

ACJC Grant Program: Crime Victim Assistance Grant Program

Period Title: FY 2014

Project Title: The Project

Purpose Area: Select a purpose area...

Has the program been providing services to victims for more than three years? Yes

Applicant Agency: Agency Name: Hopi County Victim Advocacy Center
 Department Name: Victim Services
 DUNS Number: N/A

Authorized Official: Doe, John (Lead Farmer)

Mailing Address: 687 E. Any St.
 Mesa, Arizona 85203
 Email: email@email.com
 Phone: 480-555-6987
 Fax: 480-555-6978
 Agency: Hopi County Victim Advocacy Center
 Department: Victim Services

Project Official: Josephson, Joe (Farmer)

Mailing Address: 687 E. Any St.
 Mesa, Arizona 85203
 Email: email@email.com
 Phone: 480-555-6987
 Fax: 480-555-6978
 Agency: Hopi County Victim Advocacy Center
 Department: Victim Services

Number of crimes victims served by the program during the most recently completed fiscal year: 1000

Approximate percentage of those crime victims served only by phone, mail, or e-mail: 15

Geographic areas served Hopi County

Agency Mission Statement The Hopi County victim Advocacy Center (HCVAC) is dedicated to meeting the varied needs of crime victims in Hopi County. Through advocacy, referrals and community education, HCVAC refuses to let any victim of crime struggle alone or in silence.

Does the program charge or intend to charge for services? No

If yes, describe fee schedule:

Type of crime victims served (check all that apply)

Adults molested as children
Aggravated assault
Assault
Child sexual abuse
Elder abuse/fraud
Identity theft
Sexual assault

If "Other non-violent crimes", please specify. If none, enter "None" in the box.

NONE

If "Other violent crimes", please specify. If none, enter "None" in the box.

NONE

Type of services provided (check all that apply)

Crisis counseling
Emergency financial assistance
Emergency legal advocacy
Group treatment
Information and referral

If "Other", please specify. If none, enter "None" in the box.

NONE

For the most recent fiscal year, please provide the **total number** of **services** provided to crime victims in each service area below for the **program** requesting ACJC Victim Assistance funding. *A single victim may receive several different services.*

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.	562
Emergency temporary shelter for a victim who cannot safely remain in current lodging.	3
Petty cash for immediate emergency needs related to transportation, food, shelter, and other necessities.	0
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.	25
Follow-up counseling dealing with the victimization.	256
Assistance dealing with other social service and criminal justice agencies.	150
Assistance in obtaining the return of property kept as evidence.	15
Assistance in dealing with the victim's landlord or employer.	7
Referrals to other sources of assistance as needed.	625
Court-related direct services or petty cash that help victims participate in criminal justice proceedings including transportation to court, child care, meals, and parking expenses.	114
Court-related advocate services including escorting victims to criminal justice-related interviews, court proceedings, and assistance in accessing temporary protection services.	670
Notification of significant developments in the investigation or adjudication of the case.	884
Notification that a court proceeding for which the victim has been subpoenaed has been canceled or rescheduled.	66
Notification of the final disposition of the case.	84

Total 3,461

Indicate the number of times the program requesting ACJC Victim Assistance funding provided the following services to assist victims with Crime Victim Compensation claims.

Provide verbal or written information about the Compensation Program.	677
Provide referral and/or transportation to Crime Victim Compensation Office.	220
Provide applications.	115
Provide assistance with completing the application.	50
Provide assistance with obtaining police reports, records, bills, etc.	22

Please describe how the program requesting ACJC Victim Assistance funding assists victims with submitting or processing crime victim compensation claims. *Limit 250 characters, including spaces.*

Advocates educate victims either verbally or through written information regarding the Victim Compensation Program. When needed advocates also provide applications and assistance in filling out the applications. In addition advocates will provide transportation to the Maricopa County Attorney's Office to submit claims and/or any follow up information when necessary.

Number of paid program staff providing **direct** services to crime victims. *Do not include administrative staff.*

Full time: 12 Part time: 2

For the most recent fiscal year, list the total **hours** worked by volunteers. *Must be in direct support of the program.*

1,588 / 2,080 = 0.76

Problem Statement

Identify the problem in your community that the grant funded program will address. Be very specific and include statistical data to define the severity of the identified problems. *Response is limited to 3,500 characters, including spaces.*

Enter narrative below:

According to the Arizona Department of Public Safety's Annual Report, in 2007, Hopi County residents suffered 11,254 violent and property victimizations. During that year, one in ten county residents was a victim of crime. For each of these victims and many others like them, the trauma of the crime itself was only the beginning of what will often be a lifelong struggle. Victims of crime can find their world in chaos for years to come and feel firsthand the crime's impact on their physical, financial, and psychological wellbeing.

Beyond any physical injuries resulting from victimization, victims may also suffer from other physical symptoms such as insomnia, headaches, muscle tension and nausea. In addition, victims may find themselves faced with unforeseen financial expenditures related to the crime including costs to repair damaged property, health care expenses, or costs related to funeral and burial.

The psychological impact of victimization is often the longest lasting and most difficult to overcome. Crime victims run an increased risk of suffering any number of mental illnesses like clinical depression and post-traumatic stress disorder (PTSD). The estimated chances of developing PTSD after the following victimizations are: rape, 49 percent; severe beating or physical assault, 31.9 percent; other sexual assault, 23.7 percent; shooting or stabbing, 15.4 percent; and witness to a murder or assault, 7.3 percent (Sidran Foundation, "Post-traumatic Stress Disorder Fact Sheet). In Hopi County during 2007 there were 36 rapes and 490 aggravated assaults (Crime in Arizona 2007, Arizona Department of Public Safety).

Unfortunately, victims also risk secondary victimization from a criminal justice system that often puts the needs of the State and the rights of the offender before those of the victim. Lacking knowledge of the criminal justice system, victims often retreat to the background and their voices go unheard during investigation, prosecution and sentencing. According to the Hopi county Victim Advocacy Center (HCVAC) intake survey results for 2007, 84 percent of victims responding felt they lacked adequate knowledge of the criminal justice system to make an informed decision regarding their rights.

These problems are only compounded when the victim is from a rural community with limited resources, covering a large geographic area. Over the last three years, 91 percent of Hopi County crime victims served by HCVAC indicated the lack of local victim service resources as their number one concern (HCVAC Victim Intake Survey, 2002 – 2008).

The problems faced by victims of crime are varied and numerous. And one victim's experience will differ greatly from another who suffered the same crime. Regardless of their situation, no victim should ever feel like they are facing these challenges alone.

Project Summary

Provide a summary of the program the ACJC grant funds will support. Include how the program addresses the problem in the community, what services are provided, the population served, why it is important and how it is unique. Also, include at least two specific, measurable program objectives. These objectives should outline specific program activity during the grant period. Refer to the sample application for examples. *Response is limited to 3,500 characters, including spaces.*

Enter narrative below:

In 1995 the Hopi County Victim Advocacy Center (HCVAC), a private non-profit organization, began serving victims of crime across Hopi County. Before HCVAC opened its county headquarters in Anytown, Arizona, the residents of Hopi County were without a county-wide victim services solution. Since opening HCVAC has served over 50,000 victims of crime. During 2007 HCVAC provided services to 3,193 victims from the following demographic categories: 90% white, 6% Native American, 3% Hispanic, 1% African American. This victim total represents an increase of 20% over the previous year (HCVAC Annual Report FY2007).

Through its county headquarters in Anytown and a satellite office in Anyville, HCVAC provides victims with court accompaniment, victim compensation claims assistance, forensic interviews and examinations, as well as medical and mental health referrals. HCVAC also administers a volunteer crisis response team serving the residents of Anytown, Hopi County's largest city.

During the upcoming fiscal year, in order to increase the ability of Hopi County crime victims to access all services offered by HCVAC, an additional satellite office will be opened in Anyburg located in far northeast Hopi County. With the financial support of agencies like ACJC, this satellite office will be staffed by one full time victim advocate and one part time administrative support staff. It is estimated that by adding this satellite office over 500 additional victims will be served over the course of the year.

An additional office will also increase HCVAC's ability to reach out and educate county residents on crime prevention and victim's issues. During the past fiscal year HCVAC hosted 7 training sessions across the county. Training subjects included victim rights, victim compensation, child abuse and neglect, sexual assault and domestic violence prevention. For 2010 HCVAC hopes to add an additional 4 training sessions throughout the county.

Over the past ten years HCVAC has established a proven track record of meeting the needs of crime victims in Hopi County. Of those victims served in 2007, 87 percent reported an increased sense of safety; 96 percent reported an increased understanding of the criminal justice system; and 92.4 percent reported being very satisfied with HCVAC overall (HCVAC Annual Report FY2007).

Project Collaboration

Programs must demonstrate a strong collaborative effort in *each* of these areas: law enforcement, prosecution, service providers, community organizations and other social service agencies. List the public and private organizations your agency collaborates with.

Enter narrative below:

Anytown Police Department
Hopi County Attorney's Office
Stop Abuse (Domestic Violence Shelter)
Anyville Police Department
Hopi County Sheriff's Office
Anytown City Prosecutor's Office
Boys and Girls Club of Anyville
Hopi County DV Council

Describe in detail a recent collaboration, other than a service referral, involving one or several of the agencies listed above. Discuss the purpose of the collaboration, your agency's contribution to process and the outcomes. *Response is limited to 1,500 characters, including spaces.*

Enter narrative below:

During Victim Rights Week, April 13-19, 2008, HCVAC partnered with the Hopi county Sheriff's Office, Stop Abuse and the Hopi County Community College School of Media Production to produce a victim rights awareness video. The resulting video covered victim rights, how to recognize the signs of abuse and simple crime prevention tips. With the help of a private donor, 100 copies of this video were distributed to schools, police departments and community centers across the country.

Performance Tracking

Briefly describe how the program tracks statistical data for number of crime victims served, number of services provided, referrals, etc. *Response is limited to 500 characters, including spaces.*

Enter narrative below:

Program activity is tracked in our Victim Services Database. Each statistical data type is entered on a daily basis and then various reports are generated to meet the specific requirements of each program grant

Evaluation Plan

How will you evaluate the effectiveness of the program activities? Please indicate how the results of program evaluation activities have

made, or will make an impact on the way the program provides services to crime victims. *Response is limited to 1,500 characters, including spaces.*

Enter narrative below:

Each victim served by HCVAC is asked to fill out an intake survey after making the initial contact and then asked to complete an exit survey at the conclusion of services. The intake survey measures the victims understanding in the following areas: safety, availability of services, and the criminal justice system. These areas are covered again in the exit survey along with questions dealing with overall satisfaction with HCVAC services provided. The results of these surveys are compiled on a monthly basis and compared to determine the effectiveness of program activities.

Survey Response Rate

If the program uses a survey to measure program performance, please indicate the number of surveys administered and the number of survey responses received during the most recently completed fiscal year. Please describe efforts the program has made to increase or maintain a representative survey response rate. If the program does not use a survey then please indicate NONE in the box below.

Response is limited to 1,500 characters, including spaces.

Enter narrative below:

HCVAC has been able to achieve a high survey response rate (85% to 90%), by training our advocates the importance of administering these tools to all victims served, and making the survey part of the case management process. We keep all of our responses anonymously, provide the survey in both English and Spanish, and offer to read the survey questions or help respondents in completing the survey in any way possible.

Approximate number of victims to be served during the upcoming grant period: 1,000

Goal: HEALING

Outcomes (please select at least 3):

Description	%	#
Number and percentage of victims reporting an increased knowledge of services available.	82%	820
Number and percentage of victims who report having increased feelings of well being.	%	
Number and percentage of victims who report they know how to access short and long term resources available to meet their needs.	88%	880
Number and percentage of victims reporting the provider's services increased their ability to cope.	%	
Number and percentage of victims completing treatment plan objectives.	%	
In this space you may optionally provide any additional quality measure of your own choice. (More information.)	89%	890

Goal: JUSTICE

Outcomes (please select at least 2):

Description	%	#
Number and percentage of victims reporting the information and assistance provided had a positive impact on their participation in the criminal justice system.	92%	920
Number and percentage of victims reporting an increased understanding of their legal rights.	%	
Number and percentage of victims reporting increased knowledge of the legal system.	92%	920
In this space you may optionally provide an additional quality measure of your own choice.	%	

Goal: ECONOMIC STABILITY

Outcomes (please select at least 1):

Description	%	#
Number and percentage of crime victims reporting an increased knowledge of the victim compensation program, restitution and other financial assistance services.	90%	900

Goal: SAFETY

Outcomes (please select at least 1):

Description	%	#
Number and percentage of victims who report understanding and initiating safety plans for meeting their immediate and ongoing safety needs	82%	820
Number and percentage of victims who report being able to better assess their safety needs.	%	
In this space you may optionally provide an additional quality measure of your own choice.	%	

Goal: QUALITY MEASURES

Outcomes (please select at least 3):

Description	%	#
Percentage of victims reporting overall satisfaction with services.	88%	880
Percentage of community collaborators reporting positive satisfaction with services provided.	85%	850
Percentage of victims who report they would recommend program services to other victims.	%	
Percentage of victims who reported that advocacy services that were provided were helpful.	86%	860
In this space you may optionally provide any additional quality measure of your own choice.	%	

Personnel

Enter narrative below:

Full Time Master's Level Victim Advocate working out of the HCVAC branch office.

Full Time/Part Time

Match	Position Title	# Pos (FTE)	Annual Salary	Subtotal Salary	ERE Amount	Total
	Advocate	.5	\$30,000.00	\$15,000.00	\$4,500.00	\$19,500.00
X	Lead Advocate	1	\$21,000.00	\$21,000.00	\$0.00	\$21,000.00
					Salary Subtotal: \$36,000.00	
					ERE Subtotal: \$4,500.00	
					Total: \$40,500.00	Match Total: \$21,000.00

Nonmatch Total: \$19,500.00

Overtime

Match	Position Title	Hours	Hourly Wage	Subtotal Wages	ERE Amount	Total
						Wages Subtotal: \$0.00
						ERE Subtotal: \$0.00
						Total: \$0.00 Match Total: \$0.00
						Nonmatch Total: \$0.00

ERE Breakdown

Enter narrative below:

ERE Breakdown:

Health/Dental/Life 8.19%

FICA/Medicare 7.33%

Retirement 9.10%

Workers Comp 0.31%

Unemployment Ins 0.19%

Pro Rata Attorney Gen 0.63%

Accum Sick Leave 0.40%

Pro Rata Personnel 1.04%

IT Charge 0.15%

TOTAL 27.35%

Consultant/Contractual Services

Enter narrative below:

Match	Expense Type	Hours	Rate	Total
				Match Total: \$0.00
				Nonmatch Total: \$0.00

Travel (In State)

Enter narrative below:

Match	Expense Type	Units	Amount	Total
				Match Total: \$0.00
				Nonmatch Total: \$0.00

Travel (Out of State)

Enter narrative below:

Match	Expense Type	Units	Amount	Total
				Match Total: \$0.00

Nonmatch Total: \$0.00

Confidential Funds

Enter narrative below:

Match	Expense Type	Amount	Total
			Match Total: \$0.00
			Nonmatch Total: \$0.00

Other Operating Expenses

Enter narrative below:

Tuition for funded advocate to attend the Arizona Victim Assistance Academy in June of 2012.

Match	Expense Type	Type	Quantity	Each	Total
	AVAA Training	Registration/Training	1	\$1,500.00	\$1,500.00
					Supplies Subtotal: \$0.00
					Registration/Training Subtotal: \$1,500.00
					Other Subtotal: \$0.00
					Total: \$0.00 Match Total: \$0.00
					Nonmatch Total: \$1,500.00

Equipment Purchases

Enter narrative below:

Match	Expense Type	Type	Quantity	Each	Total
					Capital Subtotal: \$0.00
					Non-Capital Subtotal: \$0.00
					Total: \$0.00 Match Total: \$0.00
					Nonmatch Total: \$0.00

If matching funds are required for this grant program, provide a description of what funds will be used as the required match.
DPS-VOCA

Total Project Cost

Required Match: \$21,000.00

Match Total: \$21,000.00

Requested Total: \$21,000.00

If received, will ACJC funds be used as matching funds for other grant program(s)?
If yes, please list the name(s) of the grant program and funding agency.

Audit Requirements

List the date of your last financial audit.

12/2/2012

Did the audit result in a Schedule of Findings and Questioned Costs?

No

Internal Controls

Does your organization have established policies related to salary scales, fringe benefits, travel reimbursement and personnel policies?

Yes

Which of the following describes your organization's accounting system?

Manual

How frequently do you post to the General Ledger?

Daily

Does the accounting system completely and accurately track the receipt and disbursements of funds by each grant or funding source?

Yes

Does the accounting system provide for the recording of actual costs compared to budgeted costs for each budget line item?

Yes

Are time and effort distribution reports maintained for employees working fully or partially on grant programs, which account for 100% of each employee's time?

Yes

Are duties of the bookkeeper/accountant segregated from the duties of cash receipt or cash disbursement?

Yes

Are checks signed by individuals whose duties exclude recording cash received, approving vouchers for payment, and the preparation of payroll?

Yes

Are all accounting entries and payments supported by source documentation?

Yes

Are employee time sheets supported by appropriately approved/signed documents?

Yes

Does the organization maintain policies which include procedures for assuring compliance with the terms of the grant award?

Yes

Does the organization maintain written codes of conduct for employees?

Yes

Does the organization maintain written procurement policies and procedures?

Yes

Does the organization have adequate staff to comply with the terms of the grant agreement?

Yes

Is there a separate bank account maintained for grant funds?

Yes

Are the officials of the agency bonded?

Yes

Does the agency use a double-entry system in accounting for program funds?

Yes

If you answered "No" to any of the questions in this section, please provide a brief explanation why.

N/A

Please upload the following documents:

All Applicants:

Total Program Budget

Most Recent Financial Audit (include management letter and schedule of findings if applicable)

Job descriptions for personnel to be funded by ACJC Victim Assistance Grant

Non-profit organizations please attach:

1. A letter from a prosecutor's office or law enforcement agency endorsing the application.
2. A Current board list that includes affiliations identifies current officers and provides the Chairman's contact information.

AND ONE OF THE FOLLOWING:

1. A copy of the organization's 501(c)(3) designation letter from the IRS.
2. Submission of a statement from the state taxing authority or state Secretary of State, or other similar official certifying that the organization is a non-profit operating within the state, and that no part of its net earnings may lawfully benefit any private shareholder or individual.
3. Submission of a certified copy of the applicant's certificate of incorporation or similar document.
4. Submission of any item above (1-3), if that item applies to a state or national parent organization, together with a statement by the state or parent organization that the applicant is a local nonprofit affiliate.

Max size per upload 10MB.

Special Conditions

1. ACJC grant funds shall be used to provide direct services to victims of crime.
2. ACJC grant funds shall not be used to supplant federal, state, county, or local funds that would otherwise be made available for such purposes.
3. The applicant shall operate in a manner consistent with, and in compliance with, the provisions and stipulations of the approved grant application and agreement.
4. The applicant agrees that it will incorporate the use of volunteers in its program to the extent that such volunteers contribute to the effective and efficient provision of services to crime victims.
5. The applicant agrees to promote coordinated public and private efforts to assist crime victims within the community served.
6. The applicant agrees that ACJC grant funds are not to be expended for any indirect costs that may be incurred in administering the funds.
7. The applicant agrees to expend funds only in the approved budget categories for the amount approved.
8. The applicant agrees that payment obligation is conditioned upon the availability of funds appropriated or allocated for the payment of such obligation.

9. The applicant agrees to retain all books, account reports, files, and other records for a period of five years after the completion of the expiration of the project. All such documents shall be subject to inspection and audit at reasonable times.
10. The applicant agrees to provide accounting, auditing, and monitoring procedures to safeguard grant funds and keep such records to assure proper fiscal controls, management, and the efficient disbursement of grant funds.
11. The applicant agrees to remit all unexpended ACJC grant funds to the Commission within 30 days of receipt of a written request from the Commission.
12. The applicant agrees to submit Quarterly Financial Reports to the Commission on the forms provided. Quarterly Financial Reports are due on October 31, 2012, January 31, 2013, April 30, 2013, and August 15, 2013. An Annual Performance Report is required to be submitted to the Commission on the forms provided. It is due August 15, 2013. In the event that reports are not received on or before the required date(s), the Commission may require more frequent reports. Funding will be suspended until such time as the delinquent report(s) are received.
13. The applicant agrees to comply with all applicable requirements of A.R.S. § 41-1463, all applicable state and federal civil rights laws, and Executive Order 1999-4 and 2000-4. In the event that a federal or state court or federal or state administrative agency makes a finding of discrimination after a due process hearing on the basis of race, color, religion, national origin, sex, age, or disability against the applicant, the applicant will forward a copy of the findings to the Commission.
14. The applicant will assign to the Commission any claim for overcharges resulting from antitrust violations to the extent that such violations concern materials or services supplied by third parties to the applicant in exchange for grant funds provided.
15. The applicant agrees to use arbitration in the event of disputes in accordance with the provisions of A.R.S. §12-1501 et. seq.
16. The applicant agrees that it is acting as an independent contractor and agrees to hold the Commission harmless for the actions of the grantee's employees.
17. The applicant agrees to obtain and maintain subrogation agreements from victims as a condition of receipt of assistance exceeding one hundred dollars (\$100) in direct financial aid.
18. The applicant agrees to comply with the applicable laws and provisions of the Arizona Crime Victim Assistance Program Rules A.A.C. R10-4-201 through R10-4-204.
19. The applicant agrees to submit, upon request, a copy of its financial audit for the most recently completed 12-month period.
20. The applicant assures that it will collect and maintain information on victim services provided by ethnicity, sex, age, and disability.
21. The applicant assures that it will comply with all applicable state and federal drug-free workplace requirements.
22. The applicant assures that it will comply with all state and federal laws regarding privacy during the course of the program. All information relating to clients should be treated with confidentiality. Information shall be disclosed to the Commission, when requested, in compliance with the Crime Victim Assistance Program Rules, state and federal laws, and the grant agreement.



On behalf of the applicant agency I certify that: I have read and understand the conditions listed above; all the information presented in this application is correct; there has been appropriate coordination with affected agencies; and the applicant agency will comply with the provisions of all applicable laws and conditions if awarded funds.