

For reference only. Responses must be submitted via AmpliFund. Emailed, mailed, and hand-delivered applications will not be accepted.

**Victims of Crime Act (VOCA) Legal Services for Victims of Crime  
PROGRAM NARRATIVE  
NOFO # 1745-0423**

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 highly encouraged as you complete your responses.

**Summary of the Program – 5 Points**

1. Describe your agency’s history and expertise in the provision of legal services to victims of crime, include information on types of legal assistance you will fund through this program.
2. Besides the legal services funded through this NOFO, what (if any) other legal services does your agency provide? Include examples of how these services are coordinated with the VOCA funded activities.

**Statement of the Problem– 10 Points**

1. Please list the count(ies) to be served by your program: If you are proposing a program to serve a portion of a county, please specify those municipalities and/or neighborhoods.
2. Describe the problem in your service area that demonstrates the need for your proposed program. This may include a description of available indicators on the extent of victimization and legal assistance sought in your service area. Some county-level data may be retrieved from the Authority’s Research & Analysis Unit website <https://icjia.illinois.gov/researchhub/datasets>.
3. Describe strengths and challenges of the community to be served. An example of a strength could be strong community network; a challenge could be poverty. A minimum of two strengths and two challenges are essential and must be related to the problem described in question 2.

**Agency Capacity and Experience – 15 Points**

1. Describe history of providing legal assistance for victims of crime. 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 applicant does not have a history of providing legal services, please explain how the applicant will build capacity to provide them. This explanation should include at least one capacity-building example and demonstrate a strong understanding of such services. If

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agency is new, state whether a minimum of 25 percent of its financial support comes from sources other than the Crime Victims Fund.

2. Describe how the applicant agency's present capacity and expertise may limit the provision of services. Include how the limitations affect clients who are seeking services.
3. Describe fiscal experience and capacity to manage grants. Include all non-state funding sources that support legal assistance programming. Include quantitative (e.g. size of budget and number of grants) and qualitative (e.g. process and procedure; summary of previous management) descriptions.
4. Describe how the proposed program complements existing services funded by other sources.

### **Project Management – 25 Points**

1. Check at least one type of legal assistance to be provided:  
☐ Emergency Legal Assistance  
☐ Victim Rights Enforcement  
☐ Civil Legal Assistance

For each type of legal assistance checked above, please describe in detail the proposed services and program rationale.

2. Organizations must commit to providing services to one or more of the following victim populations. Services will not be limited to the selected population(s). Please indicate the population(s) that your program intends to serve and explain legal services specific to the population(s) selected.  
☐ Domestic Violence Victims  
☐ Elderly Victims  
☐ Human Trafficking Victims  
☐ Financial Exploitation Victims  
☐ Sexual Violence Victims
3. Describe activities that will promote and direct potential clients to the proposed services. At minimum, include method, language(s), venues where activities will be provided, and past experiences in this activity.
4. Describe the client intake process, including, but not limited to, intake questions and criteria for acceptance. Please briefly explain the referral process when a case is not accepted due to eligibility or organizational capacity. Also explain the rationale for your intake and referral process.
5. Describe how applicant agency will address the following barriers to accessing legal assistance. At minimum, the response must include a plan to provide a low barrier screening and intake process.

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- Program eligibility independent of victim income
  - Hours of operation and intake beyond traditional working hours (9 a.m. to 5 p.m.)
  - Interpretation services
  - Transportation support for clients that request this support. This support can include transportation costs and other assistance to help victims receive direct services and participate in criminal justice proceedings related to the crime.
6. Indicate whether services will be provided free of charge. Please affirm that your program will not use a client's income and assets to determine eligibility.
  7. List types of legal assistance the applicant agency will not be able to provide and the agencies to which clients with such needs will be referred.
  8. Describe collaborative partners, such as victim service agencies or community organizations, and explain collaboration history and each partner's role in your proposed program.

### **Staffing Plan – 30 Points**

1. List and describe all staff positions assigned to the proposed program. Include at minimum name of position, roles and responsibilities, and reporting and supervision structure.

List total numbers of full-time equivalent (FTE) staff positions that would be funded by the program during the grant period. FTE is the ratio of the staff person's total number of funded hours during a period (part-time, full-time, and contracted hours) by the number of hours in the average full-time work week. List positions that would be part-time and/or only partially funded with a grant and any consultants/contractors.

PROGRAM-FUNDED STAFF	# of positions	Total FTE
Managing Attorney/Attorney		
Case Manager (mandatory)		
Support Staff (administrative assistant, bookkeeper, accountant)		
Bi-Lingual/Multi-Lingual Support staff		
Paralegal		
Other (specify):		
Other (specify):		
TOTAL		

2. Describe attorney(s) activities and interaction with client(s). Explain how attorney(s) will interact with the case manager position to best support client(s).
3. Describe how the case manager position (mandatory) will collaborate with victim advocate(s) and/or other staff (within or outside of applicant agency) to best support client(s). Please include the referral process for clients sent to outside applicant agency.

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4. Describe how cases are assigned and supervised.
5. Describe how the agency will ensure that all staff working with client(s) receive the required training for each victimization group proposed.
6. Describe how the proposed program will include staff trauma-informed skills training and consultation to improve client responses and increase knowledge and utilization of strategies for mitigating vicarious trauma among staff. Include a plan to hold at least one training.
7. Describe how the proposed program will utilize volunteers and describe volunteer training.

### Goals, and Performance Metrics - 5 Points

Please complete the Goals and Performance Metrics for your proposed program in the AmpliFund grant management system. Goals should be outlined for a 12-month program. The metrics should measure meaningful, tangible changes resulting from program implementation or expansion for the designated period of performance.

<b>GOAL:</b> To provide comprehensiveness legal services to victims of crime.	
<b>Process Objectives</b>	<b>Process Performance Measures</b>
Provide ____ (#) of clients with comprehensive legal services.	Number of clients who contacted provider for legal services
	Number of clients who received legal services
Provide comprehensive legal services to ____ (#) of clients at provider's full capacity.	Number of clients ineligible for legal services
	Number of eligible clients with unaddressed legal needs due to organizational capacity
	Number of clients placed on a waiting list for legal services
	Number of clients referred to other legal providers
<b>Emergency legal services:</b> <i>only complete if applicant is proposing to implement emergency legal services</i>	
Provide ____ (#) of clients with emergency legal services.	Number of clients who contacted provider for emergency legal services
	Number of clients who received emergency legal services
	Number of clients with unaddressed emergency legal service needs due to organizational capacity

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Provide emergency legal services to ____ (#) of clients at provider's full capacity.	Number of clients referred to other legal providers for emergency legal service needs
____ (#) of clients will receive assistance with emergency orders of protection, civil no contact orders, or stalking no contact orders.	Number of clients who received assistance with emergency protective orders
____ (#) of clients will receive assistance with emergency custody or visitation rights.	Number of clients who received assistance with emergency custody or visitation rights
<b>Victim rights enforcement training to staff and services to clients:</b> <i>only complete if applicant is proposing to implement victim rights enforcement training to staff and services to clients</i>	
Provide ____ (#) of clients with victim rights enforcement services.	Number of clients who contacted provider for victim rights enforcement services
	Number of clients who received victim rights enforcement services
Provide victim rights enforcement services to ____ (#) of clients at provider's full capacity.	Number of clients with unaddressed victim rights enforcement needs due to organizational capacity
	Number of clients referred to other legal providers for victim rights enforcement needs
____ (#) of clients will receive assistance with completing a victim impact statement.	Number of clients assisted with completing a victim impact statement
____ (#) of clients will receive assistance with exercising other victim rights.	Number of clients assisted with exercising other victim rights
<b>Civil legal services:</b> <i>only complete if applicant is proposing to implement civil legal services</i>	
Provide ____ (#) of clients with civil legal services.	Number of clients who contacted provider for civil legal services
	Number of clients who received civil legal services
Provide civil legal services to ____ (#) of clients at provider's full capacity.	Number of clients with unaddressed civil legal service needs due to organizational capacity

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	Number of clients referred to other legal providers for civil legal service needs
_____ (#) of clients will receive assistance related to plenary orders of protection, civil no contact orders, or stalking no contact orders.	Number of clients who received assistance with court-issued plenary protective orders
_____ (#) of clients will receive assistance related to campus administrative protection/stay-away orders.	Number of clients who received assistance with campus protective orders
_____ (#) of clients will receive legal assistance related to non-emergency family matters, including divorce, custody, support and dependency.	Number of clients who received legal assistance related to non-emergency family matters
_____ (#) of clients will receive legal assistance related to housing matters.	Number of clients who received legal assistance related to housing matters
_____ (#) of clients will receive legal assistance related to employment matters.	Number of clients who received legal assistance related to employment matters
_____ (#) of clients will receive legal assistance related to immigration matters.	Number of clients who received assistance related to immigration matters
_____ (#) of clients will receive legal assistance related to intervention with creditors, law enforcement (e.g., to obtain police records), or other entities on behalf of victims of identity theft and financial fraud.	Number of clients who received legal assistance related to intervention with creditors, law enforcement (e.g., obtaining police records), or other entities on behalf of victims of identity theft and financial fraud
_____ (#) of clients will receive legal assistance related to intervention with schools/colleges in addressing the consequences of victimization.	Number of clients who received legal assistance related to intervention with schools/colleges in addressing the consequences of victimization
_____ (#) of clients will receive legal assistance related to intervention with other organizations in addressing the consequences of a person's victimization.	Number of clients who received legal assistance related to intervention with other organizations in addressing the consequences of victimization

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____ (#) of clients will receive assistance related to filing a motion to vacate and/or expunge certain convictions based on their status of being victims	Number of clients assisted with vacating and/or expunging convictions
<b>Other client support services and staff training</b>	
____ (# or %) of clients with limited English proficiency will receive assistance with language interpretation.	Number of clients enrolled in program with limited or no English proficiency
	Number of clients who received assistance with language interpretation.
____ (#) of clients will receive assistance with transportation.	Number of clients who received assistance with transportation
____ (#) of clients will receive crisis intervention services	Number of clients who received crisis intervention services
____ (#) of clients will receive assistance completing a crime victim compensation application	Number of clients offered assistance with completing a crime victim compensation application
	Number of clients who received assistance completing a crime victim compensation application
Coordinate additional support services for ____ (#) of clients	Number of clients referred to a victim or social services agency for additional support services
	Number of clients receiving additional support services from a victim or social service agency
Provide ____ (#) of trauma skills trainings with staff to improve trauma-informed response	Number of trauma skills trainings held with staff
	Number of staff who successfully completed trauma skills training
Provide ____ (#) of specialized trainings with staff to enhance delivery of program services	Number of specialized trainings provided to staff
	Number of staff who successfully completed specialized trainings

### Performance Plan Template – 5 Points

Information on the following implementation goals must be included in the **Performance Plan Template** via AmpliFund

#### 1) Milestone

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*Example:* Hire legal assistant for program.

*Example:* All staff members will be trained on trauma-informed care.

*Example:* Submit subcontract to ICJIA for review and approval

**2) Narrative**

*Example:* Provide information regarding person responsible for hiring and supervision of the legal assistant

*Example:* To ensure all staff are trained in trauma-informed care, we will allow staff to use work time to attend training. We will disseminate dates, times, and locations of free virtual or in-person training throughout the city. Staff who have not received training within three months of the grant period will be contacted and reminded weekly.

*Example:* Provide information regarding who will submit the subcontract to ICJIA and be responsible for review, completion, and compliance of subcontract requirements.

**3) Numeric**

*Example:* X staff will be trained.

**4) Date**

*Example:* Due Date: Month One.

ICJIA recognizes that each program may have different needs, goals, and client populations. See below for a Performance Implementation Plan example. For your plan, generate goals that best fit your program.

**Budget Detail and Budget Narrative – 10 Points**

Please 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.

**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: <https://il.amplifund.com/Public/Opportunities/Details/ae77a891-d44b-4e07-b7a1-3daad34f43e5>

To be considered for funding, completed applications must be submitted via the above



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AmpliFund link by the application deadline of 5:00 p.m., May 15, 2023. ICJIA encourages applicants to review this Technical Assistance Recording for more information on how to apply.