

| Grant Program | Service Category | # | Outcome Measures (Key Performance Indicators) for quarterly outcome report <i>"Unduplicated" means that once served by TVC-funded grant services, the reported (counted) beneficiary cannot be reported (counted) again for additional services received by the same TVC grant-funded project for the remainder of the grant year.</i> |
|--------------------|--|----|--|
| General Assistance | Supportive Services & Financial Assistance | 1 | How many total beneficiaries (veterans and their family members) were provided with temporary shelter this quarter, funded by TVC grants? |
| | | 2 | How many total beneficiaries (veterans and their family members) were provided with a long-term housing solution this quarter (long-term housing solution is one that will extend beyond 6 months)? |
| | | 3 | How many eligible beneficiaries reported improved mobility and quality of life this quarter based on receiving your assistive technology services, funded by TVC grants? |
| | | 4 | How much TVC grant funding was applied for assistive technology client services this quarter? |
| | | 5 | How many total times did your organization provide transportation assistance this quarter, funded by TVC grants? |
| | | 6 | How much TVC grant client service funding was applied for transportation assistance this quarter? |
| | | 7 | How many total meals were served this quarter to eligible beneficiaries, funded by TVC grants? |
| | | 8 | How much TVC grant funding was applied for client meal services this quarter? |
| | | 9 | How many times did your organization provide restorative dental care this quarter, funded by TVC grants? |
| | | 10 | How much TVC grant funding was applied for restorative dentistry services this quarter? |
| | | 11 | How many total months worth of utilities expenses (excluding mortgage and rent) did your organization provide this quarter, funded by TVC grants? |
| | | 12 | How many total months worth of rent/mortgage assistance did your organization provide assistance with this quarter, funded by TVC grants? |
| | | 13 | How much TVC grant client service funding was applied for rent/mortgage this quarter? |
| | | 14 | How many veteran families received assistance with funeral services this quarter? |
| | | 15 | How much TVC grant client services funding was applied for funeral services this quarter? |
| | | 16 | How many total times did your organization provide child/adult care services this quarter, funded by TVC grants? |

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| General Assistance | Supportive Services & Financial Assistance | 17 | How many total case management client interactions occurred this quarter as a service (or function) of your TVC grant funded project? |
| | | 18 | How many veterans and their qualified dependents received mental health, counseling, and/or intervention-related services this quarter, funded by TVC grants? |
| | | 19 | How many total clinical, evidenced-based treatment/counseling sessions were provided this quarter to eligible veterans, funded by TVC grants? |
| | | 20 | What percent of beneficiaries who began TVC grant funded clinical EBP treatment during this quarter, remain committed to the prescribed treatment plan? |
| | | 21 | How many veterans received treatment via non-clinical (integrative) therapies this quarter, funded by TVC grants? |
| | | 22 | How many unduplicated veterans began inpatient substance abuse treatment with TVC grant funding this quarter? |
| | | 23 | How many beneficiaries were referred to other TVC grantee organizations for services that are not covered in your TVC grant funded project? |
| | | 24 | How many beneficiaries received services from other TVC grant funded organizations based on your referral? |
| | | 25 | This quarter, how many total times were TVC grant funded services (of any kind) provided to eligible veterans, dependents and/or surviving spouses <u>at their current residences</u> that ENABLED their independent living? <i>(include only those services which were included in your TVC-funded grant project)</i> |
| | | 26 | How many beneficiaries are no longer homeless, or considered at-risk for homelessness, as a result of TVC grant funded services you provided this quarter? |
| | | 27 | As a result of receiving TVC grant funded services, how many beneficiaries reported an improvement (or positive change) this quarter with their relationships with family members and/or community? |
| | | 28 | As a result of receiving TVC grant funded services, how many beneficiaries reported an improvement (or positive change) this quarter with their financial stability? |
| | | 29 | As a result of receiving TVC grant funded services, how many beneficiaries reported an improvement (or positive change) this quarter with their employment status? |
| 30 | As a result of receiving TVC grant funded services, how many beneficiaries reported an improvement (or positive change) this quarter with their housing situation? | | |
| 31 | As a result of receiving TVC grant funded services, how many beneficiaries reported an improvement (or positive change) this quarter with their outlook on their future? | | |