**Illinois Family Violence Coordinating Council**

**Implementation**

**PROGRAM NARRATIVE**

**NOFO # 2096-0425**

**Summary of the Program – 10 Points**

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| 1. Describe overview of the project, need for the project, area to be served, capacity to complete the project and projected numbers for each program component. (10 points) |
| **Response**: |

**Statement of the Problem/Description of Need (15 points total)**

The purpose of this section is for the applicant to provide a clear and accurate picture of the need for the project and benefits gained. Include local statistics/data, whenever possible, and indicate the source of your data. Please make sure data is from the last five years.

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| 1. Identify the catchment/service area (In previous grant years, it was required that a local family violence coordinating council’s service area be a judicial circuit; we no longer require this. At the minimum, the service area should include a county). Include a description and demographic characteristics of communities served. (5 points) |
| **Response**: |

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| 1. Provide a clear and accurate picture of the need for the project within the catchment area, including current trends or issues, service gaps, outdated/ineffective policies/procedures, and/or unmet needs in the community. (10 points) |
| **Response**: |

**Project Implementation – 45 Points**

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| 1. Fill in your local Family Violence Coordinating Council members. Enter name, job title, and the organization’s name for each member. Ensure you add the corresponding information under the same number if there is more than 1 member in a discipline. In order to apply, you must include at least 5 of the disciplines below. **Applicants must submit at least 2 letters of support from local FVCC member agencies.** |
| The list of disciplines that can be part of a council are not limited to the below list. If you have additional members from different disciplines, please add a row(s) at the end of the list. (5 points) |

See example below:

|  |  |  |  |
| --- | --- | --- | --- |
| Discipline | Name of Steering/Planning Committee Member(s) | Job Title of Member(s) | Members’ Organization Name |
| 911/Dispatch Telecommunicator | 1. Lacey Pollock 2. Chelsea Jones | 1. Criminal Justice Specialist 2. Office Associate | 1. Illinois Criminal Justice Information Authority 2. Illinois Department of Revenue |

**Local Family Violence Coordinating Council Members**

| Discipline | Name of Steering/Planning Committee Member(s) | Job Title of Member(s) | Members’ Organization Name |
| --- | --- | --- | --- |
| 911/Dispatch Telecommunicator |  |  |  |
| Circuit Clerk's Office |  |  |  |
| Court Administrator |  |  |  |
| Court Security/Bailiff |  |  |  |
| Department of Children and Family Services |  |  |  |
| Disability Services |  |  |  |
| Domestic Violence Victim Services |  |  |  |
| Education |  |  |  |
| Emergency Medical Services |  |  |  |
| Faith-Based Community |  |  |  |
| Judge |  |  |  |
| Law Enforcement |  |  |  |
| Local Council Coordinator |  |  |  |
| Medical Personnel |  |  |  |
| Mental Health Professional | 1. |  |  |
| Military |  |  |  |
| Older Adult Services |  |  |  |
| Partner Abuse Intervention Program Provider |  |  |  |
| Person with lived domestic violence experience |  |  |  |
| Private Attorney |  |  |  |
| Probation |  |  |  |
| Prosecutor |  |  |  |
| Public Defender |  |  |  |
| Self-Advocate (person with disability) |  |  |  |
| Sexual Assault Victim Services |  |  |  |
| Other: \_\_\_\_\_\_\_\_\_\_ |  |  |  |

**Applicants must submit at least 2 letters of support from local FVCC member agencies.**

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| 1. How do you plan to engage members from disciplines that you do not currently have as active members? (5 points) |
| **Response**: |

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| 1. Based on the needs of your community, which types of sub-committees would you convene. Additionally, list community partners that would be valuable on each sub-committee. Include discussion about the focus of the sub-committee’s work. We ask that you consider a minimum of 2 sub-committees (5 points) |
| **Response**: |

| ***Committee*** | ***Member Agencies*** | ***Person Responsible for Staffing Committee*** | ***How Often Committee Meets*** | ***Describe the committee’s focus and projects.*** |
| --- | --- | --- | --- | --- |
| ***Steering Committee (required)*** |  |  |  |  |
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| 1. Describe how your Council will recruit, engage, and maintain members to your committees. Be sure to include who is responsible for recruiting, engaging, and maintaining committee members. (5 points) |
| **Response**: |

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| 1. List potential topics and intended audiences for trainings your Council will provide. Explain why each topic was chosen and how it aligns with the needs of your community. (5 points) |
| **Response**: |

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| 1. Describe your plan to follow-up with attendees of trainings you have provided. Be sure to include who is responsible for follow-up. (5 points) |
| **Response**: |

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| 1. Please describe how evaluation results from your council’s trainings are used. (5 points) |
| **Response**: |

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| 1. Discuss your process of sharing and distributing resources with both criminal justice/family violence professionals as well as for purposes of community awareness. Be sure to include who is responsible for sharing and distributing resources and information. (5 points) |
| **Response**: |

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| 1. This Implementation Schedule should be used as a planning tool for the program and reflect a realistic projection of how the program will proceed and the staff responsible for each task. Please add lines as necessary. (5 points) |
| **Response**: |

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| --- | --- | --- | --- |
| **Task** | **Staff Position Responsible** | **Start Date** | **End Date** |
| Training |  |  |  |
| Training |  |  |  |
| Meetings |  |  |  |
| Meetings |  |  |  |
| Hire FVCC Local Council Coordinator (if applicable) |  |  |  |
| Attend FVCC Local Council Coordinator’s Meeting |  | TBD by ICJIA | TBD by ICJIA |
| Submit quarterly or monthly Fiscal Report to the Authority |  |  |  |
| Submit quarterly Data Report to the Authority. |  |  | October 15, 2025  January 15, 2026  April 15, 2026  July 15, 2026 |
| Complete all Fiscal and Programmatic Closeout Materials |  | July 30, 2026 | July 30, 2026 |

**Project Management – 15 Points**

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| 1. Provide convincing evidence that your agency is capable of carrying out the proposed program, including fiscal, administrative and programmatic ability to manage grant. This should include experience, staffing patterns, and qualifications to comply with GATA fiscal and administrative requirements. This section should include an explanation of any recent changes in policies and procedures to improve fiscal, administrative or programmatic capacity. (5 points) |
| **Response**: |

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| 1. Describe your strategy for developing and/or updating bylaws, mission/vision/values statements, and strategic planning. (5 points) |
| **Response**: |

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| 1. Describe your organization’s experience managing state and federal grants. (5 points) |
| **Response**: |

Implementation Schedule

Complete the table below, defining 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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| Submit subcontract to ICJIA for review and approval (if applicable) |  |  |
| Submit quarterly progress report |  | 15th of every quarter |
| Submit quarterly financial performance report |  | 15th of every quarter |

**Performance Measures/Standards – 10 Points**

Instructions: Complete the table below. Funded programs will be required to submit quarterly progress reports that will minimally include the following information based on the objectives the applicant agencies propose in their response to this solicitation.

Objectives should measure meaningful, tangible changes resulting from program implementation or expansion.

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| **Goal 1:** The local Circuit Family Violence Coordinating Council will work to improve the systems response to family violence (including but not limited to domestic violence, child abuse, teen dating violence, and abuse against older adults and persons with disabilities) by developing multidisciplinary committees to provide oversight, guidance, and development of policies and procedures enforcing victim safety, abuser accountability, and community safety | |
| **Process Objectives** | **Performance Measures** |
| Local Council Steering Committee will meet at least 3 times per year | \_\_\_\_ (#) of local council steering committee meetings. |
| Subcommittees of the Steering Committee will be formed. | * Name of committees and \_\_\_\_ (#) of times each committee will meet. |
| Name of subcommittee: | * (#) of time committee will meet: |
| Name of subcommittee: | * (#) of time committee will meet: |
| Name of subcommittee: | * (#) of time committee will meet: |
| Name of subcommittee: | * (#) of time committee will meet: |
| Name of subcommittee: | * (#) of time committee will meet: |
| * **Goal 2:** Improve the knowledge of criminal justice professionals on domestic violence related topics. | |
| **Outcome Objectives** | **Performance Measures** |
| Provide trainings to local circuit criminal justice and family violence professionals. | * \_\_\_\_\_ (#) of trainings provided to local circuit criminal justice and family violence professionals. |
| Develop, expand, or revise training materials | * \_\_\_\_ (#) of newly developed, expanded, or revised training materials. |
| Educate criminal justice and family violence professionals through trainings. | * \_\_\_\_ (#) of attendees participating in trainings. |
| Collect evaluations or pre-posttests. | * \_\_\_\_ (#) of training evaluations collected. |
| Follow-up with training attendees. | * \_\_\_\_\_(#) of follow-up contacts made after training. |
| Training participants indicate increased confidence on evaluation. | * \_\_\_\_\_ % of participants that indicate increased confidence after training based on number of attendees. |
| * **Goal 3**: To increase the awareness and knowledge of family violence issues (including but not limited to domestic violence, child abuse, teen dating violence, and abuse against older adults and persons with disabilities) in the communities of the service area. | |
| **Outcome Objectives** | **Performance Measures** |
| Coordinate with local criminal justice professionals and community agencies to participate in public awareness regarding family violence related topics. | * \_\_\_\_ (#) of community awareness events and activities. |
| Educate and disseminate information to attendees at community awareness events and activities. | * \_\_\_\_ (#) of participants at community awareness events and activities. |
| Create products or materials for community awareness events and activities. | * \_\_\_\_\_ (#) of products or materials created for community awareness events and activities. |

**Budget Detail and Budget Narrative – 5 Points** This section can be completed on a separate Excel document.

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| Completed NOFO Application materials should be zipped in a single folder. Each individual document should be named following naming conventions listed on page 7 and emailed to Illinois Family Violence Coordinating Council Implementation. Please review the submission checklist on page 1 in NOFO Instructions. All materials must be received by: 5:00 p.m., May 5, 2025. |