GENERAL AWARD ADMINISTRATION

1. Is this the last reporting period for which the award will have data to report? For example, were all funds expended and is the award in the process of closing out in the Grants Management System?
   A. Yes/No (If Yes, answer the semiannual narrative questions.)

2. Did you initiate or maintain contact with the Training and Technical Assistance (TTA) Provider during the reporting period? For the Body-Worn Camera (BWC) Pilot Implementation program, grant activity starts when you begin working with the TTA provider on policy development or policy certifications. If you select Yes, the program becomes operational and should remain so until the grant closes out.
   A. Yes/No
   B. If Yes, please select from the following:

<table>
<thead>
<tr>
<th>Type(s) of TTA activity during the reporting period</th>
<th>Select all that apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>An introductory TTA call was held between the TTA provider and agency staff responsible for implementing the BWC program.</td>
<td>☐</td>
</tr>
<tr>
<td>The TTA provider and agency made progress on BWC policy scorecard approval or policy certification (e.g., TTA provided feedback or shared policy examples).</td>
<td>☐</td>
</tr>
<tr>
<td>The TTA provider and agency completed the BWC policy scorecard approval or policy certification.</td>
<td>☐</td>
</tr>
<tr>
<td>The TTA provider and the agency engaged in other types of training or technical assistance not related to BWC policy development.</td>
<td>☐</td>
</tr>
<tr>
<td>Other</td>
<td>☐</td>
</tr>
</tbody>
</table>

   If Other, please explain:

   C. In No, please select from the following:

<table>
<thead>
<tr>
<th>Reason for no TTA activity during the reporting period</th>
<th>Select one</th>
</tr>
</thead>
<tbody>
<tr>
<td>The grantee was not aware that contact with the TTA provider is a condition of this grant.</td>
<td>☐</td>
</tr>
<tr>
<td>The grantee has not yet had any contact with the TTA provider.</td>
<td>☐</td>
</tr>
<tr>
<td>The grantee has not yet held a formal contact with the TTA provider but the contact is scheduled.</td>
<td>☐</td>
</tr>
<tr>
<td>Other</td>
<td>☐</td>
</tr>
</tbody>
</table>

   If Other, please explain:
PARTNERSHIPS AND COMMUNITY ENGAGEMENT

3. Have you conducted outreach (including training) to the community, criminal justice partners, or other outside organizations regarding officers’ use of BWCs during the reporting period? Outreach refers to the process of engaging and informing the public as well as victim, privacy, and civil liberty advocacy groups about how an applicant will use its BWC project as part of a larger initiative to improve transparency and accountability during encounters between the police and the public.

   A. Yes/No (If No, skip to Officer Training.)

4. Please indicate which types of organizations your agency had contact with during the reporting period. Select all that apply.
   
   A. Prosecutors  
   B. Police Unions  
   C. Courts  
   D. Public defenders  
   E. Victim advocates  
   F. Other advocacy groups (faith-based groups, private nonprofit groups)  
   G. Media  
   H. General public  
   I. Local government (mayor’s office, city council, county board)  
   J. State government (governor’s office)  
   K. College or university  
   L. Other, please explain: ____________________________

5. Which of the following messages were delivered as part of your agency’s community outreach during the reporting period? Select all that apply.
   
   A. The BWC program will improve public safety.  
   B. The BWC program will improve officer safety.  
   C. The BWC program will provide valuable evidence.  
   D. The BWC program will improve the transparency of police-public interactions.  
   E. The BWC program will prompt discussion of recording policies (e.g., when an officer should/should not record).  
   F. The BWC program will prompt discussion of how the public may request/access video recordings.  
   G. The BWC program will prompt discussion of when officers have access to video recordings.  
   H. Other, please explain: ____________________________

6. Which of the following messages were delivered as part of your agency’s public safety/criminal justice partner outreach during the reporting period? Select all that apply.
   
   A. The content of BWC policies and procedures.  
   B. The BWC program will improve the transparency of police-public interactions.  
   C. The evidence process, release, retention, and management for criminal justice agencies and the public.  
   D. The expectations of evidentiary quality for adjudication purposes.
OFFICER TRAINING

7. Have you conducted any officer-training on the use of BWCS during this reporting period?
   A. Yes/No (If No, skip to Deployment of Body-Worn Cameras.)
   B. If Yes, when did this training program start? (Month/Year) _____________________

8. What types of trainings regarding your BWC program were conducted during the reporting period? Select all that apply.
   A. Academy training
   B. Field training
   C. In-service training (including classroom training)
   D. Roll-call training
   E. Web-based training/computer-based training
   F. Other, please explain: ____________________________________________

9. Which of the following types of training activities were provided during this reporting period? Select all that apply.
   A. Training on how to activate and use the BWC in the field
   B. Training on how to upload BWC footage
   C. Training on your agency’s BWC policy
   D. Training on legal issues related to BWCS
   E. Other, please explain: ____________________________________________

10. How many total hours of formal in-person BWC training took place during the reporting period? ___________________

11. Please enter the total number of officers who received formal in-person BWC training during the reporting period. ___________________

DEPLOYMENT OF BODY-WORN CAMERAS

- **BWCS proposed to be purchased as part of this grant funding**: Total BWCS proposed in your grant application using federal funds plus matching funds.
- **Number of BWCS purchased using Bureau of Justice Assistance (BJA) grant funds**: Number of BWCS paid for using BJA grant funds or matching funds applied to this grant. At award closeout, this should be the same as what was proposed to be acquired.
- **Number of BWCS purchased using other funding sourced**: Number of BWCS paid for from other sources, but not necessarily proposed as part of your grant application.

12. Please enter the total number of BWCS proposed to be acquired as part of this grant funding. ___________________

13. Since the beginning of the grant program, please enter the total number of BWCS that have been acquired. ___________________

REVISED JANUARY 2021

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.
14. Please indicate which of the following purposes BWC footage was used for during the reporting period. Select all that apply.

A. Shared with a prosecutor’s office
B. Shared with a defense attorney
C. Used as court evidence
D. Voluntarily released to media or social media
E. Released to media upon request
F. Release to a private citizen upon request
G. Officer review of a complaint made against an officer
H. Review of a use-of-force incident
I. Review of a citizen complaint
J. Officer training
K. Evaluation of the BWC program
L. Other, please explain: _______________________________________________________

PERSONNEL AND QUALITY ASSURANCE

15. Please enter the number of new full-time and/or part-time staff positions created as a result of the BWC program since the beginning of the grant program. 

A. Technical staff _____________________
B. System administration (e.g., user account manager) _____________________
C. Program management (e.g., project manager coordinator) _____________________
D. Liaison staff (e.g., community outreach officer) _____________________
E. Administrative staff (e.g., administrative or legal assistant) _____________________
F. Other _____________________

16. Has your agency established a tracking or auditing system to ensure that officers are complying with your agency's BWC policies and procedures?

A. Yes/No
B. If No, please explain: _____________________

17. Is your agency a research partner conducting a formal evaluation of the BWC program?

A. Yes/No
B. If Yes, please provide the following contact information for the person conducting the evaluation:
   Name _____________________
   Email address _____________________
   Phone number _____________________

CLOSEOUT QUESTIONS

18. Did you complete your BWC program/initiative (i.e., spent all of your funds) as outlined in your grant application?

A. Yes/No
B. If No, please explain: _____________________
19. How do you intend to sustain your BWC program after the grant period has ended?

________________________________________________________________________________

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.
  - **Specific**
  - **Measurable**
  - **Achievable**
  - **Relevant**
  - **Time-bound**

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

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

1. What were your accomplishments during the 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, please explain: ______________________________________________________________________

5. Are you on track to fiscally and programmatically complete your program as outlined in your grant application?
   A. Yes/No
   B. If No, please 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?

________________________________________________________________________________