

**CITY OF EL PASO, TEXAS**  
**AGENDA ITEM DEPARTMENT HEAD'S SUMMARY FORM**

**DEPARTMENT:** POLICE

**AGENDA DATE:** March 14, 2006

**CONTACT PERSON/PHONE:** ASSISTANT CHIEF PAUL CROSS / 564-7310  
MARTA GINER / 564-7119

**DISTRICT(S) AFFECTED:** Citywide

**SUBJECT:**

**APPROVE** a resolution / ordinance / lease to do what? **OR AUTHORIZE** the City Manager to do what? Be descriptive of what we want Council to approve. Include \$ amount if applicable.

Approve a resolution authorizing the City Manager to approve the electronic submission of a proposal to the Criminal Justice Division (Office of the Governor of the State of Texas) for the VOCA grant program in the amount of \$101,322 with a local cash match of \$18,804, and an in-kind match of \$6,527 for a total of \$126,653. "Highest Elected Official" signature not required; Resolution of Mayor and City Council is required. Please note that this is a re-submittal due to clerical errors made in the previous submittal.

**BACKGROUND / DISCUSSION:**

Discussion of the what, why, where, when, and how to enable Council to have reasonably complete description of the contemplated action. This should include attachment of bid tabulation, or ordinance or resolution if appropriate. What are the benefits to the City of this action? What are the citizen concerns?

The VOCA grant will fund the Victim Services Response Team (VSRT) to staff the program with three (3) case workers to provide a variety of service to local victims of crime.

**PRIOR COUNCIL ACTION:**

Has the Council previously considered this item or a closely related one?

Yes. The City of El Paso received VOCA funding in 2005.

Please note that this is a re-submittal due to clerical errors made in the previous submittal.

**AMOUNT AND SOURCE OF FUNDING:**

How will this item be funded? Has the item been budgeted? If so, identify funding source by account numbers and description of account. Does it require a budget transfer?

Account # 21150060 Fund# 16371 Project #500231 Match allocated from Confiscated Funds Grant is in the amount of \$101,322. Cash match of \$18,804 in cash and \$6,527 in-kind (volunteer services) is being provided for matching requirement.

\*\*\*\*\*REQUIRED AUTHORIZATION\*\*\*\*\*

**LEGAL:** (if required) \_\_\_\_\_

**FINANCE:** (if required) \_\_\_\_\_

**DEPARTMENT HEAD:** \_\_\_\_\_

(Example: if RCA is initiated by Purchasing, client department should sign also  
Information copy to appropriate Deputy City Manager

**APPROVED FOR AGENDA:** \_\_\_\_\_

**CITY MANAGER:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

## RESOLUTION

WHEREAS, the El Paso City Council finds it in the best interest of the citizens of El Paso that the Victim Services Response Team be operated for the July 1, 2006 – June 30, 2007 year; and

WHEREAS, the El Paso City Council agrees to provide applicable matching funds for the said project as required by the Office of the Governor grant application; and

WHEREAS, the El Paso City Council agrees that in the event of loss or misuse of the Criminal Justice Division funds, the El Paso City Council assures that the funds will be returned to the Criminal Justice Division in full.

WHEREAS, the El Paso City Council designates City Manager Joyce Wilson as the grantee's authorized official. The authorized official is given the power to apply for, accept, reject, alter or terminate the grant on behalf of the applicant agency.

### **NOW THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EL PASO:**

1. That the El Paso City Council approves submission of the grant application for the Victim Services Response Team project to the Office of the Governor, Criminal Justice Division.
2. The City Manager be authorized to sign the grant application including all understandings and assurances contained therein, and apply for, accept, reject, alter or terminate the grant in the amount of \$101,322.00, from the City of El Paso Police Department to the Office of the Governor, Criminal Justice Division, for the purpose of continuing the efforts of the Police Department's Victim Services Response Team.
3. The City of El Paso agrees to provide cash matching funds in the amount of \$18,804.00 and in-kind match of \$6,527.00.
4. The El Paso City Council agrees that the existence of an award will not be used to offset or decrease total salaries, expenses and allowances that the City receives or provides to its Police Department at or after the time the grant is awarded.
5. The City Manager be authorized to sign Cooperative Working Agreements relating to the grant with the following agencies: El Paso County Sheriff's Office; Court Appointed Special Advocates; Diocesan Migrant and Refugee Services, Inc., Battered Spouse Program; STARS; El Paso County District Attorney, Victim Assistance Program; El Paso County District Attorney, Domestic Violence Unit; El Paso County Attorney's Office, VOCA Protective Orders Program; Center Against Family Violence; Advocacy Center for the Children of El Paso; West Texas Community Supervision and Corrections Department, Victim Services Program; Rio Grande

Council of Governments; and Family Service of El Paso, Crime Survivors Counseling Program.

ADOPTED this 14th day of March, 2006

CITY OF EL PASO

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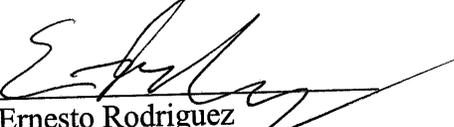
John Cook  
Mayor

ATTEST:

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Richarda Duffy Momsen  
City Clerk

APPROVED AS TO FORM:



Ernesto Rodriguez  
Assistant City Attorney

**OFFICE OF THE GOVERNOR  
CRIMINAL JUSTICE DIVISION  
GRANT APPLICATION CERTIFICATION FORM**

This certification form is the authorized official's verification that the grant application described below contains true and accurate information. The initial application process is complete once this form is completed, signed and returned.

An application may not be considered for funding until this form is submitted. This is not a commitment by CJD to fund this application nor is it a commitment to a level of funding. Please do not change the preprinted information on this form.

**Application Number:** 13590 - 08 (please reference this number in all future correspondence) **Date:** 3/6/2006

**Applicant Name:** El Paso, City of **Amount Requested:** \$101,322  
**Project Title:** Victim Services Response Team/Crisis Response Team **Funding Source:** VA-Victims of Crime Act (VOCA) Fund

**Part I: Authorized Official Information:**

A. Verify the Authorized Official information below is correct. Please enter corrected information in Section B, as needed.

**Name:** Joyce Wilson **Address:** #2 Civic Center Plaza  
**Email:** citymanager@elpasotexas.gov **City/St/Zip:** El Paso, Texas 79901  
**Phone:** (915) 541-4844 **Fax:** (915) 541-4866

B. Enter the updated Authorized Official information below:

**Name:** **Address:**  
**Email:** **City/State/Zip:**  
**Phone:** **Fax:**

**Part II: Submission of Resolution from Governing Body:**

A. Please fax the resolution from the governing body along with this Grant Application Certification Form to CJD.

B. If you are not able to submit your resolution now, please fax it to CJD at your earliest convenience. Be sure to include your application number when you fax in your resolution.

**Part III: Certification of Grant Application:**

A. Please complete, sign and fax this form to CJD at (512) 475-2440 on or before the response due date of: 3/20/2006

B. I, the Authorized Official, certify that the forms listed below, as submitted to CJD in the grant application kit, and the Authorized Official Information shown above (including any changes), contain true and accurate information.

- |                    |                                |                              |
|--------------------|--------------------------------|------------------------------|
| 1. Coversheet Form | 3. Match-GPI Form              | 5. Project Narrative Form    |
| 2. Budget Form     | 4. Fund-Specific Criteria Form | 6. Supporting Documents Form |

\_\_\_\_\_  
**Signature of Authorized Official**

\_\_\_\_\_  
**Date of Certification**

Approved as to form:

  
\_\_\_\_\_  
Ernesto Rodriguez, Asst. City Attorney

**OFFICE OF THE GOVERNOR  
CRIMINAL JUSTICE DIVISION  
GRANT APPLICATION CERTIFICATION FORM**

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**Email:** citymanager@elpasotexas.gov **City/St/Zip:** El Paso, Texas 79901  
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| 2. Budget Form     | 4. Fund-Specific Criteria Form | 6. Supporting Documents Form |

\_\_\_\_\_  
**Signature of Authorized Official**

\_\_\_\_\_  
**Date of Certification**

Approved as to form:

  
Ernesto Rodriguez, Asst. City Attorney

# Grant Coversheet Form

**1. ENTER the legal name of the organization:**  
 City of El Paso-El Paso Police Department

**2. ENTER the title of the project:**  
 Victim Services Response Team

**3. ENTER the division or unit to administer the project:**  
 Victim Services

**4. ENTER the agency's State Payee Identification Number:**  
 74-6000749

**5. Is the applicant organization delinquent on any federal or state debt? (SELECT One):** No

*Note: CJD will not award a grant to an applicant that is delinquent on any federal or state debt unless they can show mitigating circumstances, subject to CJD approval.*

**6. The funding source your organization is applying for is:**  
**Victims of Crime Act Fund (federal CFDA-16.575)**

**7. ENTER the grant period:**  
 From: 7/1/2006 To: 6/30/2007

**8. ENTER the current grant number if a continuation project:**  
 13590-07

**9. Budget Information (figures are filled in from the Budget Form):**

CJD Funds	Cash Match	In-Kind	Total
\$101,322	\$18,804	\$6,527	\$126,653

**10. a) Is this a local or regional project? (SELECT One):** Yes

**b) Is this grant application in response to a Request for Applications (RFA) as published in the Texas Register? (SELECT One):** Yes

**c) If you marked 'No' to item 10.b), ENTER the name of the CJD staff member that you contacted for submission:**

This application  **is** subject to a regional COG Prioritization.

**11. SELECT the primary service county or area:** El Paso

The regional council of government (COG) for this application is:  
Rio Grande Council Of Governments (0800)

**12. a) ENTER the Authorized Official Information:**

Title (Mr., Ms., Dr., Judge, etc.): Ms.

Name: Joyce Wilson

Position: City Manager

Address: 2 Civic Center Plaza, 10th Floor

City/State/Zip: El Paso TX 79901

Telephone: (915)541-4844 Fax: (915)541-4866

Email: [citymanager@elpasotexas.gov](mailto:citymanager@elpasotexas.gov)

**b) ENTER the Project Director Information:**

Title (Mr., Ms., Dr., Judge, etc.): Ms.

Name: Elizabeth Ovalle

Position: Program Director

Address: 911 N. Raynor

City/State/Zip: El Paso TX 79903

Telephone: (915)564-7088 Fax: (915)564-7354

Email: [ovallee@elpasotexas.gov](mailto:ovallee@elpasotexas.gov)

**c) ENTER the Financial Officer Information:**

Title (Mr., Ms., Dr., Judge, etc.): Mr.

Name: William Studer

Position: Deputy City Manager for Financial and Administrative Services

Address: 2 Civic Center Plaza, 7th Floor

City/State/Zip: El Paso TX 79901

Telephone: (915)541-4215 Fax: (915)541-4760

Email: [StuderWF@elpasotexas.gov](mailto:StuderWF@elpasotexas.gov)

**13. a) SELECT your organization type based on the list of eligible applicants by fund source:**  
 City

**b) LIST the cities and counties within the service area:**  
 City of El Paso

**14. FOR COG USE ONLY**

a) Is this application shared with another COG? (ENTER "Yes" or "No"): [ ]

b) CPTN #:

c) Priority #:

d) State Application Identifier (SAI #) or COG Application ID:  
TX-R-20060221-0001-08

# Grant Budget Form

Legal Name of Organization:	City of El Paso-El Paso Police Department			
Title of Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			
Minimum Match Percentage (If Applicable):	20%	1. ENTER the CJD Requested Amount:		\$101,322
Minimum Match Amount (If Applicable):	\$25,331			
2. ENTER Program Income Applied to this Budget (If Applicable):	\$0	Total Project Cost Amount:		\$126,653

## BUDGET DETAIL

PERSONNEL	Salary % Applied to the Grant	CJD Funds	Cash Match	In-Kind	Total
Case Manager I - Provide immediate crisis intervention, telephone contacts, information and referrals, assist with TCVC applications. Fringe Benefits - FICA, Medicare, Workers Comp, Unemployment, Health & Life Insurance, Pension. Salary \$28,000 + Fringe \$9,402.	100.00%	\$37,402			\$37,402
Case Manager II - Provide immediate crisis intervention, telephone contacts, information and referrals, assist with TCVC applications. Fringe Benefits - FICA, Medicare, Workers Comp, Unemployment, Health & Life Insurance, Pension. Salary \$28,000 + Fringe \$9,402.	100.00%	\$28,000	\$9,402		\$37,402
Case Manager III - Provide immediate crisis intervention, telephone contacts, information and referrals, assist with TCVC applications. Fringe Benefits - FICA, Medicare, Workers Comp, Unemployment, Health & Life Insurance, Pension. Salary \$28,000 + Fringe \$9,402.	100.00%	\$28,000	\$9,402		\$37,402
Volunteers - Each @\$7.00 per hour x 932.43 hours. The volunteers will assist the Case Managers in immediate crisis intervention, information and referrals.	100.00%			\$6,527	\$6,527
<b>CONTRACTUAL AND PROFESSIONAL SERVICES</b>		CJD	Cash	In-Kind	Total
N/A					\$0
<b>TRAVEL AND TRAINING</b>		CJD	Cash	In-Kind	Total
In-state travel & training conferences using the Department's travel policy, which includes \$60 per diem, \$115 per night for hotel & lowest airfare, plus conference fee.		\$4,500			\$4,500
<b>EQUIPMENT</b>		CJD	Cash	In-Kind	Total
N/A					\$0
<b>SUPPLIES AND DIRECT OPERATING EXPENSES</b>		CJD	Cash	In-Kind	Total
Airtime for three (3) cellular phones @ \$45 per month per phone.		\$1,620			\$1,620
Consumable office supplies (printer paper, staples, envelopes, tape, postage, pens)		\$1,800			\$1,800
<b>INDIRECT COSTS (the Direct Costs Against Which the Indirect Rate is Charged)</b>		CJD Direct Costs	Match Direct Costs	Indirect Rate	Total
					\$0
<b>BUDGET SUMMARY</b>					
<b>BUDGET CATEGORIES</b>		CJD	CASH	IN-KIND	TOTAL
PERSONNEL		\$93,402	\$18,804	\$6,527	\$118,733

## Grant Budget Form

CONTRACTUAL AND PROFESSIONAL SERVICES	\$0	\$0	\$0	\$0
TRAVEL AND TRAINING	\$4,500	\$0	\$0	\$4,500
EQUIPMENT	\$0	\$0	\$0	\$0
SUPPLIES AND DIRECT OPERATING EXPENSES	\$3,420	\$0	\$0	\$3,420
<b>TOTAL DIRECT COSTS:</b>	<b>\$101,322</b>	<b>\$18,804</b>	<b>\$6,527</b>	<b>\$126,653</b>
INDIRECT COSTS	\$0	\$0	\$0	\$0
<b>TOTAL:</b>	<b>\$101,322</b>	<b>\$18,804</b>	<b>\$6,527</b>	<b>\$126,653</b>
Actual Total Match:			<b>\$25,331</b>	
Actual Match Percentage Applied to this Budget:			<b>20.00%</b>	

# Match & Generated Program Income (GPI) Form

Legal Name of Organization:	City of El Paso-El Paso Police Department		
Title of Project:	Victim Services Response Team		
Grant Period:	From:	7/1/2006	To: 6/30/2007
Current Grant Number (If Continuation):	13590-07		

## A. CASH MATCH SOURCES AND AMOUNTS

1. a)	ENTER Source of Cash Match (e.g., program income, city, county, etc.):	b) ENTER Amount:	Cont'd -	ENTER Source of Cash Match	Cont'd - ENTER Amount:
(1)	Confiscated funds (City of El Paso) - Fringe Benefits for one Case Manager (II) Position	\$ 9,402	(11)		
(2)	Confiscated funds (City of El Paso) - Fringe Benefits for one Case Manager (III) Position	\$ 9,402	(12)		
(3)	Volunteer hours (in-kind) Each @ \$7.00 per hour x 932.43 hours. Tracked through log sheets & time cards.	\$ 6,527	(13)		
(4)			(14)		
(5)			(15)		
(6)			(16)		
(7)			(17)		
(8)			(18)		
(9)			(19)		
(10)			<b>Total Cash Match</b>		<b>\$ 25,331</b>

## B. GENERATED PROGRAM INCOME (GPI) REPORTING

The information requested below is not calculated in the computations as part of this grant application. It is for reporting purposes to CJD only. Even though some program income may be listed as "CASH MATCH" within the Budget Form, all program income on-hand must be shown below.

ENTER Program Income On-Hand as of the grant application submission date:

# Fund-Specific Criteria Form

Legal Name of Organization:	City of El Paso-El Paso Police Department		
Title of Project:	Victim Services Response Team		
Grant Period:	From:	7/1/2006	To: 6/30/2007
Current Grant Number (If Continuation):	13590-07		

## **PART 1: FUND-SPECIFIC CERTIFICATIONS**

**All applicants must certify to the following requirements for the Victims of Crime Act (VOCA) fund:**

Services to Victims of Crime - Applicant agrees to provide services to victims of crime which include: responding to the emotional and physical needs of crime victims; assisting victims in stabilizing their lives after a victimization; assisting victims to understand and participate in the criminal justice system; and providing victims with safety and security.

Effective Services - Applicant must demonstrate a record of providing effective services to crime victims. If the applicant cannot yet demonstrate a record of providing effective services, the applicant must demonstrate that at least 25 percent of its financial support comes from non-federal sources.

Volunteers - Applicant agrees to use volunteers to support either the project or agency-wide services, unless CJD determines that a compelling reason exists to waive this requirement.

Community Efforts - Applicant agrees to promote community efforts to aid crime victims. Applicants should promote, within the community, coordinated public and private efforts to aid crime victims. Coordination efforts qualify an organization to receive VOCA funds, but are not activities that can be supported with VOCA funds.

Crime Victims' Compensation - Applicant agrees to assist crime victims in applying for crime victims' compensation benefits.

Records - Applicant agrees to maintain daily time and attendance records specifying the time devoted to allowable VOCA victim services.

Civil Rights Information - Applicant agrees to maintain statutorily required civil rights statistics on victims served by race, national origin, sex, age, and disability of victims served, within the timeframe established by CJD. This requirement is waived when providing service, such as telephone counseling, where soliciting the information may be inappropriate or offensive to the crime victim.

Victims of Federal Crime - Applicant agrees to provide equal services to victims of federal crime.

No Charge - Applicant agrees to provide grant-funded services at no charge to victims of crime.

Confidentiality - Applicant agrees to maintain the confidentiality of client-counselor information and research data, as required by state and federal law.

Discrimination - Applicant agrees not to discriminate against victims because they disagree with the State's prosecution of the criminal case.

Civil Rights Liaison Certification - Applicants must designate a civil rights liaison who will serve as the grantee's civil rights contact point and who will bear the responsibility for ensuring that the grantee meets all applicable civil rights requirements. The designee will act as the grantee's liaison in civil rights matters with CJD and with the federal Office of Justice Programs. Provide the following information related to the designated Civil Rights Liaison within your agency:

Name of Civil Rights Liaison:	Phone Number:
Linda Ball Thomas	915-541-4102

Address:

2 Civic Center Plaza, 3rd Floor  
El Paso, Texas, 79901

The organization's Authorized Official certifies that the project for which this application is submitted will adhere to all of the requirements listed above:

SELECT One:  Yes  No

# Fund-Specific Criteria Form

## **PART 2: TYPE OF CRIME**

Select the target crime(s) this project will address and specify the percentage of your project that is applicable to each type. Be sure that your percentages total 100%.

Select	Percentage	Type of Crime
<input checked="" type="checkbox"/>	25%	Sexual Assault
<input checked="" type="checkbox"/>	50%	Domestic Abuse
<input checked="" type="checkbox"/>	25%	Child Abuse

\_\_\_\_\_ Other (Specify):

## **PART 3: ELIGIBLE ACTIVITIES**

Select all activities or services that apply to your project. Definitions for each item are provided in the Application Instruction Kit.

- Assistance in Filing Crime Victims' Compensation Claims
- Crisis Counseling
- Group Treatment/Support
- Emergency Financial Assistance
- Legal Advocacy
- Follow-up
- In-Person Information/Referral
- Criminal Justice Support/Advocacy
- Personal Advocacy
- Shelter/Safe House
- Telephone Contact Information/Referral
- Therapy
- Other Services (Specify):

# Project Narrative Form

Legal Name of Organization:	City of El Paso-El Paso Police Department			
Title of Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

## **PART I. PROBLEM STATEMENT AND DATA**

### **1.1 Problem Statement**

Provide a brief statement of the specific problem or problems this project is designed to address.

El Paso continues to experience an increase in the need for immediate crisis intervention and stabilization to assist victims of crime begin the healing process immediately after a crime is committed. Lack of awareness results in victims not knowing that certain rights and resources are available to help them with any physical or emotional trauma suffered as a result of a crime.

# Project Narrative Form

## 1.2 Supporting Data

Provide data that supports the problem. Use only data that is verifiable and relevant to your target population. The data should be derived from baseline statistics. For example, do not use statewide data for a local problem and do not use national data for a statewide problem. Also, provide citations for the sources of your data.

### City of El Paso

Number of Incidents of Violence in 2005  
Approximately 30,019

Year	Number of Victims Served	Compensation Applications
2000	8,729	271
2001	8,947	387
2002	7,032	577
2003	7,621	626
2004	9,920	1,199
2005	9,455	1,131

Source: El Paso Police Department  
City of El Paso

# Project Narrative Form

## 1.3 Community Plan

If this is a local or regional project, the grant applicant must have participated in a local community planning process or the proposed project has to be in response to priorities set in a community plan. IDENTIFY what priority(ies) this project addresses within your community plan. (See T.A.C. §3.51):

This project will provide victims of crime and neglect with support services and/or information and referrals by conducting the following:

- a. Identify multi-disciplinary, comprehensive psychotherapy and/or counseling programs.
- b. Provide victims with referrals to emergency shelter, transitional living and assist in locating permanent housing.
- c. Provide information on crime victims rights, the state compensation fund and facilitate an understanding among victims on the workings of the criminal justice system.
- d. Provide crisis intervention and outreach, and identify support groups for victims of sexual assault and their significant others.
- e. Provide emotional support, grief counseling, conflict and trauma resolution for crime victims.
- f. Provide updates to victims of crime on their cases as they progress through the criminal justice system.
- g. Assure that victims know that they have the opportunity to submit a statement to the court regarding the impact of the crime committed against them and their families.

The project will also coordinate community efforts in the assistance for crime victims by providing opportunities to use volunteers and student interns from the high school level to the post-graduate level in service learning situations. The project will provide adequate training and continuing education to service providers, volunteers and student interns.

# Project Narrative Form

## **PART 2: GOAL STATEMENT**

Based on your problem statement, provide a brief goal statement. It should be a general statement reflecting the overall impact that you intend the project to attain. Do NOT list activities in the goal.

The goal of this project is to provide victims of crime with an increased awareness of victims rights, available resources and immediate crisis intervention.

# Project Narrative Form

## **PART 3: TARGET GROUP**

Briefly explain the target group for your project. Include the geographic area targeted, the target audience, and the relevant characteristics of those persons.

### **3.1 Geographic Area:**

The target geographic area for our project is the City of El Paso, TX.

### **3.2 Target Audience:**

The target audience of our group is Victims of all major crimes.

### **3.3 Gender:**

The target gender of our group is both female and male.

### **3.4 Ages:**

This project targets all age groups.

### **3.5 Special Characteristics:**

The special characteristics of our target group include an underserved population consisting of a disadvantaged, monolingual Spanish population and homeless.

# Project Narrative Form

## **PART 4: PROJECT ACTIVITIES**

### **4.1 Program Type**

Designate the Program Type that best describes the primary purpose for this project. Definitions are located in the Application Instruction Kit. Note: Active program types will vary by fund source. While you can view all Program Types, you can only select one that is active for this fund source. (**SELECT** only one)

- Enforcement/Investigation    Prosecution    Alternative Sanctions    Supervision    Training/Education  
 Treatment/Counseling    Prevention    Early Intervention    Victim Advocacy    Crisis Intervention  
 Other (Specify): \_\_\_\_\_

### **4.2 Activity Description**

Describe the activities or services your project provides. Be sure the activities support the goal statement and are consistent with the selections made in the Fund-Specific Criteria tab.

The team responds to requests for assistance from patrol officers and supervisors. They respond to crime scenes, hospitals, or other locations where victims are located. The team immediately assesses the situation, determines what services are needed, and assists in providing help. The team members are trained in Texas Crime Victim Compensation requirements and benefits, available community resources, and have a working knowledge of the criminal justice system. The team is trained in victim awareness and sensitivity, cultural norms, crisis intervention, crisis counseling, Critical Incident Stress Management (CISM) and on completing Texas Crime Victim Compensation applications (TCVC). The team will provide information and make referrals either by phone or in person and conduct follow ups to ensure crime victims are receiving the needed services. The team will promote citizen involvement through volunteerism. Victims will receive immediate assistance, which will be made available at minimal travel distance, as service delivery will begin at the scene of the crime or the victim's home. The team will facilitate coordination and communication with other agencies ensuring a smooth transition for victims as they go through the criminal justice system. The team will continue to recruit volunteers who are trained to respond to the needs of victims.

# Project Narrative Form

## **PART 5: PROJECT OBJECTIVES**

### **5.1 Performance Measures**

Provide both output and outcome measures for this project. Output measures show the level of activity of a project. They reflect the amount of services being provided (e.g., number of people served; number of classes held). They are not intended to show impact. Outcome measures show impacts of a project in targeted areas (e.g., percentage of program graduates). They reflect the extent to which the goals of the project have been achieved.

	<u>Current Annual</u> Activity	<u>Target Level</u> of Activity for the Grant Period
<b>Output Measures - Required for All Projects</b>		
Number of victims served.	9,455 (FY05)	9,928 (+5%)
Number of Call-outs.	270 (FY05)	284 (+5%)
Number of compensation applications filed.	1,131 (FY05)	1188 (+5%)
Number of active, trained volunteers.	107 (FY05)	112 (+5%)

	<u>Current Annual</u> Activity	<u>Target Level</u> of Activity for the Grant Period
<b>Outcome Measures - Optional</b>		
Enter text here...do not exceed the maximum allowed area within any of the text boxes.		

# Project Narrative Form

## 5.2 Continuation Projects

For continuation projects only, if your current or previous year's project is NOT on schedule in accomplishing the stated objectives, briefly describe the major obstacles preventing your organization from successfully reaching the project objectives as stated within your previous grant application. (Data may be calculated on a pro-rated basis depending on how long the current or previous year's project has been operating.)

Enter text here...do not exceed the maximum allowed area within the text box.

# Project Narrative Form

## **PART 6: PROJECT SUMMARY**

Briefly summarize the entire application, including the project's problem statement, supporting data, goal, target group, activities, and objectives. Be sure that the summary is easy to understand by a person not familiar with your project and that you are confident and comfortable with the information if it were to be released under a public information request.

Victims of violent crime resulting in bodily injury, death or emotional trauma should receive immediate intervention at the scene of a crime from advocates trained in crisis intervention and stabilization to help victims start the healing process sooner.

The Victim Services Response Team, comprised of three case managers and approximately 104 trained volunteers, will respond to crime scenes at the request of police dispatchers, officers investigating the crime, the victim's families, and/or at the request of the victims themselves. The team will respond to each request and will provide crisis intervention, explain available services, make appropriate referrals and conduct follow up sessions with each victim as needed.

The team serves citizens of the City of El Paso (population 592,099 - US Census Bureau, 2004 Population Estimates), which falls within the jurisdiction of the El Paso Police Department (EPPD). The El Paso Police Department responded to approximately 30,019 incidents of violence during 2005.

The team prioritizes incidents involving victims of violent crime resulting in bodily injury, death or emotional trauma. The team responds to calls from patrol officers and supervisors and reports to crime scenes, hospitals or other facilities where victims might be. They immediately assess the situation, determine what services are needed, and assist in providing help.

The team is current on Texas Crime Victim Compensation requirements and benefits, available community resources, and have a working knowledge of the criminal justice system. The team is trained in victim awareness and sensitivity, cultural norms, crisis intervention and the completing of TCVC applications. Continuous training is provided to current volunteers during regular scheduled monthly meetings. The team will increase the volunteer pool by organizing at least two training sessions per year. These training sessions include 80 hours of training. The team will inform patrol officers about the services offered by attending shift training at the regional commands.

The team proposes to increase the number of victims served, the number of call outs, the number of TCVC applications filed and increase their volunteer pool by 5% in 2006-2007.

# Supporting Documents Form

Legal Name of Organization:	City of El Paso-El Paso Police Department			
Title of Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

## **PART I: COMPREHENSIVE CERTIFICATION AND ASSURANCES**

**Applicants must complete and submit this form to CJD before they will receive state and/or federal funds. Recipients of state and/or federal funds must fully understand and comply with the requirements listed for the Assurances on pages 8-11 of the Application Instruction Kit for this project. Failure to comply may result in the withholding of funds, termination of the award, or other sanctions.**

### **1.1 Certifications and Assurances**

The applicant has read and will fully comply with the Comprehensive Certifications and Assurances stated on pages 8-11 of the Application Instruction Kit for this project:

SELECT One:

Yes
▼

### **1.2 Audit Certification**

Applicant agencies who expend combined federal funding or combined state funding of \$500,000 or more during the fiscal year are required to submit an annual single audit by an independent auditor in accordance with the Single Audit Act Amendments of 1996 and OMB Circular A-133. In the spaces provided below please provide the total combined federal funds expended and the total combined state funds expended during the most recently completed fiscal year.

a) Total combined <b>Federal Funds</b> expended by agency or local unit of government:	\$55,930,067
b) Total combined <b>State Funds</b> expended by agency or local unit of government:	\$12,476,665
c) Enter agency fiscal year:	9/1/2005-8/31/2006

(e.g., 9/1/05 - 8/31/06)

*Note: applicants who expend less than \$500,000 in combined federal or combined state funds are exempt from the Single Audit Act and cannot charge audit costs to a CJD grant. However, CJD may require a limited scope audit as defined in OMB Circular A-133.*

# Supporting Documents Form

## 1.3 Equal Employment Opportunity Plan (EEOP) Certification

### Definitions:

**Type I Entity** - An applicant that meets one or more of the following criteria:

- a. the applicant has less than 50 employees;
- b. the applicant is a non-profit organization;
- c. the applicant is a medical institution;
- d. the applicant is an Indian tribe;
- e. the applicant is an educational institution; or
- f. the applicant is receiving a single award of less than \$25,000.

**Federal law exempts a Type I Entity from the EEOP requirements.**

**Type II Entity** - An applicant that has 50 or more employees and is receiving a single award of \$25,000 or more, but less than \$500,000. **Federal law requires a Type II Entity to formulate an EEOP and keep it on file.**

**Type III Entity** - An applicant that does not qualify as a Type I Entity or Type II Entity. **Federal law requires a Type III Entity to formulate an EEOP and submit it for approval to the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice.**

If the applicant organization is a Type I, II, or III Entity, **SELECT** one of the following:

SELECT One:

Option 3

**Option 1: I certify that:**

- (a) the applicant is not required to prepare an EEOP because it is a **Type I Entity** as defined above, pursuant to 28 CFR 42.302; and
- (b) the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

**Option 2: I certify that:**

- (a) the applicant is a **Type II Entity** as defined above;
- (b) the applicant has formulated an EEOP in accordance with 28 CFR 42.301, et seq., subpart E;
- (c) the EEOP has been formulated and signed into effect within the past two years by the proper authority;
- (d) the EEOP is on file in the office of *(insert name and address)*:

(e) the EEOP is available for review by the public and employees or for review or audit by officials of CJD, CJD's designee, or the Office of Civil Rights, Office of Justice Programs, U.S. Department of Justice, as required by relevant laws and regulations; and

(f) the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

**Option 3: I certify that:**

- (a) the applicant is a **Type III Entity** as defined above;
- (b) the EEOP has been formulated and signed into effect within the past two years by the proper authority;
- (c) the EEOP has been submitted to the Office of Civil Rights (OCR), Office of Justice Programs, U.S. Department of Justice and has been approved by the OCR, or it will be submitted to the OCR for approval upon award of the grant, as required by relevant laws and regulations; and
- (d) the applicant will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

## 1.4 Debarment Certification

## Supporting Documents Form

A. The applicant certifies that it and its principals:

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal Court, or voluntarily excluded from participation in this transaction by any federal department or agency;
2. Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
3. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses unenumerated in section 1.2(a) of this form; and have not within a three-year period preceding this application had one or more public transactions (federal, state, or local) terminated for cause or default; or

B. If the applicant is unable to certify to the above statements, **SELECT** 'Unable to Certify' and provide an explanation below:

Unable to Certify

# Supporting Documents Form

## **PART 2: COOPERATIVE WORKING AGREEMENT PURPOSE AND PARTICIPANTS**

(T.A.C. §3.2009)

When a grantee intends to carry out a grant project through cooperating or participating with one or more outside organizations, the grantee must obtain authorized approval signatures on the cooperative working agreement (CWA) from each participating organization. Grantees must maintain on file a signed copy of all cooperative working agreements, and they must submit to CJD a list of each participating organization and a description of the purpose of each CWA. Cooperative working agreements do not involve an exchange of funds.

Below, list each participating organization that has entered into a CWA with the applicant, and provide a written description of the purpose of each CWA.

<b>No.</b>	<b>Participating Organization</b>	<b>Purpose of CWA</b>
1.	Family Services of El Paso	Collaboration of efforts to serve victims of crime.
2.	El Paso County Sheriff's Office	Collaboration of efforts to serve victims of crime.
3.	CASA	Collaboration of efforts to serve victims of crime.
4.	Diocesan Migrant Refugee Services	Collaboration of efforts to serve victims of crime.
5.	STARS	Collaboration of efforts to serve victims of crime.
6.	District Attorney's Office	Collaboration of efforts to serve victims of crime.
7.	El Paso County Attorney's Office	Collaboration of efforts to serve victims of crime.
8.	Center Against Family Violence	Collaboration of efforts to serve victims of crime.
9.	Advocacy Center for Children of El Paso	Collaboration of efforts to serve victims of crime.
10.	Rio Grande Council of Government	Collaboration of efforts to serve victims of crime.
11.	West Texas Commission of Supervision & Corrections Department	Collaboration of efforts to serve victims of crime.

# Supporting Documents Form

## PART 3: NON-PROFIT FINANCIAL CAPABILITY QUESTIONNAIRE

(T.A.C. §3.2023)

All nonprofit corporations applying for CJD grant funds that **have not previously received a CJD grant** must complete this questionnaire. Failure to comply may result in the denial of an award by CJD.

### 3.1 Organizational Information

1. Enter the year in which the corporation was founded:

2. Enter the date that the IRS letter granted 501(c)(3) tax exemption status:

**(Provide a copy of the IRS letter via facsimile.)**

3. Enter the Employer Identification Number assigned by the IRS:

4. Enter the charter number and the date assigned by the Texas Secretary of State:

Charter Number:

Date Assigned:

5. In the space provided below state the purpose of the organization as stated in the Articles of Incorporation or the Bylaws:

Enter text here...do not exceed the maximum allowed area within any of the text boxes.

6. If any member of the board is related to one another or an employee of the nonprofit corporation, in the space provided below explain the relationship:

### 3.2 Financial Management Information

#### A. Accounting System

The grantee organization needs to incorporate an accounting system that will track costs between direct and indirect costs (**general ledger**) as well as direct costs by project (**project ledger**). The grantee will also need to establish a **time and effort reporting system** to track personnel costs by project. This should be reported on an hourly basis, or in increments of an hour.

If the answer is 'No', to any question, explain what action will be taken to ensure accountability.

1. Is there a chart of accounts? (This is a list of a grantee organization's accounts identified by a specific number.)

SELECT One:

2. Does the accounting system include a project ledger providing for the recording of expenditures for each program by required budget cost categories?

SELECT One:

3. Is there a timekeeping system that allows for grant personnel to delineate activity and also requires the signatures of the employee and his or her supervisor?

SELECT One:

Enter text here...do not exceed the maximum allowed area within any of the text boxes.

# Supporting Documents Form

## **B. Financial Capability**

The grantee should prepare financial statements at least annually. At a minimum, current internal **balance sheet** and **income statements** are required. A **balance sheet** is a statement of financial position of a grantee disclosing the assets, liabilities, and retained earnings at a given point in time. An **income statement** is a summary of the revenue and expenses of a grantee for a specified period of time, usually for an accounting or fiscal year.

If the answer is 'No', to any question, explain the corrective action that will be taken to ensure accountability.

1. Has an independent audit been conducted of the organization? **If yes, provide a copy of the most recent audit report. If no, provide copies of the most recent Balance Sheet and Income Statement.**

SELECT One:

2. Does the organization prepare financial statements at least annually?

SELECT One:

3. According to the organization's most recent Audit or Balance Sheet, are the current total assets greater than the liabilities?

SELECT One:

## **C. Budgetary Controls**

The grantee should establish a system to track expenditures against budget and/or funded amounts.

If the answer is 'No', to any question, explain the corrective action that will be taken to ensure accountability.

1. Are there budgetary controls in effect (e.g., comparison of budget with actual expenditures on a monthly basis) to preclude drawing down grant funds in excess of:

a) Total funds authorized on the Statement of Grant Award?

SELECT One:

b) Total funds available for any budget category as stipulated on the Statement of Grant Award?

SELECT One:

## **D. Internal Controls**

The organization must safeguard cash receipts and disbursements and ensure a segregation of duties exists. For example, one person should not have control over all aspects of the accounting system, such as signing checks and making deposits.

If the answer is 'No', to any question, explain the corrective action that will be taken to ensure accountability.

1. Has the organization instituted safeguards to ensure adequate controls regarding the following:

a) Are accounting entries supported by appropriate documentation (e.g., purchase orders, vouchers, receipts, invoices)?

SELECT One:

b) Is there separation of responsibility in the receipt, payment, and recording of cash?

SELECT One:

Other:

# VOCA Performance Measures Addendum

## **A. IDENTIFYING INFORMATION**

**ENTER** the identifying information for the organization and this project. *(Note: The information will automatically prefill on each subsequent sheet within this file.)*

1. Legal name of the organization:	City of El Paso-El Paso Police Department			
2. Title of the project:	Victim Services Response Team			
3. Grant period:	From:	7/1/2006	To:	6/30/2007
4. Current grant number (If Continuation):	13590-07			

## **B. PERFORMANCE MEASURES**

All applicants will be asked to track and report standard performance measures **based only on the activity(ies) selected** in *Part 3* of the *Fund-Specific Criteria Form* within the *Application Kit - Forms* file. Please identify *both current and target level data for each required measure*. An official reporting packet containing detailed requirements will be sent from the Public Policy Research Institute (PPRI) at Texas A&M University following notification of award.

### **ELIGIBLE ACTIVITY 1: FORENSIC INTERVIEWS**

Evidentiary interviews with victims of abuse conducted by a trained professional in a friendly environment. Interviews may be videotaped and may allow for input from representatives of diverse agencies. One comprehensive interview is preferred in order to reduce the potential for further victim trauma.

<b><u>1.1 Performance Measures</u></b>	<b><u>Current Data</u></b>	<b><u>Target Data</u></b>
Number of victims interviewed.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Number of forensic medical exams.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department		
Title of the Project:	Victim Services Response Team		
Grant Period:	From:	7/1/2006	To: 6/30/2007
Current Grant Number (If Continuation):	13590-07		

**B. PERFORMANCE MEASURES (cont'd.)**

**ELIGIBLE ACTIVITY 2: GENERAL CRISIS SERVICES**

Emergency services provided to help victims during the crisis phase. Typical services include hotline, crisis counseling, phone and in-person information and/or referrals, accompaniment, advocacy for all necessary crisis procedures (medical, law enforcement, legal, shelter, etc.), transportation, financial assistance, crime victim compensation filing, etc.

<u>2.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of victims receiving crisis counseling.	1131	1187
Number of victims receiving information and/or referral (in person/by phone).	4639	4871
Number of safety plans developed.	477	501

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department			
Title of the Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

## **B. PERFORMANCE MEASURES (cont'd.)**

### ELIGIBLE ACTIVITY 3: INTERAGENCY CASE COORDINATION OR MULTI-DISCIPLINARY TEAMS

Representatives of several agencies meet regularly to discuss common cases and share information to enhance investigation, prosecution, and victim restoration. Cases are followed through in this manner to closure. Participating agencies may include Child Protective Service, law enforcement, prosecutors' offices, Sexual Assault Nurse Examiners or other medical personnel, mental health professionals, etc.

<u>3.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of multi-disciplinary meetings.	<input type="text"/>	<input type="text"/>
Number of cases reviewed by the multi-disciplinary team.	<input type="text"/>	<input type="text"/>
Number of victims interviewed for case information.	<input type="text"/>	<input type="text"/>

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department			
Title of the Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

**B. PERFORMANCE MEASURES (cont'd.)**

**ELIGIBLE ACTIVITY 4: INTERAGENCY NETWORKING**

Maintain liaison with various community entities through: monthly or quarterly networking meetings; membership on task forces and advisory boards; face-to-face meetings with agency heads; coordination with other local agencies serving victims; and emergency response team participation.

<u>4.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of networking contacts.	11	13

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department			
Title of the Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

**B. PERFORMANCE MEASURES (cont'd.)**

**ELIGIBLE ACTIVITY 5: LEGAL ADVOCACY**

Victims are identified soon after the offense, provided information on victims rights (e.g., restitution, crime victim compensation), and provided comprehensive crisis and follow-up support needed to keep them engaged in the investigation and prosecution process. May include filing temporary restraining orders, injunctions, and other protective orders, elder abuse petitions, and child abuse petitions but does not include criminal prosecution or the employment of attorneys for non-emergency purposes, such as custody disputes, civil suits, etc.

<u>5.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of victims assisted through legal process.	<input type="text"/>	<input type="text"/>
Number of victims provided information and/or referral.	<input type="text"/>	<input type="text"/>
Number of victims assisted with crime victim compensation applications.	<input type="text"/>	<input type="text"/>
Number of court accompaniments.	<input type="text"/>	<input type="text"/>
Number of child permanent placement achieved (for CASA programs).	<input type="text"/>	<input type="text"/>

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department			
Title of the Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

**B. PERFORMANCE MEASURES (cont'd.)**

**ELIGIBLE ACTIVITY 6: PROTECTIVE ORDERS**

Legal representation is provided by volunteer and/or staff attorneys to obtain protective orders and assistance may be provided by a Legal Advocate. Services may be available at non-traditional locations and times.

<u>6.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of protective order applications.	<input type="text"/>	<input type="text"/>
Number of protective orders filed.	<input type="text"/>	<input type="text"/>
Number of protective orders granted/obtained.	<input type="text"/>	<input type="text"/>

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department			
Title of the Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

**B. PERFORMANCE MEASURES (cont'd.)**

**ELIGIBLE ACTIVITY 7 - RESTORATIVE JUSTICE**

Meetings between the victim and the offender who perpetrated the crime against the victim. At a minimum grantees must consider: (a) the safety and security of the victim; (b) the benefit of therapeutic value to the victim; (c) the procedures for ensuring that participation of the victim and offender are voluntary and that everyone understands the nature of any meeting or other activity; (d) the provision of appropriate support and accompaniment for the victim; (e) appropriate debriefing opportunities for the victim after a meeting; (f) the credentials of the facilitators; and (g) the opportunity for a crime victim to withdraw from the process at any time.

<u>7.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of victims participating in restorative justice efforts.	[ ]	[ ]
Number of restorative justice efforts.	[ ]	[ ]

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department			
Title of the Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

**B. PERFORMANCE MEASURES (cont'd.)**

**ELIGIBLE ACTIVITY 8: SHELTER PROGRAMS**

Shelter programs provide a safe place for victims and their children. Other services include food, clothing, transportation, and service referrals.

<u>8.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of victims who requested shelter.	<input type="text"/>	<input type="text"/>
Number of victims provided shelter.	<input type="text"/>	<input type="text"/>
Number average length of shelter stay per victim.	<input type="text"/>	<input type="text"/>

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department			
Title of the Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

**B. PERFORMANCE MEASURES (cont'd.)**

**ELIGIBLE ACTIVITY 9: SUPPORT GROUPS**

Regular meetings of victims suffering similar types of traumas providing mutual peer support.

<u>9.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of victims participating in support groups.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Number of support group sessions held.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department			
Title of the Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

**B. PERFORMANCE MEASURES (cont'd.)**

**ELIGIBLE ACTIVITY 10 - THERAPY/COUNSELING**

Individual, group, and family therapy/counseling provided by licensed professional therapists/counselor beyond the crisis period. May target primary or secondary victims and may include specialized types of therapy such as animal therapy, play therapy, art therapy, etc.

<u>10.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of victims receiving counseling/therapy.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Number of counseling hours.	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

# VOCA Performance Measures Addendum

Legal Name of the Organization:	City of El Paso-El Paso Police Department			
Title of the Project:	Victim Services Response Team			
Grant Period:	From:	7/1/2006	To:	6/30/2007
Current Grant Number (If Continuation):	13590-07			

## **B. PERFORMANCE MEASURES (cont'd.)**

### **ELIGIBLE ACTIVITY 11: VOLUNTEER TRAINING, RECRUITMENT, AND SUPERVISION**

Recruit and train volunteers. Volunteers' duties commonly include accompaniment, case management, advocacy, crime scene response, public awareness, clerical support, crisis intervention, hotline, crime victim compensation claims processing, etc.

<u>11.1 Performance Measures</u>	<u>Current Data</u>	<u>Target Data</u>
Number of volunteers recruited.	48	50
Number of volunteers trained.	42	44
Number of active volunteers.	104	109