FY23 State Domestic Violence Bridge Funding Quarterly Progress Report

Program Name *		
Name of indiv	idual submitting report *	
First Name	Last Name	
Email *		
example@example	e.com	
Date of submi	ission *	
Month Day	Year	
Reporting peri	iod *	

POPULATION DEMOGRAPHICS

This section is to be completed each reporting period.

1. Total number of individuals who received services during the reporting period.

Instructions: Count all individuals served by your organization with the use of VOCA plus match funds during the reporting period. This number should be an unduplicated count of people served during a single reporting period, regardless of the number of services they received or victimization types with which they presented.

Total number of individuals receiving services *

2. Total number of anonymous contacts received during the reporting period.

Instructions: Count all anonymous contacts received by your organization through a hotline, online chat, or other service where the individuality of each contact cannot be established. If your organization did not have any anonymous contacts, enter zero (0).

Total number of anonymous contacts *

3. Number of NEW individuals who received services from your agency for the first time during the reporting period.

Instructions: Report the number of NEW individuals served by your organization with the use of VOCA plus match funds for the first time during the reporting period. This number should be an unduplicated count of NEW clients served during a single reporting period, regardless of the number of services they received or victimization types with which they presented. For the first reporting period of your subaward, all individuals should be counted as new.

Total number of NEW individuals receiving services *

4. Demographics (for NEW individuals identified in Question 3)

instructions: Count each NEW individual in only one race/ethnicity type as self-reported. Individuals who self-report in more than one race and/or ethnicity category should be counted in the "Multiple Races" category. The total number of individuals in each demographic category should equal the number of NEW individuals reported in Question 3.

All "0" entries must represent a true value of zero.

If no data is collected for a **category**, enter"NT" in that category to mark it as Not Tracked. This means that the subgrantee is not yet able to submit data in this category due to the need to update its data collection system, but that efforts are underway to track data as requested. Then, in the "Not Tracked" category provided, report the number of individuals whose demographic data was not tracked.

If no data is collected for an **individual**, count that individual in the **Not Reported** category. This means that the subgrantee collects this data, but it was not provided by the person completing the intake form.

A. RACE/ETHNICITY (self-reported)

A1. American Indian/Alaska Native American Indian/Alaska Native A2. Asian Asian A3. Black/African American Black/African American A4. Hispanic or Latino Hispanic or Latino A5. Native Hawaiian/Pacific Islander Native Hawaiian or Other Pacific Islander A6. White Non-Latino White Non-Latino/Caucasian A7. Other Some Other Race **A8. Multiple Races** Multiple Races

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A9. Not Reported

Not Reported

A10. Not Tracked Not Tracked **B. GENDER IDENTITY** (self-reported) B1. Male Male **B2. Female** Female **B3. Other** Other (brief description below) If 'other' is reported, a brief description is required: **B4. Not Reported** Not Reported **B5. Not Tracked** Not Tracked

C. AGE (self-reported)
C1. Age 0-12
0-12
C2. Age 13-17
13-17
C3. Age 18-24
18-24
C4. Age 25-59
25-59
C5. Age 60+
60 and older
C6. Not Reported
Not Reported
C7. Not Tracked
Not Tracked
5. Types of Victimizations (for ALL individuals identified in Questions 1 and 2)
Enter the count of individuals who received services based on each presenting victimization type during the reporting period.

The total must equal the number(s) reported in questions 1 and questions 2. However, the total can be greater than the number(s) reported in question 1 and question 2 if there is a victim or victims that

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presented with more than one type of victimization

An individual MAY be counted in more than one victimization type.

An individual MAY NOT be counted more than once within the same victimization type.

A. Individuals who received services by victimization type:

Number of Individuals who received services based on the presenting victimization during the reporting period

Adult Physical Assault (Includes Aggravated and Simple Assault)

Adult Sexual Assault

Adults Sexually Abused/Assaulted as

Children

Arson

Bullying (Verbal, Cyber, or Physical)

Burglary

Child Physical Abuse or Neglect

Child Pornography

Child Sexual Abuse/Assault

Domestic and/or Family Violence

DUI/DWI Incidents

Elder Abuse or Neglect

Hate Crime: Racial/Religious/Gender/Sexual

Orientation/Other (please explain below)

Human Trafficking: Labor

Human Trafficking: Sex

Identity Theft/Fraud/Financial Crime

Kidnapping (non-custodial)

Kidnapping (custodial)

Mass Violence (Domestic/International)

Other Vehicular Victimization (e.g. Hit & Run)
Robbery
Stalking/Harassment
Survivors of Homicide Victims
Teen Dating Victimization
Terrorism (Domestic/International)
Other
Hate Crime. Please explain:
Other (Victimization Type) Please explain:
B. Individuals presented with more than one type of victimization during reporting period?
Of the individuals who received services, how many presented with more than one type of victimization during the reporting period?
Individuals with more than one type of victimization
C. Special Classifications
Special Classifications of individuals (Enter the number of individuals who identify in one or more of these categories)
Deaf/Hard of Hearing
Homeless

Immigranto/Pofugogo/Acylum
Immigrants/Refugees/Asylum Seekers
LGBTQ
Veterans
Victims with Disabilities:
Cognitive/Physical/Mental
Victims with Limited English
Proficiency
Other
If Other, please explain:
DIRECT SERVICES
6. Number of individuals assisted with a victim compensation application during the reporting period:
Count the number of individuals who received assistance with completing a victim compensation application during the reporting period, even if they did not submit the application. Simply providing an individual with an application does NOT qualify as assistance.
Individuals who received a cristomer commission victims commences on application of *
Individuals who received assistance completing victim compensation applications: *
7. Select the types of services provided by your organization during the reporting period:

- A. Information and Referral
- B. Personal Advocacy/Accompaniment
- C. Emotional Support or Safety Services
- D. Shelter/Housing Services

8. Total number of individuals who received services by service type AND number of times each service was provided during the reporting period:

Instructions: For each category(items A, B, C, D, and E), enter the **number of clients** who received services from your agency during the reporting period. For each subcategory within a category (e.g., items A1, A2, A3, and A4), enter **the number of times that service was provided** during the reporting period. Zero is a valid response.

Because some clients may receive multiple services, the total **number of times that services were provided** within a category may be greater than the **number of clients** who received those services.

A. INFORMATION & REFERRAL

Enter the number of individuals who received services in Information and Referral: *

Enter the number of times services were provided in each subcategory: The total for subcategories (A1-A4) needs to be equal to or it may be greater than the overall number of individuals receiving this type of service.

- A2. Information about victims' rights, how to obtain notifications, etc. *
- A1. Information about the criminal justice process *
- A3. Referral to other victim service programs *

B. PERSONAL ADVOCACY/ACCOMPANIMENT

A4. Referral to other services, supports, and resources (includes legal, medical, faith-based organizations, address confidentiality programs, etc.) *

Enter the number of individuals who received services in Personal Advocacy/Accompaniment:
Enter the number of times services were provided in each subcategory: the total for subcategories (B1-B10) needs to be equal to or may be greater than the overall number of individuals receiving this type o service.
B3. Law enforcement interview advocacy/ accompaniment *
B1. Victim advocacy/ accompaniment to emergency medical care *
B2. Victim advocacy/ accompaniment to medical forensic exam *
B4. Individual advocacy (e.g. assistance in applying for public benefits, return of personal property or effects) *
B5. Performance of medical or nonmedical forensic exam or interview or medical evidence collection *
B6. Immigration assistance (e.g. special visas, continued presence application, and other immigration relief) *
B7. Intervention with employer, creditor, landlord, or academic institution *

C. EMOTIONAL SUPPORT OR SAFETY SERVICES
B9. Transportation assistance (includes coordination of services) *
B10. Interpreter services *
Enter the number of individuals who received services in Emotional Support/Safety Services: *
Enter the number of times services were provided in each subcategory: The total for subcategories (C1-C7) needs to be equal to or may be greater than the overall number of individuals receiving this type of service.
C4. Individual counseling *
C1. Crisis Intervention (in-person, includes safety planning, etc.) *
C2. Hotline/crisis line counseling *
C3. On-scene crisis response (e.g. community crisis response) *

B8. Child or dependent care assistance (includes coordination of services) *

D. SHELTER/HOUSING SERVICES

C5. Support Groups (facilitated or peer) *
C6. Other therapy (traditional, cultural, or alternative healing; art, writing, or play therapy. etc.) *
C7. Emergency financial assistance *
Enter the number of individuals who received services in Shelter/Housing: *
E. CRIMINAL/CIVIL JUSTICE SYSTEM ASSISTANCE
Enter the number of individuals who received services in Civil/Criminal Justice Assistance: *
Enter the number of times services were provided in each subcategory: The total for subcategories (D1-D3) needs to be equal to or may be greater than the overall number of individuals receiving this type of service.
D1. Emergency shelter or safe house *
D2. Transitional housing *
D3. Relocation assistance (includes assistance with obtaining housing) *

Enter the number of times services were provided in each subcategory: The total for subcategories (E1-E11) needs to be equal to or may be greater than the overall number of individuals receiving this type of service.

E6. Other emergency justice-related assistance *
E1. Notification of criminal justice events *
E2. Victim impact statement assistance *
E3. Assistance with restitution *
E4. Civil legal assistance in obtaining protection or restraining order *
E5. Civil legal assistance with family law issues *
E7. Immigration assistance *
ARPA Required Questions
Number of individuals enrolled in sectoral job training programs
Number of individuals completing job training programs

Number of youth participating in summer youth employment programs
E8. Prosecution interview advocacy/ accompaniment *
E9. Law enforcement interview advocacy/ accompaniment *
E10. Criminal advocacy/ accompaniment *
E11. Other legal advice and/or counsel *
13. Number of surveys distributed (includes, but not limited to, those distributed by hand, mail or electronic methods)
Subgrantee Annually Reported Questions
Only required for the July-Sept Quarterly Report
15. Please discuss some of the challenged your victim assistance program faced during the course of the federal fiscal year.
11. Number of requests for services that were unmet because of organization capacity issues
Name and Title

Please Explain:
12. Does your organization formally survey clients for feedback on services recieved? Yes No (go to question #14)
14. Number of surveys completed.
16. Please describe some of the services that victims needed but could not be provided. What were the challenges that prevented those services from being provided?