

FAMILY VIOLENCE PREVENTION AND SERVICES ACT

SUBGRANTEE CUMULATIVE PERFORMANCE REPORT

- Introduction -

The Department of Finance and Administration (DF&A), Intergovernmental Services (IGS), Victim Justice and Assistance (VJA) Programs administers federal funds that the State of Arkansas receives under the Family Violence Prevention and Services Act Grant Program. The state administrator of these funds is required to report to its grantor how the funds were applied in accordance with the federal regulations and on the impact that the funds had on the state and at the local levels. **Accuracy of the report that the State submits is critical, but this relies on accurate reports being obtained from subgrantees.**

Your organization has accepted federal funds under this grant program; therefore, you have accepted the condition to gather statistics and other information relating to the use and results of these funds. In the pages that follow, you are asked to provide information needed for the state to illustrate work performed using FVPSA funds, as well as trends in your geographic area.

You will find that some questions solicit information regarding your organizational activities; however, other parts require you to **report activities directly associated with your FVPSA subgrant.** Your FVPSA subgrant involves only those activities and services that are directly paid for using FVPSA funds, plus those earmarked as matching contributions.

Please carefully read the instructions for each question and answer accurately and honestly, as responses you give will be collectively presented as true and accurate in the State's report to the U.S. Department of Health and Human Services. If you have any questions at all, please call the VJA Programs Administration for assistance.

*Your time is appreciated,
as is your dedication to the fair treatment of victims of family violence.*

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SUBGRANTEE CUMULATIVE PERFORMANCE REPORT

- Instructions -

- ❖ This is a cumulative or year-to-date report. Each report you submit should indicate the activities performed by your organization since the project start date.
- ❖ You are given the discretion on when to report the information requested; however, it is advisable that you have a system in place whereby you know whether case information and subgrant project activities have already been included in the statistical compilation. If, during the reporting period, a case is pending (meaning it remains active or unresolved), you should choose whether to report the case now or wait until it is closed.
- ❖ It is not uncommon for a victim to have suffered multiple victimizations. Only count that victim in a category if services your organization provided were directly related to the crime incident.
- ❖ Victims should be counted only once per crime victimization, unless they fall victim to a second, unrelated crime, and your organization provided services related to that second crime.
- ❖ The figure reported for the organization should include services/activities provided with other varying organizational income/revenue sources, including FVPSA-funded and matching activities and services.
- ❖ The figure reported for the FVPSA subgrant project should include services/activities provided using FVPSA funds, including activities you claim as match, but excluding other activities performed by your organization.

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SUBGRANTEE CUMULATIVE PERFORMANCE REPORT

SUBGRANTEE: _____

SUBGRANT # _____ - _____ REPORTING PERIOD: 10/1/____ - _____

1. If your FVPSA subgrant funded personnel, or if contributions of other paid personnel were used to meet subgrant matching requirements, please provide the following information for each.

a. _____
Employee Name Title

Check One: _____ Part Time Position _____ Full Time Position

Salary from FVPSA Project: \$ _____ Salary Applied Toward Match: \$ _____
Please place an asterisk (*) to indicate the funding source below.

Other Funding Sources for this Position:

_____ \$ _____
_____ \$ _____

b. _____
Employee Name Title

Check One: _____ Part Time Position _____ Full Time Position

Salary from FVPSA Project: \$ _____ Salary Applied Toward Match: \$ _____
Please place an asterisk (*) to indicate the funding source below.

Other Funding Sources for this Position:

_____ \$ _____
_____ \$ _____

(Please copy this page if additional space is needed.)

2. The following questions focus on victims who received shelter services only. *Shelter* is defined as the provision of temporary refuge in compliance with state law and regulation, which includes emergency shelter, safe homes, meals and crisis intervention to victims of family violence and their dependents.

Is your organization a shelter for victims of family violence and their dependents, as defined above?

_____ YES _____ NO

a. How many victims received shelter services by your organization during this reporting period, and what is the average length of their stay? (Note: Your responses should reflect all victims who received shelter, including those served through your FVPSA subgrant project.)

| <u>Victim Population</u> | <u>Total Client Number</u> | <u>Average Length of Stay</u> |
|--------------------------|----------------------------|-------------------------------|
| Women | _____ | _____ |
| Children | _____ | _____ |
| Men | _____ | _____ |

b. Was there an occasion when your organization was unable to provide shelter to a victim of family violence?

_____ YES _____ NO

If yes, how many victims were referred to another facility or turned away?

| <u>Victim Population</u> | <u>Number Referred To Another Shelter</u> | <u>Number Turned Away</u> |
|--------------------------|---|---------------------------|
| Women | _____ | _____ |
| Children | _____ | _____ |
| Men | _____ | _____ |

If you responded that you were unable to provide shelter to a victim, please briefly describe the circumstances:

- c. **The following questions attempt to gain insight on various aspects of family violence. Please limit your responses to your *primary* victim population, only, and to those victims who were provided shelter services through your organization.** In other words, if your organization is a battered women's shelter, respond to the following series of questions for adult shelter residents only. Do not include sheltered dependents in your responses.

Of the victims of family violence who received refuge in the shelter:

How many reported being abused as children? _____

How many reported that their abusers were abused as children? _____

How many reported witnessing family violence in their childhood? _____

How many reported that their abusers witnessed family violence in their childhood? _____

How many reported having abused alcohol? _____

How many reported that their abusers had abused alcohol? _____

How many reported having abused drugs? _____

How many reported that their abusers had abused drugs? _____

How many sought emergency medical intervention? _____

How many sought an Order of Protection? _____

Of these, how many obtained an Order of Protection? _____

How many sought civil remedies? _____

How many returned to the abusive home? _____

How many established a safe, independent life after leaving the shelter? _____

How many experienced law enforcement intervention? _____

How many followed through with criminal charges? _____

Of these, how many resulted in convictions? _____

3. **Related assistance** is defined as the provision of direct assistance to victims of family violence and their dependents for the purpose of preventing further violence, helping such victims to gain access to civil and criminal courts and other community services, facilitating the efforts of such victims to make decisions concerning their lives in the interest of safety and assisting such victims in healing from the effects of violence either through direct services that enable the victim or by public awareness.

a. Does your organization offer **related assistance** to victims of family violence and their dependents, as defined above?

_____ YES _____ NO

b. How many victims of family violence were provided **related assistance** by your organization during this reporting period? (Note: Your responses should reflect all victims who received related assistance, including those served through your FVPSA subgrant project, as well as victims who provided shelter.)

| <u>Victim Population</u> | <u>Total Client Number</u> |
|--------------------------|----------------------------|
| Women | _____ |
| Children | _____ |
| Men | _____ |

c. How many victims of family violence were provided related assistance through your FVPSA subgrant during this reporting period? (Your responses should focus on those victims who received related assistance through your FVPSA subgrant project, not the total organization's work.)

| <u>Victim Population</u> | <u>Sheltered Victims</u> | <u>Non-Sheltered Victims</u> | <u>Totals</u> |
|--------------------------|--------------------------|------------------------------|---------------|
| Women | _____ | _____ | _____ |
| Children | _____ | _____ | _____ |
| Men | _____ | _____ | _____ |
| Totals: | _____ | _____ | _____ |

- d. **The following questions attempt to gain insight on various aspects of family violence. Please limit your responses to your *primary* victim population, only, and to those victims who did not require shelter, but received related assistance through your organization.** In other words, if your organization is a battered women's shelter, respond to the following series of questions for adult shelter residents only. Do not include sheltered dependents in your responses.

Of the non-sheltered victims of family violence who received related assistance:

How many reported being abused as children? _____

How many reported that their abusers were abused as children? _____

How many reported witnessing family violence in their childhood? _____

How many reported that their abusers witnessed family violence in their childhood? _____

How many reported having abused alcohol? _____

How many reported that their abusers had abused alcohol? _____

How many reported having abused drugs? _____

How many reported that their abusers had abused drugs? _____

How many sought emergency medical intervention? _____

How many sought an Order of Protection? _____

Of these, how many obtained an Order of Protection? _____

How many sought civil remedies? _____

How many returned to the abusive home? _____

How many established a safe, independent life after leaving the shelter? _____

How many experienced law enforcement intervention? _____

How many followed through with criminal charges? _____

Of these, how many resulted in convictions? _____

4. VICTIM PROFILES:

a. **Gender:** Please report the total number of victims served through your FVPSA project (funded and match) during this reporting period by gender. (The numbers provided below should not reflect the total organization's work.)

| <u>Victim Population</u> | <u>Total Primary Victims</u> | <u>Total Secondary Victims</u> |
|------------------------------|----------------------------------|------------------------------------|
| Female | _____ | _____ |
| Male | _____ | _____ |
| Unknown | _____ | _____ |
| TOTAL BY GENDER: | _____ | _____ |

NOTE: The total of these columns should agree with your responses in question 3c.

b. **Race/Ethnicity:** Please report the total number of victims served through your FVPSA project (funded and match) during this reporting period by race/ethnic background. (The numbers provided below should not reflect the total organization's work.)

| <u>Racial/Ethnic Background</u> | <u>Total Primary Victims</u> | <u>Total Secondary Victims</u> |
|-------------------------------------|----------------------------------|------------------------------------|
| African American | _____ | _____ |
| Hispanic /Latino | _____ | _____ |
| Indian / Native American | _____ | _____ |
| Asian Americans | _____ | _____ |
| Pacific Islanders | _____ | _____ |
| Caucasian | _____ | _____ |
| Other (Identify): | | |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| Unknown | _____ | _____ |
| TOTAL BY RACE/ETHNICITY: | _____ | _____ |

NOTE: The total of these columns should agree with your responses in question 3c.

c. **Age:** Please report the total number of victims served through your FVPSA project (funded and match) during this reporting period by age. (The numbers provided below should not reflect the total organization's work.)

| <u>Age</u> | <u>Total Primary Victims</u> | <u>Total Secondary Victims</u> |
|----------------------|----------------------------------|------------------------------------|
| 0 - 12 | _____ | _____ |
| 13 - 17 | _____ | _____ |
| 18 - 25 | _____ | _____ |
| 26 - 40 | _____ | _____ |
| 41 - 60 | _____ | _____ |
| 61 + | _____ | _____ |
| Unknown | _____ | _____ |
| TOTAL BY AGE: | _____ | _____ |

NOTE: The total of these columns should agree with your responses in question 3c.

9. **SERVICES PROVIDES:** If your current FVPSA subgrant budgeted for any of the activities listed below, indicate so by using a check mark (3) and provide the information requested. (Note: If the activity or service is performed by your organization, but not specifically using FVPSA funds or matching contributions, do not include.)

FVPSA Project
Activity or Service

Activity or Service

_____ **Individual Counseling Conducted by Licensed Mental Health Professional**

Number of women who received service: _____

Number of children who received service: _____

Number of men who received service: _____

Total combined counseling hours: _____

_____ **Face-to-Face Lay Crisis Intervention Counseling**

Number of women who received service: _____

Number of children who received service: _____

Number of men who received service: _____

Total combined crisis counseling hours: _____

_____ **Group Counseling for Victims Facilitated by a Licensed Mental Health Professional**

Number of women who received service: _____

Number of children who received service: _____

Number of men who received service: _____

Total combined group counseling hours: _____

_____ **Support Group for Victims Facilitated by an Unlicensed Advocate**

Number of women who received service: _____

Number of children who received service: _____

Number of men who received service: _____

Total combined peer support group hours: _____

FVPSA Project
Activity or Service

Activity or Service

Crisis Hotline Calls

Number of women who received service: _____

Number of children who received service _____

Number of men who received service: _____

Total combined crisis hotline hours _____

Batterers' Intervention / Treatment Program

Number of men who received service: _____

Number of women who received service: _____

Legal Advocacy

How many adult victims were accompanied to chancery court proceedings? _____

How many victims obtained an Order of Protection? _____

How many child victims were accompanied to juvenile court (dependency neglect) proceedings? _____

How many victims were escorted to criminal municipal court proceedings? _____

How many victims were escorted to criminal circuit court proceedings? _____

Were criminal court services coordinated with the Prosecutor's Victim Assistance Program?

_____ YES _____ NO

**FVPSA Project
Activity or Service**

Activity or Service

Victim Transportation

On how many occasions were victims transported in relation to your FVPSA subgrant project?

of Trips

Purpose of Transportation:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Training

Describe any training that was conducted as a part of your FVPSA subgrant project:

Date

Training Topic and Audience Participants

of Attendees

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Continue on a separate page, if needed

FVPSA Project
Activity or Service

Activity or Service

Incoming Calls Seeking Information and Referrals

How many occasions did you have the opportunity through the FVPSA subgrant project to provide a caller with information or referral information:

Interagency Consultation and Support _____

Community Education _____

Non-Crisis Information/Referrals _____

Use of Media for Public Awareness

Describe the media interviews, engagements and inquiries that resulted from FVPSA funding:

Form of Media

Description:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Other activities not listed above:

Continue on a separate page, if needed.

10. TYPES OF VIOLENCE COMMITTED:

a. How many women reported the following types of abuse to your organization during this reporting period?

| <u>Type of Abuse</u> | <u>Women Served by Organization</u> | <u>Women Served by FVPSA Project</u> |
|----------------------|-------------------------------------|--------------------------------------|
| Physical | _____ | _____ |
| Sexual | _____ | _____ |
| Psychological | _____ | _____ |

b. How many children reported the following types of abuse to your organization during this reporting period?

| <u>Type of Abuse</u> | <u>Children Served by Organization</u> | <u>Children Served by FVPSA Project</u> |
|----------------------|--|---|
| Physical | _____ | _____ |
| Sexual | _____ | _____ |
| Psychological | _____ | _____ |

c. How many men reported the following types of abuse to your organization during this reporting period?

| <u>Type of Abuse</u> | <u>Men Served by Organization</u> | <u>Men Served by FVPSA Project</u> |
|----------------------|-----------------------------------|------------------------------------|
| Physical | _____ | _____ |
| Sexual | _____ | _____ |
| Psychological | _____ | _____ |

11. VOLUNTEER CONTRIBUTIONS: If time donated by volunteers was used to meet subgrant matching requirements, identify the total number of volunteers involved and total number of volunteer hours.

a. Total number of volunteers working on FVPSA subgrant project: _____

b. Total number of volunteer hours applied toward FVPSA subgrant match: _____

c. Please describe the activities that your volunteers provided within your FVPSA subgrant.

The undersigned hereby certifies that all statements, information and disclosures made herein have been reviewed in its entirety and are true and accurate. Furthermore, the undersigned accepts that this certification shall be treated as a material representation of fact upon which reliance will be placed by the State of Arkansas, Department of Finance and Administration.*

Authorized Official

Date*

** Please note that the final performance report for this subgrant requires additional information that calls for narrative responses. This certification will apply to those pages, as well.*

→ PLEASE NOTE ←

The following questions need only be submitted along with your final performance report for this subgrant. It is, however, advisable that you be aware that the information will be required so that you may prepare for complete and thorough responses.

12. a. What goals/activities did your subgrant set out to provide?

b. Did you accomplish these goals?

In completing this section, please describe the tool(s) you utilized in determining whether your goals were achieved (e.g. pre / post statistical comparison, survey results) and your analysis of the findings. If you find that the outcome of your subgrant fell short of your expectations, please describe what you believe could have changed the ultimate outcome.

13. If your subgrant specifically set out to serve those in any of the following victim populations, please describe what special efforts were made and the impact of your efforts.

- **victims within ethnic, racial and cultural minorities**
- **victims whose primary language is not English**
- **victims living in geographically isolated regions**
- **victims with physical or mental disabilities**
- **elderly victims**

Indicate “N/A” if this question does not apply to your subgrant.

14. The goal of the FVPSA Grant Program is to establish, maintain and expand programs that prevent family violence and provide immediate shelter and related assistance to victims of family violence and their dependents.

In addition, the FVPSA Grant Program promotes a more effective response family violence through coordination and collaboration between community resources, including police, prosecutors, the courts, victim service providers, child welfare and family preservation services and medical and mental health care providers.

- a. Please describe how your FVPSA subgrant project impacted on the lives of victims in your community?**
- b. How did your FVPSA subgrant project impact on your community's coordinated response to family violence.**

(Please do not reveal any information that would be considered confidential, including victims' identities.)
