

**ACTIVITY DATA COLLECTION - GROUPED DATA**  
**Systems Change Support**

<b>Agency Name:</b>		<b>Program Name:</b>	
<b>Service Definition ID (Refer to service provisions):</b>			
<b>Service Location City:</b>	<b>Service Location Zip:</b>	<b>Service Location NfL:</b>	
<b>Activity Location Name (optional):</b>			

<b>Activity Category :</b> Please mark (X) <b>ONE</b> activity.	
<b>Results-based accountability</b>	
<input type="checkbox"/> * Training funded programs to conduct evaluations and use data	<input type="checkbox"/> Conducting research or evaluation (e.g., community surveys, local evaluation)
<input type="checkbox"/> Conducting community asset mapping/needs assessment	<input type="checkbox"/> * Other results-based accountability
<b>Civic engagement</b>	
<input type="checkbox"/> * Supporting involvement of residents on policy boards/commissions and in program implementation	<input type="checkbox"/> * Other civic engagement
<input type="checkbox"/> * Community planning efforts involving residents	
<b>Advocating for policy changes or new legislation</b>	
<input type="checkbox"/> * Meeting with/educating policy-makers	<input type="checkbox"/> Other advocating for policy changes or new legislation
<input type="checkbox"/> Preparing documents to support policy changes	
<b>Raising or leveraging of funds</b>	
<input type="checkbox"/> * Writing proposals to request additional funds	<input type="checkbox"/> Other raising or leveraging of funds
<input type="checkbox"/> Preparing/implementing sustainability plans	
<b>Service quality</b>	
<input type="checkbox"/> Developing or monitoring service quality standards	<input type="checkbox"/> Other service quality improvement
<input type="checkbox"/> Developing new training materials for service providers	
<b>Working competently with diverse populations</b>	
<input type="checkbox"/> Developing or adapting programs and materials specifically for diverse populations (ethnic, language, cultural, disabilities, other special needs). Includes translation	<input type="checkbox"/> * Outreach to underrepresented providers
	<input type="checkbox"/> * Other working competently with diverse populations
<b>Interagency collaboration</b>	
<input type="checkbox"/> Establishing or maintaining centralized registries and databases	<input type="checkbox"/> * Organizing/facilitating interagency meetings/work among providers to coordinate cases
<input type="checkbox"/> * Organizing/facilitating administrative-level meetings/work to share information, coordinate, and make joint decisions	<input type="checkbox"/> Developing systems to blend funding streams
	<input type="checkbox"/> * Other interagency collaboration
<b>Accessibility of services</b>	
<input type="checkbox"/> * Universal health care or augmentation of health insurance	<input type="checkbox"/> * Other efforts to increase accessibility
<input type="checkbox"/> * Universal preschool or expansion of early child care and education slots	
<input type="checkbox"/> * Other systems change activities	

\* Complete next page, where applicable

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**Directions:** If the activity that you selected above is starred "\*", list the number of occurrences, the estimated number of people and the audience characteristics, as applicable.

(Single) Date: ___/___/_____ (mm/dd/yyyy) <b>OR</b> Start Date: ___/___/_____ End Date: ___/___/_____		
<i>(up to one quarter's data may be included as long as the date range stays within a single quarterly reporting period)</i>		
Duration or average duration: _____ <input type="checkbox"/> hours <b>OR</b> <input type="checkbox"/> minutes <b>OR</b> <input type="checkbox"/> Not applicable		
<b>Number of occurrences:</b> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		<b>Estimated # of people:</b> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>Type of audience activity is directed at:</b> Mark (X) <b>ALL</b> that apply.	<input type="checkbox"/> Parents/guardians <input type="checkbox"/> Children (0 to 5) served directly	<input type="checkbox"/> Other family members <input type="checkbox"/> Community-at-large
<b>Characteristics of audience as applicable: Mark (X) ALL that apply.</b>		
<b>Ethnicity</b>  <input type="checkbox"/> No specific ethnicity <b>OR</b>	<input type="checkbox"/> Alaska Native or American Indian <input type="checkbox"/> Asian	<input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other
<b>Primary language</b>  <input type="checkbox"/> No specific primary language <b>OR</b>	<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Cantonese	<input type="checkbox"/> Hmong <input type="checkbox"/> Korean <input type="checkbox"/> Other <input type="checkbox"/> Tagalog <input type="checkbox"/> Vietnamese
<b>Is activity directed at children with disabilities, other special needs or their families? If yes, mark (X) <input type="checkbox"/></b>		