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CalVIP (Cohort 3) Quarterly Progress Report (QPR)

This document serves as your guide to the CalVIP (Cohort 3) Quarterly Progress Report (QPR). To start your QPR, please access the online tool at one of the following locations.

- To start the QPR for the Quarter 1/Quarter 2 report, please navigate to:
<https://survey.alchemer.com/s3/6265877/CalVIP-Cohort-3-Quarterly-Progress-Report-QPR-Q1-Q2>
- To start a QPR for any of the Quarter 3 through 11 reports, please navigate to:
<https://survey.alchemer.com/s3/6265885/CalVIP-Cohort-3-Quarterly-Progress-Report-QPR-Q3-Q11>

These links will take you to a login page. Please log in with your username and password, which will be provided to you by BSCC or evaluation team staff. You can also contact your study team liaison for your username and password. These usernames and passwords help customize your reporting experience and minimize the information you need to fill out in future reports. Since the information in the QPR is not sensitive, these usernames and passwords are not secret. Feel free to share them with other staff at your organization who may need to complete your QPR.

We realize that you may need to complete your QPR over multiple sessions. To do so, you will be provided a customized web address you can use to return to a given QPR that you have begun. At the bottom of the first full page (once you log in), you will find this link. It will activate after you move past the first page. You will also be emailed this link based on the email address you provide on the first page of the QPR. The email will come from calvipeval@spra.com. Please be sure to check your junk mail folder if you do not receive it. Also, we recommend that you copy and paste this link before advancing past the first page just in case you have difficulties receiving the email. Please remember that whenever you start a new QPR for a subsequent quarter, always start with the links in the bullet points above. The link within the QPR that you are emailed only allows you to edit an existing report, not start a new one.

The rest of this document lays out the questions as they appear in the QPR. While the QPR itself includes most instructions, this document shows you all questions in a single place, helps explain question skip patterns, lists out answer choices for dropdown menus, and explains when certain fields will be auto-filled based on prior questions or past QPRs. Throughout, you will see items highlighted in **green** if they only appear based on your selection of certain responses such as a follow-up question that only appears if you select “yes” to a question. Items highlighted in **blue** are those that change based on the section of the report you are in. For example, if your project has multiple goals, then you will see the goal number highlighted in blue. These do not show in the actual QPR but are illustrated here to help guide you.

For additional instructions on using the online tool, please view the recorded training under the Cohort 3 tab on the BSCC’s website at: http://www.bscc.ca.gov/s_cpgpcalvipgrant/

If you have further questions on how to complete the report or difficulty accessing it, please contact your liaison at: calvipeval@spra.com

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Section 1: Grantee and Reporting Information

1.1.1. Please provide the following information about your project and you.

a. Grantee:	[auto-filled grantee name]
b. Project Title:	[text]
c. BSCC Grant Award Number:	[text]

Commented [CG1]: This field will autofill based on your login.

Commented [CG2]: Starting in Q3, this field will autofill based on your past response.

Commented [CG3]: Starting in Q3, this field will autofill based on your past response.

d. Your name:	[text]
e. Your title:	[text]
f. Phone:	[phone]
g. Email:	[email]

1.1.2. Please select the reporting period for **this QPR**.

Commented [CG4]: The following dropdown menu will only include the first item for the Q 1/2 report. Subsequent reports will only include Q3 through Q11 options.

Please note that the first reporting period includes two quarters. For the first QPR, answers to questions that refer to the reporting period should include data for both quarters 1 and 2 combined.

Quarter 1/2: October 2020 - March 2021
Quarter 3: April - June 2021
Quarter 4: July - September 2021
Quarter 5: October - December 2021
Quarter 6: January - March 2022
Quarter 7: April - June 2022
Quarter 8: July - September 2022
Quarter 9: October - December 2022
Quarter 10: January - March 2023
Quarter 11: April - June 2023

1.1.3. Would you like any Technical Assistance?

Yes

No

[If yes] a. Please describe the type and nature of the assistance you would like.

[text]

Section 2: Quarterly Grant Status

2.1. Expenditure Status

2.1.1. Please report on the status of your grant and project expenditures as of the end of the reporting period.

a. Grant award amount:	[currency]
b. Grant amount invoiced-to-date (Sum of quarterly invoices):	[currency]

Commented [CG5]: Starting in Q3, this field will autofill based on your past response.

[c. and d. will only be visible for city and small city grantees based on your selection in 1.1.1.a.]

c. Amount of grant budgeted for <i>pass-through</i> funds:	[currency]
d. Amount of <i>pass-through</i> funds expended (record \$0 if you have no <i>pass-through</i> funds):	[currency]

Commented [CG6]: Starting in Q3, this field will autofill based on your past response.

2.1.2. Are grant funds being expended as planned and on schedule?

- Yes
- No

[If no] a. Please describe why not and what your plans are for adjusting future spending.

2.2. Status of Grant Agreement Goals and Objectives

2.2.1. How many goals does your project have?

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8

Commented [CG7]: Starting in Q3, this field will autofill based on your past response.

2.2.2. Are any of these goals new since your grant agreement?

- Yes
- No

[If yes] a. Please write out the goals that are new since your grant agreement.

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Goal [1]

2.2.3. Please provide the following information about Goal [1] and each of its objectives.

Commented [CG8]: 2.2.3. a. and b. will repeat based on the number of goals you selected 2.2.1.

a. Please write out Goal [1] and each of its objectives. For each objective, please indicate your plans for measuring completion of that objective. Leave any unused objective fields blank.

Commented [CG9]: Starting in Q3, the first table (2.2.3.a) will autofill based on the answers you provided in the first reporting period.

Goal 1	[text]
Objective 1a	[text]
Please describe your plans for measuring completion of Objective [1]a.	[text]
Objective 1b Progress	[text]
Please describe your plans for measuring completion of Objective [1]b.	[text]
Objective 1c Progress	[text]
Please describe your plans for measuring completion of Objective [1]c.	[text]
Objective 1d Progress	[text]
Please describe your plans for measuring completion of Objective [1]d.	[text]
Objective 1e Progress	[text]
Please describe your plans for measuring completion of Objective [1]e.	[text]
Objective 1f Progress	[text]
Please describe your plans for measuring completion of Objective [1]f.	[text]

b. Please provide progress updates for Goal [1] and each of the objectives for this goal that you filled in immediately above.

Goal 1 Progress	[text]
Objective [1]a Progress	[text]
Objective [1]b Progress	[text]
Objective [1]c Progress	[text]
Objective [1]d Progress	[text]
Objective [1]e Progress	[text]

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Objective 1 f Progress	[text]
Describe overall progress towards the stated goal during the reporting period.	[text]
Describe challenges in reaching the stated goal and all associated objectives during the reporting period.	[text]
If applicable, what steps did you implement to address any challenges?	[text]

Section 2.3: Project Inputs and Implementation

2.3.1. List all organizations and agencies that refer participants to your project. Also indicate the type of each organization. Self-referrals or referrals from family or friends will be captured further below.

Commented [CG10]: The table for this question will autofill starting in the Q3 reporting period based on answers provided in the first reporting period.

Name of Organizations that Refer to the Project	Organization Type
[text]	[text]

Commented [CG11]: Starting in Q3, if you need to add new organizations, you will need to fill in both the name of the organization and the organization type. Org type choices include: CBO/Non-profit, K-12 Education, Higher Education, Health Care Provider, Police/Sheriff, Probation/Parole, Workforce System Agency, Other Public Agency, Other

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a. Partnerships. What is the status of partnership agreements, including MOUs, subcontracts, etc., as well as any informal arrangements needed to deliver project services and complete project goals?

- Not Started
- Planning Phase
- Implementation Started
- Completed/Established
- N/A

Describe progress:

[text]

b. Staffing and/or Volunteers. What is the status of hiring or securing arrangements for people for positions needed to deliver project services and complete project goals?

- Not Started
- Planning Phase
- Implementation Started
- Completed/Established
- N/A

Describe progress:

[text]

c. Staff/Partner Training. What is the status of providing training to staff and/or partners needed to provide project services and complete project goals?

- Not Started
- Planning Phase
- Implementation Started
- Completed/Established
- N/A

Describe progress:

[text]

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d. Identification, Outreach and Enrollment. What is the status of identifying, conducting outreach to, and enrolling participants into project services?

- Not Started
- Planning Phase
- Implementation Started
- Completed/Established
- N/A

Describe progress:

[text]

e. Evidence-based practices. What is the status of identifying and implementing project interventions based on strategies known to achieve positive participant outcomes?

- Not Started
- Planning Phase
- Implementation Started
- Completed/Established
- N/A

Describe progress:

[text]

f. Data Collection/Evaluation. What is the status of identifying and conducting systematic and ongoing data collection to measure participation and evaluation measures?

- Not Started
- Planning Phase
- Implementation Started
- Completed/Established
- N/A

Describe progress:

[text]

g. Please describe any ways in which the COVID-19 pandemic has affected implementation.

[text]

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Section 3: Description of Grantee Services

In this section you will clarify who can participate in the services provided by your grant and the nature of those services. For most grantees, the information in this section will stay the same throughout your grant.

For the following questions, please describe each “program” that is funded by your CalVIP grant, also referred to as your CalVIP project. The definition of a program is a distinct service track within your project that has its own unduplicated enrollment and may have distinct eligibility criteria and/or sets of services that it provides to participants that are different from other programs. In other words, for a project to have multiple programs, participants must not cross between them and programs may be different from one another in other ways. Some grantees offer only one program as part of their projects. Those that offer multiple programs may do so in different ways. Grantees with multiple programs may offer them from within one or across many different organizations.

Furthermore, this report is concerned with tracking information about programs where a participant is enrolled and expected to receive multiple services. In contrast, this report is not concerned with tracking participant information for services that are singular in nature such as one-time workshops or classes, street outreach services (on their own and not connected to more intensive services), or other types of limited contact where enrollment information typically is not available and there is no expectation of additional contact. While these limited involvement services may be important, this report is not tracking them.

Given the definitions above, how many programs are part of your CalVIP-funded project?

1
2
3
4
5
6
7
8
9
10

Commented [CG15]: Most questions in Section 3 will autofill starting with the Q3 reporting period based on answers provided for the first reporting period

Commented [CG16]: This is a dropdown where you pick the number of programs. This number will autofill starting in Q3 based on the number selected in prior quarters.

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Section 3.1: Program [1]

3.1.1. For Program [1] of your CalVIP-funded project, please list the name of the program, the organization that is primarily responsible for operating it (this organization should be listed in the partner section above or be your organization), and the enrollment goal (i.e., the number of participants you plan to enroll) for this program over the lifetime of the project.

Name of Program	Lead Operating Organization	Enrollment Goal
[text]	[text]	[number]

3.1.2. For Program [1] of your CalVIP-funded project, please provide the following information about program eligibility.

a. What is the minimum age a person can be to participate? Min Age (if none, enter "N/A"):	[number]
b. What is the maximum age a person can be to participate? Max Age (if none, enter "N/A"):	[number]

c. Describe the process used to determine a participant's eligibility.	[text]
d. Describe any other eligibility requirements participants must meet to be in this program.	[text]

3.1.3. For Program [1] of your CalVIP-funded project, are participants formally assessed?

- Yes
 No

[If yes] a. What tool and how is it used?

[text]

3.1.4. Does Program [1] of your CalVIP-funded project use a validated risk assessment tool?

- Yes
 No

[If yes] a. What tool and how is it used?

[text]

Commented [CG17]: This section will replicate with questions for Program 2, Program 3 and so forth, depending on the number of programs selected immediately above.

Starting in Quarter 3, many of these items will also autofill, based on the answers provided in prior quarters.

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3.1.5. Please select the types of services provided to participants as part of Program [1] (select all that apply).

We recognize that grantees have many ways of describing service components. Please select the services from the list that best describe those provided by Program [1] of your project. Do not include services that participants may receive from other organizations or programs that are made through “soft” referrals and not tracked as part of your program. Please note that you will need to report on participant activity in each category selected (for the project as a whole) in question 4.3.1.

<input type="checkbox"/> Case Management	<input type="checkbox"/> Life skills/Healthy Choices/Family Management
<input type="checkbox"/> Conflict Resolution/Anger Management/Violence Avoidance/Social Emotional Learning Training	<input type="checkbox"/> Mentoring
<input type="checkbox"/> Cognitive Behavioral Therapy	<input type="checkbox"/> Motivational Interviewing
<input type="checkbox"/> Culturally Responsive/Culturally Competent Services	<input type="checkbox"/> Pro-social/Leadership Skills and Activities
<input type="checkbox"/> De-escalation/Violence Interruption/Intervention Services	<input type="checkbox"/> Substance Abuse Treatment
<input type="checkbox"/> Diversion	<input type="checkbox"/> Supportive Services (including any supports provided or tracked through the program that aid participants in achieving other program goals)
<input type="checkbox"/> Education: K-12/GED	<input type="checkbox"/> Tattoo Removal
<input type="checkbox"/> Education: Postsecondary	<input type="checkbox"/> Trauma-Informed/Restorative Justice Practices
<input type="checkbox"/> Health: Mental/Behavioral	<input type="checkbox"/> Vocational Skills Training/Apprenticeships
<input type="checkbox"/> Health: Physical Health	<input type="checkbox"/> Work/Career Readiness Training
<input type="checkbox"/> Housing	<input type="checkbox"/> Other: [text]
<input type="checkbox"/> Individual Development Planning/Life, Education, or Career Planning	<input type="checkbox"/> Other: [text]
	<input type="checkbox"/> Other: [text]
	<input type="checkbox"/> Other: [text]

Commented [CG18]: System is filling in all other boxes and not pre-filling “Text”

Lea will check on number and then we will communicate individually with these grantees.

3.1.6. Describe the measurable milestone(s) Program [1] uses to determine when a participant has successfully completed services? Please describe what criteria you use for determining completion? Note that you will use this definition for identifying participants who “successfully complete” your project in Section 4.

[Text]

Commented [CG19]: If you have “Other” selected, it will be pre-filled, but please fill in the description in the “text” portion of this answer.

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Section 4: Enrollments, Services Received, and Exits

This section is for you to report how many unique/unduplicated individuals enrolled in your project, received services, and/or exited during the reporting period. In this section, you should record this information for your project overall and not for individual programs.

Section 4.1: Enrollment and Reentry

4.1.1. For the reporting period, please record the total number of participants who enrolled in the project and the number of participants who enrolled in the project in each enrollment category listed below.

The “1st Time Enrolled” column should include the number of participants who enrolled in project services during the reporting period and who had never previously enrolled in project services since the start of the grant. The “2nd Time Enrolled” and “3(+)rd Time Enrolled” columns should include the number of participants who enrolled a second or third (or greater) time during the reporting period, after having previously been exited at any time during the grant. In other words, to be included in the “2nd Time Enrolled” column, a participant must have previously been recorded once in the “Exit” section (Section 4.4) at any point during the grant period. In order to be included in the “3(+)rd Time Entry” column, a participant previously must have been recorded in the “Exit” section two or more times at any point during the grant period. It is possible for a person to exit and reenter in the same reporting period.

The total of the numbers you enter in each column for items b., c., and d. should equal the value you have listed in each respective column of item a. For example, if you list “10” in the “1st time enrolled” column in item a., the total number of people in the “1st time enrolled” column in item c. should also equal 10.

a. Total Number of Participants Enrolled

	1 st Time Enrolled	2 nd Time Enrolled	3(+) rd Time Enrolled
Total Enrollment			

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b. Please Indicate the Referral Source and Number of Participants Enrolled by Referral Source

Referral Source Name	1 st Time Enrolled	2 nd Time Enrolled	3(+) Time Enrolled
[text]			
Family/Friend			
Unknown/Did not collect			

Commented [CG20]: The Referral Source names will pre-populate starting in Quarter 3 based on prior quarters. If you have added any referral sources to 2.3.1 in the current quarter, please also add these here.

c. Number of Participants Enrolled by Participation Status

	1 st Time Enrolled	2 nd Time Enrolled	3(+) Time Enrolled
Mandated			
Voluntary			
Unknown/Did not collect			

d. Number of Participants Enrolled by Point of Diversion/System Involvement

	1 st Time Enrolled	2 nd Time Enrolled	3(+) Time Enrolled
No contact with law enforcement			
Informal contact with law enforcement			
Pre-adjudication			
Post-adjudication, in community, no supervision			
Post-adjudication, in community, under supervision			
Post-adjudication, in-facility			
Unknown/Did not collect			

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Section 4.2: Participant Demographics at Enrollment

4.2.1. For the reporting period, please record the total number of participants who enrolled and the number of participants in each demographic category at the point of enrollment.

The total of the numbers you enter in each column for items b., c., and d. should equal the value you have listed in each respective column of item a. For example, if you list “10” in the “1st time enrolled” column in item a., the total number of people in the “1st time enrolled” column in item c. should also equal 10.

a. Total Number of Participants Enrolled

	1 st Time Enrolled	2 nd Time Enrolled	3(+) rd Time Enrolled
Total Enrollment			

b. Number of Participants by Age at Enrollment

	1 st Time Enrolled	2 nd Time Enrolled	3(+) rd Time Enrolled
12 years or younger			
13-17 years old			
18-24 years old			
25-34 years old			
35 years or older			
Unknown/Did not collect			

c. Number of Participants by Gender at Enrollment

	1 st Time Enrolled	2 nd Time Enrolled	3(+) rd Time Enrolled
Female			
Male			
Non-binary/3 rd Gender			
Other			
Prefer not to state			
Unknown/Did not collect			

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d. Number of Participants by Race/Ethnicity at Enrollment

Please list multi-racial/ethnic participants under the multiple race or ethnicity row.

	1 st Time Enrolled	2 nd Time Enrolled	3(+) Time Enrolled
American Indian/Alaska Native			
Asian: Chinese			
Asian: Japanese			
Asian: Filipino			
Asian: Korean			
Asian: Vietnamese			
Asian: Indian			
Asian: Laotian			
Asian: Cambodian			
Asian: Other			
Black or African American			
Hispanic or Latino			
Middle Eastern/North African			
NH/PI: Native Hawaiian			
NH/PI: Guamanian			
NH/PI: Samoan			
NH/PI: Other			
White			
Other			
Multiple race or ethnicity			
Declined to state			
Unknown/Did not collect			

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e. Number of Participants in Assessed Risk Groups at Enrollment

	1st Time Enrolled	2nd Time Enrolled	3(+)rd Time Enrolled
Low			
Medium			
Medium-high			
High			
Other: [text]			
Unknown/Did not collect			

f. Number of Participants of Different Education Statuses at Enrollment

	1st Time Enrolled	2nd Time Enrolled	3(+)rd Time Enrolled
Enrolled in elementary or middle school			
Enrolled in high school			
Enrolled in training program			
Enrolled in 2/4-year college			
Not Enrolled/Highest Completed: Elementary or Middle school			
Not Enrolled/Highest Completed: Some high school			
Not Enrolled/Highest Completed: High school diploma			
Not Enrolled/Highest Completed: GED			
Not Enrolled/Highest Completed: Some college or vocational training			
Not Enrolled/Highest Completed: Certificate or college degree			
Unknown/Did not collect			

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g. Number of Participants with Different Employment Statuses at Enrollment

	1st Time Enrolled	2nd Time Enrolled	3(+)rd Time Enrolled
Employed: Not looking for other/additional employment			
Employed: Looking for other/additional employment			
Unemployed: Looking for employment			
Unemployed: Not looking for employment/student			
Unemployed: Not looking for employment/other reason			
Unknown/Did not collect			

h. Number of Participants with Different Housing Statuses at Enrollment

	1st Time Enrolled	2nd Time Enrolled	3(+)rd Time Enrolled
Living independently (own or rent)			
Living with parent/s			
Living with relatives (not foster care)			
Living with a friend			
Living in foster care			
Living in out-of-home care through child welfare or probation			
Living in unstable housing (car, street, abandoned building, tent, etc.)			
Other			
Unknown/Did not collect			

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Section 4.3: Participation in Services

4.3.1. Please record the number of unduplicated individuals that participated in each type of service offered across the project during the reporting period.

In the following table, for each service category provided under the grant, please indicate the total number of unique individuals that received those services during the reporting period. Participants exiting during the reporting period should be included in the total so long as they received the selected services at any time during the reporting period. The same participant can be reported across different services but should only be counted one time for any given service. The purpose of this table is to provide a 'snap-shot' of participation by service type during the reporting period.

	Unduplicated Participant Count
[Case Management]	
[Conflict Resolution/Anger Management/Violence Avoidance/Social Emotional Learning Training]	
[Cognitive Behavioral Therapy]	
[Culturally Responsive/Culturally Competent Services]	
[De-escalation/Violence Interruption/Intervention Services]	
[Diversion]	
[Education: K-12/GED]	
[Education: Postsecondary]	
[Health: Mental/Behavioral]	
[Health: Physical Health]	
[Housing]	
[Individual Development Planning/Life, Education, or Career Planning]	
[Life skills/Healthy Choices/Family Management]	
[Mentoring]	
[Motivational Interviewing]	
[Pro-social/Leadership Skills and Activities]	
[Substance Abuse Treatment]	
[Supportive Services]	
[Tattoo Removal]	
[Trauma-Informed/Restorative Justice Practices]	
[Vocational Skills Training/Apprenticeships]	

Commented [CG21]: These services will prepopulate based on the answers selected in 3.1.5.

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[Work/Career Readiness training]	
Other: [text]	

Commented [CG22]: Please note that if you selected "Other" in 3.1.5, you need to fill in the description in 3.1.5 for the description to appear here.

4.3.2. Please record the number of individuals that participated in each type of service offered across the project over the lifetime of the grant.

Commented [CG23]: This question will only appear starting in Quarter 3.

In the following table, for each service category provided under the grant, please indicate the total number of unique individuals that received those services over the lifetime of the grant. The same participant can be reported across different services but should only be counted one time for any given service. For example, if a participant received Service X in quarter 3 and quarter 5, then this individual should only be counted once for Service X in this table.

	Unduplicated Participant Count
[Case Management]	
[Conflict Resolution/Anger Management/Violence Avoidance/Social Emotional Learning Training]	
[Cognitive Behavioral Therapy]	
[Culturally Responsive/Culturally Competent Services]	
[De-escalation/Violence Interruption/Intervention Services]	
[Diversion]	
[Education: K-12/GED]	
[Education: Postsecondary]	
[Health: Mental/Behavioral]	
[Health: Physical Health]	
[Housing]	
[Individual Development Planning/Life, Education, or Career Planning]	
[Life skills/Healthy Choices/Family Management]	
[Mentoring]	
[Motivational Interviewing]	
[Pro-social/Leadership Skills and Activities]	
[Substance Abuse Treatment]	
[Supportive Services]	
[Tattoo Removal]	

Commented [CG24]: These services will prepopulate based on the answers selected in 3.1.5.

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[Trauma-Informed/Restorative Justice Practices]	
[Vocational Skills Training/Apprenticeships]	
[Work/Career Readiness training]	
Other: [text]	

Commented [CG25]: Please note that if you selected "Other" in 3.1.5, you need to fill in the description in 3.1.5 for the description to appear here.

Section 4.4: Participant Exits

4.4.1. For the reporting period, please record the total number of participants who exited the project and their reason for exit.

Similar to what was previously described for enrollment, the "1st Time Exits" column should include the number of participants who exited the project during the reporting period and who had never previously exited the project, since the start of the grant. The "2nd Time Exits" and "3(+)rd Time Exits" columns should include the number of participants who exited a second or third (or greater) time during the reporting period, after having previously exited at any time during the grant. In other words, to be included in the "2nd Time Exits" column, a participant must have previously exited once at any point during the grant period. In order to be included in the "3(+)rd Time Exit" column, a participant previously must have exited two or more times at any point during the grant period. It is possible for a person to exit multiple times in the same reporting period.

The total of the numbers you enter in each column for items b., c., and d. should equal the value you have listed in each respective column of item a. For example, if you list "10" in the "1st time exits" column in item a., the total number of people in the "1st time exits" column in item c. should also equal 10.

a. Total Number of Participants at Exit

	1 st Time Exits	2 nd Time Exits	3(+) rd Time Exits
Total Participants Exited			

b. Primary Reason for Exit

	1 st Time Exits	2 nd Time Exits	3(+) rd Time Exits
Successful completion			

Commented [CG26]: For this field, please refer to the definition you provided in 3.1.6.

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Dropped out/lost contact			
Non-compliant (asked to leave)			
Arrest/incarceration			
Services determined not appropriate			
Other			
Unknown/Did not collect			

Section 4.5: Exiting Participant Demographics

4.5.1. For the reporting period, please record the demographic categories for participants exiting the project.

For exiting participants, please categorize individuals based on the demographic information collected at enrollment. For example, if a participant enrolled into project services when they were 17 years old, and exited when they were 20 years old, you would still count them in the “13-17 years old” line.

Also, the total of the numbers you enter in each column for items b., c., and d. should equal the value you have listed in each respective column of item a. For example, if you list “10” in the “1st time exits” column in item a., the total number of people in the “1st time exits” column in item c. should also equal 10.

a. Total Number of Participants at Exit

	1 st Time Exits	2 nd Time Exits	3(+) rd Time Exits
Total Participants Exited			

b. Number of Exiting Participants by Age

	1 st Time Exits	2 nd Time Exits	3(+) rd Time Exits
12 years or younger			
13-17 years old			
18-24 years old			
25-34 years old			
35 years or older			
Unknown/Did not collect			

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c. Number of Exiting Participants by Gender

	1 st Time Exits	2 nd Time Exits	3(+) rd Time Exits
Female			
Male			
Non-binary/3 rd Gender			
Other			
Prefer not to state			
Unknown/Did not collect			

d. Number of Exiting Participants by Race/Ethnicity

Please list multi-racial/ethnic participants under the multiple race or ethnicity row.

	1 st Time Exits	2 nd Time Exits	3(+) rd Time Exits
American Indian/Alaska Native			
Asian: Chinese			
Asian: Japanese			
Asian: Filipino			
Asian: Korean			
Asian: Vietnamese			
Asian: Indian			
Asian: Laotian			
Asian: Cambodian			
Asian: Other			
Black or African American			
Hispanic or Latino			
Middle Eastern/North African			
NH/PI: Native Hawaiian			
NH/PI: Guamanian			
NH/PI: Samoan			
NH/PI: Other			
White			
Other			
Multiple race or ethnicity			
Declined to state			
Unknown/Did not collect			

Section 5: Participant Outcomes

5.1.1. In the following table, please list each outcome your project measures, how you would categorize this outcome based on the list provided, and the method by which you measure whether a positive change has occurred.

An outcome refers to a change that happens to participants as compared to some prior state. The BSCC is interested, in particular, in measurable, positive changes that occur to participants. The prior state in question could be the participant's status prior to enrollment, at enrollment, or at some point while receiving services (note that "positive" changes for justice system involvement typically involve lower scores, and fewer incidents rather than increases). Some examples of positive outcomes that your program may try to capture might include placement in employment, increased earnings, fewer altercations at school, completion of educational credit or a certificate or degree, indications of improved physical or mental health, more stable housing, improved connections to trusting adults, etc.

Please note that you should only include measurable changes. Some possible ways to measure changes involve using a validated (or non-validated) assessment tool; examining health, education, or criminal justice system records, observing official documents (e.g., a pay stubs, transcripts, expert observations), or gathering self-reported information through a participant survey, questionnaire, or follow-up calls.

For the Outcome Categories you should select, the full description of each one is as follows (abridged versions appear in the dropdown menu):

- Crime 1:** Reduced Violent Activity/Gang Involvement
- Crime 2:** Reduced Arrests/Charges
- Crime 3:** Reduced Convictions/Sustained Petitions
- Crime 4:** Reduced Incarceration
- Employment 1:** Found Employment
- Employment 2:** Retained Job/Promoted
- Employment 3:** Increased Earnings
- Employment 4:** Improved Job Satisfaction
- K-12 Education 1:** Enrollment/Credit Completion
- K-12 Education 2:** Diploma/GED Completion
- K-12 Education 3:** Improved Attendance
- K-12 Education 4:** Reduced Disciplinary Actions
- Postsecondary Education 1:** Enrollment/Credit Completion
- Postsecondary Education 2:** Certificate Completion
- Postsecondary Education 3:** Degree Completion

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- Health 1:** Improved Mental Health
- Health 2:** Improved Physical Health
- Health 3:** Reduced Drug/Alcohol Use
- Health 4:** Reduced Victimization
- Housing 1:** More Stably Housed
- Psychosocial 1:** Feeling More Engaged with Society
- Psychosocial 2:** Feeling More Connected to Others
- Psychosocial 3:** Feeling Safer in the Community
- Psychosocial 4:** Feeling Better Able to Make Positive Life Choices
- Psychosocial 5:** Increased Feeling of Basic Needs Being Met
- Skills/Knowledge 1:** Improved Justice System Awareness
- Skills/Knowledge 2:** Improved Conflict Resolution/Anger Management/Violence Avoidance/
Social Emotional Skills
- Skills/Knowledge 3:** Improved Life/Healthy Choices/Family Management Skills
- Skills/Knowledge 4:** Improved Work/Career Readiness

Project Outcome	Outcome Category	Method of Measuring Positive Change
[Text]	[Dropdown list]	[Text]

Commented [CG27]: Please list each outcome your project measures as your project describes them. These are pre-filled in 5.1.2. You can copy and paste these in from 5.1.2.

Commented [CG28]: For this column, please categorize each outcome your project measures using the following dropdown choices.

- Crime 1:** Violence/Gang Activity
- Crime 2:** Arrests/Charges
- Crime 3:** Convictions/Petitions
- Crime 4:** Incarceration
- Employment 1:** Employment
- Employment 2:** Retention/Promotion
- Employment 3:** Earnings
- Employment 4:** Job Satisfaction
- K-12 Ed 1:** Enrollment/Credits
- K-12 Ed 2:** Diploma/GED
- K-12 Ed 3:** Attendance
- K-12 Ed 4:** Disciplinary Actions
- Postsecondary 1:** Enrollment/Credit
- Postsecondary 2:** Certificates
- Postsecondary 3:** Degrees
- Health 1:** Mental Health
- Health 2:** Physical Health
- Health 3:** Drug/Alcohol Use
- Health 4:** Victimization
- Housing 1:** Stable Housing
- Psychosocial 1:** Engaged with Society
- Psychosocial 2:** Connected to Others
- Psychosocial 3:** Safer in the Community
- Psychosocial 4:** Life Choices
- Psychosocial 5:** Basic Needs Met
- Skills 1:** Justice System Awareness
- Skills 2:** Conflict/Anger Management/SES
- Skills 3:** Life/Health/Family Choices
- Skills 4:** Work/Career Readiness

5.1.2. In the following table, for each outcome your project measures, please report on the number of participants who exited the project during this reporting period AND demonstrated a positive change for the given outcome.

The second column should include an unduplicated count of individuals who exited your project during the reporting period, but only if they experienced positive changes. An individual should appear no more than once in any given row, but may appear in more than one row. In other words, the total possible number of individuals who could be included in each row of the table would be the total number of individuals who exited the project during this reporting period.

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Outcome	Number of Individuals Exiting with a Positive Outcome for this Reporting Period
[Text]	[number]

Commented [CG29]: This column will auto-populate based on the outcomes you provided in prior quarters.

5.1.3. In the following table, for each outcome your project measures, please report on the number of participants who exited the project at any point of the grant AND demonstrated a positive change for the given outcome.

Commented [CG30]: This question only appears starting in the Q3 reporting period.

The second column should include an unduplicated count of individuals who exited your project at any point during the lifetime of the grant, but only if they experienced positive changes. An individual should appear no more than once in any given row, but may appear in more than one row. In other words, by quarter 11, the total possible number of individuals who could be included in each row of the table would be the total number of individuals ever exited from the project over the lifetime of the grant.

Outcome	Number of Individuals Exiting with a Positive Outcome During the Grant Period
[Text]	[number]

Commented [CG31]: This column will auto-populate based on the outcomes you list in 5.1.1