**Consortium on Coordinated Community Supports**

**Grantee Metrics Plan for Services**

**Grantee Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Jurisdiction:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Grantee Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This Metrics Plan provides further explanation and context for the numbers your organization reports in the Milestones & Deliverables (M&D) report. Each grantee must submit a Metrics Plan. Please answer each question under all metrics thoroughly and include any additional information that your organization believes is relevant to the metrics reported.

**Standard Metrics**

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| **1. Total # of Unduplicated Students Served**  How is your organization calculating this metric? Were there any special considerations? |
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| **2. # of Unduplicated Students Served by Tier**  Are there are any special considerations for how your services are defined at each tier? |
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| **3. # of Unduplicated Students Served by Race and Ethnicity**  How is your organization collecting data for this metric? If your organization is unable to collect this data, please note this here. |
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| **4. # of Unduplicated Students Served by Gender**  How is your organization collecting data for this metric? If your organization is unable to collect this data, please note this here. |
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| **5. # of Unduplicated Students Served by Grade**  How is your organization collecting data for this metric? Were there any special considerations made? |
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| **6. # of Unduplicated Schools Served**  How is your organization calculating this metric? |
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| **7. Satisfaction Surveys**  Provide: (1) a copy of your satisfaction survey(s); (2) explanation as to when surveys will be administered; (3) whether surveys will be given to students, their family members, or both; and (4) your definition for “satisfaction with services” using the survey. To count as “satisfaction,” the response must higher than “neutral.” Submit a copy of your satisfaction survey as an attachment to the Metrics Report. |
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| **8. School Staff Training**  Provide a description of: 1) the type(s) of training provided to school staff, 2) the number of training sessions required in order to complete the training, 3) a description of the tool used to assess mastery, and 4) a definition of mastery using the tool. For example, an organization may describe a Likert-type scale of 1-5, and indicate that a score of 4 or above would indicate mastery. |
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| **9. # of Unduplicated New Positions that Provide Direct Services**  If an organization has grants in multiple jurisdictions that are sharing new positions, in which grantee’s Milestones & Deliverables (M&D) report will the positions be reported? |
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| **10. Tier 1 Outcomes**  Please describe: (1) the type(s) of Tier 1 services; (2) how many individuals will be assessed using the tool; (3) whether assessments will be given to students, families, both, or other; (5) the time interval(s) for when assessments will be given; and, (6) a definition of “desired outcome” using the tool(s) or survey(s). Submit a copy of the tool(s) or survey(s) used to assess the effectiveness of the intervention(s) as an attachment to the Metrics Plan. |
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| **11. Tier 2 Outcomes**  Please include: (1) a list of assessment tool(s) used; (2) minimum time interval between baseline and follow-up outcome assessment to report demonstrated improvement, no change, or deterioration; (3) whether assessments will be given to students, families, both, or other; and, (4) a definition of “improvement,” “no change,” and “deterioration” using the tool(s). Submit a copy of the tool(s) or survey(s) used to assess the effectiveness of the intervention if it is not on the pre-approved list. |
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| **12. Tier 3 Outcomes**  Please include: (1) a list of assessment tool(s) used; (2) minimum time interval between baseline and follow-up outcome assessment to report demonstrated improvement, no change, or deterioration; (3) whether assessments will be given to students, families, both, or other; and, (4) a definition of “improvement,” “no change,” and “deterioration” using the tool(s). Submit a copy of the tool(s) or survey(s) used to assess the effectiveness of the intervention if it is not on the pre-approved list. |
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**Custom Metrics**

For each intervention listed in your M&D template, describe when and how assessment occurs and how improvement is measured and defined. Copy and paste the boxes to add more space if your organization has more than four interventions to report. Submit a copy of all measures not listed on the Outcome Measures Menu as an attachment to your Metrics Plan.

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| **Intervention 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
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| **Intervention 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
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| **Intervention 3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
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| **Intervention 4: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
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