

BUREAU OF JUSTICE ASSISTANCE
DE-ESCALATION AND CRISIS RESPONSE TRAINING PROGRAM
PERFORMANCE MEASURE QUESTIONNAIRE

GRANT ACTIVITY

1. 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.*
- A. Yes.
- B. No. (If no, select from the following responses and answer the Semiannual Narrative Questions).

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 activities using outside 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, please explain:	

2. Select your funding category.
- A. Category 1: Training Program for Law Enforcement Agencies.
- B. Category 2: Training Program for Jails, Prisons, and Correctional Agencies.
3. Select the training type of training program you will implement with BJA program funds. *Select all that apply.*
- A. Crisis Response and Intervention Training (CRIT).
- B. Virtual reality (VR) training systems.

STAFF/OFFICER TRAINING

4. Under what circumstances do staff/officers participate in your training program? *Select all that apply.*
- A. Onboarding or new staff/officer training.
- B. Staff/officer training required on a regular schedule (e.g., monthly, quarterly, annually, etc.).
- C. Staff/officers are referred for this type of training in response to a complaint.
- D. Staff/officers are referred for this type of training following a use-of-force incident.

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E. If other, please describe: _____

TRAINING OUTCOMES

5. As of the last day of the reporting period, has the grant funded training been provided to staff/officers in your agency?
 - A. Yes.
 - B. No. (If no, skip to the Semiannual Narrative Questions).
6. What is the total number of staff/officers in your agency who are expected to receive this training under your grant program? _____
7. How many staff/officers received the grant funded training during the reporting period? _____
8. Are you tracking outcomes to assess whether the training is affecting officer behavior or crisis response outcomes?
 - A. Yes.
 - B. No, but we plan to implement outcome tracking. (Skip to Semiannual Narrative Questions).
 - C. No, we do not plan to implement outcome tracking. (Skip to Semiannual Narrative Questions).
9. Describe how you are measuring whether officers are successfully applying de-escalation and crisis intervention skills in the field? Describe any observed changes since implementing the training program. When responding, please address the direction of change for each measure (increased, decreased, or no change); specific data where available (percentages, counts, survey scores); and any measures where it is too early to assess impact). *Enter N/A if a measure is not applicable to your program.*

Incident-Based Measures

- A. Use-of-force incidents _____
- B. Injuries to community members _____
- C. Injuries to officers _____
- D. Community complaints _____

Response-Based Measures:

- E. Documented successful de-escalations _____
- F. Referrals to crisis services or diversion resources _____

Perception-based measures

- G. Officer self-reported staff confidence in handling crisis situations _____
- H. Office self-reported satisfaction with the training _____
- I. Community feedback on crisis response _____
- J. If other, please explain: _____

10. Have you implemented any new or revised protocols for responding to individuals in crisis resulting from this grant?
 - A. Yes.
 - B. No. (If no, skip to next section).
11. Describe the protocol changes and their implementation status. _____

IMPLEMENTATION EVALUATION

12. Is your program conducting an implementation evaluation?

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- A. Yes, evaluation is currently underway.
- B. Yes, evaluation is being planned but not yet started.
- C. No, but we are conducting informal internal monitoring.
- D. No evaluation is planned.

13. If you selected A or B above, please describe the following:

- A. Evaluation design or approach _____
- B. Current status _____
- C. Any preliminary findings and how they have informed program adjustments

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.

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

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

Please answer the following questions every semiannual reporting period (January and July of each year), based on your grant-funded activities. Please ensure your responses are complete, comprehensive, and specific to this award.

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.

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4. Are you on track to achieve the goals you hope to achieve with your grant funding, both fiscally and programmatically as outlined in your grant application? *(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. Based on your knowledge of the criminal justice field, are there any innovative programs or accomplishments that you would like to share with BJA?

THANK YOU FOR PARTICIPATING!

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