

**Name of Community/Fire Department:**

(If this is a regional grant, list every participating fire department/fire district)

**Address:**

**Name of Fire Chief: Tel. Number: ( )**

**Fax Number:** ( )

**Date Submitted:** \_/ /

**S.A.F.E. Program Coordinator:** \_ **Senior S.A.F.E. Program Coordinator**

(If different than S.A.F.E. Program Coordinator)

**Email Address:**

**List of S.A.F.E. Educators:**

(Please list all members of your department by tittle who work with the S.A.F.E. program)

**Due Monday, January 31, 2022**

# DIRECTIONS: Use this checklist as a guide. Items with asterisks are the REQUIRED pages that need to be completed and returned

 \*Cover Sheet Page 1

 Instructions for Completing the Year End Report Page 3

 \*Year End Narrative Report Page 7

 \*Completed Year End Senior SAFE Activity Worksheet Page 8

 \*Completed Year End School Activity Worksheet Page 9

 \*Year End Community Report Page 10

 \*Student and Instructor Evaluation Report including evaluation results Pages 11-15

 \*Budget Page signed by the Chief of the Department Page 16

**IF NEEDED:**

 Extension Request Form Page 17

 Final Budget Worksheet Page 18

**Instructions for Completing FY 2021 S.A.F.E. Grant Year-End Report**

## Year-End Narrative Report (page 7)

Please provide a brief synopsis of your program’s activities throughout the year. Utilize the goals and objectives that were written from your S.A.F.E. and Senior

S.A.F.E. grant application. Specifically, take each goal and analyze whether the objective was met, or why it was not met. Add any other noteworthy items that were encountered. (Minimum one page)

## Year-End Senior S.A.F.E. Activity Report (page 8)

* + **Partnering Agency:** List all partnering agencies.
	+ **Number of Fire and Life Safety Presentations:** List the total number of fire and fall prevention presentations.
	+ **Key Fire Safety Behaviors Taught:** Identify key fire safety behaviors taught by your program.
	+ **Number of Seniors Reached:** Total number of seniors reached by your program.
	+ **Number of Fire and Fall Prevention Trainings:** Include train-the-trainer courses.
	+ **Curriculum Used:** Identify any curriculum used (Remembering WhenTM, etc.)
	+ **Number of Home Smoke/CO Alarm Installation Trainings Given:** List the number of installation trainings that you provided to your community partners.

### **Number of Home Visits:** List the number of home visits conducted by your department and/or by your partnering agency.

* + **Number of Smoke Alarm Installations:** List the number of smoke alarms installed.
	+ **Number of CO Alarm Installations:** List the number of CO alarms installed.
	+ **Other Safety Device Installations:** List the number of other safety devices that your department installed besides traditional smoke or CO alarms.
	+ **Other Activities:** List all other older adult activities that your department conducted.

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## Year-End School Activity Report (page 9)

### List what programs were completed in your FY 2021 S.A.F.E. Program. Use your grant application Activity Worksheet as a guide.

* + **Grade Category:** Complete the report with information by grade level.
	+ **Number of Students Enrolled: *(Required for all grade levels*)** Enter the total number of students enrolled per grade, Pre-K through 12 regardless of whether or not your program reaches that level. (Ask the superintendent’s office for the school census or refer to your grant.) **If your community does not include a middle school or high school indicate that on your activity report as N/A.**
	+ **Number of Students Reached by S**.**A.F.E.:** Enter the number of students reached by your S.A.F.E. Program by grade level. Use classroom enrollment as a guide. **Enter N/A for grades you did not reach or visit.**
	+ **Total Number of Classrooms Reached by S.A.F.E.:** Enter the number of classrooms reached by your S.A.F.E. Program by grade level. **Enter N/A for grades you did not reach.**
	+ **Number of Classroom Visits per Grade Grouping:** How many times did each student in this grouping see a S.A.F.E. Educator? **Enter N/A for grades you did not reach.**
	+ **Type of Presentation**: (e.g., classroom, auditorium, public event, etc.)
	+ **Curriculum or Key Fire Safety Behaviors:** Enter the curriculum you used such as *Learn Not To Burn*, *Smoke Detectives* or list the key fire safety behaviors from the *Mass. Curriculum Planning Guidebook* your program covers, (i.e. Making and Practicing Home Escape Plans, Understanding and Practicing Match and Lighter Safety.)

## Year-End Community Activity Report (page 10)

### List the community activities supported by the S.A.F.E. Program

* + Estimate the number of people in attendance/reached (for example how many children visited the fire safety house at a community event.)
	+ List the topics covered
	+ Program Partners: list the names of companies and organizations with whom you have formed partnerships to support or assist your community programs such as Boys and Girls Club, Rotary, local businesses, etc.
1. **Student Evaluation Report (pages 11-15)**

Summarize the results of your student evaluations by grade. This is where you prove the students learned what you thought you taught them. Use your grant application Activity Worksheet as a guide. **Provide blank copies of your evaluation tools and scoring rubrics if different from the evaluations you submitted with your grant. Provide a brief explanation why you chose to alter your original evaluation. (*Required)***

It may only be possible to evaluate one grade level but evaluate the same one year after year for consistency. Use page 11 to report your results if you used the DFS 3rd Grade Evaluation Tool; use page 12 for DFS 6th Grade Evaluation Tool, use page 11 for DFS 10th Grade Evaluation Tool, otherwise use page 13 to report your results.

1. **S.A.F.E Student and Educator Evaluation Report (page 14-15)**
	* **Method of Student Evaluation:** Enter the methods of evaluation used, such as the 3rd or 6th Grade Evaluation Tool, pretest, post-test, essay, homework assignment, and demonstrations, etc. (Summarize the results in the evaluation section, page 14.)
	* **Method of S.A.F.E. Educator Evaluation:** Enter the methods of evaluation used, such as teacher questionnaires, peer review, etc. In one paragraph, describe the method used to evaluate your students. In a second paragraph describe the method to evaluate the S.A.F.E educator(s) – did you use a teacher questionnaire, etc. (page 15) **Provide a blank copy of your instructor evaluation form if different from the one submitted with your grant application.**
2. **Year-End Budget Expenditure Worksheet Revenue (see page 16)**

1R. Enter the amount of your Fiscal Year 2021 Awards for S.A.F.E. and Senior SAFE.

1E. Enter the amount expended on salary 2E. Enter amount expended training

3E. Enter the amount expended on equipment

4E. Enter the amount expended on materials and supplies 5E. Enter the amount expended on other

6E. Enter the total amount spent

Subtract (6E) from your total award (1R). If this does not equal zero, you have remaining funds. **If there are remaining funds, apply for a six-month extension (page 17).**

**We are aware many departments supplement the S.A.F.E. grant with local funding. Please do not add that into the worksheet. The worksheet should only be for grant funds. The number in the bottom right box cannot be negative.**

**Signature and Date**

The budget worksheet must be signed by the **fire chief** who is responsible for the proper expenditure of the grant funds.

1. **Six Month Extension Form (page 17)**

Fill out this form and submit with your FY 2021 S.A.F.E. Grant Year End Report to request a six-month extension on use of your FY 2021 money. ***Do not fill out page 18 with your request for an extension.***

1. **Final Budget Report to be filed after Six Month Extension (Page 18).**

If you file for and receive a six-month extension, you must submit a final budget report by July 30, 2022 that reflects expenditures as of June 30, 2022.

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**1R – Enter the amount of your Fiscal Year 2021 Extension**

**1E-5E – Enter the amounts spent in the various categories and subtract from 1R**

**6E – The balance should be zero. If not, the balance must be returned.**

**Any funds remaining after June 30, 2022 must be returned to the Department of Fire Services, 1 State Road, Stow, MA 01775, Attn: Fiscal Affairs.**

1. **Please return only the applicable pages to** **David.Demarco@mass.gov**  **or** **Christie.Clement@mass.gov**

Send To: S.A.F.E. Program Department of Fire Services

P.O. Box 1025 Stow, MA 01775

Name of Department

# Year-End Narrative Report for S.A.F.E. and Senior SAFE

Please provide a brief synopsis about your program’s activities throughout the year. Utilize the goals and objectives that were written from your community’s S.A.F.E. and Senior SAFE Grant Application. Specifically, take each goal: analyze whether the objective was met, or why it was not met. Add any other noteworthy items such as Young Heroes or Golden Heroes. (Minimum one page)

**Student S.A.F.E.**

**Senior SAFE**

# Senior SAFE Activity Report

**Department:**

**Partnering Agency/Agencies:**

**Number of Fire and Life Safety Presentations:**

**Key Fire/Fall Behaviors Taught:**

**Curriculum Used:**

**Number of Seniors Reached:**

**Number of Home Visits:**

**Number of Smoke Alarms Installed:**

**Number of CO Alarms Installed: \_ Number of Safety Devices Installed \_**

**Types of Other Safety Devices**

**Installed:**

**Other**

**Activities: \_**

Name of Department

# Year-End School Activity Report

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Grade**Level** | **# of Students****Enrolled (Required for All Grade Levels)** | **# of****Students Reached By S.A.F.E.** | **Total #****Classrooms Reached by S.A.F.E.** | **# of Times****Each Classroom Visited** | **Type of****Presentation** | **Curriculum or****Key Fire Safety Behaviors** | **Method of****Student Evaluation** | **Method of****S.A.F.E****Educator Evaluation** |
| Pre-K & K |  |  |  |  |  |  |  |  |
| Gr. 1 & 2 |  |  |  |  |  |  |  |  |
| Gr. 3 & 4 |  |  |  |  |  |  |  |  |
| Gr. 5 & 6 |  |  |  |  |  |  |  |  |
| Gr. 7 & 8 |  |  |  |  |  |  |  |  |
| Gr. 9 & 10 |  |  |  |  |  |  |  |  |
| Gr. 11 & 12 |  |  |  |  |  |  |  |  |
| TOTAL |  |  |  |  |  |  |  |  |

**Percentage of student population reached by S.A.F.E Program (total reached/ total enrolled X 100) %.**

# Year-End Community Activity Report

Name of Department

**Community S.A.F.E Activities:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Activity** | **# In Attendance** | **Topics Covered** | **Program Partners** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

 **Partnerships formed in the S.A.F.E and Senior SAFE Program.**

**Name of Department**

**3rd Grade Student Evaluation Results Total # of Students Tested:**

**\*Average Overall Score:** %

**Percent Correct by Question #:**

|  |  |
| --- | --- |
| **1:** % | **16:** % |
| **2:** % | **17:** % |
| **3:** % | **18:** % |
| **4:** % | **19:** % |
| **5:** % | **20:** % |
| **6:** % | **21:** % |
| **7:** % | **22:** % |
| **8:** % | **23:** % |
| **9:** % | **24:** % |
| **10:** % | **25:** % |
| **11:** % | **26:** % |
| **12:** % | **27:** % |
| **13:** % | **28:** % |
| **14:** % | **29:** % |
| **15:** % | **30:** % |

**\*Add the scores of questions 1-30 together then divide your total by 30 and the answer is your average overall score. For additional information refer to URL:** [**http://www.mass.gov/eopss/docs/dfs/osfm/pubed/safe/3rd-grade-guide.pdf**](http://www.mass.gov/eopss/docs/dfs/osfm/pubed/safe/3rd-grade-guide.pdf)

**If you did not use the DFS 3rd Grade Evaluation Tool, go to the next page and leave this blank.**

**Total # of Students Tested:**

**\*Average Overall Score:** % **Percent Correct by Question #:**

|  |  |  |
| --- | --- | --- |
| **1A:** | % | **15:** % |
| **1B:** | % | **16:** % |
| **1C:** | % | **17A:** % |
| **1D:** | % | **17B:** % |
| **2:** | % | **17C:** % |
| **3:** | % | **17D:** % |
| **4:** | % | **17E:** % |
| **5:** | % | **17F:** % |
| **6:** | % | **17G:** % |
| **7:** | % | **17H:** % |
| **8:** | % | **17I:** % |
| **9:** | % | **18:** % |
| **10:** | % | **19:** % |
| **11:** | % | **20:** % |
| **12:** | % | **21:** % |
| **13:** | % | **22:** % |
| **14:** | % |  |

**\*Enter each score as well as the overall score into the 6th grade database. For additional information refer to URL:** [**http://www.mass.gov/eopss/agencies/dfs/dfs2/osfm/pubed/web-**](http://www.mass.gov/eopss/agencies/dfs/dfs2/osfm/pubed/web-pages/resources-for-fire-educators.html)[**pages/resources-for-fire-educators.html.**](http://www.mass.gov/eopss/agencies/dfs/dfs2/osfm/pubed/web-pages/resources-for-fire-educators.html) **If you did not use the DFS 6th Grade Evaluation Tool, go to the next page and leave this blank.**

**10th Grade Student Evaluation Results Total # of Students Tested:** \_

**\*Average Overall Score:** % **Percent Correct by Question #:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1A:****1B:****1C:** | % **%**% | **10C:** %**10D: %****11:** % | **23 :****24 :** |  **%** **%** |
| **2:** | % | **12A:** % |  |  |
| **3:** | % | **12B:** % |  |  |
| **4:** | % | **12C:** % |  |  |
| **5:** | % | **12D:** % |  |  |
| **6A:** | % | **13:** % |  |  |
| **6B:****6C:** | %% | **14:** %**15:** % |  |  |
| **7A:** | % | **16:** % |  |  |
| **7B:****7C:** | %% | **17:** %**18:** % |  |  |
| **8:** | % | **19:** % |  |  |
| **9:** | % | **20: %** |  |  |

**10A:** % **21: %**

**10B:** % **22 : %**

**\*Enter each score as well as the overall score into the 10th grade database. For additional information refer to URL:** [**http://www.mass.gov/eopss/agencies/dfs/dfs2/osfm/pubed/web-**](http://www.mass.gov/eopss/agencies/dfs/dfs2/osfm/pubed/web-pages/resources-for-fire-educators.html)[**pages/resources-for-fire-educators.html.**](http://www.mass.gov/eopss/agencies/dfs/dfs2/osfm/pubed/web-pages/resources-for-fire-educators.html) **If you did not use the DFS 10th Grade Evaluation Tool, go to the next page and leave this blank.**

**S.A.F.E. Student Evaluation Report**

The type of student evaluation tool we used was: (check all that apply) **Reminder:** Verbal questions and answers are no longer an acceptable means of evaluation.

|  |  |  |  |
| --- | --- | --- | --- |
|  Checklist |  Rubric |  Pre-test |  Post-test |
|  Poster |  Homework |  Demonstration |  Other (please explain) |

* 1. What grade did you evaluate?
	2. How many students did you evaluate?
	3. **Please attach a copy of the evaluation tool if different from the one submitted with your grant. *(Required)***
	4. Please provide summary statistics from your evaluation.

(**Example:** 85% of the 300 third graders who completed a home escape plan showed a meeting place in front of the house. 10% showed a meeting place in back of the house and 5% showed no meeting place at all.)

**S.A.F.E. Student Evaluation and Educator Evaluation Report Narrative**

In one paragraph, describe the method used to evaluate your students. In a second paragraph describe the method to evaluate the S.A.F.E educator(s) – did you use a teacher questionnaire, etc. **Submit a blank copy of your instructor evaluation form if different from the one submitted with your grant. Provide a brief explanation why you chose to alter your original evaluation.**

|  |  |  |  |
| --- | --- | --- | --- |
| **1R. Budget Category** | **Description****List expenditures in FY 2021****Fire Department:**  | **School-Based Budget FY2021 Amount****$** | **Senior SAFE Budget FY2021 Amount****$** |
| **1E.** Salary | To defray personnel costs incurred as a result of a commitment to S.A.F.E., such as replacement costs of firefighters dedicated toS.A.F.E. program initiatives. Compensation paid to employees engaged in activities affiliated with this grant may include regular salary, replacement salary, overtime, overtime replacement andother salary benefits. |  |  |
| **2E**.Training | To provide training of personnel in any nationally recognized fire safety curriculum. Training courses and seminars sponsored by the Department of Fire Services are available. Typical expenses in this category include tuition, S.A.F.E. related in-state travel or lodging, and meal expenses. This includes training conducted by the fire department which should be listed under personnel costs. |  |  |
| **3E.**Equipment | Costs associated with the purchase and installation of equipment affiliated with this grant. To purchase or lease equipment to support and enhance S.A.F.E. efforts such as televisions, DVD players, and camcorders. For the Senior SAFE Program, funds may be used to purchase smoke alarms, carbon monoxide alarms, replacement batteries, tools such as drills and step ladders for installation, high-end heat limiting devices for stoves, in-hood stove top fire extinguishers, house numbers, nightlights, and other similar fall prevention devices. |  |  |
| **4E.**Materials & Supplies | Costs associated with any materials or supplies affiliated with the grant including: program curriculum, workbooks, DVDs, videos, handouts, classroom supplies, T-shirts, bumper stickers, and other educational or promotional materials. |  |  |
| **5E**. Other | To purchase miscellaneous and/or incidental items related to the successful implementation of the S.A.F.E. program. |  |  |
| **6E**. Total | **Subtract line 6E from line 1R.** If the total is greater than zero, please apply for an extension. (You can apply for S.A.F.E. only, Senior SAFE only or both grants) |  |  |

**Subtract line 6E from line 1R. If greater than zero you are eligible to apply for an extension. Balance of Unexpended FY 2021 Funds.** $

**Chief’s signature Date**

# Name of Community/Fire Department:

(If this is a regional grant, list every participating fire department/fire district)

**Address: Name of Fire Chief:**

**Tel. Number: Fax Number:**

**Date Submitted:**

**S.A.F.E. Program Coordinator:**

**Senior S.A.F.E. Program Coordinator**

(If different than S.A.F.E. Program Coordinator)

# Email Address:

**Please fill this form out as well as your FY 2021 S.A.F.E. and Senior SAFE Grant Year End Report with an up to date Year-End Budget Worksheet and Head of Department Signature.**

# Amount of S.A.F.E. FY 2021 Extension Request: $ . Amount of Senior SAFE FY 2021 Extension Request: $ .

**Reasons for requesting six-month extension:**

**Chief’s signature Date**

|  |  |  |
| --- | --- | --- |
|  | **Extension Worksheet Page****Fire Department:**  |  |
| **1R. Budget Category** | **Description List expenditures** | **School-Based Budget FY2021 Extension Amount****$** | **Senior SAFE Budget FY2021 Extension Amount****$** |
| **1E. Salary** | To defray personnel costs incurred as a result of a commitment to S.A.F.E., such as replacement costs of firefighters dedicated toS.A.F.E. program initiatives. Compensation paid to employees engaged in activities affiliated with this grant may include regular salary, replacement salary, overtime, overtime replacement andother salary benefits. |  |  |
| **2E**.**Training** | To provide training of personnel in any nationally recognized fire safety curriculum. Training courses and seminars sponsored by the Department of Fire Services are available. Typical expenses in this category include tuition, S.A.F.E. related in-state travel or lodging, and meal expenses. This includes training conducted by the fire department which should be listed under personnel costs. |  |  |
| **3E.****Equipment** | Costs associated with the purchase and installation of equipment affiliated with this grant. To purchase or lease equipment to support and enhance S.A.F.E. efforts such as televisions, DVD players, and camcorders. For the Senior SAFE Program, funds may be used to purchase smoke alarms, carbon monoxide alarms, replacement batteries, tools such as drills and step ladders for installation, high- end heat limiting devices for stoves, in-hood stove top fire extinguishers, house numbers, nightlights, and other similar fall prevention devices. |  |  |
| **4E.****Materials & Supplies** | Costs associated with any materials or supplies affiliated with the grant including: program curriculum, workbooks, DVDs, videos, handouts, classroom supplies, T-shirts, bumper stickers, and other educational or promotional materials. |  |  |
| **5E**. **Other** | To purchase miscellaneous and/or incidental items related to the successful implementation of the S.A.F.E. program. |  |  |
| **6E**. **Total** | The Total should be zero. If this line is greater than zero, the remaining funds must be sent back to DFS |  |  |

**Balance of Unexpended FY 2021 Funds** $

(***Any unexpended funds should be returned to DFS – Attention Fiscal Affairs***)

**Chief’s signature Date**