**VICTIMS OF CRIME ACT (VOCA)**

**LAW ENFORCEMENT/PROSECUTION-BASED ASSISTANCE**

**PROGRAM NARRATIVE**

**NOFO # 1745 – 0701**

Program narrative must be submitted via AmpliFund. This document is for reference only. Applicants are highly encouraged to review the questions and complete a response on a separate document, then log into AmpliFund and “copy & paste” the response in the appropriate section.

The AmpliFund system times out after 20 minutes of inactivity. Clicking “save and continue” is encouraged as you begin completion of information in AmpliFund.

**Summary of the Program – 6 Points**

1. Agency type (choose one):

£ County state’s attorney’s office

£ County sheriff’s department

£ Local police department

£ Non-profit victim services agency collaborating with law enforcement or state’s attorney’s office\*

\*Victim services agencies applying to provide services within a law enforcement agency or state’s attorney’s office must submit a draftMemorandum of Understanding (MOU) between the applicant agency and the law enforcement agency or state’s attorney’s office that details agency collaboration, proposed services, program location, and designated liaisons in both agencies who will coordinate the implementation of the program and ensure program objectives are met. An MOU must be submitted to ICJIA for review prior to the execution of the grant agreement.

2. These VOCA funds will primarily be used to (choose one):

£ Expand services into a new geographic area.

£ Serve additional victim populations.

£ Offer new types of services.

£ Continue existing services to crime victims.\*

\* See definition of supplanting in NOFO Section D6 Funding Description and explain how funding will enhance or supplement existing —not supplant— program activities and staff positions. If appropriate, explain how much of the currently operational program is funded with other VOCA funds.

3. Please describe how the victim service activities outlined within this application have been coordinated between the law enforcement and state’s attorney’s offices and victim service providers in the community to be served. Include letters of support from all agencies listed as part of the application. If your agency is not able to coordinate these activities with a victim service agency, please explain why. (2pts)

4. Please provide a *brief* description of your entire organization, including unit descriptions, number of staff in each unit, and overall budget. (4pts)

**Statement of the Problem– 8 Points**

1. Please list the county or municipality to be served by your program. If the proposed program will serve a portion of a county or municipality, please specify municipalities and/or neighborhoods.

2. Describe the problem in your service area that demonstrates the need for your proposed program. This must include a description of available indicators on the extent of victimization and victim assistance sought in your service area from within the last five years.

County-level data may be available on ICJIA website at <https://icjia.illinois.gov/> (Click RESEARCH at top and then the DATASETS tab to view downloadable datasets.). Provide jurisdictional data, if possible. (4pts)

3. Describe strengths and challenges of the community to be served. A minimum of two strengths and two challenges are essential and must be related to the problem of community violence. (4pts)

**Project Implementation – 18 Points**

1. What, if any, other victim services does your agency provide? Include examples of how these services are coordinated with the proposed victim service activities. If no other victim services are provided by your agency, please respond “None”. (3pts)

2. Please complete the chart to indicate the total number of staff currently dedicated to all victim services at your organization (in addition to staff of the proposed program). (1pt)

|  |  |
| --- | --- |
| **Type of staff** | **Number of staff** |
| Number of staff providing direct service.  *(Do not include managerial and support staff in this count).* |  |
| Number of managerial staff. |  |
| Number of administrative support staff. |  |

3. Describe history of providing services for victims of crime, including community engagement (if applicable). Include quantitative (e.g. years of service; number of clients served last year) and qualitative (e.g. description of services provided; client case summaries) descriptions.

If program is new, explain how the agency will build capacity to provide the proposed services. Include at least one capacity-building example, demonstrate a strong understanding of services, and state whether a minimum of 25 percent of its financial support comes from sources other than the Crime Victims Fund. (8pts)

4. Describe fiscal experience and capacity to manage grants. Include all funding sources that support victim service programming in the agency. Include quantitative (size of budget and number of grants) and qualitative (process and procedure; summary of previous management) descriptions. (3pts)

5. Describe how your agency will financially sustain the program at the end of the funding period. (3pts)

**Project Management – 25 Points**

These funds are to be used for the creation or enhancement of services for crime victims provided through law enforcement agencies and state’s attorney’s offices programs. Explain in detail all required program elements.

1. Public agencies and non-profit victim service agencies applying to provide services within a public agency must provide a detailed explanation of how the program will function, including: (10pts)

1. How victims will be screened for eligibility. Victim eligibility for services cannot be dependent on participation in the criminal justice process. Services must also be made available after a victim’s involvement with the criminal justice system has ended.
2. How uniform referrals for services outside of your agency’s capacity will be made to all victims regardless of perceived interest or cooperation.
3. How services will be available for all victims of crime, including how client services will be tracked and managed.
4. Location of victim service staff within law enforcement agency or state’s attorney’s office.
5. Coordination of services with other victim service staff in the agency to support a comprehensive and coordinated response to victim needs.

2. Project the number of clients to be served during the grant period. Explain and justify this projection. (3pts)

3. Describe known barriers victims may experience in accessing victim services and how your agency will address these. (4pts)

4. Describe how the program will incorporate trauma-informed care. (3pts)

5. Describe collaborative partners, any history of collaboration, and each partner’s role in your proposed program. (3pts)

6. Programs receiving VOCA funds must notify all victims of the VOCA Victims Compensation Program administered through the Office of the Illinois Attorney General.\* Please explain how your agency informs victims of the VOCA Victims’ Compensation program. (2pts)

\*Notification is defined as advertising the Victims’ Compensation Program through posters or brochures publicly visible in the agency’s office. Other options include providing information on and referrals to the program and assistance with the application.

**Staffing Plan – 15 Points**

1. List and describe all staff positions assigned to the proposed program. Include at minimum name of position, roles and responsibilities, location of services, reporting and supervision structure, time budgeted, and funding source. (4pts)

* Law Enforcement Agencies: Fund another advocate (optional): Applicant organization may use grant funds to support an additional advocate within the agency.
* States Attorney’s Offices:  Social Worker (optional): Applicant organization may use grant funds to support a social worker who will consult with the attorney(s) during the intake process, conduct assessment intervention, improve outcomes for clients receiving legal services, and extend referral services (i.e. counseling).

2. What are the primary qualifications of program–funded staff (education, language skills, etc.)? (2pts)

3. Describe how cases are coordinated and supervised within the agency. Outline any protocols for information sharing and confidentiality. (3pts)

4. Describe how the proposed program will include staff trauma skills training and consultation to improve trauma-informed responses to clients. Include a plan to hold at least one training. (2pts)

5. What other training needs have you identified for staff funded under this program? How will you address those training needs? If you are unable to address those needs, please explain why. For law enforcement agencies, please include officer awareness of this program. (2pts)

6. Describe how your agency utilizes volunteers and how the proposed program will utilize volunteers. Describe how many FTE volunteer staff are used by your agency as a whole. If your volunteers will be providing direct services, list any training you will be providing to them. (1pt)

7. Complete chart below by reporting staff by function(s) performed, not by title or location. Also report employees who will be part-time and/or only partially funded with these funds and any consultants/contractors. Include employees and consultants who will be funded with any required grant match. (1pt)

**All activities provided by the following staff must be fully explained in the budget narrative. Add lines if necessary.**

|  |  |  |  |
| --- | --- | --- | --- |
| **PROGRAM-FUNDED STAFF** | **Agency Full Time Equivalent\*** | **% time on VOCA funded program** | **Program Full Time Equivalent\*\*** |
| ***Example: Volunteer Coordinator*** | ***.50*** | ***100*** | ***.5*** |
| ***Example: Advocate*** | **.75** | **50** | **.375** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **TOTAL** |  |  |  |

\*Agency FTE is calculated by the number of total hours worked in a week divided by the average work week for your organization.

\*\* Program FTE is calculated by Agency FTE times the time on the program.

Job descriptions and list required training for each position must be submitted if application is funded.

**Goals and Performance Metrics – 10 Points**

Please download and complete the Goals and Performance Metrics for your proposed program in the AmpliFund grant management system. This program is for 12 months, the metrics should measure meaningful, tangible changes resulting from program implementation or expansion for the designated period of performance.

|  |  |
| --- | --- |
| **Goal: To provide advocacy services to victims of crime at law enforcement agencies or state’s attorney’s offices.** | |
| Objective | Performance Measure |
| SCREENING | |
| #\_\_\_\_\_victims referred to the advocate by an officer.  # \_\_\_\_\_ victims screened for eligibility by your agency. | # of victims referred  # of victims screened for eligibility by your agency  # of victims not eligible for services by your agency  Please list the agencies to which you referred |
| CLIENTS SERVED | |
| # \_\_\_\_ clients will be provided services by your agency. | # of clients provided services by your agency |
| INFORMATION & REFERRAL | |
| # \_\_\_\_ clients will receive information about the criminal justice process. | # of clients provided information about the criminal justice process  # of times staff provided information about the criminal justice process |
| # \_\_\_\_ clients will receive information about victim rights, how to obtain notifications, etc. | # of clients provided information about victim rights, how to obtain notifications, etc.  # of times staff provided information about victim rights, how to obtain notifications, etc. |
| # \_\_\_\_ clients will receive referrals to other victim service providers for services. | # of clients provided with referrals to other victim service providers  # of times staff provided referrals to other victim service providers  Please list the agencies to which you referred |
| # \_\_\_\_ clients will receive referrals to other services, supports, and resources (includes legal, medical, faith-based organizations, etc.). | # clients provided with referrals to other services, supports, and resources  # of times staff provided referrals to other services, supports, and resources |
| #\_\_\_\_ clients will receive assistance filing for victim compensation. | # of clients provided assistance filing for victim compensation  # of times staff provided assistance filing for victim compensation |
| PERSONAL ADVOCACY/ACCOMPANIMENT | |
| #\_\_\_\_ clients will receive individual advocacy (e.g., assistance applying for public benefits). | # of clients provided individual advocacy (e.g., assistance applying for public benefits)  # of times staff provided individual advocacy (e.g., assistance applying for public benefits) |
| #\_\_\_\_\_ clients will receive assistance intervening with an employer, creditor, landlord, or academic institution. | # of clients provided with assistance intervening with an employer, creditor, landlord, or academic institution  # of times staff provided assistance intervening with an employer, creditor, landlord, or academic institution |
| #\_\_\_\_ clients will receive child or dependent care assistance. | # of clients provided with child or dependent care assistance  # of times staff provided child or dependent care assistance |
| #\_\_\_\_ clients will receive transportation assistance. | # of clients provided with transportation assistance  # of times staff provided transportation assistance |
| #\_\_\_\_\_ clients will receive interpreter services. | # of clients provided with interpreter services  # of times staff provided interpreter services |
| # \_\_\_ clients will receive housing advocacy or help with implementing a plan for obtaining housing (e.g., accompanying client to apply for Section 8 housing). | # of clients provided with housing advocacy or help with implementing a plan for obtaining housing (e.g., accompanying client to apply for Section 8 housing)  # of times staff provided assistance with receive housing advocacy or help with implementing a plan for obtaining housing (e.g., accompanying client to apply for Section 8 housing) |
| # \_\_\_\_ clients will receive employment assistance (e.g., help creating a resume or completing a job application). | # of clients provided with employment assistance (e.g., help creating a resume or completing a job application)  # of times staff provided employment assistance (e.g., help creating a resume or completing a job application) |
| # \_\_\_\_ clients will receive education assistance (e.g., help completing a GED or college application). | # clients provided with education assistance (e.g., help completing a GED or college application)  # of times staff provided education assistance (e.g., help completing a GED or college application) |
| # \_\_\_\_ clients will receive economic assistance (e.g., help creating a budget, repairing credit, providing financial education). | # of clients provided with economic assistance (e.g., help creating a budget, repairing credit, providing financial education)  # of times staff provided economic assistance (e.g., help creating a budget, repairing credit, providing financial education) |
| EMOTIONAL SUPPORT OR SAFETY SERVICES | |
| # \_\_\_\_\_ clients will receive crisis intervention. | # of clients provided with crisis intervention  # of crisis intervention sessions provided by staff |
| CRIMINAL/CIVIL JUSTICE SYSTEM ASSISTANCE | |
| # \_\_\_\_ clients will receive notification of criminal justice events (e.g., case status, arrest, court proceedings, case disposition, release, etc.). | # of clients provided notification of criminal justice events  # of times staff provided notification of criminal justice events |
| # \_\_\_\_ clients will receive victim impact statement assistance. | # of clients provided victim impact statement assistance  # of times staff provided victim impact statement assistance |
| # \_\_\_\_ clients will receive assistance with restitution. | # of clients provided assistance with restitution  # of times staff provided assistance with restitution |
| # \_\_\_\_ clients will receive civil advocacy/accompaniment. | # of clients provided civil advocacy/accompaniment  # of times staff provided civil advocacy/accompaniment |
| # \_\_\_\_ clients will receive criminal advocacy/accompaniment. | # of clients provided criminal advocacy/accompaniment  # of times staff provided criminal advocacy/accompaniment |
| REQUIRED TRAININGS | |
| #\_\_\_\_\_staff will receive training on trauma skills. | # of staff trained  # of trainings held |
| #\_\_\_\_\_staff will receive training on victim service advocacy. | # of staff trained  # of trainings held |
| *Required for programs operating within police departments* | |
| #\_\_\_\_\_ officer awareness trainings held. | # of officers trained  # of officer awareness trainings held |

**Performance Plan – 3 Points Completed in AmpliFund**

Download and complete the table below for your proposed program in the AmpliFund grant management system. Define each step in the implementation and operation of the proposed program, detailing the staff position responsible for each task, and including a target date for completion. Do not use staff names. Please add additional lines, as necessary.

|  |  |  |
| --- | --- | --- |
| **Task** | **Staff Position Responsible** | **Date Due** |
| *Example: Hire Staff* | *Program Administrator* | *Month One* |
| *Example: Train Staff* | *Training Coordinator* | *Month One* |
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|  |  |  |
| If applicable, submit subcontract to ICJIA for review and approval |  |  |
| Submit quarterly data report to ICJIA |  | 15th of every quarter |
| Submit quarterly fiscal reports to ICJIA |  | 15th of every quarter |
| Submit Final Fiscal (PFR) to ICJIA |  | 30 days after last day of grant |
| Submit Final Data Reports to ICJIA |  | 30 days after the last of the grant |

**Budget Detail and Budget Narrative – 15 Points** **Completed in AmpliFund**

Please download and complete the budget and the budget narrative for your proposed program in the AmpliFund grant management system. This program is for 12 months, both the budget and budget narrative should reflect 12 months of programming.

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| --- |
| **Application Submission via AmpliFund**  The following process is required:  **Step 1**: Applicants must register at the Illinois Grant Accountability and Transparency Act (GATA) Grantee Portal: <https://grants.illinois.gov/portal/>.  **Step 2**: Applying Organizations must identify an individual(s) who will submit the application via AmpliFund, this person will serve as the Primary Contact for this application. However, more than one individual can have access to and complete components of the application via AmpliFund. The Primary Contact must submit the applications, including attachments, via Amplifund. To apply, go to: [AmpliFund](https://il.amplifund.com/Public/Opportunities/Details/71e62118-a2f8-4b63-9f47-9299ba095a1e)   To be considered for funding, completed applications must be submitted via the above AmpliFund link by the application deadline of 5:00 p.m., August 8, 2025.  ICJIA encourages applicants to review this [Technical Assistance Recording](https://www.youtube.com/@illinoiscriminaljusticeinf6099/videos) for more information on how to apply. |