

**BUREAU OF JUSTICE ASSISTANCE
CHILD-FRIENDLY FAMILY VISITING SPACES IN PRISONS AND JAILS
PERFORMANCE MEASURES**

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 Grants Management System. If you select Yes, you will be directed to answer the questions in the Final Report section. These are one-time-only questions that you will answer prior to report closeout.*
 - A. Yes/No *(If Yes, answer the Final Report questions and create a final report.)*

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. Grant activity also is initiated when you have contact with BJA training and technical assistance providers, even if you have not expended federal funds for this activity. If you select Yes, the program becomes operational and should remain so until the grant closes out.*
 - A. Yes/No
 - B. If No, select from the following responses:

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

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FACILITY DESCRIPTION

Responses should be as of the last day of the reporting period.

3. How would you best describe your facility? *Select all that apply.*
 - A. Jail
 - B. Prison
 - C. Other, describe: _____

4. Who does your facility house? *Select all that apply.*
 - A. Males
 - B. Females
 - C. Other, describe: _____

5. How many employees did your office/facility have on staff as of the last day of the reporting period? *If the award benefits more than one facility, report the combined number of staff. Count both full- and part-time employees.*

Type of Personnel	Total Personnel
Supervision employees (correctional officers)	
Non-supervision employees	
	[Autosum]

6. What is the operational (or rated) capacity of your correctional facility or facilities? *If the award benefits more than one facility, report the combined inmate/resident capacity.*
 - A. Enter number: _____

7. How many people were housed at your facility or facilities as of the last day of the reporting period? *If the award benefits more than one facility, report the combined inmate/resident population.*
 - A. Enter number: _____

IMPLEMENTATION AND PLANNING

Responses should be as of the last day of the reporting period.

8. Have you completed a Child-Friendly Family Visiting Implementation Plan?
 - A. Completed
 - B. Not yet complete
 - C. Not applicable
 - D. If not yet complete, explain: _____

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9. Have you developed a total project budget with all construction costs accounted for, such as preliminary calculations of design fees and renovation related costs?
- A. Completed
 - B. Not yet complete
 - C. Not applicable
 - D. If not yet complete, explain: _____
10. Have you conducted an environmental assessment pursuant to National Environmental Policy Act requirements?
- A. Completed
 - B. Not yet complete
 - C. Not applicable
 - D. If not yet complete, explain: _____
11. Have you developed and distributed a request for proposal for proposed facility changes that solicits proposals from architecture and engineering firms or construction/renovation companies?
- A. Completed
 - B. Not yet complete
 - C. Not applicable
 - D. If not yet complete, explain: _____
12. Have you negotiated and signed a contract with the selected architecture and engineering firm or construction/renovation company?
- A. Completed
 - B. Not yet complete
 - C. Not applicable
 - D. If not yet complete, explain: _____
13. Has your agency appointed an existing employee or hired an employee to serve as the project manager and to be the main point of contact?
- A. Completed
 - B. Not yet complete
 - C. Not applicable
 - D. If not yet complete, explain: _____
14. Have renovation plans and related documents (including specifications) been completed?
- A. Completed
 - B. Not yet complete
 - C. Not applicable
 - D. If not yet complete, explain: _____

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CONSTRUCTION AND OTHER IMPROVEMENT ACTIVITIES

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15. Have you begun renovating the facility? *If No, skip to question 18.*

- A. Completed
- B. Not yet complete
- C. Not applicable
- D. If not yet complete, explain: _____

Construction

16. Have you created a checklist or "punch list" of items to be tested and inspected (including building systems, electronics, installed furniture, equipment, etc.)? *Note: The project manager should inspect the facility with construction/renovation company representative to evaluate all punch list items.*

- A. Completed
- B. Not yet complete
- C. Not applicable
- D. If not yet complete, explain: _____

17. Have all punch list items been satisfactorily completed?

- A. Completed
- B. Not yet complete
- C. Not applicable
- D. If not yet complete, explain: _____

Other Improvement Purchases

18. Have you made any purchases this reporting period for materials that are not directly related to construction (e.g., furniture, books, toys)? *If No, skip to the next section.*

- A. Yes
- B. No
- C. Not applicable

19. What materials (not related to construction) have you purchased?

20. How do you plan on using these materials to further support family strengthening and the best interests of child visitors?

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CHANGES TO POLICY AND PRACTICE

Responses should be as of the last day of the reporting period.

21. Does your agency have a written policy or standards around children and family visitors?

- A. Yes
- B. No

22. Does your agency intend to update your written policy or standards around children and family visitors? *If No, skip to the next section.*

- A. Yes
- B. No

23. Has your agency identified sections within your written policy or standards to create or improve protocol around children and family visitors?

- A. Yes
- B. No

24. Describe the protocol changes you plan to make to your policy or standards around children and family visitors.

25. Have you implemented the changes indicated above?

- A. Yes
- B. No
- C. If not yet complete, explain:

26. Have you created any positions (e.g., repurposed old staff or hired new staff) specifically to improve the functioning of child and family visitation during this reporting period?

If No, skip to the next section.

- A. Yes
- B. No
- C. Not applicable

27. Enter the total number of new positions created this reporting period: _____

28. Enter the total number of new positions created since the beginning of the grant: _____

29. What is the purpose of the new position or new positions?

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TRAINING

30. Did you conduct any training with your staff during this reporting period that is specifically related to supporting family strengthening and the best interests of child visitors?

- A. Yes
- B. No *(If No, skip to the next section.)*

31. What types of training did your program conduct during the reporting period? *Report the training name and select all modes of training that apply.*

Training Name	Academy Training	Web-Based Training/ Computer-Based Training	Classroom Training (formal in-person training)	Field Training	In-Service Training	Other

32. For each training completed during the reporting period, indicate (1) who provided the training, (2) the target audience, (3) the number of people trained, and (4) the name of the training provider. *Count each person only once per training topic, regardless of how many times they attended the training. You may report five (5) trainings per reporting period.*

Training Name	Target Audience	Number of People Trained	Training Provider	What funds were used to provide the training?
[Open text]	[Open text]	[Whole number]	[Open text]	<ul style="list-style-type: none"> • Grant funds • National Training and Technical Assistance Center • Other Office of Justice Programs funds • Other • Unknown

33. Will the staff who participated in the training program be able to directly apply the knowledge obtained from the training(s)?

- A. Yes
- B. No, the training(s) may be useful to advocate for new approaches but will not be applied directly at this time.
- C. No, the training(s) did not provide information that can be directly applied to the program.

34. Describe the impact that the training(s) will have on specific outcomes/objectives related to the goals of your program.

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FINAL REPORT QUESTIONS

35. Did you complete your program/initiative (e.g., spend all of your funds) as outline in your grant application?

- A. Yes
- B. No

36. How do you plan to sustain the changes you have made as a result of this grant?

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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 from 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, provide updates on each one 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 reporting period?

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

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

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?

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

THANK YOU FOR PARTICIPATING!

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