BUREAU OF JUSTICE ASSISTANCE
COMMUNITY-BASED VIOLENCE INTERVENTION AND PREVENTION INITIATIVE
PERFORMANCE MEASURE QUESTIONNAIRE

GENERAL AWARD ADMINISTRATION

1. Did you obligate, expend, or draw down grant funds (federal and/or matching funds) approved grant program during the reporting period?
   A. Yes.
   B. No. (If no, answer the following question, then proceed to the Semiannual Narrative section).

2. If no, did you conduct any activities related to this award using other funding sources (non-federal, non-match) during the reporting period?
   A. Yes. Please describe the activities that have taken place:
   _____
   B. No. Please explain why there has been no activity:
   _____

DEFINITIONS

High Risk:
Individuals identified through validated tools or formal referral sources (law enforcement, probation, parole, prosecutors, or standardized risk assessments) as having a substantially elevated likelihood of violent crime involvement.

Highest Risk:
Individuals assessed—through LE intelligence, violent incident data, investigation insights, or validated instruments—as having immediate or acute likelihood of involvement in violent crime, either as victims or perpetrators.

Verified Risk:
Risk determination supported by documented evidence from validated assessment tools or criminal justice system sources (police, probation/parole, prosecutors, structured LE datasets).

RISK IDENTIFICATION AND PARTICIPANT ENGAGEMENT

1. Did your target population include individuals assessed as high risk, highest risk, or verified risk for violent crime involvement using any of the following sources? (Select all that apply.)
   A. Law enforcement data or intelligence (police incident data, shooting data, warrants, group/gang intelligence)
   B. Criminal justice referrals (probation, parole, prosecutors)
   C. Validated risk assessment tools administered at intake
   D. Community/CBO referrals
   E. Other
   F. If other, please describe _____

2. During the reporting period how many individuals were assessed as high/highest/verified risk who are newly engaged with your program?____

The performance measure questions presented here are preliminary and may be subject to revision.
This document is only to be used for planning and data collection purposes.
All grantees must enter their data in the JustGrants system upon award acceptance.

3. During the reporting period how many individuals remained engaged for 30 days or more.
   _____

MANDATORY LAW ENFORCEMENT COLLABORATION

4. How did law enforcement partners participate in or support program activities this reporting period? (Select all that apply.)
   A. Joint response to violent incidents
   B. Information/data sharing to identify high-risk individuals
   C. Participation in community engagement events
   D. Support for intervention or outreach efforts
   E. Coordinated enforcement actions (e.g., focused deterrence)
   F. Other
   G. If other, please describe _____

5. Provide one specific example from this reporting period describing how law enforcement coordination contributed to program outcomes (e.g., violence reduction, improved community relations):
   _____

PARTNERSHIP ACTIVITIES

6. How many program staff and partner personnel completed training relevant to your community violence intervention strategy(ies) during the reporting period? ____

7. How many formal coordination meetings with partners such as community-based organizations, service providers, or other stakeholders during the reporting period? _____

   _____

TARGETED VIOLENCE INTERVENTIONS AND DIRECT SERVICES

8. Enter the number of individuals assessed as highest or verified risk who were directly engaged (both victims/potential victims and perpetrators/potential perpetrators) through program services during the reporting period: _____
9. For individuals enrolled in your program for 90 days or longer (during this or prior reporting periods):
   A. Total number enrolled 90+ days: _____
   B. Of those, how many remained violence-free (no involvement in violent crime as victim or perpetrator) throughout their enrollment: ___

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10. If you provided direct services during this reporting period, which of the following services were provided as a part this award? *Select all that apply.*

    A. No direct services were provided.
    B. Cognitive based. These services include therapeutic programs used to change criminal thinking and behavior, such as Moral Reconation Therapy or Aggression Replacement Training.
    C. Educational. These services foster knowledge by helping participants develop daily life skills that can enhance their opportunities.
    D. Employment. These services are designed to help people find suitable job opportunities.
    E. Health care/Medicaid eligibility. These services are designed to help individuals or families find, obtain, or retain health care.
    F. Housing. These services are designed to help individuals or families find, obtain, or retain suitable housing, including transitional housing.
    G. Mental health. These services are provided in correctional facilities or in the community for those participants under supervision and may include counseling programs or group self-help programs.
    H. Pro-social. These services use directed skill building to help participants interact in a positive way with others.
    I. Substance use. These services include substance abuse education, treatment, or aftercare.
    J. Transportation. These services include assistance with public transportation costs or help finding other reliable modes of transportation.
    K. Vocational. These services help participants learn a trade and enhance their job opportunities.
    L. Individualized case planning. These services help participants set goals, objectives, and conditions for reentering society.
    M. Family engagement. These services focus on involving family members in the treatment process to help provide support and encouragement.
    N. Other, describe: _____

SEMIANNUAL NARRATIVE QUESTIONS

In this module, you will consider the goals you hope to achieve with your funding. Your goals should align with your approved application and program budget. Once submitted, these goals should remain unchanged throughout the life of the award, unless discussed with your grant manager.

Set **S·M·A·R·T** goals to clarify the scope of your priorities.

- **S**pecific
- **M**easurable
- **A**chievable
- **R**elevant
- **T**ime-bound

If you have multiple goals, please provide updates on each one separately.

1. What were your accomplishments, including any progress made toward achieving your grant-funded program goals during the reporting period? *Your response should outline any actions executed by your agency in the overall implementation of your award, administrative or programmatic. Please ensure*

your program goals relate back to your approved application and program budget. Generally, you should describe more than one accomplishment.

2. What challenges did you encounter, if any, within the reporting period that prevented you from reaching your goals or milestones?

3. Is there any assistance that BJA can provide to address any challenges identified in question 2?

   A. Yes. If yes, explain: _____

   B. No.

4. Are you on track to achieve your approved goals/objectives with your grant funding? *(If no, please provide an explanation as to why your agency is not on-track and what your plans are to address the delay.)*

   A. Yes.
   B. No. If no, explain: _____

5. What major activities are planned for the next 6 months? *Your response should address the goals and objectives as outlined in the Program Narrative and provide an update on the planned activities in the next 6 months under each goal.*

6. Do you have any innovative accomplishments under this award that you would like to share with BJA?

Thank you (page)

Thank you for submitting your performance data. When you select the Finish button, you will return to the performance report, and you will need to Submit the performance report.