ☐ 4.1 Increased access and use of data to understand differences among populations and communities with high rates of SV ☐ 4.2 Increased monitoring and evaluation activities and sharing of data related to SV prevention Intermediate Outcomes ☐ 1.3 Increased capacity for statewide program					

	implementation and SV prevention ☐ 2.4 Increased partner support to implement, evaluate, and adapt state- and community-level strategies to prevent SV Strategy 3: Implement Strategy ☐ 3.4 Increased reach of prevention strategies to communities and populations with high rates of SV ☐ 3.5 Increase in number of community- and societal-level strategies that center and engage communities and address conditions that impact health and safety. ☐ 3.6 Increase in protective factors and decrease in risk factors associated with SV Strategy 4: Use Data to Inform Action ☐ 4.3 Increased use of data-driven decision-making to understand differences in populations and communities with high rates of SV ☐ 4.4 Increased					

	state- and community-level monitoring of trends in SV outcomes RPE 0068 **Short Term Outcomes** ☐ 1.1 Increased recipient capacity to implement and evaluate primary prevention of SV at the community and societal levels ☐ 1.2 Increased capacity among partners organizations to center and engage communities about SV prevention ☐ 2.1 Increased partner and community awareness of effective primary prevention strategies to prevent SV ☐ 2.2 Increased partner and community awareness about the differences in burden of SV ☐ 2.3 Increased coordination and collaboration among partners and between State Health Departments					

	(SHDs) and Tribal SA Coalitions to prevent SV ☐ 3.1 Increased community and societal level implementation of SV prevention strategies ☐ 3.2 Increased implementation of prevention strategies among communities and populations with high rates of SV ☐ 3.3 Increased implementation of prevention strategies that seek to prevent SV by addressing conditions that impact health and safety ☐ 4.1 Increased access to data that describes differences among populations and communities with high rates of SV ☐ 4.2 Increased monitoring and evaluation activities and sharing data related for SV prevention **Intermediate Outcomes** ☐ 1.3 Sustained capacity for program implementation and SV prevention across the state or territory"					

	☐ 2.4 Increased partner support to implement, evaluate, and adapt state and community level strategies to prevent SV" ☐ 3.4 Increased reach of prevention strategies that impact communities and populations with high rates of SV" ☐ 3.5 Increased efforts to align selected strategies with the needs of populations impacted by high rates of SV, to center and engage communities, and address conditions that impact health and safety ☐ 3.6 Increase in protective factors and decrease in risk factors associated with SV ☐ 4.3 Increased use of data for decision making to understand differences among populations and communities with high rates of SV" ☐ 4.4 Increased monitoring of trends in SV outcomes and					

	conditions that impact health and safety at the state and community level					

FORM 7: DATA TO ACTION

Instructions for Recipients

The Data to Action Form collects information about progress on data to action activities conducted during the reporting period of xx/xx/xxxx to xx/xx/xxxx. This form has two sections: 1) Data Collection and Use, and 2) Data Dissemination.

SECTION 1: DATA COLLECTION AND USE

This section collects information about the progress you have made in the collection, analysis, and use of sexual violence data, and data on shared risk and protective factors.

Data

Data Access and Use

Data Source (Name) [500]	**Data Source Type (Select one)**	**Description of Data Source [500] *(Include "owner"/data collector, information to be collected, how data is accessed, etc.)***	**Data Coverage**	**Use of Data**	**Describe Data Use [500]**	**Describe any barriers or challenges your program encountered in accessing this data source [500]**
	• Needs Assessment • Surveillance data • Police data • Hospital data • Surveys • Interviews • Focus groups • Administra		☐ School/ Campus ☐ School District/ System ☐ Census Tract/Zip Code ☐ Neighborhood	• Select population of focus • Select prevention strategies/approaches/programs • Select sub-recipients or community partners • Address differences in health • Inform Action Plan • Inform program or policy	Insert text	Insert text

	• tive data • Other (not listed): Specify Click or tap here to enter text.		☐ Town/City ☐ County ☐ State ☐ National ☐ Other (not listed): Please Specify Click or tap here to enter text.	effort implementation • Complete Evaluation		

SECTION 2: DATA DISSEMINATION

This section collects data on efforts you have made to disseminate data to partners, the public, the media, or policymakers during the reporting period, in alignment with your data dissemination plan.

Please report on completed efforts (i.e., dashboards, infographics, fact sheets, or other data tools that were released – not in development – during the reporting period).

Include all data sources and data dissemination activities. Choose which data dissemination activity was conducted and describe the activity, the core audience, and the potential reach.

Data Dissemination Table

Data Dissemination Activity [Select one]	**Description of Activity [500]**	**Core Audience [Select all that apply]**	**Reach of Efforts [500]**
• Released new or updated data dashboard or data website • Released new or updated infographic • Released new or updated fact sheets • Released new or updated report • Published manuscript/scientific publication • Conducted a presentation • Other (please specify)	Insert text	• General public • State agencies or governmental partners • Non-profit or community partners • Policymakers • Other, specify	Insert text