

**ARIZONA CRIMINAL JUSTICE COMMISSION
(ACJC)**



**Crime Victim Assistance Program
Annual Performance Report
FY 2014
(July 1, 2013 - June 30, 2014)**

Due August 15, 2014

**Please note the Annual Report should only be completed using the survey link sent to you via email. This document should only be used as a template for your responses.

Agency Name: _____ ACJC Grant #: _____

Program Name: _____

Address: _____

Telephone Number: _____ FAX Number: _____

E-Mail: _____

Prepared by: _____
Signature of Person Completing Report Date

Typed Name and Title

Certified by: _____
Signature of Authorized Official Date

Typed Name and Title

I. Number of Crime Victims Served by ACJC Grant-Funded Program

PLEASE LIST THE NUMBER OF VICTIMS SERVED BY THE ENTIRE PROGRAM.

Indicate the total number of crime victims served by the ACJC grant-funded *program* during the grant period (July 1, 2013 – June 30, 2014). This program must include the "Grant-funded personnel" whose position(s) were funded by ACJC grant monies and grantee match funds.

EACH CRIME VICTIM SHOULD BE COUNTED ONLY ONCE.

If a victim has multiple crimes committed against them during an incident, list the victim once under the crime that carries the stiffest penalty according to statute.

EXAMPLE: John Doe is the victim of a robbery. During the robbery, he is assaulted and suffers physical injury. John receives multiple services from your ACJC grant funded program, but since this is one incident involving only one set of facts, John should be counted as a victim only once. The type of crime reported in the table below should be the crime that carries the stiffest penalty.

Type of Crime	# of Crime Victims Served by ACJC Grant Funded Program	Type of Crime	# of Crime Victims Served By ACJC Grant Funded Program
Abuse of Vulnerable Adults	0	Financial Exploitation	0
Adults Molested as Children	0	Forgery	0
Aggravated Domestic Violence	0	Homicide	0
Arson	0	Identity Theft	0
Assault	0	Interfering With Judicial Process	0
Burglary	0	Kidnapping	0
Child Abuse (Physical & Sexual)	0	Robbery	0
Criminal Damage	0	Sexual Assault – Adults Only	0
Criminal Trespass	0	Stalking	0
Disorderly Conduct	0	Terrorism	0
Domestic Violence (crime type unknown)	0	Theft	0
DUI	0	Threatening/Intimidating	0
Endangerment	0	Unknown (i.e. crisis hotline calls)	0
Other: (Please List)		Other Total	0
	0		0
	0		0
	0		0
	0		0
	0		0
TOTAL NUMBER OF CRIME VICTIMS SERVED (Add both columns above)			0
How many of the victimizations above were related to Domestic Violence:			0

II. Demographics of Victims Served by the ACJC Grant-Funded Program

Each demographic category TOTAL must be the same TOTAL reported previously in Section I.

ETHNICITY	AGE	SEX	DISABILITY
Caucasian	0 – 17	Male	Yes
Latino/Latina	18 – 65	Female	No
African American	66 – Plus	Unknown	Unknown
Asian/Pacific Islander	Unknown		
American Indian/Eskimo			
Unknown			
TOTAL	0	0	0

III. ACJC Grant-Funded Program Budget

Please provide the following information about the ACJC Grant-Funded Program

A. Total FY14 annual budget for ACJC Grant-Funded Program	\$
B. Total ACJC Grant Award Amount for FY14	\$
C. ACJC Grant Amount as % of total program budget (B÷A)	

IV. Victim Compensation Assistance

Indicate the number of times ACJC grant-funded personnel have provided the following services to assist victims with Crime Victim Compensation claims.

Type of Assistance	Number of Times Provided
1. Provide verbal or written information about the Compensation Program.	0
2. Provide referral and/or transportation to Crime Victim Compensation office.	0
3. Provide applications.	0
4. Provide assistance with completing the application.	0
5. Provide assistance with obtaining police reports, records, bills, etc.	0
TOTAL	0

V. Service Categories

Report the total number of services provided by the ACJC grant-funded *program* during the grant period (July 1, 2013 – June 30, 2014). This program must include the "Grant-funded personnel" whose position(s) were funded by ACJC grant monies and grantee match funds.

For this item, please report ALL services provided to a crime victim. The services listed below are authorized by the Crime Victim Assistance Program Rule R10-4-204.

EXAMPLE - An advocate provides assistance to a victim in obtaining property kept as evidence on three different occasions, accompanies the same victim to court four times, and provides assistance in filing a compensation claim. Services would be reported as follows:

Assistance in obtaining property	3
Court escort	4
<u>Assistance in filing a Compensation Claim</u>	<u>1</u>
TOTAL SERVICES FOR THE VICTIM	8

Type of Service (Include in-person, letter, e-mail, and telephone services)	Number of Services
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1. Crisis intervention services for the urgent emotional or physical needs of a victim, which may include a 24-hour hotline for counseling or referrals for a victim. (R10-4-204.A.1)	<u>0</u>
2. Emergency temporary shelter for a victim who cannot safely remain in current lodgings. (R10-4-204.A.2.a)	<u>0</u>
3. Emergency petty cash for immediate needs related to transportation, food, shelter, and other necessities. (R10-4-204.A.2.b)	<u>0</u>
4. Emergency temporary repairs , such as locks and windows damaged as a result of a crime to prevent the immediate reburglarization of a home or apartment. (R10-4-204.A.2.c)	<u>0</u>
5. Follow-up counseling dealing with the victimization. (R10-4-204.A.3.a)	<u>0</u>
6. Assistance in dealing with other social services and criminal justice agencies . (R10-4-204.A.3.b)	<u>0</u>
7. Assistance in obtaining the return of property kept as evidence. (R10-4-204.A.3.c)	<u>0</u>
8. Assistance in dealing with the victim's landlord or employer . (R10-4-204.A.3.d)	<u>0</u>
9. Referral to other sources of assistance as needed. (R10-4-204.A.3.e)	<u>0</u>
10. Court related services including direct services or petty cash that help victims participate in criminal justice proceedings, including transportation to court, child care, meals, and parking expenses. (R10-4-204.A.4.a)	<u>0</u>
11. Advocate services including escorting victims to criminal justice-related interviews, court proceedings, and assistance in accessing temporary protection services. (R10-4-204.A.4.b)	<u>0</u>
12. Notification services for significant developments in the case, court proceedings, and final disposition of the case. (R10-4-204.A.5)	<u>0</u>
13. Other (List All)	<u>0</u>
<u>0</u>	<u>0</u>
<u>0</u>	<u>0</u>

TOTAL NUMBER OF SERVICES PROVIDED (Add all the services listed above) **0**

VI. Program Goals and Outcomes

Based on the percentages provided in your original FY14 ACJC Victim Assistance Grant Application, please report your program's performance during the grant period.

You must select and report on the same outcomes as those submitted in the original application. The corresponding percentages will be directly compared to those submitted in the original application and should be based on program performance during the grant period.

The figure you provided on page 1 (*TOTAL NUMBER OF CRIME VICTIMS SERVED*) should be used as the total for the percentages required below. Please provide the percentage for each selected outcome.

Goal 1: Healing (choose at least three)	%
<input type="checkbox"/> Percentage of victims reporting an increased knowledge of services available.	%
<input type="checkbox"/> Percentage of victims who report having increased feelings of well being.	%
<input type="checkbox"/> Percentage of victims who report they know how to access short and long term resources available to meet their needs.	%
<input type="checkbox"/> Percentage of victims reporting the provider's services increased their ability to cope.	%
<input type="checkbox"/> Percentage of victims completing treatment plan objectives.	%
<input type="checkbox"/> In this space you may optionally provide any additional quality measure of your own choosing.	%
Goal 2: Justice (choose at least two)	%
<input type="checkbox"/> Percentage of victims reporting the information and assistance provided had a positive impact on their participation in the criminal justice system.	%
<input type="checkbox"/> Percentage of victims reporting an increased understanding of their legal rights.	%
<input type="checkbox"/> Percentage of victims reporting increased knowledge of the legal system.	%
<input type="checkbox"/> In this space you may optionally provide any additional quality measure of your own choosing.	%
Goal 3: Economic Stabilization (choice required)	%
<input checked="" type="checkbox"/> Percentage of crime victims reporting an increased knowledge of the victim's compensation program, restitution and other financial assistance services.	%

Goal 4: Safety (choose at least one)

%

- Percentage of victims who report understanding and initiating safety plans for meeting their immediate and on-going safety needs. %
- Percentage of victims who report being able to better assess their safety needs. %
- In this space you may optionally provide any additional quality measure of your own choosing. %

Quality Measures (choose at least three)

%

- Percentage of victims reporting overall satisfaction with services. %
- Percentage of community collaborators reporting positive satisfaction with services provided. %
- Percentage of victims who report they would recommend program services to other victims. %
- Percentage of victims who reported that advocacy services provided were helpful. %
- In this space you may optionally provide any additional quality measure of your own choosing. %

Please include the total number of victim survey responses used to calculate the above percentages:

0

VII. Volunteer Information

Please provide the following estimates about volunteers assisting with the ACJC grant-funded program during the FY14 grant period (July 1, 2013 – June 30, 2014).

- A. Estimate number of volunteers assisting with ACJC grant-funded program. _____
- B. Total estimated hours to be worked by volunteers in "A". _____
- C. Total contribution of program volunteers expressed as FTE equivalency.
(Question B Total ÷ 2,080) 0.00

VIII. Narrative Report

Complete the following questions in the spaces provided. Values in () are suggested response lengths.

1. Provide case history and anecdotal information that demonstrate the impact the grant funds have had on the delivery of victim services by your organization. Please do not include confidential client information. (700 words)
 2. Identify any emerging issues or notable trends impacting crime victim services within your community. What assistance does your program need in order to better address these issues and make it more responsive to the needs of crime victims? (700 words)
 3. Did the grant-funded program meet the selected goals and outcomes? These are the specific percentages estimated in the "Program Goals and Outcomes" section of the grant application and documented in section VI of this report. If all outcome percentages were met please share additional program accomplishments during the grant period. If any outcomes were not met, please explain in detail why not. (700 words)
 4. Explain how the content of the survey used to measure participant satisfaction with the services provided by the program reflects the goals and outcomes selected. Additionally, explain how the percentages are calculated from the survey responses. (700 words)
 5. Is the amount of funding the program receives enough to make administering the grant (applying, surveying victims, tracking services, and reporting) worthwhile? What aspect of administering the grant places the greatest burden on program resources? (700 words)
 6. What support provided by ACJC in the past, in addition to funding, has been most helpful to the program? What additional support, beyond funding, could ACJC provide to the program? (700 words)
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