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**WI Child Abuse and Neglect Prevention Board
Family Resource Center of Quality Grant, contract 433001-G24-0002315
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**YEAR-END NARRATIVE REPORT TEMPLATE**

**Due Date: July 17, 2024**

**Instructions**

*Have a copy of your grant agreement on hand to draft your report. The responses to the report sections below should provide a clear overview of the activities completed in the first six months of SFY2024. The completed reports provide insight into how this grant has affected the community you serve and your organization thus far. Submit the completed report through the* [SPARC Performance Report Portal](https://dcfsparc.wisconsin.gov/)*. Include any attachments and the reporting spreadsheet.*

Naming mechanism: When you save the template, please rename using this structure. Your agency name can be an acronym or abbreviated. i.e. BVCC\_FRCQ\_Report SFY24 or BayView\_FRC Midyear Report SFY24.

{agency name}\_FRCQ\_Report SFY24

**Reporting Period: July 1, 2023–June 30, 2024**

**Organization Name:**

**Project Name:**

**Contract #:**

**Contact Person:**

**Contact Email:**

**County(ies):**

**Section 1: Programming**

*Did your agency use grant funds to provide direct services to families during this reporting period?*

[ ] Yes [ ]  No

If yes, please complete the chart in the CANPB SFY24 FRCQ Grant Performance Measures spreadsheet. If no, please skip this section.

**Section 2 Objectives (deliverables during this time period)
OBJECTIVE: Protective Factors**

1. Please describe how protective factors remain the focus of all programming.
2. Please provide how protective factors remain a focus for the agency and staff.
3. Please provide details on additional ways your FRC is expanding protective factors integration within your agency, if applicable.
4. Provide an estimated amount of staff time dedicated to protective factors work.

**Barriers to Reach Objective:** [*Identify barriers*]

**Additional Information:**

***OBJECTIVE: Professional Development***

1. How many FRC staff have created an account in the [*Family Resource Center Professional Development System*](https://uwm.edu/wcwpds/family-resource-center-professional-development-system/)?

|  |  |  |
| --- | --- | --- |
|  | *# with profile/account* | *# without profile/account* |
| *FRC Infrastructure Leadership teams* |  |  |
| *Additional Family Resource Center staff* |  |  |

1. Provide context with the number, i.e. total number of FRC staff/number of FRC staff with account
2. Please describe or provide an example of your FRC’s professional development plan and tracking system for each FRC staff.
3. Please describe how your FRC is aligning professional development plans with the Core Competencies for Family Support Professionals.
4. Please describe or provide a copy, of your FRC’s onboarding plan. This should include how new family support/FRC staff are provided with timely trainings (including but not limited to foundational trainings and programming trainings).
**Barriers to Reach Objective:** [*Identify barriers*]

**Additional Information:**

***OBJECTIVE: Parent Advisory Committee***

1. Please provide the name of your FRC’s Parent Advisory Committee, the number of current parents and frequency of regular meetings (monthly, quarterly, etc.).
2. Provide an estimated amount of staff time dedicated to parent leadership.
3. Please provide a short description on your FRC’s continuing recruitment efforts for the Parent Advisory Committee.
4. Please provide details on additional ways your FRC is expanding parent voice within FRC programming, if applicable.

**Barriers to Reach Objective:** [*Identify barriers*]

**Additional Information or updates:**

***OBJECTIVE: Awareness to Action plan (A2A)***

At a minimum your A2A plan should have been reviewed and revised, as needed.

* Please describe any revision to your A2A plan?
* What have you accomplished within your A2Aplan at the end of this grant?
* What areas do you still need to work on?

**Barriers to Reach Objective:** [*Identify barriers*]

**Additional Information or updates:**

***OBJECTIVE: Annual Action plan review***

Annual review and update of action plan completed by June 1, 2024.

* Please describe revisions to your overall Infrastructure Action Plan?
* What have you accomplished within your action plan at the end of this grant?
* What areas do you still need to work on?

**Barriers to Reach Objective:** [*Identify barriers*]

**Additional Information or updates:**

***OBJECTIVE: Annual Standards of Quality Program Self Assessment***Complete and submit annual standards of quality program assessment into DAISEY by January 31, 2024.

Completed: (date)

**Barriers to Reach Objective:** [*Identify barriers*]

**Additional Information or updates:**

***OBJECTIVE: WI FRC agency profile in DAISEY***Please indicate which forms in the WI FRC Agency Information have been updated or reviewed. Note: each FRC agency will be required to have all forms completed by June 1, 2024 and updated/reviewed annually.

|  |  |  |
| --- | --- | --- |
| Form | *Reviewed, no changes* | *Updated with new information* |
| WI FRC - Core Service Child Development Form |  |  |
| WI FRC - Core Service Community Engagement Form |  |  |
| WI FRC - Core Service Parenting Supports Form |  |  |
| WI FRC - Core Service Resources & Navigation Form |  |  |
| WI FRC - Parent Leadership Development Form |  |  |
| WI FRC - Staffing and Training Form |  |  |

**Barriers to Reach Objective:** [*Identify barriers*]

**Additional Information:**

***OBJECTIVE: Update agency information in 2-1-1 system***

By June 1, 2024 update agency information in the 2-1-1 system for the [Family and Child Guided Search](https://211wisconsin.communityos.org/familyandchildsearch).

Completed by: (date)

Please describe any efforts your agency has completed to promote the [Family and Child Guided Search](https://211wisconsin.communityos.org/familyandchildsearch).

**Barriers to Reach Objective:** [*Identify barriers*]

**Additional Information:**

***OBJECTIVE: FRC of Quality Community of Practice Calls***

Please indicate the number of staff who participated in the virtual FRC of Quality Community of Practice Calls.

|  |  |
| --- | --- |
| **FRC-Q community of practice call** | **# of staff who participated** |
| 9/19/23 |  |
| 12/19/23 |  |
| 3/19/24 |  |
| 6/18/24 |  |

**Barriers to Reach Objective:** [*Identify barriers*]

**Additional Information:**

**Section 3: Program Accomplishments***In this section:*

* *Provide a summary of progress to-date (200-500 words).*
* *What activities did you conduct during the reporting period, including those not anticipated in your original proposal? What activities did you decide not to undertake?*

**Section 4: Publications, Marketing and Outreach***In this section provide:*

* *A description of efforts to recruit and engage families.*
* *A description of your referral process for the program and referral sources (i.e. do you have a formal referral process or form for your partners to receive referral or to send referrals to other community agencies).*
* *List any products that were developed with grant funds.*
* *Describe any efforts to promote* [*Five for Families*](https://fiveforfamilies.org/) *public awareness campaign.*

*Please make sure to include an explanation of any changes, challenges, or issues.*

**Section 4a.: Family Strengthening Month\*** (if your agency has multiple Prevention Board grants, you only need to respond to this section in one year-end report. Please identify the report your completed this section).

* *Describe any activities conducted for* ***Family Strengthening Month.***
* *Include an estimated number of people who participated in agency activities and/or were exposed to information on prevention*
* *Include links to any media coverage and copies of any marketing materials*

**Section 4b.: Parenting on the Go Bag\****\*If your agency did not utilize Prevention Board funding for Parenting on the Go Bags, please skip this section. Or if your agency used Prevention Board funding for bags from another grant – report on that year-end report.*

*Use the table to indicate the number of bags were disseminated by age group*

|  |  |
| --- | --- |
| **Quantity** | **Age Group** |
|  | newborn to 6 months of age – may be included in a welcome baby/hospital visit |
|  | 6 months to 2 years of age |
|  | 3 – 6 years of age |
|  | 7 - 9 years of age |
|  | 10+ year of age |
|  | **Total**  |

* *Please describe how bags were disseminated to families (provide dates, and event type. i.e., Parent Café’s, Community Events, etc.)*
* *Share the most successful strategies in engaging parents with the bags*
* *Which products were families most interested in?*
* *Describe any challenges or barriers in dissemination*
* *If the Prevention Board were able to support Parenting on the Go Bags in the future, what changes would make the process easier for agencies?*

*Please make sure to include an explanation of any changes, challenges, or issues.*

**Section 5: Collaborations & Partnerships***In this section:*

* *Highlight any new or emerging partners, subgrantees (if applicable), and their role(s)*
* *Describe any efforts to involve parents in the planning and implementation of any agency planning and/or programming.*

**Please check all collaborations/partnerships that apply**

[ ] Early Childhood Systems
[ ]  Strengthening Families, Head Start
[ ]  Maternal, Infant, and Early Childhood Home Visiting
[ ]  Child Mental Health
[ ]  LGBTQIA2S+ Organizations
[ ]  Hospitals, Clinics, etc.
[ ]  Substance Abuse
[ ]  Public Health / Health Department
[ ]  Nonprofit Community Organizations
[ ]  Schools
[ ]  Library
[ ]  Business Community
[ ]  Community Action Agencies
[ ] Other (please describe in narrative)

**Section 6: Outreach and Education
Please indicate how your organization educates parents, caregivers, and community members on the important role of primary prevention programs, services, and strategies:**

[ ] General Social Media Posts
[ ]  Five for Families
[ ]  Protective Factors
[ ]  Child Development
[ ]  Triple P Level 1
[ ]  [Room to Grow](https://preventionboard.wi.gov/Pages/OurWork/RoomToGrowCampaign.aspx) Campaign
[ ]  Parent Education opportunities.

[ ]  ​[Catching Kids Doing G​​ood](https://preventionboard.wi.gov/Pages/OurWork/CatchingKidsDoingGood.aspx) campaign
[ ]  Parenting Supports
[ ]  Resource and Navigation
[ ]  Community Engagement (community presentations)

[ ]  [Embrace the power of Dads](https://preventionboard.wi.gov/Pages/OurWork/EmbracethePowerofDads.aspx) campaign

**Section 7: Lessons Learned**

* *During this reporting period, what were some new or surprising insights for:*
	+ *You?*
	+ *Your staff/parent leaders/volunteers?*
	+ *Clients/Service users or project/program partners?*

*(Suggested word length: 200-250 words)*

* *During this reporting period, what were some ideas or practices that were reinforced for you, your staff/parent leaders/volunteers, clients or project/program partners? (Suggested word length: 200-250 words)*

*(Suggested word length: 200-250 words)*

**Section 8: Concrete Supports (if applicable)***Did your agency use grant funds to provide concrete supports to families during this reporting period?*

[ ] Yes [ ]  No

If yes, please complete the chart in the CANPB SFY24 FRCQ Grant Performance Measures spreadsheet. If no, please skip this section.

**Section 9: Other Activities***In this section, grantees may report on any other activities or accomplishments that occurred in this reporting period and enhanced the success of your program goals that did not fit elsewhere in the report. Please describe any other primary prevention activities implemented with Prevention Board funds (this may include “small dose” Triple P, online Triple P, or other primary prevention activities).*

**Section 10: Technical Assistance***Use this section to describe any additional resources or assistance that the Prevention Board could provide. Examples might include suggestions for improving Community of Practice calls, support with WPRS and data entry, or professional development or training needs for your staff and supervisors.*

**Section 11: Protective Factors Implementation\****\*If your agency does not receive* *Prevention Board funding for Protective Factors, please skip this section*

**Section 12 CCDBG (Not applicable):**

**Section 13: Attachments to the Year-End Narrative Report**

* *Photos may be included as an attachment.*
* *News articles about the program or newsletters created by the program should be attached.*
* *Any additional documents that are in reference to any of the sections above.*