CPIP Year End Report for Social Development Programs

Organization Name:	
Program Name:	
Reporting Period: January 1, 2020 to December 31, 2020	

Crime Prevention Level

1. Crime Prevention Level: (*Should match current Theory of Change.*)
    _____ Early Identification
    _____ Prevention of Re-offending
    _____ Siim ohksin: Wahkotiwin

Program Activities

2. Describe program activities implemented in this time period. This should match the 'strategy' section of current Theory of Change. If actual program activities are different than planned activities as described in the Theory of Change, explain why.
    _____
    _____
    _____

Clients, Contacts, Volunteers, Volunteer Hours

3. Report the number of unique individual clients or participants over the past year where a client file was opened. _____ (number)

    •Individuals should only be counted once per program.
    •Do not include 'contacts' because they are counted separately

4. Please provide any available information the program collects on participant demographics (e.g. age, gender, ethnicity, Indigeneity, immigration status, etc.)
    _____
    _____
    _____

5. Program recruitment and completion information:

    Number of individual clients/participants who begin the program: _____
    Number of individual clients/participants who complete the program _____

    If you have additional information on program recruitment and completion, share it here:
    _____
    _____
    _____

6. If the program is experiencing challenges with recruitment and retention, describe efforts to address them. If the program is not experiencing challenges with recruitment and retention, write "not applicable".
    _____
    _____
    _____

7. Report the number of contacts. A contact is a service where no client file is opened. It includes but is not limited to: telephone inquiries, drop-ins, one-time assistance with forms or referrals, participation in one-time information or education sessions, participation in community events, etc.
   _____ (number)

   - Do not include the number of times a worker meets with a client from the 'individual clients/participants served' category.
   - Do not include the number of web hits received.
   - Do not include the number of newsletters or brochures distributed.

8. Comments regarding number of contacts.
   _____
   _____
   _____

9. Indicate the number of volunteers that provided support that directly benefited your program (e.g., volunteers who provide administrative support, direct program support, governance, fundraising, etc.).
   _____ (number)

   - Volunteers should be counted only once.
   - If volunteers provide support that directly benefits more than one CPIP funded program, please count them in only one of the program's Year End Reports.

10. Comments regarding number of volunteers.
    _____
    _____
    _____

11. Report the total number of hours that all of your volunteers have worked to support your program during this 12-month reporting period.
    _____ (number)

12. Comments regarding number of volunteer hours.
    _____
    _____
    _____

Mid-Term Outcomes

Use results of formal or informal data/information collection to describe the extent to which the program is positively influencing each risk and/or protective factor identified in the current Theory of Change.

Risk/Protective Factor #1: _____(dropdown list, should match current
                                                                        TOC)

13. Is the program positively influencing this risk or protective factor? Below you will be asked to explain what data/information you used to come to this conclusion.

_____ Yes, the program is positively influencing this risk/protective factor (sub-questions only required if this box is checked)

Data/information collected using formal methods showing positive influence (e.g. surveys or interviews with participants, program records, systematic observation of programs). To attach reports click "attach", if no formal methods to report, write 'none.':

_____
_____
_____

Data/information collected using informal observation or stories from participants or staff showing positive influence. (If no informal methods to report, write 'none.'):

_____
_____
_____

_____ No, so far the program has had little or no positive influence on this risk/protective factor (sub-questions only required if this box is checked)

Data/information collected using formal methods showing little or no positive influence (e.g. surveys or interviews with participants, program records, systematic observation of programs). To attach reports click "attach", if no formal methods to report, write 'none.': _____
_____
_____
_____

Data/information collected using observation or stories from participants or staff showing little or no positive influence. (If no informal methods to report, write 'none.'):

_____
_____
_____

Risk/Protective Factor #2: _____(dropdown list, should match current
TOC)

14. Is the program positively influencing this risk or protective factor? Below you will be asked to explain what data/information you used to come to this conclusion.

_____ Yes, the program is positively influencing this risk/protective factor (sub-questions only required if this box is checked)

Data/information collected using formal methods showing positive influence (e.g. surveys or interviews with participants, program records, systematic observation of programs). To attach reports click "attach", if no formal methods to report, write 'none.':

_____
_____
_____

Data/information collected using informal observation or stories from participants or staff showing positive influence. (If no informal methods to report, write 'none.'):

_____
_____
_____

_____ No, so far the program has had little or no positive influence on this risk/protective factor (sub-questions only required if this box is checked)

Data/information collected using formal methods showing little or no positive influence (e.g. surveys or interviews with participants, program records, systematic observation of programs). To attach reports click "attach", if no formal methods to report, write 'none.': _____
_____
_____
_____

Data/information collected using observation or stories from participants or staff showing little or no positive influence. (If no informal methods to report, write 'none.'):

_____
_____
_____

Risk/Protective Factor #3: _____(dropdown list, should match current TOC)

15. Is the program positively influencing this risk or protective factor? Below you will be asked to explain what data/information you used to come to this conclusion.

_____ Yes, the program is positively influencing this risk/protective factor (sub-questions only required if this box is checked)

Data/information collected using formal methods showing positive influence (e.g. surveys or interviews with participants, program records, systematic observation of programs). To attach reports click "attach", if no formal methods to report, write 'none.':

_____
_____
_____

Data/information collected using informal observation or stories from participants or staff showing positive influence. (If no informal methods to report, write 'none.'):

_____
_____
_____

_____ No, so far the program has had little or no positive influence on this risk/protective factor (sub-questions only required if this box is checked)

Data/information collected using formal methods showing little or no positive influence (e.g. surveys or interviews with participants, program records, systematic observation of programs). To attach reports click "attach", if no formal methods to report, write 'none.': _____

_____
_____
_____

Data/information collected using observation or stories from participants or staff showing little or no positive influence. (If no informal methods to report, write 'none.'):

_____
_____
_____

Continuous Improvement

16. Drawing on formal and informal data/information collected, what is working well with the program and why? How will the program sustain these successes?

_____
_____
_____

17. Drawing on formal and informal data/information collected, what isn't working well with the program and why? How will these challenges be addressed going forward?

_____
_____
_____

18. If there have been any contextual changes to the program, for instance in program goals, population served, activities, please describe them here.

_____
_____
_____

19. To aid CPIP in its own continuous improvement efforts, please provide feedback on ways in which this reporting process could be improved.

_____
_____
_____

Additional Comments

20. If there is anything else you would like to tell us, please do so here.

_____
_____
_____