

**BUREAU OF JUSTICE ASSISTANCE**  
Virtual Reality Site-Based Training  
**PERFORMANCE MEASURES QUESTIONNAIRE**

**GENERAL AWARD ADMINISTRATION**

1. Is this the last reporting period for which the award will have data to report? *For example, all funds have been expended and the award is in the process of closing out in the Justice Grants (JustGrants) system.*
- A. Yes/No (If Yes, answer the Semiannual Narrative Questions)

**GRANT ACTIVITY**

2. Was there grant activity during the reporting period? *There is grant activity when the grantee has obligated, expended, or drawn down grant funds to implement objectives proposed in the Bureau of Justice Assistance (BJA)-approved grant application. If Yes, the program becomes operational and should remain so until the grant closes out. If No, select from the following responses and answer the Semiannual Narrative Questions.*
- A. Yes (Includes strategic planning activities)  
B. No

Reason(s) for no grant activity during the reporting period	Select all that apply
In procurement	<input type="checkbox"/>
Project or budget not approved by agency, county, city, or state governing agency	<input type="checkbox"/>
Seeking subcontractors (request for proposal stage only)	<input type="checkbox"/>
Waiting to hire project manager, additional staff, or coordinating staff	<input type="checkbox"/>
Paying for the program using prior federal funds	<input type="checkbox"/>
Administrative hold (e.g., court case pending)	<input type="checkbox"/>
Still seeking budget approval from BJA	<input type="checkbox"/>
Waiting for partners or collaborators to complete agreements	<input type="checkbox"/>
Other	<input type="checkbox"/>
If Other, explain:	

3. Does your project include a researcher or research partner? *[Carry forward]*
- A. Yes  
B. No *(If No, skip to question 7)*

4. Provide the primary point of contact (POC) for the researcher/research partner that your agency will work with as part of your project. If there has been a change in the researcher/research partner POC, update the contact information. *[Carry forward]*
  - A. Name: \_\_\_\_\_
  - B. Research partner POC information:
    - Name of agency: \_\_\_\_\_
    - Telephone number: \_\_\_\_\_
    - Email: \_\_\_\_\_
5. Please describe the research partner's role in the project and the current status of their activities: \_\_\_\_\_
6. Has there been a change in your researcher/research partner or a significant change in the research team during the reporting period?
  - A. Yes, describe: \_\_\_\_\_
  - B. No

## PLANNING

7. Describe the status of your virtual reality scenario-based training planning activities that occurred during the reporting period.
  - A. Not started *(If selected, skip all Planning measures)*
  - B. In progress *(If selected, carry forward)*
  - C. Under internal agency review *(If selected, skip all Planning measures)*
  - D. Submitted to BJA *(If selected, skip all Planning measures)*
8. Describe the planning activities conducted. *Include details on how community members were consulted/involved and the proposed activities for which they provided input. For example, describe if you surveyed local community-based organizations or citizens, conducted focus groups or community meetings, analyzed administrative or local data, etc.*

\_\_\_\_\_

\_\_\_\_\_
9. Have you developed any course content/curricula? *Select all that apply.*
  - A. Yes, developed in coordination with university research partner
  - B. Yes, developed in coordination with the technical and training assistance provider
  - C. Yes, developed on our own
  - D. Not at this time
  - E. If Yes, describe: \_\_\_\_\_

MARCH 2023

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## IMPLEMENTATION

10. Have you begun implementation of your virtual reality scenario-based training?
- Yes
  - No *(If No, skip to the Semiannual Narrative Questions)*
11. Under what circumstances do officers participate in a virtual reality scenario-based training? *Select all that apply.*
- Officers undergo this type of training on a regular schedule (i.e., monthly, quarterly, annually, etc.)
  - Officers are referred for this type of training in response to a citizen complaint
  - Officers are referred for this type of training following a use-of-force incident
  - Other, describe: \_\_\_\_\_
12. What topics/scenarios are included in the training curricula? *Select all that apply.*
- General de-escalation techniques
  - Encounters with an individual experiencing a mental health crisis
  - Use of non-lethal or less lethal force in accordance with local, state, and federal laws (e.g., tasers, chokeholds)
  - Other, describe: \_\_\_\_\_
13. How many officers underwent at least one virtual reality scenario-based training during the reporting period? \_\_\_\_\_
14. What percentage of your agency's current officers with arresting powers have undergone at least one virtual reality scenario-based training within the past year?  
\_\_\_\_\_
15. How many total community members participated in at least one virtual reality scenario-based training during the reporting period? \_\_\_\_\_

## TRAINING OUTCOMES

16. Indicate the extent to which officer confidence in the following areas changed following participation in at least one virtual reality scenario-based training. *Select the answer that best applies to each scenario.*

	Officer confidence in their:	Unknown	Decreased	Remained unchanged	Increased somewhat	Increased substantial
A	Ability to employ de-escalation techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B	Ability to respond to individuals experiencing mental health crises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C	Ability to respond with non-lethal or less lethal force	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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17. What is the prior assessment based on? *Select all that apply.*
- A. Post-training surveys of officers
  - B. After action training reviews
  - C. Findings reported by our research partner
  - D. Other, explain: \_\_\_\_\_
18. How many community complaints did your department receive during the reporting period?  
\_\_\_\_\_
- 18a. How many of these complaints were registered against officers who have completed the virtual reality scenario-based training? \_\_\_\_\_
- 18b. Describe the reasons for the complaints. \_\_\_\_\_
19. How many administrative/disciplinary actions did your department take against officers during the reporting period? \_\_\_\_\_
- 19a. How many of these administrative/disciplinary actions did your department take against officers who have completed the virtual reality scenario-based training?  
\_\_\_\_\_
- 19b. Describe the reasons for the actions. \_\_\_\_\_
20. Do you track incidents where force was used during the course of an arrest?
- A. Yes
  - B. No (*If No, skip to the Semiannual Narrative Questions*)
21. In the past 6 months, what percentage of incidents involved the use of force during the course of an arrest? \_\_\_\_\_

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## SEMIANNUAL NARRATIVE QUESTIONS

In this module, you will identify the goals you hope to achieve with your funding. Once submitted, these goals cannot be changed without approval of your grant manager.

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

- Specific
- Measurable
- Achievable
- Relevant
- Time-bound

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

**Answer the following questions every semiannual reporting period (January and July of each year), based on your grant-funded activities.**

1. What were your accomplishments during this reporting period?

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2. What goals were accomplished, as they relate to your grant application?

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3. What problems/barriers did you encounter, if any, within the reporting period that prevented you from reaching your goals or milestones?

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4. Is there any assistance that BJA can provide to address any problems/barriers identified in question 3?

A. Yes/No

B. If Yes, explain: \_\_\_\_\_

5. Are you on track to complete your program fiscally and programmatically as outlined in your grant application?

A. Yes/No

B. If No, explain: \_\_\_\_\_

6. What major activities are planned for the next 6 months?

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7. Based on your knowledge of the criminal justice field, are there any innovative programs/accomplishments that you would like to share with BJA?

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**THANK YOU FOR PARTICIPATING!**

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