OMB No. 0990-0438 Exp. Date: 10/31/2018

Teen Pregnancy Prevention Program Performance Measures

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The time required to complete this information collection is estimated to average 0.9 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer.

Questions at Grantee-Level

Grantee Details

Program Model

Select the evidence-based program model(s) being replicated (tier 1) or type the name of the program model(s) being tested (tier 2) as part of the project.

Aban Aya Youth Project

Adult Identity Mentoring (Project AIM)

All4You!

Assisting in Rehabilitating Kids (ARK)

Be Proud! Be Responsible!

Be Proud! Be Responsible! Be Protective!

Becoming a Responsible Teen (BART)

Children's Aid Society (CAS)—Carrera Programs

¡Cuídate!

Draw the Line/Respect the Line

Families Talking Together (FTT)

FOCUS

Health Improvement Projects for Teens (HIP Teens)

Heritage Keepers Abstinence Education

HORIZONS

It's Your Game: Keep it Real (IYG)

Making a Difference!

Making Proud Choices!

Project IMAGE

Project TALC

Promoting Health Among Teens! Abstinence-Only Intervention

Promoting Health Among Teens! Comprehensive Abstinence and Safer Sex Intervention

Raising Healthy Children (formerly known as the Seattle Social Development Project)

Reducing the Risk

Respeto/Proteger

Rikers Health Advocacy Program (RHAP)

Safer Choices

Safer Sex

SiHLE

Sexual Health and Adolescent Risk Prevention (SHARP) (formerly known as HIV Risk Reduction Among Detained Adolescents)

Sisters Saving Sisters

STRIVE

Teen Health Project

Teen Outreach Program (TOP)

Seventeen Days

State

Select the state(s) served by the TPP grant

Alabama Louisiana Ohio Alaska Maine Oklahoma Arizona Maryland Oregon Arkansas Massachusetts Pennsylvania Rhode Island California Michigan Colorado Minnesota South Carolina Mississippi South Dakota Connecticut Delaware Missouri Tennessee Florida Montana Texas Georgia Nebraska Utah Hawaii Nevada Vermont Idaho New Hampshire Virginia Washington Illinois New Jersey New Mexico West Virginia Indiana New York Iowa Wisconsin Kansas North Carolina Wyoming Kentucky North Dakota

Setting

Select the setting(s) served by the TPP grant		
Out-of-School Time and Community-Based Programs		
In school, Elementary School		
In school, Middle School		
In school, High School, traditional		
In school, High school, alternative		
Out of Home Care		
Runaway and Homeless Youth		
Youth in Juvenile Justice		
Clinic-based		
Faith-based organizations		
Institutions of Higher Education		

Urbanicity

Select the urbanicities served by the TPP grant (http://www.cdc.gov/nchs/data/series/sr 02/sr02 166.pdf—a list of U.S. counties and county-equivalent entities and their urbanization levels starts on page 32)			
Large central metro			
Large fringe metro			
Medium metro			
Small metro			
Micropolitan			
Non-core			

Partners

Formal partners are organizations (e.g., schools) with a written agreement, such as signed MOU, contract, or Letter of Commitment, and who cooperate and collaborate with the grantee to implement the program by sharing resources and working together to enhance each other's capacity.

- How many formal partners were involved in implementing the program during the reporting period?
- Of all the project's formal partners that were engaged at the beginning of the program year, how many were still engaged at the end of the program year?

Informal partners are organizations that support the implementation of the program informally through networking and coordinating activities; there is no written agreement between the grantee and an informal partner.

- How many informal partners were involved in implementing the program during the reporting period?
- Of all the project's informal partners that were engaged at the beginning of the program year, how many were still engaged at the end of the program year?

(Asked only in the final data collection) How many partners described firm plans to continue implementation of the program after the end of OAH grant funding?

Training

- In the reporting period, how many new intervention facilitators (including teachers) have you or one of our partners trained? Please include only training provided to new facilitators.
- In the reporting period, how many intervention facilitators (including teachers) have you or one of your partners given supplemental training?

Dissemination

•	bot	w many manuscripts have you had accepted for publication in the reporting period (including th articles that were published and those that have been accepted but not yet published)? Do include manuscripts previously reported as published.
•		ase list the references for any published manuscripts published in the reporting period.
•	Du	ring the reporting period, indicate the number of times each approach was used to mmunicate information and raise awareness about the TPP-funded program:
	0	Brochure/Newsletter/E-Newsletter
	0	Press Release
	0	Radio/TV advertisement
	0	Newspaper/Magazine article
	0	Peer Reviewed Publication
		 Please list the references for any peer reviewed publication
	0	Other (explain)
•	Но	w many presentations have you made at each of the following levels in the reporting period:
	0	National or regional?
		Please list titles of all presentations and venue (e.g., conference or organization to which the presentation was made)
	0	State?
		Please list titles of all presentations and venue (e.g., conference or organization to which the presentation was made)

Costs

Part 1: Personnel Costs

Indicate the total personnel costs, including salary, payroll taxes, and benefits, paid during this reporting period by each organization or implementation partner supported by the grant:

«name of grantee organization»	\$
«name of partner organization #1»	\$
«name of partner organization #2»	\$
«name of partner organization #3»	\$
«name of partner organization #4»	\$

For each organization or implementation partner supported by the grant, estimate the proportion of personnel costs used to support each of the following activities during this reporting period:

	General Admin.	Participant recruitment or retention	Staff training & technical assistance	Providing program services	Fidelity monitoring	Evaluation
«grantee»	%	%	%	%	%	%
«partner #1»	%	%	%	%	%	%
«partner #2»	%	%	%	%	%	%
«partner #3»	%	%	%	%	%	%
«partner #4»	%	%	%	%	%	%

Part 2: Office Space and Facilities		
Indicate the category that best describes the cost of office space ar any implementation partners (check one):	nd facilities used by the grantee and	
All office space and facilities are used free of charge to the grantee and implementation partners		
Some office space and facilities are used free of charge and others require payment		
All office space and facilities require payment		
If some or all of the office space and facilities require payment, indi- grantee and any implementation partners during this reporting perio		
\$		
Part 3: Financial Diversification and Sustainability		
For each of the following resource categories, indicate the amount received during this reporting period to assist with ongoing and futu		
Fund raising or cash (donations, fee for service, etc.)	\$	
Other grants	\$	
Internal agency funding	\$	
In-kind contributions (estimate value)	\$	
Other specify:	\$	

Questions at Implementing Organization-Level

Reach Demographics

- For each section, how many youth participated in your program for at least one activity in the reporting period?
 - Gender—Male, Female, Transgender, Do not identify as male, female or transgender, Unknown/unreported
 - Age—10 or younger, 11–12, 13–14, 15–16, 17–18, 19 or older, Unknown/unreported
 - Grade—6 or less, 7–8, 9–10, 11–12, GED program, college/technical, Not currently in school, Unknown/unreported
 - Race/ethnicity—

	Ethnicity		
Race	Hispanic/ Latino	Non-Hispanic/ Latino	Unknown Ethnicity
White			
Black			
Asian			
American Indian/Alaska Native			
Native Hawaiian/Other Pacific Islander			
More than one race			
Other Race			
Race unknown/not reported			

Dosage of Services Received by Participants

- For each section, what is the total number of participants that participated in your program for at least one activity in the reporting period?
- For each section during the reporting period, what was the average attendance for every scheduled class/session?
- For each section during the reporting period, how many participants attended 75% or more of the program classes/sessions?

Fidelity

Facilitator reported fidelity

• For each section, what is the number of activities planned and what is the number of activities completed?

Observer reported fidelity

- For each section, how many classes/sessions were actually observed by an independent observer?
- For each section, what was the average observed adherence (average number of activities completed across sessions as observed)?

Observer reported quality (see observation form)

- For each section, how many classes/sessions were actually observed by an independent observer?
- What was the average quality rating across sections for the following areas:
 - Explanation of activities
 - Track of time
 - Presentation rushed
 - Participants understand
 - Active participation
 - Knowledge
 - Enthusiasm
 - Poise
 - Rapport
 - Addressed concerns
 - Overall quality

Linkages to Youth-Friendly Health Care

In the reporting period, how many referrals were made by program staff to youth-friendly off-site providers or SBHCs for ANY of the following health services: Reproductive Health Care; Mental Health Services; Primary Health Care; Educational Services; Vocational Education/Workforce Development; Intimate Partner Violence Prevention; Healthy Relationships Training. (Collect # of each)

Costs

Part 1: Payments to Program Developer or Distributor

ndicate the total amount of any payments made to eporting period by either the grantee or any imple	, ,
\$	
	-

What types of materials, supports, and/or services were covered by these payments during this reporting period (check all that apply)?

Curriculum or other program materials and supplies

Licensing fees

Fidelity monitoring or quality improvement services

Evaluation

Other specify:

Part 2: Other Direct Costs to Support Program Implementation

Apart from any payments made to a program developer or distributor, indicate the total amount paid during this reporting period by the grantee or any implementation partner for each of the following:

Other program materials and supplies from an outside provider	\$
Monetary incentives, including gift cards, for program enrollment or participation	\$
Non-monetary incentives for program enrollment or participation (t-shirts, etc.)	\$
Program supports (meals, transportation, etc.)	\$
Program recruitment materials	\$
Media campaigns	\$