

PROJECT IMPLEMENTATION & EVALUATION PLAN

Guidelines and Template

Fiscal Year 2016 CVE Grant Program

The following guidance should be used to develop a Project Implementation & Evaluation Plan (PIEP). This plan will satisfy the term in your award package that requires DHS approval of a reporting template and performance measures. Additionally, you will update the plan submit updates at least quarterly as an attachment to the Performance Progress Report (SF-PPR) that is required in the Notice of Funding Opportunity. In accordance with 2 CFR 200.328 significant developments should be reported in between reporting periods, and this plan may be utilized as well to do so.

Purpose and Use of a Project Implementation & Evaluation Plan

The PIEP will help you to:

- **plan** your project by outlining the activities to be accomplished, timeframes, and resources needed (personnel, equipment, meeting space, et.al.), and how project results will be sustained.
- **manage** implementation of your project by enabling you to track implementation against expectations.
- **report** quarterly on your progress in implementing the project.
- **evaluate impact** by identifying the indicators and data you will use to assess level and type of impact achieved, the data collection methods to be used, and timeframes for collecting outcome-level evaluation data, noting that some indicators may require collection of baseline data at the start of the project for comparison.

The Office of Community Partnerships (OCP) expects that the PIEP will reflect the scope of your project and the size of the grant for which you were awarded. Smaller grants and projects of smaller scope require less detailed PIEPs than larger programs.

Use the OCP PIEP template to create your plan. This template includes all required elements arranged in a logical layout. As you create the PIEP, you might also find it helpful to refer to the sample Project Implementation & Evaluation Plan prepared by OCP.

Project Implementation and Evaluation Plan Term Definitions

Goal A broad statement about what you aim to accomplish with your project and how you plan to do it. There are two parts to a project goal statement: a “to” part, and a “by” part. The “to” part refers to what you hope to accomplish in the project relative to the target population; the “by” part summarizes the activities you will undertake to accomplish your project goal. A project goal statement should also include any systemic change to be achieved by the project.

Example: To improve access to health care for people with limited English proficiency in the service area by creating sustainable systems to 1) train medical interpreters and health professionals in cultural competency and the use of medical interpreters, and 2) provide outreach and education to health care consumers about medical interpretation.

Resources The resources needed to implement a project activity and achieve project outputs.

Examples could include: staff, consultants, volunteers, new technology, new equipment, supplies, networks

How a project uses its resources to achieve outputs

Activity *Example 1: Identify a consultant to develop the training curriculum*
Example 2: Develop the training curriculum

A direct, tangible, and measurable product of a project activity. An output is usually expressed as a number of units delivered.

Output

Examples: 6 training modules developed; 5 trainings held; 3 outreach materials developed; 200 participants served; 300 hours of service provided

Outcome The result of project activities, often expressed in terms of changes in behavior, norms, decision-making, knowledge, attitudes, capacities, motivations, skills, or conditions on individuals, families, households, organizations, systems, or communities. An outcome is usually the result of more than one activity and is carried out *by a third party* (usually a program participant or beneficiary). Outcomes are often confused with outputs. The difference would be, for example:

Output: 2 cultural competency trainings delivered to medical interpreters and health professionals.

Outcome: Medical interpreters and health professionals have/apply increased cultural competency skills.

Outcome Indicator

The quantitative (numbers, percentages, statistics, or other precise measures) or qualitative (descriptive, anecdotal) measure to tell you whether you have accomplished your desired outcome. An indicator is the measurable “evidence” or information that will tell you whether or not your program is achieving its intended outcomes. In many cases, more than one indicator may be necessary to measure an outcome. Where appropriate and possible, you should also identify a numeric target for your indicator. However, OCP recognizes that setting numeric targets can be difficult and in some cases, unrealistic and cost prohibitive given the scope of the project. Therefore, these targets can be revised as the project is implemented with the revisions recorded in each quarterly report submitted to OCP.

Example Outcome: Providers receiving training are more skilled.

Indicator: % of providers trained through the program can effectively serve people with limited English proficiency, measured by how many non-English speaking patients served prior to project compared with number served after project completion.

Data Collection Method

Methods and tools used to collect information for an outcome indicator.

Examples could be: surveys, interviews, focus groups, observation, document review, tests

Data Collection Timeframe

The timeframe identifies when and how often indicator data are collected. When thinking about timeframe, consider both what is reasonable in terms of when you expect to see change and what is realistic in terms of data collection workload. In many cases, it will make sense to collect data about outcomes early in the project (often called “baseline data”) to enable you to show the change over the project period.

Examples could be: quarterly, once a semester, at start of project and end of project.

Evaluation Results

Description of progress, including data, in achieving outcomes as measured through outcome indicators. Evaluation results are submitted with quarterly (if results are available) and final progress reports to OCP.

OCP Project Implementation & Evaluation Plan

You should modify the Project Implementation & Evaluation Plan template to the number of outcomes your specific project requires. For *each* outcome in the PIEP, create an Implementation Plan table *and* an Evaluation Plan table. Please use the definitions provided in the PIEP guidance document when crafting your plan. Draft, in the box below, the overarching goal statement for the project. Following completion of the PIEP, each grantee is expected to complete the Risk Assessment & Mitigation Plan in Appendix A.

In the Implementation Plan table:

- Type each activity in a separate row; add as many rows as needed.
- Arrange activity rows chronologically by the start date of the activity.
- This PIEP should span both years of performance under this grant program.

In the Evaluation Plan table:

- Type each outcome indicator in a separate row.
- Include indicators that will help measure the impact resulting from the project; it is not necessary to have more than one indicator if that indicator sufficiently measures impact.
- Identify and/or design data collection methods to be used to obtain the data that will be reported on quarterly.
- Ensure attention to collection of data that can be broken down by sex and age of project participants or beneficiaries.

NOTE: Data collection methods should be specific and timebound. Any expenses incurred from the collection of data must come from the grant already awarded. No additional funds will be made available for evaluation by DHS OCP.

Organization Name	Illinois Criminal Justice Information Authority/Targeted Violence Prevention Program
Project Title	Engaged Bystander-Gatekeeper Training for Ideologically Inspired Targeted Violence
Grant Number	EMW-2016-CA-APP-00169
Grant Implementation Period:	August 1, 2017 through July 31, 2019
Reporting Period:	July 1, 2018 through September 30, 2018

Project Goal Statement

The goal of the “Engaged Bystander-Gatekeeper Training” is to build and foster community resilience to targeted violence by training community members to: (1) engage effectively with individuals who exhibit warning signs of radicalization to violence and/or to targeted violence, (2) help individuals get access to assessments and services within the community, and (3) prevent community members from adopting violent ideologies and also prevent those who have adopted such ideologies from pursuing acts of targeted violence.

Target Population

[Please include an estimated size and demographic breakdown of expected and/or served program beneficiaries]

A representative sample of Illinois residents ranging from urban communities and suburban communities in different parts of Illinois including the City of Chicago and its suburbs, and smaller cities in northern and central Illinois. The Albany Park neighborhood in the City of Chicago is no longer one of our pilot communities. The anchor there – Makki Masjid – disengaged from the project citing concerns over discrimination against the Muslim community. The same holds true for Naperville, IL.

Springfield (central Illinois): 116,809 residents (75% White, 2% Hispanic, 18% Black, 2% Asian, 3% Other)

Elgin (northern Illinois): 111,000 residents (40% White, 45% Hispanic, 7% Black, 7% Asian, 1% Other)

Champaign: 81,055 residents (67 % White, 6% Hispanic, 15% Black, 10 % Asian, 2 % Other)

One hundred fifty community leaders and community members will be trained in total across several pilot communities.

OUTCOME 1: Increase in referrals of at-risk individuals.

Mid-Term Outcome 1.1: Increased ability to identify warning signs of radicalization and propensity toward violence.

Mid-Term Outcome 1.2: Increased knowledge about violence inhibitors.

Mid-Term Outcome 1.3: Increased ability to identify signs requiring referral.

Mid-Term Outcome 1.4: Increased capacity to identify helping resources in the community.

Mid-Term Outcome 1.5: Increased feeling of responsibility to make referrals.

Mid-Term Outcome 1.6: Increased confidence in successfully intervening.

OUTCOME 1 IMPLEMENTATION PLAN

Activity	Inputs/Resources	Time Frame	Anticipated Outputs	Progress Reporting <i>(Complete for Progress Report Only)</i>
Review, adapt, and finalize existing gatekeeper and bystander education program to meet CVE needs.	Curriculum Design Team	Quarterly updates; Final documents upon completion	Final training curriculum, materials, and online resources.	Work on drafting curriculum and supporting materials (including case studies to be used in the training and a supplemental reading guide to be used as a refresher) continued during this quarter.
Develop a website and finalize online resources.	Website Resource Team Curriculum Design Team	Quarterly updates; Final documents upon completion	Final website made available online.	Not applicable in this quarter
Conduct trainings with representatives from community and faith groups, schools, healthcare, and law enforcement.	Training Team	Quarterly	# of train the trainer sessions held # of community leaders and professionals trained as trainers # of sessions held by newly trained community leaders and professionals # of community members who have completed the program	Not applicable in this quarter

OUTCOME 1 EVALUATION PLAN

Outcome Indicator(s)	Data Collection Method and Timeframe	Evaluation Results <i>(Complete for Progress Report Only)</i>
<p>Mid-Term Outcome 1.1 indicator:</p> <p>Statistically significant increase in reported ability to identify warning signs of radicalization and propensity toward violence.</p>	<p>Pre/post training survey.</p> <p>Three month follow-up online survey.</p>	<p>Not applicable for this quarter</p>
<p>Mid-Term Outcome 1.2 indicator:</p> <p>Statistically significant increase in knowledge about violence inhibitors.</p>	<p>Pre/post training survey.</p> <p>Three month follow-up online survey.</p>	<p>Not applicable for this quarter</p>
<p>Mid-Term Outcome 1.3 indicator:</p> <p>Statistically significant increase in ability to identify signs requiring referral.</p>	<p>Pre/post training survey.</p> <p>Three month follow-up online survey.</p>	<p>Not applicable for this quarter</p>
<p>Mid-Term Outcome 1.4 indicator:</p> <p>Statistically significant increase in capacity to identify helping resources in the community.</p>	<p>Pre/post training survey.</p> <p>Three month follow-up online survey.</p>	<p>Not applicable for this quarter</p>
<p>Mid-Term Outcome 1.5 indicator:</p> <p>Statistically significant increase in reported feelings of responsibility to make referrals.</p>	<p>Pre/post training survey.</p> <p>Three month follow-up online survey.</p>	<p>Not applicable for this quarter</p>
<p>Mid-Term Outcome 1.6 indicator:</p> <p>Statistically significant increase in reported confidence in successfully intervening.</p>	<p>Pre/post training survey.</p> <p>Three month follow-up online survey.</p>	<p>Not applicable for this quarter</p>

OUTCOME 2: Increased community engagement and buy-in around CVE.

Mid-Term Outcome 2.1: Increase feelings of shared responsibility to address community issues.

OUTCOME 2 IMPLEMENTATION PLAN

Activity	Inputs/Resources	Time Frame	Anticipated Outputs	Progress Reporting (Complete for Progress Report Only)
Conducting four focus groups and interviews with community members to inform curriculum development.	Research Team	Quarterly updates; Final documents upon completion	Report to Curriculum Design Team of findings.	The Research Team analyzed the focus group transcripts, summarized major themes, and drafted and submitted an internal document outlining major findings to Director Afeef. The Research Team has also reviewed the draft curriculum concept and provided feedback based on the literature reviewed and the focus group findings.
Training observations.	Research Team	Quarterly updates; Final documents upon completion	Report to Curriculum Design and Training Teams of findings.	Not applicable for this quarter
Training pre/post surveys.	Research Team	Quarterly updates; Final documents upon completion	# of surveys completed % completion rate Feedback reports of main findings to Curriculum Design and Training Teams.	Not applicable for this quarter
Documentation of program development and refinement.	Research Team	Quarterly updates; Final documents upon completion	Report on program design and refinement (process evaluation)	Not applicable for this quarter
Develop a website and finalize online resources.	Website Resource Team Curriculum Design	Quarterly updates; Final	Final website made available online.	Not applicable for this quarter

Activity	Inputs/Resources	Time Frame	Anticipated Outputs	Progress Reporting (Complete for Progress Report Only)
	Team	documents upon completion		
Conduct trainings with representatives from community and faith groups, schools, healthcare, and law enforcement.	Training Team	Quarterly	# of community members who have completed the program	Not applicable for this quarter

OUTCOME 2 EVALUATION PLAN

Outcome Indicator(s)	Data Collection Method and Timeframe	Evaluation Results (Complete for Progress Report Only)
Statistically significant increase in feelings of shared responsibility to address community issues.	Pre/post training survey. Three month follow-up online survey.	Not applicable for this quarter
Refinement of training materials to include community voice.	Focus groups, interviews, pre/post survey results, training observations, administrative data, and documentation of curriculum/program refinement.	Not applicable for this quarter

APPENDIX A: RISK MANAGEMENT PLAN

The following risk assessment chart is designed to assist in the identification of potential occurrences that would impact achieving project objectives, primarily those originating externally and that are outside of the organization’s control. Risks could include, but are not limited to: economic, social, or political changes; changes to planned partnerships; legal or compliance changes; or other risks unique to this project. Use the chart below to identify these risks; add additional rows if necessary.

Risk Identified	Likelihood of Risk Occurring (low/medium/high)	Risk Analysis (brief assessment of the impact the identified risk could/would have on the project)	Risk Management Plan (plan to minimize the impact that the risk presents to the project and adjustments to be made if the risk transpires)
CVE opponents’ advocacy against grant funded project	High	Create confusion through use of misinformation in the minds of community leaders and community members; Create a disincentive for participation by partners;	We engage in an ongoing effort to provide accurate information about TVPP and its efforts. We have been addressing advocacy efforts by inviting concerned citizens to meet with TVPP and to provide complete transparency for our work. This has worked to allay concerns in most instances, and to win over new supporters in some instances.
Disengagement of partners	Medium	Reduction in the number individuals trained; less diversity in the pool of citizens participating in the training development and implementation;	We have identified one additional community (Elgin, IL) since our application that is committed to being a part of this grant project. This one additional community will be included regardless of whether the other communities remain in order to add further diversity in the participant mix.
Unavailability of experts identified in grant	Low	Training curriculum will lack substantive rigor; quality of the information imparted to communities will be lessened;	We have maintained contact with our expert partners since submission of application. All but one are still onboard. TVPP director took a 3 day training in instructional design and used this project for the course. He received training in the ADDIE methodology and was able to consult with the instructor on best practices. We are looking to retain a curriculum/instructional design professional to assist us nonetheless; we have also, in the course of TVPP work, identified other experts with redundant expertise; we also have additional research staff (paid for outside of the CVE grant) that can help us identify evidence-based and promising practices from the violence prevention and CVE research to replace expert consultants in the event that becomes necessary.