

**Uniform Notice of Funding Opportunity**  
Victims of Crime Act: Trauma Recovery Centers

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**Uniform Notice of Funding Opportunity**  
 Victims of Crime Act: Trauma Recovery Centers  
*November 1, 2017*

	<b>Data Field</b>	
1.	Awarding Agency Name:	Illinois Criminal Justice Information Authority
2.	Agency Contact:	Reshma Desai, Strategic Policy Advisor Illinois Criminal Justice Information Authority 300 West Adams, Suite 200 Chicago, IL 60606 <a href="mailto:cja.vocagrantsunit@illinois.gov">cja.vocagrantsunit@illinois.gov</a> 312-814-1708
3.	Announcement Type:	<input checked="" type="checkbox"/> Initial announcement <input type="checkbox"/> Modification of a previous announcement
4.	Type of Assistance Instrument:	Grant
5.	Funding Opportunity Number:	1474-378
6.	Funding Opportunity Title:	Victims of Crime Act: Trauma Recovery Center
7.	CSFA Number:	546-00-1474
8.	CSFA Popular Name:	VOCA FFY16
9.	CFDA Number(s):	16.575
10.	Anticipated Number of Awards:	3-4
11.	Estimated Total Program Funding:	\$4,400,000
12.	Award Range	Up to \$1,100,000 per award
13.	Source of Funding:	<input checked="" type="checkbox"/> Federal or Federal pass-through <input type="checkbox"/> State <input type="checkbox"/> Private / other funding Mark all that apply
14.	Cost Sharing or Matching Requirement:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Indirect Costs Allowed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Restrictions on Indirect Costs	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, provide the citation governing the restriction:

16.	Posted Date:	November 1, 2017
17.	Closing Date for Applications:	11:59 p.m., January 10, 2018
18.	Technical Assistance Session:	<p>Session Offered: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Session Mandatory: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Applicants must view and certify that that they have watched the recorded webinar which will be available beginning at <b>1:30 p.m., November 1, 2017.</b></p> <p>View the webinar at:  <a href="https://grants.icjia.cloud/">https://grants.icjia.cloud/</a></p>

## A. Program Description

The Illinois Criminal Justice Information Authority (ICJIA) is a state agency dedicated to improving the administration of criminal justice. ICJIA brings together key leaders from the justice system and the public to identify critical issues facing the criminal justice system in Illinois, and to propose and evaluate policies, programs, and legislation that address those issues. The statutory responsibilities of ICJIA fit into four areas: grants administration; research and analysis; policy and planning; and information systems and technology.

The federal Victims of Crime Act (VOCA) was passed in 1984 for the purpose of compensating and assisting victims of crime and providing funds for training and technical assistance.

ICJIA is the state agency charged with the administration of the Illinois' Victims of Crime Act Victim Assistance Formula Grant Program. This program is supported by fines and penalties levied against criminals convicted of federal crimes and allocated to states by formula by the Office for Victims of Crime of the U.S. Department of Justice. In federal fiscal year 2016, Illinois received a VOCA award of \$87.1 million.

VOCA grants must support the provision of direct services to victims of crime. States are required to allocate a minimum of 10 percent of funds received for services to each of the following: victims of sexual assault, domestic violence, child abuse, and underserved victims of violent crime. **VOCA funds may not be used to supplant or replace state and local funds that would otherwise be available for crime victim services and must be used to develop new projects or expand existing projects.**

For more information on the VOCA Program please visit:  
<http://ojp.gov/ovc/about/victimsfund.html>.

ICJIA recently completed a statewide assessment of victim services in Illinois. The report was presented to the Ad Hoc Victim Services Committee for consultation and coordination with other state agencies. The final report's recommendations were approved by the ICJIA Board in January 2017 and form the funding priorities for ICJIA over the next three years. These 12 priorities outline a comprehensive plan to address victims' needs in Illinois. This funding opportunity addresses key funding priorities related to services for underserved groups, the need for longer-term mental health services, and the importance of trauma-informed and trauma-focused services and programs. Additionally, the trauma recovery center (TRC) model is an evidence-informed model, addressing our priority to fund program models that have been supported by research. Please see the following link to access the report and recommendations: <http://www.icjia.state.il.us/articles/ad-hoc-victim-services-committee-research-report>

## *Authorizing Statutes*

The Victims of Crime Act of 1984 established the Crime Victims Fund (34 USC 20101(c)) for the purpose of creating a special mandatory spending account dedicated to helping victims of all types of crimes. Programs authorized by the Victims of Crime Act are:

- Children’s Justice Act grants.
- U.S. Attorney’s victim/witness coordinators.
- F.B.I victim assistance specialists.
- Federal victim notification system.
- OVC discretionary grants.
- State compensation formula grants.
- State victim assistance formula grants.
- Antiterrorism Emergency Reserve.

The Illinois Criminal Justice Information Act (20 ILCS 3930/7(k)) established ICJIA as the agency “to apply for, receive, establish priorities for, allocate, disburse and spend grants of funds that are made available...from the United States pursuant to the federal Crime Control Act of 1973, as amended, and similar federal legislation, and to enter into agreements with the United States government to further the purposes of this Act, or as may be required as a condition of obtaining federal funds.”

In addition, “distribution of federal funds through the Victims of Crime Act of 1984 by the Illinois Criminal Justice Information Authority is authorized by 20 Ill. Admin. Code 1520.40, stating in pertinent part that “[ICJIA] will annually review Section 1404 of the Victims of Crime Act of 1984 (P.L. 98-473, effective October 12, 1984) and based on the requirements of Section 1404(a) and (b), the need for services to victims and the services available to address that need, as evidenced by oral and written comment and testimony received at public meetings conducted pursuant to the Open Meetings Act (Ill. Rev. Stat. 1983, ch. 102, par. 41 et seq.), select program priorities for each federal fiscal year.”

The agency must comply with all applicable provisions of state and federal laws and regulations pertaining to nondiscrimination, sexual harassment, and equal employment opportunity, including, but not limited to the Illinois Human Rights Act (775 ILCS 5/1-101 et seq.), Public Works Employment Discrimination Act (775 ILCS 10/1 et seq), United States Civil Rights Act of 1964 ( as amended) (42 USC 2000a-and 2000H-6), Section 504 of the Rehabilitation Act of 1973 (29 USC 794), Americans with Disabilities Act of 1990 (42 USC 12101 et seq.), and Age Discrimination Act (42 USC 6101 et seq.).

Public Act 99-938 amended The Illinois Criminal Justice Information Act, establishing ICJIA as the agency to assist with implementing comprehensive trauma recovery services for violent crime victims in underserved communities. ICJIA shall “[c]onduct strategic planning and provide technical assistance to implement comprehensive trauma recovery services for violent crime victims in underserved communities with high levels of violent

crime, with the goal of providing a safe, community-based, culturally competent environment in which to access services necessary to facilitate recovery from the effects of chronic and repeat exposure to trauma. Services may including, but are not limited to, behavioral health treatment, financial recovery, family support and relocation assistance, and support in navigating the legal system”. Pub. Act 99-938 (eff. Jan. 1, 2018) (adding 20 ILCS 3930/7(w)).

## ***Background***

The purpose of this Notice of Funding Opportunity (NOFO) is to support comprehensive direct services for historically underserved or marginalized victims of violent crime and their families through implementation of a trauma recovery center (TRC) model. This NOFO borrows greatly from the University of California-San Francisco’s Trauma Recovery Center model. It is highly recommended that potential applicants review the program manual for background information: <http://traumarecoverycenter.org/trc-manual/>.

## **Problem Statement**

Violent crime victims have a significant unmet need for mental health treatment and psychological services, including specialized services that general mental health treatment settings are typically ill- equipped to address. Trauma and violence often drive victims into isolation and create a reluctance to engage in treatment. Many victims of crime are unlikely to seek out mental health treatment and therefore do not receive any post-trauma mental health services. Vulnerable populations also face substantial barriers to treatment access, in particular young people of color, the homeless, LGBTQ people, the chronically mentally ill, people with substance use disorders, non-English speaking people, and those living in poverty.<sup>1</sup> ICJIA completed a needs assessment that resonated with these barriers to treatment as both underserved victims and providers highlighted difficulties in accessing services and a lack of services that are sensitive to the needs of vulnerable victims.<sup>2,3</sup>

For the purposes of this funding opportunity, the following definitions will apply:

**Trauma Recovery Center (TRC) Model:** A comprehensive service delivery model providing coordinated clinical and case management services for adult and/or minors

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<sup>1</sup> Wiggall, S. & Boccillari, A. (2017). The UC San Francisco trauma recovery center manual: A Model for removing barriers to care and transforming services for survivors of violent crime. Retrieved from: <http://traumarecoverycenter.org/wp-content/uploads/2017/05/TRC-Manual-v1-5-10-17.pdf>

<sup>2</sup> Aeffect, Inc. (2017). *2016 Victim Needs Assessment*. Chicago, IL: Illinois Criminal Justice Information Authority. Retrieved from

[http://www.icjia.state.il.us/assets/articles/2016\\_ICJIA\\_Victim\\_Needs\\_Assessment\\_Summary\\_Report.pdf](http://www.icjia.state.il.us/assets/articles/2016_ICJIA_Victim_Needs_Assessment_Summary_Report.pdf)

<sup>3</sup> Houston-Kolnik, J., Vasquez, A., Alderden, M., & Hiselman, J. (2017). *Ad Hoc Victim Services Committee Research Report*. Chicago, IL: Illinois Criminal Justice Information Authority. Retrieved from <http://www.icjia.state.il.us/articles/ad-hoc-victim-services-committee-research-report>

victims of violent crime and their families who typically do not access services due to individual and cultural barriers to help seeking.

**Historically underserved or marginalized victims:** Historically underserved or marginalized victims might not seek services for a variety of reasons, including stigma, stereotypes, and social norms that deter help seeking; a lack of knowledge on service availability, methods of access, and eligibility; concerns or past experiences with provider insensitivity to disabilities or cultural beliefs; and a lack of positive experience with the criminal justice system, including law enforcement, which is a frequent access point to victim services. Historically underserved or marginalized victims who may benefit from the low-barrier services that the TRC aims to provide may include individual who are homeless, individuals who are chronically mentally ill, immigrants and refugees, individuals who are disabled, people with severe trauma-related symptoms, and individuals of diverse ethnicities/origins.<sup>4</sup>

**Direct services:** Efforts that respond to the emotional, psychological, and physical needs of crime victims; assist victims to stabilize their lives after victimization; assist victims to understand and participate in the criminal justice system; or provide victims of crime with a measure of safety.

### **Trauma Recovery Center Model Background**

The TRC model addresses both the psychological and tangible needs of violent crime victims and their families, particularly those in underserved groups, through coordinated and comprehensive clinical case-management, including outreach and services and the provision of trauma-informed, evidence-based mental health services. Clinical case management and mental health services are provided through a multi-disciplinary team of trauma clinicians that may include psychiatrists, psychologists, or social workers. TRCs are designed to address the needs of crime victims who typically do not access services due to individual and cultural barriers to help seeking.

This model uses early and assertive outreach and coordinated clinical case management to provide services to victims whose trauma needs for both services and outreach require a greater level of engagement than traditional service models.<sup>5</sup> In this model, clinicians provide both clinical intervention and case management to actively engage with victims to work toward client-defined priorities, provide mental health interventions and advocacy services in tandem, and simultaneously address the multifaceted social and tangible needs of victims. The model addresses survivor needs by offering access to a variety of resources, allowing for tailored services based on individual needs.

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<sup>4</sup> Programs should be designed to target this population, but victims outside of these parameters are eligible for services as well.

<sup>5</sup> Kelly, V. G., Merrill, G. S., Shumway, M., Alvidrez, J., & Boccellari, A. (2010). Outreach, engagement, and practical assistance: Essential aspects of PTSD care for urban victims of violent crime. *Trauma, Violence, & Abuse, 11*, 144-156.

The first TRC was established in 2001 at Zuckerberg San Francisco General Hospital/University of California in San Francisco, Calif., as a four-year demonstration project to address barriers to accessing support services for victims of violent crime and explore how funding and subsequent services could better reach underserved, urban populations. The model of care was developed to provide comprehensive, high quality, effective mental health services to victims of violent crime from underserved populations, many of whom faced insurmountable barriers to connecting with support services after victimization. Since the program's inception, research has shown the model to be both clinically and cost effective.<sup>6</sup> Through a randomized control trial, researchers explored how access to comprehensive care from the TRC impacted use of victim compensation, state monies for crime victims and their families, to reduce the financial burden on victims of violent crime. The researchers found victims who participated in the comprehensive TRC model were more likely to apply for crime victim compensation than victims receiving usual care. This resulted in a higher number of younger, less educated, or homeless individuals applying for compensation. Other research around the use of active outreach and engagement within TRCs suggests that such practices, specifically when carried out in settings beyond victim service agencies where victims may be treated for injuries, such as hospitals, are particularly effective to identify and assist victims of violent crime who traditionally do not seek services.<sup>7</sup>

### ***Program Design Requirements***

The purpose of this Notice of Funding Opportunity is to support comprehensive direct services for historically underserved or marginalized victims of violent crime and their families through the implementation of a trauma recovery center (TRC) model. Eligible applicants include public or non-profit hospitals with a Level 1 Adult or Pediatric Trauma Center designation, located in Illinois. See Eligible Applicants section for full details.

A list of hospitals with Level 1 Trauma Center designations (per the Illinois Department of Public Health) is available at this link: <http://www.dph.illinois.gov/topics-services/emergency-preparedness-response/ems/trauma-program/centersByReg>

It is highly recommended that potential applicants review the UC San Francisco Trauma Recovery Center Manual for background information.

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<sup>6</sup> Wiggall, S. & Boccillari, A. (2017). The UC San Francisco trauma recovery center manual: A Model for removing barriers to care and transforming services for survivors of violent crime. Retrieved from: <http://traumarecoverycenter.org/wp-content/uploads/2017/05/TRC-Manual-v1-5-10-17.pdf>

<sup>7</sup> Alvidrez, J., Shumway, M., Boccillari, A., Green, J. D., Kelly, V., & Merrill, G. (2008). Reduction of state victim compensation disparities in disadvantaged crime victims through active outreach and assistance: A randomized trial. *American Journal of Public Health*, 98, 882-888.



Grant awards must be spent over a period of 15 months, which includes up to 3 months of coordination and a minimum of 12 months of direct service provision. Additional funding to extend the grant period will depend on both the availability of funds and project performance during the grant period.

The deadline for all applications is January 10, 2018.  
Requirements of this funding opportunity are outlined below.

### **Core Elements<sup>8</sup>**

Applicants must propose to serve victims of violent crime who are historically underserved or marginalized adults and/or minors. Services to be provided by the TRC are as follows:

1. **Assertive outreach and engagement with underserved populations**  
Conduct outreach and provide services to victims of violent crime who are historically underserved or marginalized, including, but not limited to, survivors who: are homeless, are chronically mentally ill, are members of immigrant and refugee groups, are disabled, have severe trauma-related symptoms or complex psychological issues, or are of diverse ethnicity or origin, and minor victims, including minors who have had contact with the child welfare or justice system.
2. **Inclusive treatment of victims of all types of violent crimes**  
Serve victims of a wide range of violent crimes, including, but not limited to, victims of sexual assault, domestic violence, vehicular assault, human trafficking, and aggravated battery. In some cases family members may also be served. For example, in cases of homicide and in cases where the victim's experience and/or healing directly and profoundly impacts the emotional or psychological health of family member(s).
3. **Comprehensive mental health and support services**  
Mental health and support services are comprehensive, structured, and evidence-based. Comprehensive services may include crisis intervention, individual and group treatment, medication management, outpatient substance use disorder counseling, case management, and assertive outreach. Methods of delivery shall be flexible, increase service access, and remove barriers by providing services providing services in locations that meet the victims' needs: on site, in the home, in the community, or other locations.
4. **Multidisciplinary staff team**  
Staff shall consist of a multidisciplinary staff team that must include, at minimum, Program Director, Program Coordinator, clinical staff (i.e., licensed psychiatrists,

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<sup>8</sup> Wiggall, S. & Boccillari, A. (2017). The UC San Francisco trauma recovery center manual: A Model for removing barriers to care and transforming services for survivors of violent crime, 98. Retrieved from: <http://traumarecoverycenter.org/wp-content/uploads/2017/05/TRC-Manual-v1-5-10-17.pdf>

psychologists, social workers, and marriage and family therapists); and a project evaluator. The TRC clinician staff are licensed clinicians or, in some cases, a closely supervised clinician engaged in the applicable licensure process. Clinical supervision is provided to staff on a regular, ongoing basis to ensure the highest quality of care and to help staff constructively manage the vicarious trauma they experience as service providers to victims of violent crime.

5. **Coordinated care tailored to individuals needs**

Psychotherapy and case management are coordinated through a single point of contact for the victim, with support from an integrated multi-disciplinary trauma treatment team. All treatment teams shall collaboratively develop treatment plans in order to achieve positive outcomes for clients.

6. **Clinical case management**

Services shall encompass assertive case management, including but not limited to: accompanying a client to court proceedings, medical appointments resulting from the victimization, or other victimization-related appointments as needed; assistance with victim compensation applications or the filing of police reports, assistance with obtaining safe housing and financial entitlements, linkages to medical care, providing advocacy regarding employment, and working as a liaison to other community agencies, law enforcement, or other supportive service providers as needed.

7. **Inclusive treatment of clients with complex problems**

Clients are not excluded from services solely on the basis of emotional or behavioral issues that result from trauma, including but not limited to: substance use problems, low initial motivation, or high levels of anxiety.

8. **Use of trauma-informed, evidence-based practices**

TRC mental health clinicians shall adhere to established, evidence-based practices, including but not limited to: Motivational Interviewing, Seeking Safety, Cognitive-Behavioral Therapy, and Dialectical Behavioral and Cognitive Processing Therapy.

9. **Goal driven**

The primary goals of TRC services are to decrease psychological distress, minimize long-term disability, improve overall quality of life, reduce the risk of future victimization, and promote post-traumatic growth.

10. **Accountable services**

Provide holistic and accountable services that ensure treatment shall be provided for up to 16 sessions. Mechanisms to extend treatment may be integrated for those with ongoing problems and a primary focus on trauma; treatment may be extended after special consideration from the clinical supervisor. Extension beyond 32 sessions

requires approval by the multi-disciplinary team (MDT) that considers the client's progress in treatment and remaining community need for services.

## **Program Structure**

### **1. Trauma Recovery Center Coordination and Implementation Group**

Applicants must identify a TRC Coordination and Implementation group (TRC Coordination Group) to preside over an initial coordination process up to 3 months in length. The TRC Coordination Group will convene at least quarterly thereafter during the grant period to oversee the implementation of the TRC model and foster intra and inter-agency collaboration to ensure efficient and effective victim services.

Grant awards must be spent over a period of 15 months, which includes at most three months of coordination and at least 12 months of direct service provision.

The TRC Coordination Group may take the form of a board, committee, coalition, or community task force depending on the need and capacity of the applicant agency and proposed TRC model. The Coordination Group may include the TRC program director, TRC program coordinator, senior representation from the hospitals' emergency room, trauma and mental health units, and community-based agencies.

The TRC Coordination Group will be responsible for coordinating victim services by drafting protocols to ensure that victims are identified and served in a trauma-informed, multi-disciplinary, collaborative approach both within and beyond the hospital setting. Protocols must include the process by which identified referral sources shall make referrals to the TRC and how these and other agencies will work collaboratively with the TRC to address victims' needs.

The draft TRC protocol will be submitted to ICJIA for review by April 30, 2018. ICJIA will present criteria for the protocol during the Coordination period. The final protocol must be approved by ICJIA before direct service provision can begin, which will be no later than July 1, 2018. These tasks and deadlines should be reflected in the Proposal Narrative Implementation Schedule.

Allowable costs during the coordination period are limited to the TRC program director and program coordinator's time working on the protocols and attending required ICJIA meetings, hiring and training of mental health clinicians, and associated travel.

During the coordination period, ICJIA will host three mandatory in-person meetings.

### **2. Supervisors and Direct Service Staff**

The staffing plan is required to ensure essential program functions while allowing flexibility to fit the applicant's organizational structure. Position titles can be changed to match agency structure. Staff shall consist of a multidisciplinary team(s) that includes at minimum:

- Program director: This position oversees the entire program, manages relationships with other service providers, and can conduct trainings and provide supervision of direct service providers. This position must have a clinical orientation. VOCA funds can only be used for the direct service staff supervision, training, and inter-agency coordination.
- Program coordinator: This position manages the day-to-day operations, supervises direct service staff and services, fosters inter-agency coordination, and conducts trainings.
- Clinical staff: These positions may include psychologists, social workers, and marriage and family therapists. Clinical staff are master's-level licensed clinicians or pursuing licensure. Team members have expertise or will acquire the necessary training to serve the target population of the TRC program.
- Psychiatrist for medication management.
- Project Evaluator: This position manages programmatic documentation, reports and statistics, assessment completion, and monitors services to ensure the TRC Core Elements are followed.

Additionally, applicants may include a position(s) for a peer supporter. These non-clinical positions can assist in the identification, engagement, and facilitation of community resources. This position should not replace clinical staff and must be integrated into the team structure.

See San Francisco's TRC Program Model for an example of staffing structure and proposed trainings. Staff at the TRC should be equipped and trained in culturally competent services to the underserved and marginalized clients their program will serve.

### **3. Training**

Training, both initial and ongoing, is a critical component of any TRC model. Within the program narrative, applicants should outline the training needed for program staff (e.g., training in evidence-based treatment modalities), outlining which program staff are currently trained and/or identify the trainings that will be sought for program staff who do not possess core skills or competencies or who have yet to be hired. In addition, applicants should discuss how clinical supervision will be provided to staff to ensure the highest quality of care, including how self-care will be incorporated, and opportunities for professional development.

During the coordination period, ICJIA will host three mandatory in-person meetings in order to finalize the assessment tools, protocols, and database system.

#### 4. Direct Services

Specific clinical services provided by direct service staff shall include the following: client assessment and service planning (up to 16 session treatment episodes with an extension to 32 weeks when needed); individualized psychotherapy; outpatient substance use disorder counseling; case management; legal advocacy; group psychotherapy and support groups; medication management; services provided by partners; and referrals to partner agencies, particularly at the close of TRC services.

**Clinical Case Management:** General case management is a client-centered strategy to improve coordination and continuity of care, in particular for persons who have multiple needs.<sup>9</sup> Various models of case management have been proven effective in the treatment of people with chronic mental illness, substance use disorders, or both.<sup>10</sup> The clinical case management intervention embedded in the TRC model provides both the typical and active case management support of coordinating all the resources a client might need while also simultaneously using therapeutic interventions and delivering and coordinating services.<sup>11</sup> Clinical case management takes into account that many clients have competing priorities, and will benefit most when practical assistance and mental health interventions are simultaneously provided. In contrast, simply providing contact information for a community service is not enough for clients who have experienced trauma and have an array of psychosocial needs.

#### Evidence-Based Programs and Trauma-Informed Practices

The TRC model utilizes evidence-based practices (EBPs) developed through research and with implementation shown to improve client outcomes.<sup>12</sup> Applicants must clearly outline the integration of EBPs and trauma-informed practices into the proposed program.

Examples of evidence-based approaches and specific interventions appropriate for a TRC program include:<sup>13</sup>

- **Using a culturally sensitive trauma-informed approach.**

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<sup>9</sup> Moxley, D. P. (1989). *Practice of Case Management* (Vol. 58). Sage.

<sup>10</sup> Ziguras, S. J., & Stuart, G. W. (2000). A meta-analysis of the effectiveness of mental health case management over 20 years. *Psychiatric services*, 51(11), 1410-1421.

<sup>11</sup> Wiggall, S. & Boccellari, A. (2017). The UC San Francisco trauma recovery center manual: A Model for removing barriers to care and transforming services for survivors of violent crime, 98. Retrieved from: <http://traumarecoverycenter.org/wp-content/uploads/2017/05/TRC-Manual-v1-5-10-17.pdf>

<sup>12</sup> Sackett, D.L., Rosenberg, W.M., Gray, J.A. Haynes, R.B., & Richardson, W.S. (1996). Evidence based medicine: What it is and what it isn't. *British Medical Journal*, 312, 7-12.

<sup>13</sup> Wiggall, S. & Boccellari, A. (2017). The UC San Francisco trauma recovery center manual: A Model for removing barriers to care and transforming services for survivors of violent crime, 9. Retrieved from: <http://traumarecoverycenter.org/wp-content/uploads/2017/05/TRC-Manual-v1-5-10-17.pdf>

In this approach, clinicians are attuned to the client's identity, history, and how beliefs about psychotherapy may impact treatment engagement. Stigma about having a mental health issue, about being a victim, about receiving mental health services, or about taking psychotropic medication are culturally-mediated beliefs that should be recognized and addressed early in treatment.<sup>14</sup>

- **Addressing threats to safety in the client's environment and behavior.**  
In this approach, clinicians address a client's safety concerns due to a risk of re-victimization and severe psychiatric symptoms by addressing continuous traumatic stress. The clinician focuses on helping the client reduce current threats to safety and well-being by providing case management assistance (e.g., moving to a safe location, obtaining a restraining order, making a police report) and safety planning.<sup>15</sup>
- **Addressing risk due to problems with regulation of emotions and impulses.**  
In this approach, clinicians focus on therapeutic interventions on client emotions, reactions that put them at risk (for re-victimization, self-harm).<sup>16</sup> Example interventions include dialectical behavior therapy (DBT), Skills training in affective and interpersonal regulation (STAIR), Seeking Safety and motivational interviewing<sup>17</sup>

Applicants must describe how their program will implement a model that is trauma-informed in policy and practice. Some examples of trauma informed models include the Sanctuary Model<sup>18</sup> and the U.S. Substance Abuse and Mental Health Services Administration's (SAMHSA) Trauma Informed Approach.<sup>19</sup>

ICJIA may survey grantees to assess their knowledge of trauma-informed practices and implementation of these practices as part of a grant monitoring function. With periodic assessments, agencies like ICJIA can identify areas of strength and growth for adopting a trauma-informed approach to services that help to prevent re-traumatization.

## 5. Assessment Protocol

Assessment is a core component of the TRC model. Client assessments aid in service delivery and help measure a client's progress in meeting goals.

As a part of this grant, agencies will be required to engage in client assessments, which may include scales to measure trauma history, mental health, sleep, physical pain, quality of life,

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<sup>14</sup> Ibid., 111.

<sup>15</sup> Ibid., 112.

<sup>16</sup> Ibid., 114.

<sup>17</sup> Wiggall, S. & Boccillari, A. (2017). The UC San Francisco trauma recovery center manual: A Model for removing barriers to care and transforming services for survivors of violent crime, 115-116. Retrieved from: <http://traumarecoverycenter.org/wp-content/uploads/2017/05/TRC-Manual-v1-5-10-17.pdf>

<sup>18</sup> <http://sanctuaryweb.com/>

<sup>19</sup> <https://www.samhsa.gov/nctic/trauma-interventions>

and client need. While required assessments will be finalized during the planning phase, examples of potential scales are:

- PTSD Checklist-5 (PCL-5) or Child PTSD Scale Self Report (CPSS-SR).
- Child Behavior Checklist (CBCL).
- Carlson’s Trauma History Screen (THS).
- Patient Health Questionnaire-9 (PHQ-9; Depression).
- PROMIS Sleep Disturbance.
- PEG Pain Intensity and Interference.
- World Health Organization Quality of Life (WHOQOL-BREF).

Applicants should budget for program director and program coordinator travel to ICJIA offices for monthly meetings over the three-month planning period to finalize the assessment tools, protocols, and database system. At these meetings, additional metrics will be defined as part of the grant agreement.

**Goals, Objectives, and Performance Measures**

The following table depicts objectives linked to performance indicators that show progress toward the proposed program goal. Complete the table by entering ambitious yet realistic numbers for each objective based on your proposed program. Applicants may list additional support service objectives for the program.

Selected programs will be required to submit quarterly reports on the following objectives and must identify the number of clients they aim to serve during the performance period. Objectives should estimate the number of clients that will receive each of the listed services to produce meaningful, tangible changes in clients' lives.

Goal: To provide comprehensive advocacy and mental health services to victims of violent crime.	
<b>Objective</b>	<b>Performance Measure</b>
<i><b>INFORMATION &amp; REFERRAL</b></i>	
# ____ clients will receive information about the criminal justice process.	# of clients provided information about the criminal justice process.  # of times staff provided information about the criminal justice process.
# ____ clients will receive information about victim rights, how to obtain notifications, etc.	# of clients provided information about victim rights, how to obtain notifications, etc.

	# of times staff provided information about victim rights, how to obtain notifications, etc.
# ____ clients will receive referrals to other victim service providers.	# of clients provided with referrals to other victim service providers. Please list the agencies to which you referred.  # of times staff provided referrals to other victim service providers.
# ____ clients will receive referrals to other services, supports, and resources (includes legal, medical, faith-based organizations, etc.)	# ____ clients provided with referrals to other services, supports, and resources.  # of times staff provided referrals to other services, supports, and resources.
<b><i>PERSONAL ADVOCACY/ACCOMPANIMENT</i></b>	
# ____ clients will receive individual advocacy (e.g., assistance applying for public benefits).	# of clients provided individual advocacy (e.g., assistance applying for public benefits).  # of times staff provided individual advocacy (e.g., assistance applying for public benefits).
# ____ clients will receive victim advocacy/accompaniment to emergency medical care.	# of clients provided victim advocacy/accompaniment to emergency medical care.  # of times staff provided victim advocacy/accompaniment to emergency medical care.
# ____ clients will receive victim advocacy/accompaniment to medical forensic exam.	# of clients provided victim advocacy/accompaniment to medical forensic exam.  # of times staff provided victim advocacy/accompaniment to medical forensic exam.
# ____ clients will receive law enforcement interview advocacy/accompaniment.	# of clients provided law enforcement interview advocacy/accompaniment.  # of times staff provided law enforcement interview advocacy/accompaniment.
# ____ clients will receive assistance filing for victim compensation.	# of clients provided assistance filing for victim compensation.  # of times staff provided assistance filing for victim compensation.



# ____ clients will receive immigration assistance (e.g., special visas, continued presence application, and other immigration relief).	# of clients provided immigration assistance.  # of times staff provided immigration assistance.
# ____ clients will receive assistance intervening with an employer, creditor, landlord, or academic institution.	# of clients provided with assistance intervening with an employer, creditor, landlord, or academic institution.  # of times staff provided assistance intervening with an employer, creditor, landlord, or academic institution.
# ____ clients will receive child or dependent care assistance.	# of clients provided with child or dependent care assistance. # of times staff provided child or dependent care assistance.
# ____ clients will receive transportation assistance.	# of clients provided with transportation assistance.  # of times staff provided transportation assistance.
# ____ clients will receive interpreter services.	# of clients provided with interpreter services.  # of times staff provided interpreter services.
# ____ clients will receive employment assistance (e.g., help creating a resume or completing a job application).	# of clients provided with employment assistance (e.g., help creating a resume or completing a job application).  # of times staff provided employment assistance (e.g., help creating a resume or completing a job application).
# ____ clients will receive education assistance (e.g., help completing a GED or college application).	# clients provided with education assistance (e.g., help completing a GED or college application).  # of times staff provided education assistance (e.g., help completing a GED or college application).
# ____ clients will receive economic assistance (e.g., help creating a budget, repairing credit, providing financial education).	# of clients provided with economic assistance (e.g., help creating a budget, repairing credit, providing financial education).

	# of times staff provided economic assistance (e.g., help creating a budget, repairing credit, providing financial education).
<b><i>EMOTIONAL SUPPORT OR SAFETY SERVICES</i></b>	
# ____ clients will receive crisis intervention.	# of clients provided with crisis intervention.  # of crisis intervention sessions provided by staff.
# ____ clients will receive individual counseling (Non-crisis counseling or follow-up either in-person or over the phone (or via email, Facebook, etc.).	# of clients provided with individual counseling.  # of individual counseling sessions provided by staff.
# ____ clients will receive therapy.	# of clients provided with therapy.  # of therapy sessions provided by staff.
# ____ clients will receive group support.	# of clients provided group support.  # of group support sessions provided by staff.
# ____ clients will receive emergency financial assistance.	# of clients provided with emergency financial assistance.  # of times staff provided emergency financial assistance.
<b><i>SHELTER/HOUSING SERVICES</i></b>	
# ____ clients will receive relocation assistance.	# of clients provided with relocation assistance.  # of times staff provided relocation assistance.
# ____ clients will receive housing advocacy, or help with implementing a plan for obtaining housing (e.g., accompanying client to apply for Section 8 housing)	# of clients provided with receive housing advocacy, or help with implementing a plan for obtaining housing (e.g., accompanying client to apply for Section 8 housing)  # of times staff provided assistance with receive housing advocacy, or help with implementing a plan for obtaining housing (e.g., accompanying client to apply for Section 8 housing)
<b><i>CRIMINAL/CIVIL JUSTICE SYSTEM ASSISTANCE</i></b>	
# ____ clients will receive criminal advocacy/accompaniment.	# of clients provided criminal advocacy/accompaniment.

	# of times staff provided criminal advocacy/accompaniment.
# ____ clients will receive civil advocacy/accompaniment (includes victim advocate assisting with orders of protection).	# of clients provided civil advocacy/accompaniment.  # of times staff provided civil advocacy/accompaniment.
<b>TRAININGS</b>	
# ____ of staff trained	# of staff trained Please list the types of training provided and to which staff members
<b>TRC COORDINATION AND IMPLEMENTATION GROUP MEETINGS</b>	
# ____ of meetings held	# of Coordination Group meetings held ( minimum requirements include presiding over three month coordination period and quarterly during implementation period)
<b>MULTIDISCIPLINARY STAFF MEETINGS</b>	
# ____ of multidisciplinary staff meetings scheduled.	# of MDT staff meetings held. Please submit attendance sheets from these meetings.

## **B. Funding Information**

Federal fiscal year 2016 Victims of Crime Act funds awarded by the U.S. Office for Victims of Crime to ICJIA will be used to support programs accepted through this Notice of Funding Opportunity.

Applicants may request a maximum of \$1.1 million in federal funding to support programming for a 15-month period, including up to three months of coordination and at least 12 months of direct service provision. The grant term will commence upon its effective date. Based on program performance and fund availability, ICJIA staff may recommend to the ICJIA Board funding allocation to support an additional 24 months for no more than \$2,000,000. See *Section D* of this Notice of Funding Opportunity for a list of allowable and unallowable costs.

Agreements that result from this funding opportunity are contingent upon and subject to the availability of funds. ICJIA, at its sole discretion, may terminate or suspend this agreement, in whole or in part, without penalty or further payment being required, if (1) the Illinois General Assembly or the federal funding source fails to make an appropriation sufficient to pay such obligation, or if funds needed are insufficient for any reason (30 ILCS 500/20-60), (2) the Governor decreases ICJIA's funding by reserving some or all of ICJIA appropriation(s) pursuant to power delegated to the Governor by the Illinois General Assembly, or (3) ICJIA determines, in its sole discretion or as directed by the Office of the

Governor, that a reduction is necessary or advisable based upon actual or projected budgetary considerations. The implementing entity will be notified in writing of the failure of appropriation or of a reduction or decrease.

Applicants will be required to submit an Implementation Schedule that describes how the program activities will be carried out. The Implementation Schedule is included in the Program Narrative document and should include necessary detail to enable ICJIA to assess grant activity relative to planned project performance.

### **C. Eligibility Information**

Agencies must be pre-qualified through the Grant Accountability and Transparency Act (GATA) Grantee Portal, [www.grants.illinois.gov](http://www.grants.illinois.gov), to become eligible to apply for an award. During pre-qualification, Dun and Bradstreet verifications are performed, including a check of Debarred and Suspended status and good standing with the Secretary of State. The pre-qualification process also includes a financial and administrative risk assessment utilizing an Internal Controls Questionnaire (ICQ).

**Applicants must have completed the GATA pre-qualification process and received approval of their ICQ from a State cognizant agency by the date of application. Applications from agencies that have not received ICQ approval will not be reviewed.**

#### ***Eligible Applicants***

Eligible applicants must meet the following requirements:

**Public or non-profit Illinois hospital with a Level 1 Adult or Pediatric Trauma Center designation by the Illinois Department of Public Health.**

#### **And**

**Record of Effective Services.** Demonstrate a record of providing effective direct services to crime victims and financial support from sources other than the Crime Victims Fund. This includes having the support and approval of its services by the community and a history of providing cost-effective direct services.

New programs that have not yet demonstrated a record of providing services may be eligible for VOCA funds if they can demonstrate that a minimum of 25 percent of their financial support comes from sources other than the Crime Victims Fund in the year of, or the year preceding, the award.

**Meet Program Match Requirements.** Matching contributions of 20 percent (cash or in-kind) of the total costs of the VOCA-funded project. Match must be committed for each project and derived from sources other than federal funds.

**Volunteers.** Utilize volunteers unless ICJIA determines there is a compelling reason to waive this requirement.

**Promote Community Efforts to Aid Crime Victims.** Promote, within the community, coordinated public and private efforts to aid crime victims.

**Help Crime Victims Apply for Compensation.** Assist victims by identifying and notifying crime victims of the availability of compensation, referring victims to organizations that can assist them in applying, assisting victims with application forms and procedures, obtaining necessary documentation, monitoring claim status, and intervening on behalf of victims with the compensation program.

**Comply with Federal Rules Regulating Grants.** Comply with the applicable provisions of VOCA, the VOCA Victim Assistance Program Final Rule, Office of Victims of Crime guidelines, the U.S. Department of Justice Grants Financial Guide, and Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards codified in 2 CFR 200, which includes maintaining appropriate programmatic and financial records that fully disclose the amount and disposition of VOCA funds received.

**Civil Rights.** No person shall, on the grounds of race, color, religion, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, be subjected to discrimination under, or denied employment in connection with any VOCA-funded program or activity.

**Comply with State Criteria.** Abide by any additional eligibility or service criteria as established by ICJIA, including submitting statistical and programmatic information on the use and impact of VOCA funds, as requested by ICJIA.

**Services to Victims of Federal Crime.** Provide services to victims of federal crimes on the same basis as victims of state/local crimes.

**Criminal Case.** Do not discriminate against victims because they disagree with the way the state is prosecuting the criminal case.

**No Charge to Victims for VOCA-Funded Services.** Provide services to crime victims at no charge through the VOCA-funded program.

**Confidentiality of Information.** Reasonably protect the confidentiality and privacy of persons receiving services under the VOCA-funded program to the extent permitted by law, as set forth in 28 CFR 94.115.

## ***Cost Sharing or Matching***

A 20-percent match requirement will be imposed on grant funds under this program. A grant made under this program may not cover more than 80 percent of the total cost of the project funded. Match can be made in both cash and/or in-kind contributions. Funds, cash, or in-kind resources used as match must be spent in support of the program's goals and objectives.

In-kind match includes volunteered professional or personal services, office materials and equipment, work space and facilities, and non-program funded victim assistance activities. Any reduction or discount provided to a sub-recipient shall be valued as the difference between what the sub-recipient paid and what the provider's nominal or fair market value is for the good or service. The value placed on volunteered services must be consistent with the rate of compensation paid for similar work in the program or the labor market. The value of donated space may not exceed the fair rental value of comparable space. The value placed on loaned or donated equipment may not exceed its fair rental or market value.

To calculate the amount of match required:

Total Project Costs x 20 percent = Match

### **Example:**

Total Program Cost:	\$100,000
20 percent Matching Funds (\$100,000 x .20):	\$ 20,000
Federal Funds (\$100,000 x .80):	\$ 80,000

Federal guidelines prohibit matching funds to be used to supplant existing funds. Refer to 28 CFR 200.306 for more information on match types and match requirements.

## ***Indirect Cost Rate***

In order to charge indirect costs to a grant, the applicant must have an annually negotiated indirect cost rate agreement (NICRA). The three types of NICRAs include:

a) Federally Negotiated Rate: Applicant organizations that receive direct federal funding may have an indirect cost rate that was negotiated with the Federal Cognizant Agency. ICJIA will accept the federally negotiated rate. The applicant must provide a copy of the federal NICRA at time of application.

b) State Negotiated Rate: Applicant organizations may negotiate an indirect cost rate with the State of Illinois if they do not have a Federally Negotiated Rate or elect to use the De Minimis Rate. The indirect cost rate proposal must be submitted to the State of Illinois

within 90 days of the notice of award. The applicant must provide a copy of the state negotiated rate at time of application.

c) De Minimis Rate: Applicant organizations that have never received a Negotiated Indirect Cost Rate Agreement from either the Federal government or the State of Illinois may elect a de minimis rate of 10 percent of modified total direct cost (MTDC). Once established, the de minimis rate may be used indefinitely. Applicants must submit an explanation of the base used to calculate the MTDC and an explanation of what the indirect cost will be used for in their budget.

## **D. Application and Submission Information**

### ***Obtaining Application Package and Application Deadline***

Applications may be obtained at <https://gata.icjia.cloud/>.

To request hard copies of the application materials, please contact:

Reshma Desai, Strategic Policy Advisor  
Illinois Criminal Justice Information Authority  
300 West Adams, Suite 200  
Chicago, IL 60606  
[cja.vocagrantsunit@illinois.gov](mailto:cja.vocagrantsunit@illinois.gov)  
312-793-7057

Completed application materials must be emailed to [cja.vocagrantsunit@illinois.gov](mailto:cja.vocagrantsunit@illinois.gov) by **11:59 p.m., January 10, 2018**, to be considered for funding. Applicants will receive an automated confirmation that the email was received. Proposals will not be accepted by mail, fax, or in-person. Incomplete applications will not be reviewed. Late submissions will not be reviewed.

Agencies are encouraged to submit their applications 72 hours in advance of the deadline to avoid unforeseen technical difficulties. Technical difficulties should be reported immediately to ICJIA at [cja.vocagrantsunit@illinois.gov](mailto:cja.vocagrantsunit@illinois.gov)

### ***Notice of Intent and Required Document Submission***

Notice of Intent: Applicants interested in submitting an application are required to complete an online Notice of Intent form by **11:59 p.m., December 18, 2017**. Submission of a Notice of Intent is non-binding and will be used for internal planning purposes only. Agencies must have completed the GATA pre-qualification process and received approval of their ICQ from a State cognizant agency by the date of application. Upon receipt of a Notice of Intent, ICJIA will offer technical assistance to agencies which have not yet demonstrated GATA compliance. Failure to submit a Notice of Intent by the deadline above may result in an

agency not receiving technical assistance with respect to GATA compliance, therefore risking grant ineligibility. ICJIA technical assistance is not a guarantee of GATA compliance or funding eligibility.

The online Notice of Intent is available at:

<https://www.surveygizmo.com/s3/3867318/VOCA-Trauma-Recovery-Center-Notice-of-Intent>

**Required Documents:** The following documents must be emailed as separate documents to [cja.vocagrantsunit@illinois.gov](mailto:cja.vocagrantsunit@illinois.gov) by the deadline for application review. Documents that require a signature as part of submission should be downloaded, completed, printed, signed, scanned, and saved as a PDF document. All documents should be saved with the appropriate document title, for example, “*Proposal Narrative*,” and included as an attachment to the email.

**Required documents:**

Document	PDF	Word	Excel
Completed and signed Uniform State Grant Application for each agency requesting funding. <i>This document will need to be signed and scanned.</i>	X		
Completed Program Narrative in Word that meets program requirements outlined in Section A. Applicant’s narrative must be submitted in Word and formatted in the posted Program Narrative. Application should be 40 pages maximum, drafted in Times New Roman 12-point font and double-spaced with 1 inch margins. Please number pages.		X	
One completed Budget/Budget Narrative in Excel.			X
Signed letter(s) of commitment from TRC Coordination Group members outside your organization and from anticipated referral agencies	X		
<b>Non-Profit Agency Required Documents</b>			
United States Internal Revenue Service 501(c)(3) determination letter for nonprofit organizations.	X		

***Dun and Bradstreet Universal Numbering System (DUNS) Number and System for Award Management (SAM) registration***

Each applicant is required to:

(i) Be registered in SAM prior to application submission. Click here for SAM registration:

<https://governmentcontractregistration.com/sam-registration.asp>

(ii) Provide a valid DUNS number.



(iii) Maintain an active SAM registration throughout the application and grant period. It also must state that the State awarding agency may not make a federal pass-through or state award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements. If an applicant has not fully complied with the requirements by the time ICJIA is ready to make a federal pass-through or state award, ICJIA may determine that the applicant is not qualified to receive an award and may use that determination as a basis for making a federal pass-through or state award to another applicant.

### ***Applicant Technical Assistance Session***

Applicants must view a pre-recorded technical assistance session on the ICJIA website at <https://gata.icjia.cloud/>. The session will be available for viewing beginning at 1:30 p.m. on November 1, 2017. Information provided during this webinar will be unofficial and not binding on the state.

### ***Intergovernmental Review***

Not applicable.

### ***Funding Descriptions***

See comprehensive budget instructions in *Attachment 2*.

#### **Highlights of allowable costs:**

To support applicants in requesting all necessary and allowable program costs, a non-exhaustive list of suggested budget items is provided here:

- a. Staffing costs for direct service providers, supervision of direct service providers, and coordination of activities that facilitate the provision of direct services.
- b. Participation on work groups or committees to develop multi-system, interagency and multidisciplinary protocols and other working agreements, as well as coordination with federal agencies to provide services to victims of federal crimes.
- c. Program promotion and public awareness development; public awareness and education presentations, and dissemination of information through brochures, public service announcements, billboards, and other strategies. Presentations must be conducted in public forums and designed to inform victims of specific rights and services and provide them with assistance. Public awareness preparation and presentations may not exceed 10 hours per week.
- d. Culturally-sensitive and alternative therapy or healing, such as art therapy and yoga.
- e. Emergency food.
- f. Relocation assistance. Relocation, as part of the victim's service plan, is necessary for a victim's safety and well-being. Funds are restricted to first month's rent and utility set-up costs (water, gas, and electric), not to exceed a total of \$1,000 per client.

Rental payment must be based on a reasonable rental market rate. Direct payments of funds to victims for relocation are not allowed.

- g. Outpatient substance use disorder counseling.
- h. Clinical assessment tools and related software.
- i. Child care to enable a victim to attend grant-funded direct services. Assistance with child care must meet the following requirements: Except as mentioned in 28 CFR 94.119(a)(6), “child care” means the temporary supervision of minors under the care of the victim, provided by a VOCA-eligible victim service provider, during the period of time the caretaker-victim is receiving a grant-funded allowable direct service from the victim service provider. Child care services must be provided on location at the victim service provider and meet any additional federal, state, and ICJIA requirements. Direct payments of funds to victims for child care costs are not allowed.
- j. Local transportation costs for service providers and for victims to receive services. Direct payments of funds to victims for transportation costs are not allowed.
- k. Staff training costs of direct service providers, including all required training and any additional training that would assist staff in serving victims.
- l. Reasonable and necessary technology costs for staff.

### **Unallowable Costs**

The following is a non-exhaustive list of services, activities, and costs that cannot be supported with VOCA Victim Assistance Formula Grant Program funding:

- a. Audits (agencies receiving less than \$750,000 in cumulative federal funds)
- b. Capital expenses; property losses and expenses, real estate purchases, mortgage payments, construction, and most capital improvements
- c. Compensation for victims of crime
- d. Crime prevention
- e. Fundraising activities
- f. Lobbying and advocacy with respect to legislation, regulations, or administrative policy
- g. Most medical care costs
- h. Tort or criminal defense services
- i. Active investigation and prosecution of criminal activities, and witness activities
- j. Research and studies, except for project evaluations
- k. Salaries and expenses for management, unless expressly allowed in the VOCA Final Rule

### ***Supplanting***

Supplanting does not apply to not-for-profit organizations.

Federal funds received by public agencies must be used to supplement existing state and local funds for program activities and must not replace those funds that have been appropriated for the same purpose. Supplanting will be the subject of application review, as well as pre-award review, post-award monitoring, and audit. If there is a potential presence of supplanting, the applicant or grantee will be required to supply documentation demonstrating that the reduction in non-federal resources occurred for reasons other than the receipt or expected receipt of federal funds. For certain programs, a written certification may be requested by the awarding agency or recipient agency stating that federal funds will not be used to supplant state or local funds.

If funds will be used for the expansion of an already implemented program, applicants must explain how proposed activities will supplement—not supplant—current program activities and staff positions.

***Pre-award costs***

No costs incurred before the start date of the interagency agreement may be charged to a grant award received as part of this funding opportunity.

***Pre-approvals***

In compliance with federal guidance, ICJIA:

- (1) Encourages minimization of conference, meeting, and training costs.
- (2) Requires prior written approval of conference, meeting, and training costs for grant recipients. These prior approvals may affect project timelines.
- (3) Sets cost limits, including a general prohibition of all food and beverage costs.

**E. Application Review Information**

***1. Criteria***

The following outlines the point breakdown for each major section of the proposal narrative and budget documents and description of required information for each section.

Proposal Quality	Score Range
Excellent: In addition to providing complete responses for all questions, the responses were clear and detailed.	90-100

The program plan is thoughtfully designed taking into account best practices and victim needs. Application includes all mandatory elements as outlined in the Program Design section, pages 8-15.	
Very Good: Application provides complete responses and includes all mandatory elements, but a limited amount of clarification or modification is necessary to recommend the application for funding.	80-89
Good: Application provided complete responses to the majority of the questions while several responses lack clarity and detail. Application lacks some mandatory elements.	70-79
Fair: The application responses consistently lacked completeness. Application lacks some mandatory elements.	60-69
Poor: The application responses consistently lacked completeness and demonstrates a poor understanding of the issues. Application lacks some mandatory elements.	0-59

**Problem Statement (15 points)**

Demonstrate a clear and detailed understanding of the problem, including the types of victims the hospital serves and proposes to serve under this grant, victim demographics, existing services that are not meeting needs, and the proposed needed services.

**Coordination Period (10 points)**

- Fully complete the coordination grid.
- Present additional coordination activities necessary to prepare the organization for implementation. This clear and detailed description should include who will be responsible for each activity, when they will occur and provides a clear justification for each.
- Include a list of Coordination Group members, their affiliations, and their role in the group. Include a proposed meeting schedule and signed letters of commitment from members outside the organization.

**Proposed Program (30 points)**

- Demonstrate a clear and detailed understanding of the TRC model. Provide a description that walks through the program from client identification and engagement through case closure, highlighting how the TRC core elements are

incorporated in the proposed program design. Provide strong details of the proposed program, highlighting victim types most commonly served in the hospital. Include whether the program will serve adults, minors, or both and the projected number to be served with justification for those numbers.

- Provide a clear assertive outreach and engagement plan that ensures underserved or marginalized groups are served and includes services outside of the hospital. The recruitment strategy described should be responsive to community demographics and anticipated referral sources. Include clear and detailed client eligibility screening, intake, and assessment processes that are responsive to victimized persons. The response also should clearly describes the staff positions that will carry out items a-c, including supervisory and coordinator staff where appropriate.
- Provide a clear and detailed description of proposed mental health and support services, incorporating how these services are comprehensive, structured, and evidence-informed. Demonstrates a clear understanding of the evidence-based, trauma-informed treatment modalities proposed. Clearly articulate services that the proposed program will not provide and where will clients be referred. Include individual letters of commitment from all anticipated referral agencies. Describe the staff positions that will carry out items a-c, including supervisory and coordinator staff where appropriate.
- Provide a clear and detailed explanation of how psychotherapy and case management will be coordinated for victims within the TRC, including the role of clinical case and medication management. Describe how staff will carry out this work, including supervisory and coordinator staff where appropriate. Additionally, the response should include a description of how cases will be coordinated with referral agencies.
- Fully complete the Work Plan Grid.

### **Capabilities and Competencies (20 points)**

- Demonstrate the expertise and organizational capacity to successfully implement the TRC model. Provide a clear and detailed description of experience providing direct services and mental health services to victims of crime that the proposed program seeks to serve. Include a list of personnel positions responsible for managing and implementing the proposed program and their respective qualifications, including, but not limited to, experience, education, licensure, and relevant training and certification. Include clear and detailed descriptions of the staff positions, competencies in working with diverse groups and persons, and the program's capacity to collect data and engage in project evaluation. Include clear and detailed descriptions of areas that may require staff training, including identification of training needed, how the training is necessary for program success, who will attend the training, when the training will be completed, and who will provide the training.
- Clearly describe fiscal experience and capacity to manage grants and provide all detail requested on existing grants. Also, fully address supplanting, if applicable.

### **Trauma Informed Care (10 points)**

- Include a clear and detailed description of the proposed model of trauma-informed care and how the principles of this model are integrated into program structure and service delivery.

### **Goals/Objectives/Performance Indicators (5 point)**

- Complete all required process objectives and performance measures. These measurables should include ambitious yet realistic numbers for each objective based on the proposed program.

### **Adequacy of Cost Estimates (10 points total)**

- Complete the budget and budget narrative to include allowable expenses allocated in a reasonable and cost-effective manner.

## ***2. Review and Selection Process***

Proposals will be reviewed by a panel of ICJIA staff and stakeholders with expertise in victim services. Proposal selection will be made using the previously described scoring criteria. If possible, ICJIA will fund the highest scoring applicant in each geographic region before funding successive applicants. For the purposes of this funding opportunity, geographic regions include Cook County and Non-Cook County.

Once regional applicants are selected, applicants will be selected based on overall scoring, with secondary consideration given to geographic diversity and proposed program design. Applicants with equivalent scores will be selected based on individual proposed program design category scores.

ICJIA reserves the right to reject any or all incomplete proposals, proposals including unallowable activities, proposals that fail to meet eligibility or program requirements, or proposals that are otherwise deemed to be unsatisfactory. ICJIA also reserves the right to invite one or more applicants to provide necessary clarifications prior to selection and to invite successful applicants to submit amended proposals and modify budgets that include unallowable or unreasonable costs.

Review team recommendations will be forwarded to the ICJIA Budget Committee for preliminary approval and applicants will be notified of the committee's decision. A panel of ICJIA staff will conduct a final review of applications for cost allowability. Successful applicants whose applications contained unallowable or unreasonable costs will have their award reduced by the total amount of all unallowable or unreasonable costs. Upon

acceptance of the grant award, announcement of the grant award shall be published by the awarding agency to <https://www.illinois.gov/sites/GATA/Pages/default.aspx>.

### ***3. Debriefing Process***

Unsuccessful applicants may request a debriefing. A debriefing is written feedback that can assist applicants in developing improved applications for future funding. A debriefing may include strengths and weaknesses of an application in terms of the evaluation and review criteria. Debriefings are not a part of the Appeals Process.

Requests for debriefings must be made in writing and submitted within seven calendar days after receipt of a Funding Opportunity Declination Letter from ICJIA. Debriefing requests will not be granted if there is an active appeal, administrative action, or court proceeding. The written debriefing request shall include at a minimum the following:

- a. The name and address of the requesting party.
- b. Identification of grant program.
- c. Reasons for the debrief request.

Please email debriefing requests to:

Reshma Desai, Strategic Policy Advisor  
Illinois Criminal Justice Information Authority  
[Reshma.desai@illinois.gov](mailto:Reshma.desai@illinois.gov)

### ***4. Appeals Process***

Unsuccessful applicants may request a formal appeal. Only the evaluation process is subject to appeal. Evaluation scores and funding determinations may not be contested and will not be considered by the ICJIA's Appeals Review Officer. The appeal must be in writing and submitted within fourteen (14) calendar days after either the date the grant award notice is published or receipt of a Funding Opportunity Declination Letter from ICJIA, whichever comes first. The written appeal must include at a minimum the following:

- a. Statement indicating a request for a formal appeal.
- b. The name and address of the appealing party.
- c. Identification of the grant program.
- d. A statement of reason for the appeal.

Please email your appeal to:

Appeals Review Officer  
Illinois Criminal Justice Information Authority  
[CJA.ARO@Illinois.gov](mailto:CJA.ARO@Illinois.gov)

Once an appeal is received, ICJIA will acknowledge receipt of an appeal within 14 calendar days from the date the appeal was received. ICJIA will respond to the appeal, in writing, within 60 days or supply a written explanation as to why additional time is required. The appealing party must supply any additional information requested by ICJIA within the time period set in the request. ICJIA will resolve the appeal by means of written determination. The determination will include:

- a. Review of the appeal.
- b. Appeal determination.
- c. Rationale for the determination.
- d. Standard description of the appeal review process and criteria.

**5. Anticipated Announcement and State Award Dates.**

<u>Milestones</u>	<u>Target Date</u>
Release of NOFO and open application	November 1, 2017
Posting of pre-application TA recording	November, 2017
Notice of Intent due	December 18, 2017
Last date for submission of questions	January 3, 2018
Application Closes	January 10, 2018
Authority Budget Committee Meeting	March 2018
Start Program Performance Period	April 1, 2018

**F. Award Administration Information**

1. **State Award Notices.** ICJIA will send a Notice of State Award and the grant agreement to grantees once the ICJIA Budget Committee reviews and approves designations in March of 2018. No costs incurred before the start date of the agreement may be charged to the grant.
2. **Administrative and National Policy Requirements.** In addition to implementing the funded project consistent with the agency-approved project proposal and budget, the grantees selected for funding must comply with grant terms and conditions, and other legal requirements, including, but not limited to, the Office of Management and Budget Grants Accountability and Transparency Act and other federal regulations which will be included in the award, incorporated into the award by reference, or are otherwise applicable to the award. Additional programmatic and administrative special conditions may be required.
3. **Reporting.** Grantees must submit quarterly financial and progress reports and final financial and progress reports. Federal reporting requirements state that funding agencies must report all mandatory information to the federal agency (U.S. Department of Justice) no later than 30 days after the end of the designated quarter.



To do so, ICJIA will require all programs funded to report electronically at minimum on a quarterly basis and no later than 15 days after the end of each reporting period. Mandatory fiscal and progress reports will be distributed to each grantee for submission. Failure to comply with mandatory reporting requirements will cause immediate suspension of funding of this grant, any other grant that applicant has with ICJIA, and possible termination of the grant. If applicable, an annual audit report in accordance with the 2 CFR Part 200 Uniform Requirements must be submitted. Future awards and fund drawdowns may be withheld if reports are delinquent.

## **G. State Awarding Agency Contact(s)**

For more information and technical assistance regarding submission of an application, contact:

Reshma Desai, Strategic Policy Advisor  
[cja.vocagrantsunit@illinois.gov](mailto:cja.vocagrantsunit@illinois.gov)  
312-793-7057

The deadline to submit questions is 11:59 p.m., January 3, 2018

## **H. Other Information**

Neither the State of Illinois nor ICJIA are obligated to make any award as a result of this announcement. ICJIA's Executive Director has sole authority to bind the state government to the expenditure of funds through the execution of interagency grant agreements.

**Trauma Recovery Center Logic Model**  
(Adapted from UCSF Trauma Recovery Center)

Target Population	Intervention Strategies	Short-term Outcomes	Long-term Outcomes
<ul style="list-style-type: none"> <li>● Victims of               <ul style="list-style-type: none"> <li>● Shooting</li> <li>● Stabbing</li> <li>● Physical Assault</li> <li>● Sexual Assault</li> <li>● Domestic Violence</li> <li>● Hate Crimes</li> <li>● Gang Violence</li> </ul> </li> <li>● Family members of homicide victims</li> <li>● Victims not already receiving mental health services</li> </ul> <p>*Note: the majority of these clients have co-occurring psychiatric, substance use issues and medical problems. No one is turned away because of their multiple problems.</p>	<ul style="list-style-type: none"> <li>● Active Outreach, tracking and home visits</li> <li>● Clinical evaluation &amp; ongoing assessment</li> <li>● Case management               <ul style="list-style-type: none"> <li>● Crisis management</li> <li>● Safety planning</li> <li>● Psychoeducation</li> <li>● Practical assistance</li> <li>● Linkage &amp; referral</li> <li>● Coordinated and integrated care with other providers</li> </ul> </li> <li>● Trauma-informed individual &amp; group therapy               <ul style="list-style-type: none"> <li>● Safety &amp; self-care</li> <li>● Coping skills &amp; risk reduction</li> <li>● Exploring meaning of trauma</li> <li>● Harm reduction</li> </ul> </li> <li>● Medication management</li> <li>● Support and Advocacy group for victims of crime</li> </ul>	<ul style="list-style-type: none"> <li>● Crisis Intervention and Stabilization</li> <li>● Access to food, clothing, housing, medical care and other entitlements</li> <li>● Applications submitted for               <ul style="list-style-type: none"> <li>● Medicare</li> <li>● Supplemental Security Income (SSI)</li> <li>● Victim compensation</li> <li>● Other financial entitlements</li> </ul> </li> <li>● Legal advocacy</li> <li>● Increased knowledge about trauma and its consequences</li> <li>● Client satisfaction with services</li> <li>● Reduction in acute symptoms, post-traumatic distress, mood, anxiety symptoms and substance use</li> <li>● Increased self-care and positive coping skills</li> <li>● Decreased maladaptive coping skills (including substance use)</li> </ul>	<ul style="list-style-type: none"> <li>● Increases in               <ul style="list-style-type: none"> <li>● Employment</li> <li>● If disabled, receipt of SSI</li> <li>● Non-crisis help-seeking as appropriate</li> <li>● Increase in functional abilities (i.e., activities of daily living, parenting)</li> <li>● Overall quality of life</li> </ul> </li> <li>● Decreases in               <ul style="list-style-type: none"> <li>● Chronic PTSD, depression and other symptoms</li> <li>● homelessness</li> <li>● involuntary mental health treatment</li> <li>● re-victimization</li> <li>● Social isolation</li> <li>● Need for urgent or emergency services</li> </ul> </li> <li>● Increased community awareness about trauma and its consequences</li> <li>● Decrease in duplication of services and improved coordinated care</li> </ul>

## Attachment 2

### Budget Overview

#### General:

**Blue shaded fields:** The applicant must complete all cells shaded blue. White cells are populated from other fields.

The GATA Budget Template contains the following tabs:

- Section A: ICJIA Funds – Complete the blue cells at the top of the tab and the total funds requested.
- Section A: Indirect Cost Info – Applicant must check one of the boxes numbered 1-5. Applicants selecting boxes 1 or 2 must also complete the shaded cells at the bottom of the tab.
- Section B: Match Funds – Complete the blue cells detailing the source of matching contributions.
- Applicant Certification – Complete the blue cells
- FFATA
- Section C1: Personnel
- Section C2: Fringe Benefits
- Section C3: Travel
- Section C4: Equipment
- Section C5: Supplies
- Section C6: Contractual
- Section C7: Indirect Costs
- Section C: Budget Summary
- Section C: Agency Approval

**The Total Cost is automatically calculated based on the detail in each line item. The applicant must complete the share of each line item total cost that will be charged to federal/state or matching funds.**

#### Instructions:

***Pro-ratio rates:*** In some cases, equipment, furniture or contractual expenses are shared by an agency. Grant funds can only be used to pay for the share of those expenses attributed to the program. This process is done by pro-rating the cost of shared equipment, furniture, and contractual expenses.

- a) ***Personal contractual cost.*** This is the cost that is attributed to non-full-time individuals paid with grant funds. Examples of personal contract costs are cell phone costs, professional license fees, and malpractice insurance. The pro-rated cost is determined by multiplying the cost of contractual expense by the employee's percentage of time working on the program.

*Example* formula for determining personal contract cost:

A cell phone cost \$50/month and the person using the cell phone is working on the grant 75% of the time.

$\$50 \text{ (cost)} \times .75 \text{ (time working on the program)} \times 12 \text{ months (length of the program)}$   
= \$450 max. cost.

- b) Shared office equipment/contractual cost.** These are cost(s) for equipment or contractual expenses that are used by the entire office and not just the grant program. Examples of shared office equipment include copiers, mail machines, rent, and utilities. The pro-ration rate is determined by taking the number of full time equivalents (FTEs) divided by the total number of people in the office.  $2.5 \text{ (FTEs working on the grant)} \div 10 \text{ (total number of people working in the office)} = .25$  proration rate.

*Example* of the pro-ration formula:

Proration rate is 25%.

Monthly rent is \$10,000.

Maximum allowable rent expense for the year is \$3,000 ( $\$1,000 \text{ rent} \times .25 \text{ proration rate} \times 12 \text{ months of the grant program}$ ).

**Budget:** Detailed cost section for the seven budget categories. This is where all of the grant expenses are listed.

- **Round to nearest whole number:** Whole numbers should be used. Round as appropriate.
- **Accuracy:** Applicant is responsible for ensuring correct use of formulas.
- **Consistency:** Figures listed in the budget should not contradict those noted in the budget narrative.

**Budget Narrative:** Used to explain the need for a particular program expense. Information must be provided for each cost detailed in the budget, no matter how large or small.

- **Detail:** The Budget Narrative should contain enough detail so that the reader can understand the grant program without having to refer to the Program Narrative.
- **Consistency:** Figures listed in the budget should not contradict those noted in the Budget Narrative.
- **Rounding:** Rounding that occurred in the budget should be explained in the budget narrative.

### **Budget Categories**

#### **Section C1: Personnel**

Listing of all of the agency's personnel dedicated to the grant program.

- 1) *Name*: Please write “To be determined” if personnel has not been hired at time of application.
- 2) *Job title*. The title of each position must be listed in the budget and in the Budget Narrative; be consistent between all documents (Budget, Budget Narrative and Program Narrative) Each position should have a short description of what they are doing for the grant program.
- 3) *Salary or wage*. This is the maximum that the grant (combining grant and match funds) can pay based on the percentage of time spent on the program. This is determined with the following formulas:
- 4) *Basis*: This is the unit of time (such as hours, days, weeks, months) that was used to calculate the total salary.
- 5) *Percentage of time*: The percentage of a full time equivalent work week that the funded personnel will work on grant activities.
- 6) *Quantity*: This is the number of basis units (hours, days, weeks, months) that the funded personnel will be charged to the grant.
- 7) *Detailed narrative*: The budget narrative should provide enough detail that an average person can understand what is being purchased and the reason for the purchase.

### **Section C2: Fringe Benefits**

If personnel listed in the budget are receiving fringe benefits then a detailed breakout of all fringe benefits applicable, including percentage calculations, must be included in the Budget Narrative.

### **Section C3: Travel**

Work-related travel, including travel to training or conferences.

- 1) *Reasonable and necessary*: All travel must be reasonable and necessary for administering the program.
- 2) *Separate and distinct*: Each travel-related item must have its own budget line item and detailed narrative on its need and usage.
- 3) *State mileage must be used*. Please check with the State of Illinois Central Management Unit Travel Guide (<http://www2.illinois.gov/cms/Employees/travel/Pages/default.aspx> for the current state mileage rate. The state mileage rate must be used unless the agency mileage rate is less than the lesser amount has to be used. Mileage reimbursement is only provided with use of personal vehicles.
- 4) *Justification for estimate cost*: Grantee must indicate basis for cost estimates.
- 5) *Per diem*: Reimbursement for meal expenses when traveling is allowable with a program-related overnight stay less any conference-provided meals. Conference meals provided must be deducted from the per diem. The state per diem rates are:

- In-state travel: \$7 per quarter of the day
  - Out-of-state travel: \$8 per quarter of the day
- 6) *Lodging rate*: Lodging rate is the maximum rate for a hotel room that can be charged to the grant. If the lodging rate exceeds the maximum allowable rate, non-grant, non-match funds must be used to make up the difference. The lodging rate does not include taxes.
    - In-state travel: The state lodging rate must be used. View the state travel guide for current rates:  
<http://www2.illinois.gov/cms/Employees/travel/Pages/default.aspx>.
    - Out-of-state travel: The federal lodging rate must be used. Current lodging rates:  
<http://www.gsa.gov/portal/category/21287>
  - 7) *Pre-approval of all out-of-state travel*: All out-of-state travel must be pre-approved by ICJIA.
  - 8) *Conference travel*: Only employees on the grant contract are allowed to use grant funds to travel to conferences. Justification for why conference attendance is reasonable and necessary for the administration of the program must be included. Conference registration costs should be listed under the contractual budget.
  - 9) *Airfare*: Only the most reasonable airfare should be purchased and all available discounts must be applied.

#### **Section C4: Equipment**

Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit cost of at least \$5,000. Items with smaller unit costs are considered Supplies and should be detailed on that budget tab.

- 1) *Reasonable and necessary*: All purchases must be reasonable and necessary for administering the program.
- 2) *Cost to be pro-rated*: Pro-rate equipment cost if the equipment is not solely being used for the grant program.
- 3) *Disposal of equipment*: The grantee has a duty to inform ICJIA when disposing of equipment purchased with federal or matching funds. This duty exceeds the life of the grant.
- 4) *Competitive selection process*: When selecting a vendor the selection process must be competitive.
  - Prior to purchasing equipment costing less than \$100,000, the grantee must get bids from at least three vendors.
  - If the equipment being purchased is more than \$100,000, the grantee must coordinate a Request for Proposals (RFP) or an Invitation for Bid (IFB) process. ICJIA must pre-approve the RFP or IFB.
  - Grantee must indicate in the Budget Narrative the manner in which the vendor is selected.

- 5) *Detailed narrative:* The Budget Narrative should provide enough detail that an average person can understand what is being purchased and the reason for the purchase.
- 6) *Brand name checklist:* Federal rules require that budget and budget narratives do not contain brand names of products. However, if a grantee must include the brand name of a product, a completed brand name checklist is required. If applicable, ICJIA will provide this checklist to successful applicants.

### **Section C5: Supplies**

Supplies are items that may be consumed during the grant period and have a unit cost of less than \$5,000.

- 1) *Reasonable and necessary:* All purchases must be reasonable and necessary for administering the program.
- 2) *Separate and distinct:* Each item must have its own budget line item and detailed narrative on its need and usage.
- 3) *Detailed narrative:* The narrative should provide enough detail that an average person can understand what is being purchased and the reason for the purchase. The grantee also must explain how the cost was determined.
- 4) *Pro-ration:* All supplies must be pro-rated if they cannot be directly contributed to the program and are based on the cost of the whole agency. Formula(s) used must be shown.

### **Section C6: Contractual**

Contractual expenses are expenses incurred per a contractual agreement.

- 1) *Reasonable and necessary:* All expenses must be reasonable and necessary for administering the program.
- 2) *Separate and distinct:* Each item must have its own budget line item and detailed narrative on its need and usage.
- 3) *Pro-ration:* If contractual expenses cannot be directly contributed to the grant program but the whole agency's contractual cost are used then these cost must be pro-rated. Formula(s) used must be shown.
- 4) *Detailed narrative:* The narrative should provide enough detail that an average person can understand what is being purchased and the reason for the purchase.
- 5) *Publications:* When contracting for printing, a note in the narrative should be made indicating that ICJIA's disclaimer will be printed on all materials.
- 6) *Conference Registration and Expenses:* Only employees on the grant contract are allowed to use grant funds for conference expenses. Please note that all out-of-state travel needs ICJIA prior pre-approval.

- 7) *Contractual employees*: List the salary of the contractual employee and a description of the employee's grant program duties. Contractual employees must have a written agreement with the funded agency.
  - a. Explain fringe benefits in the Budget Narrative.
  - b. If a competitive process was not used to select the contractor, a Sole Source Justification Checklist is required. If applicable, ICJIA will provide this checklist to successful applicants. ICJIA must pre-approve all Sole Source funding requests.
- 8) *Review of contracts*: ICJIA must review and approve all contracts utilizing federal and match funds.
- 9) *Rent*: Grant and match funds may be used to cover reasonable rent costs. Grant-funded rent payment is prohibited when the grantee has a financial interest in the building. Both the total rent and pro-rated amounts must be listed in the budget with an explanation how the rent was pro-rated.
- 10) *Utilities*: Grant and match funds may be used to cover reasonable costs of utilities used by grant personnel. Both the total utility and pro-rated utility costs must be included in the budget narrative.