

**ILLINOIS
CRIMINAL JUSTICE
INFORMATION
AUTHORITY**



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Meeting Notice

Budget Committee

Thursday, August 20, 2020
10:00 a.m. to 12:00 p.m.

Location:

Via Webex Video Conference/Teleconference

Participation Information:

Videoconference	Teleconference
Link available to Board Members only via separate calendar invite	Conference Phone Number: 1-415-655-0002
	Access Code: 133-227-1634

Budget Committee

Agenda

Hon. Amy Campanelli
Sheriff Tom Dart
Hon. Kimberly Foxx
Director Brendan Kelly
Hon. Kwame Raoul
Carmen Terrones
Paula Wolff

- ▶ Call to Order and Roll Call
- 1. Minutes of the June 18, 2020 Budget Committee Meeting - P.2
- 2. Minutes of the July 23, 2020 Budget Committee Meeting – P.13
- 3. Coronavirus Emergency Supplemental Fund – P.20
- 4. Justice Assistance Grants – P.37
- 5. Violence Against Women Act – P.48
- 6. Violence Against Women Act / Sexual Assault Service Programs – P.59
- 7. Victims of Crime Act – P.70
- 8. State Programs – P.211
 - A. Safe From the Start – P.214
 - B. Trauma Recovery Services – P.217
 - C. Street Intervention Program – P.212
 - D. Violence Prevention and Reduction – P.220
- ▶ Public Comment
- ▶ Old Business
- ▶ New Business
- ▶ Adjourn

**Illinois Criminal Justice
Information Authority**

Patrick Delfino
Acting Chair

Jason Stamps
Acting Executive Director

This meeting will be accessible to persons with disabilities in compliance with Executive Order #5 and pertinent State and Federal laws upon anticipated attendance. Persons with disabilities planning to attend and needing special accommodations should contact by telephone or letter Mr. John Klaer, Office of Administrative Services, Illinois Criminal Justice Information Authority, 300 West Adams Street, Suite 200, Chicago, Illinois 60606 (telephone 312/793-8550). TDD services are available at 312-793-4170.



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MINUTES

**ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY
BUDGET COMMITTEE MEETING**

June 18, 2020, at 10:00 a.m.
300 West Adams, Suite 200
Chicago, Illinois 60606

Call to Order and Roll Call

Authority Chair Patrick Delfino called the meeting to order at 10:09 a.m. Acting General Counsel Murphy called the roll.

Meeting attendance was as follows:

Budget Committee Member Attendance	Present	Telephone	Absent
Cook Co. Public Defender Amy Campanelli	X		
Amanda Gallegos for Cook Co. Sheriff Tom Dart	X		
Nicole Kramer for Cook County State’s Attorney Kimberly Foxx	X		
James Piper for Illinois State Police Director Brendan Kelly	X		
John Carroll for Attorney General Kwame Raoul	X		
Carmen Terrones	X		
Paula Wolff	X		
Other Authority Member Attendance	Present	Telephone	Absent
Kendall County Sheriff Dwight Baird			X
McLean Co. Public Defender Carla Barnes			X
<i>Delia Rollins</i> for Chicago Police Department Superintendent David Brown	X		
Patricia McCreary for Cook County Circuit Court Clerk Dorothy Brown			X
State Appellate Defenders Office Director James Chadd			X
St. Clair Co. Circuit Court Clerk Kahalah Clay			X
State’s Attorney’s Appellate Prosecutor’s Office Director Patrick Delfino (Authority Chair)	X		
Illinois Dept. of Public Health Director Dr. Ngozi Ezike			X
Illinois Law Enforcement Training and Standards Board Director Brent Fischer			X
Illinois Department of Corrections Acting Director Rob Jeffreys			X

Effingham County State's Attorney Bryan Kibler			X
Loyola CJRPP Director David Olson	X		
Metra Chief of Police Joseph Perez			X
Rebecca Janowitz for Cook County Board President Toni Preckwinkle	X		
SPAC Director Kathryn Saltmarsh	X		
ICADV Executive Director Vickie Smith	X		
Jassen Storkosch for Illinois Department of Children and Family Services Director Marc Smith			X
Jennifer Vollen-Katz			X

Quorum was achieved.

Also in attendance were:

Harry Alston, Safer Foundation
 Vaughn Bryant, Metropolitan Family Services
 ICJIA Program Supervisor Shai Hoffman
 ICJIA Federal & State Grant Unit Administrative Assistant Jude Lemrow
 ICJIA Acting General Counsel Robin Murphy
 ICJIA Program Supervisor Mary Ratliff
 Sheila Regan, Acclivus
 ICJIA Program Supervisor Ron Reichgelt
 ICJIA Acting Executive Director Jason Stamps
 ICJIA Federal & State Grants Unit Associate Director Greg Stevens
 ICJIA Program Supervisor Mitchell Troup
 Other Authority staff members and guests

Executive Director's Remarks

Mr. Stamps said that staff is working very hard as State Fiscal Year 2020 draws to a close to keep programs going into State Fiscal Year 2021 and to ramp up new programming to meet the directions of the legislature in the appropriations bill.

1. Minutes of the March 12, 2020, Budget Committee Meeting

Ms. Wolff said that she had submitted two requests for revisions to the minutes to staff prior to the meeting.

- A. Ms. Wolff said that the minutes did not correctly reflect her No vote on Item 4, the FFY19 Sex Offender Registration and Notification Act Plan Introduction.
- B. Ms. Wolff said that Mr. Stevens's description of the Restore, Reinvest, and Renew (R3) program under Item 6C and its geographically designated sites did not mention the statutory elements/variables which mandated how the sites were

determined. She requested that the 5th sentence of the first paragraph under Item 6C be revised as follows (revision in italics):

To determine eligibility, he explained ICJIA conducted a data analysis of areas defined by historically recognized boundaries to identify Illinois communities that could be considered high need; *communities that have been subject to the impacts of economic disinvestment, violence, and the historical overuse of criminal justice responses to community and individual needs.*

Motion: Ms. Wolff moved to approve the minutes of the March 12, 2020, Budget Committee Meeting with the edits she requested. Ms. Kramer seconded the motion.

Vote: The motion passed by unanimous voice vote.

2. Minutes of the May 21, 2020 Budget Committee Meeting

Motion: Ms. Wolff moved to approve the minutes of the May 21, 2020, Budget Committee Meeting. Ms. Kramer seconded the motion.

Vote: The motion passed by unanimous voice vote.

3. Victims of Crime Act

Mr. Reichgelt called attention to the meeting materials and regarding FFY17, FFY18, and FFY19 Victims of Crime Act (VOCA) plan adjustments.

Designation Reductions

Mr. Reichgelt described FFY17 VOCA funds recently returned to ICJIA, as detailed in the table below:

Entity / Program	Reason for Rescission	FFY17
A Safe Place / Transitional Housing	Funds unspent at performance period end.	\$12,797
Remedies Renewing Lives / Transitional Housing	Funds unspent at performance period end.	\$26,627
Totals:		\$39,424

New Designations

Civil Legal Assistance Programs

Mr. Reichgelt described recommended FFY18 designations in response to the Civil Legal Assistance Programs Notice of Funding Opportunity (NOFO). He said that 11 applications were submitted competing for \$7.3 million. However, he said staff recommended designating a total of approximately \$7.6 million to meet the needs of the applicants. After consulting with executive staff, a decision was made to recommend

funding all of the proposals, he said. He explained that because there was not enough money to fund all applications at the amounts requested, a decision was made to review what the applicants were receiving as grantees under a prior funding opportunity and base increases on those amounts. The Children's Legal Center had not been funded previously, he said, so they received the full amount that they applied for. He described the designees, their service areas, and recommended designations as follows:

DESIGNEE	SERVICE AREA	FFY18
Ascend Justice	Chicago / Cook Co.	\$478,400
Chicago Alliance Against Sexual Exploitation	Chicago / Cook Co.	\$266,055
Children's Legal Center Chicago	Chicago / Cook Co.	\$233,862
Erie Neighborhood House	Northern Cook Co.	\$172,000
Land of Lincoln Aid, Inc.	South Central Ill.	\$631,725
Legal Aid Chicago	Chicago / Cook Co.	\$931,821
Life Span	Chicago / Cook Co.	\$956,800
Metropolitan Family Services	Chicago / Cook Co.	\$956,800
North Suburban Legal Aid	Cook Co. & Lake Co.	\$355,593
Prairie State Legal Services (Central)	Central Ill.	\$872,931
Prairie State Legal Services (Collar)	Collar Counties	\$954,974
Prairie State Legal Services (Northern)	Northern non-Collar	\$782,642
TOTAL		\$7,593,603

Lead Entity Programs

Mr. Reichgelt said that staff recommended designating \$48,203,870 in FFY18 VOCA funds to the following entities to continue support for programs that combat domestic violence, sexual abuse, and child abuse.

DESIGNEE	FFY18
Illinois Coalition Against Domestic Violence	\$21,300,000
Illinois Coalition Against Sexual Assault	\$18,803,870
Children's Advocacy Centers of Illinois	\$8,100,000
TOTAL	\$48,203,870

Notices of Funding Opportunity

Court-Appointed Special Advocate Victim Assistance Programs

Mr. Reichgelt said that staff recommended designating up to \$2,535,000 in available FFY19 VOCA funds to issue a NOFO in the third quarter of 2020 for court-appointed special advocate victim assistance programs.

Law Enforcement/Prosecution Victim Assistance

Mr. Reichgelt said that staff recommended designating up to \$2,745,000 in available FFY19 VOCA funds to issue a NOFO in the third quarter of 2020 for Law Enforcement/Prosecution Victim Assistance programs.

Motion: Ms. Wolff moved to approve the recommended FFY17 VOCA designation reductions. Mr. Carroll seconded the motion.

Vote: The motion passed by unanimous voice vote.

Motion: Ms. Wolff moved to approve the recommended FFY18 VOCA designations. Mr. Carroll seconded the motion.

Vote: The motion passed by unanimous voice vote, with a recusal by Ms. Smith due to her involvement with the Illinois Coalition Against Domestic Violence.

Motion: Dr. Olson moved to approve the recommended FFY19 designations to NOFO set-asides for court-appointed special advocate victim assistance programs and law enforcement/prosecution victim assistance programs. Mr. Carroll seconded the motion.

Vote: The motion passed by unanimous voice vote.

4. State Fiscal Year 2021 Program Appropriations

Mr. Stevens called attention to the meeting materials regarding State Fiscal Year 2021 program appropriations.

4A. Death Penalty Abolition Fund

Services to Families of Homicide Victims

Mr. Reichgelt said that staff recommended designating SFY21 Death Penalty Abolition (DPA) funds to the following entities to allow the programs to continue for an additional 12 months:

DESIGNEE	RECOMMENDED DESIGNATION
BUILD, Inc.	\$368,568
Chicago Survivors, Inc.	\$607,924
TOTAL	\$976,492

Ms. Wolff said that at a future point it would be helpful to have some information on the populations served by both of these entities.

Law Enforcement Training

Ms. Ratliff said that staff recommended designating \$139,722 in SFY21 DPA funds to Northern Illinois University (NIU) to conduct training for law enforcement throughout the state on post-traumatic stress disorder, suicide, and resilience among police. She said NIU successfully executed this program last year.

Ms. Smith said that, given the current climate, it is critical that this training be used as an opportunity to engage with people who can inform this training in a way that would significantly enhance it.

Motion: Ms. Campanelli moved to approve the recommended SFY21 DPA designations. Ms. Kramer seconded the motion.

Vote: The motion passed by unanimous voice vote.

4B. Safe From the Start

Ms. Ratliff said that staff recommended designating SFY21 Safe From the Start (SFS) funds to the following entities to allow the programs to continue for 12 months representing Year 3 of their planned three years of programming:

Implementing Agency	Geographic Area	Amount
Children's Advocacy Center of North & Northwest Cook County	Cook/Kane (Elk Grove, Hanover, Maine, Palatine, Schaumburg, and Wheeling Townships; Prospect Heights; Carpentersville; E. Dundee)	\$121,500
Center for Prevention of Abuse	Peoria, Tazewell and Woodford	\$121,500
Casa Central	Chicago (Austin, Belmont Cragin, Hermosa, Humboldt Park, Logan Square, Near West Side, South Lawndale, West Town)	\$75,000
Child Abuse Council	Rock Island, Henry and Mercer	\$121,500
Children's Home + Aid Society of Illinois	McLean	\$121,500
Family Focus, Inc.	Cook (Englewood and W Englewood)	\$75,000
Heartland Human Care Services	Cook (Pilsen, Little Village, Brighton Park, Back of the Yards, McKinley Park)	\$75,000
Metropolitan Family Services	Cook (Roseland, Pullman, West Pullman)	\$75,000
South Suburban Family Shelter, Inc.	Cook and Will (Townships include: Bloom, Bremen, Calumet, Orland, Palos, Rich, Thornton, Worth, Crete, Frankfort, Manhattan, Monee, New Lennox, Peotone and Washington)	\$121,500
TOTAL		\$907,500

Motion: Mr. Carroll moved to approve the recommended SFY21 SFS designations. Ms. Smith seconded the motion.

Vote: The motion passed by unanimous voice vote.

4C. Illinois Family Violence Coordinating Council

Ms. Ratliff said that staff recommends designating SFY21 Illinois Family Violence Coordinating Councils (IFVCC) funds to the following entities to allow the programs to continue for 12 months representing Year 3 of their planned three years of programming.

Judicial Circuit	Implementing Agency/Fiscal Agent	Amount
3 rd	County of Madison	\$20,000
5 th	Regional Office of Education #11	\$38,800
6 th	Macon-Piatt ROE	\$38,800
7 th	Sangamon County	\$38,800
8 th	West Central Illinois Area Agency on Aging	\$38,800
10 th	County of Peoria	\$38,800
12 th	Will County	\$38,800
16 th /23 rd	Kendall County	\$54,300
17 th	Winnebago County	\$38,800
18 th	DuPage County	\$38,800
21 st	Iroquois-Kankakee Regional Office of Education #32	\$38,800
22 nd	McHenry County	\$38,800
TOTAL		\$462,300

Ms. Smith said that the IFVCC programs are some of the most productive efforts in Illinois because they bring everybody in the community to the table to work through local issues regarding family violence.

Motion: Ms. Smith moved to approve the recommended SFY21 IFVCC designations. Mr. Carroll seconded the motion.

Vote: The motion passed by unanimous voice vote.

4D. Street Intervention Program

Mr. Hoffman said that Metropolitan Family Services (MFS) had received a line item appropriation of Street Intervention Program (SIP) funds in the SFY21 State Budget. He said that staff recommended designating \$5,778,832 to MFS to provide sub-awards to agencies in support of their Communities Partnering 4 Peace (CP4P) program.

Mr. Bryant provided a breakdown of MFS's revenues and expenditures and described a number of current programs supported by MFS.

Motion: Ms. Wolff moved to approve the recommended SFY21 SIP designation. Ms. Kramer seconded the motion.

Vote: The motion passed by unanimous voice vote.

4E. Safer Foundation

Mr. Hoffman said that this was the third year that the Safer Foundation (SF) has received a line item appropriation in the State Budget to support SF's Working for Peace Program. He said that staff recommended designating \$1 million in SFY21 funds to SF to support its job training programs and transitional jobs for at-risk individuals.

Mr. Alston provided details about SF's employment programs.

Motion: Mr. Carroll moved to approve the recommended SFY21 SF designation. Ms. Smith seconded the motion.

Vote: The motion passed by unanimous voice vote, with a recusal by Ms. Gallegos due to the Cook County Sheriff's Office's relationships with the Cook County Jail and the Safer Foundation.

4F. Violence Prevention and Reduction

Mr. Hoffman said that this was the first year that Acclivus is receiving a line item appropriation in the State Budget. He said that staff recommends designating \$6,546,400 in SFY21 Violence Prevention and Reduction (VPR) funds to Acclivus to provide violence prevention and reduction in high need communities. This Cook County-based program provides ongoing support to victims and people at risk of becoming victims of violence.

Ms. Regan described Acclivus's program activities and neighborhoods served and she provided a history of Acclivus.

Motion: Ms. Wolff moved to approve the recommended SFY21 VPR designation. Ms. Smith seconded the motion.

Vote: The motion passed by unanimous voice vote.

4G. Community-Based Violence Prevention and Intervention

Mr. Hoffman said that due to issues related to the COVI-19 Pandemic, no NOFO was issued this year for Community-Based Violence Prevention and Intervention (CBVIP) programs. He said the program targets youth and young adults, including, but not limited to, those who are identified as being at heightened risk or those who engage in high-risk behavior or violence. He said that staff recommends designating a maximum of \$6,840,313 in SFY21 funds to support CBVIP programs at the following agencies:

Applicant	Total Anticipated Amount
Alternatives, Inc.	\$317,210
Big Brothers Big Sisters of Metropolitan Chicago	\$291,368
Bright Star Community Outreach, Inc.	\$671,649
Cabrini Green Legal Aid	\$172,781
Catholic Charities of the Archdiocese of Chicago	\$568,817
Children's Home + Aid	\$102,173
Gary Comer Youth Center	\$807,505
Heartland Alliance	\$659,942
Illinois Association of Juvenile Justice Councils	\$928,239
Lake County Crisis Center/DBA A Safe Place	\$469,537
Lawrence Hall	\$192,556
Northeast DuPage Family and Youth Services	\$132,035
Pilsen-Little Village Community Mental Health Center, Inc. d/b/a Pilsen Wellness Center, Inc.	\$251,061
Region 1 Planning Council	\$195,923
South Shore Drill Team & Performing Arts Ensemble	\$83,195
Springfield Urban League	\$313,943
Universal Family Connections	\$682,379
Total	\$6,840,313

Motion: Ms. Wolff moved to approve the recommended SFY21 VPR designations. Ms. Kramer seconded the motion.

Vote: The motion passed by unanimous voice vote.

4H. Bullying Prevention

Mr. Hoffman said that staff recommended designating \$392,189 in SFY21 Bullying Prevention (BP) funds to support the implementation of trauma response programs in 17 schools as described in the table below. He noted plans were not finalized as most schools have not yet determined what school will look like in the fall due to the pandemic.

Applicant	Regions served	Number of Schools	Anticipated Amount
Board of Trustees of Southern Illinois University	Franklin, Saline, and Williamson counties	9	\$198,380
Ann & Robert H. Lurie Children's Hospital of Chicago	North Lawndale, South Lawndale, and Englewood (CPS Elementary and High School Networks 5, 7, 15 and 16)	8	\$193,809
Total			\$392,189

Motion: Ms. Wolff moved to approve the recommended SFY21 BP designations. Ms. Kramer seconded the motion.

Vote: The motion passed by unanimous voice vote.

4I. Community Law Enforcement Partnership for Deflection & Substance Use Disorders

Mr. Hoffman said that staff recommended designating \$296,352 in SFY21 Community Law Enforcement Partnership for Deflection and Substance Use Disorders (CLEP) programs as described in the table below. He said the funds primarily support emergency treatment and coordinators to work with community-based service providers.

Applicant	Total Anticipated Amount
Elk Grove Police Department	\$101,459
Mundelein Police Department	\$65,000
Arlington Heights Police Department	\$129,893
Total	\$296,352

Motion: Ms. Wolff moved to approve the recommended SFY21 CLEP designations. Dr. Olson seconded the motion.

Vote: The motion passed by unanimous voice vote.

4J. Violence Prevention and Street Intervention Program

Mr. Stevens said staff would collaborate with the Illinois Department of Human Services (IDHS) to expend some unallocated and lapsing SFY20 Violence Prevention and Street Intervention funds. He said while the funds would have supported IDHS’s COVID-19 Summer Youth Program, DHS secured funding from other sources.

No action was necessary on the item and none was taken.

Public Comment

None.

Old Business

None.

New Business

None.

Adjourn

Motion: Ms. Kramer moved to adjourn the meeting. Ms. Smith seconded the motion. The motion passed by unanimous voice vote. The meeting was adjourned at 12:07 p.m.



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MINUTES

**ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY
BUDGET COMMITTEE MEETING**

July 23, 2020, at 10:00 a.m.

Internet video conference / teleconference

Call to Order and Roll Call

Authority Chair Patrick Delfino called the meeting to order at 10:07 a.m. Associate General Counsel Scott Risolute called the roll.

Meeting attendance was as follows:

Budget Committee Member Attendance	Present	Telephone	Absent
Cook Co. Public Defender Amy Campanelli	X		
Amanda Gallegos for Cook Co. Sheriff Tom Dart	X		
Nicole Kramer for Cook County State’s Attorney Kimberly Foxx			X
Yvette Loizon for Illinois State Police Director Brendan Kelly	X		
John Carroll for Attorney General Kwame Raoul	X		
Carmen Terrones	X		
Paula Wolff	X		
Other Authority Member Attendance	Present	Telephone	Absent
Kendall County Sheriff Dwight Baird			X
McLean Co. Public Defender Carla Barnes			X
<i>Delia Rollins</i> for Chicago Police Department Superintendent David Brown	X		
Patricia McCreary for Cook County Circuit Court Clerk Dorothy Brown			X
State Appellate Defenders Office Director James Chadd			
St. Clair Co. Circuit Court Clerk Kahalah Clay	X		
State’s Attorney’s Appellate Prosecutor’s Office Director Patrick Delfino (Authority Chair)	X		
Illinois Dept. of Public Health Director Dr. Ngozi Ezike			X
Illinois Law Enforcement Training and Standards Board Director Brent Fischer			X
Illinois Department of Corrections Acting Director Rob Jeffreys	X		
Effingham County State’s Attorney Bryan Kibler			X

Loyola CJRPP Director David Olson	X		
Metra Chief of Police Joseph Perez			X
Rebecca Janowitz for Cook County Board President Toni Preckwinkle			X
SPAC Director Kathryn Saltmarsh	X		
ICADV Executive Director Vickie Smith			X
Jassen Storkosch for Illinois Department of Children and Family Services Director Marc Smith	X		
Jennifer Vollen-Katz	X		

Quorum was attained.

Also in attendance were:

Sheryl Andrews, Proviso-Leyden Community Council for Community Action
 Angel Brown-Humphrey, Touch by an Angel Community Enrichment Center
 Emily Cahill, Peoria Park District
 Jaclin Davis, Cook County Southland Juvenile Justice Council
 Laurel Taylor-Dudley, Community Lifeline
 Wyvetta Granger, Community Lifeline
 Claudette Harrell, Proviso-Leyden Community Council for Community Action
 ICJIA Program Supervisor Shai Hoffman
 Howard Lathan, Chicago Area Project
 ICJIA Federal & State Grant Unit Administrative Assistant Jude Lemrow
 Rita McConville, Proviso-Leyden Community Council for Community Action
 ICJIA Federal & State Grant Unit Administrative Assistant Vanessa Morris
 James Pagano, Illinois Department of Corrections
 ICJIA Associate General Counsel Scott Risolute
 Jay Sandine, Rockford Park District
 ICJIA Acting Executive Director Jason Stamps
 ICJIA Federal & State Grants Unit Associate Director Greg Stevens
 ICJIA Program Supervisor Mitchell Troup
 ICJIA Chief of Staff Charice Williams
 Other Authority staff members and guests

Executive Director's Remarks

Mr. Stamps said staff was working hard to implement the R3 and Coronavirus Emergency Supplemental Funds programs. He said the R3 Notice of Funding Opportunity had generated many applications and that they were under review. He said between new program funds appropriated by the Illinois legislature and incoming federal program funds, ICJIA staff is processing approximately \$270 million.

Mr. Stamps also announced that former Acting General Counsel Robin Murphy had left ICJIA and that Associate General Counsel Scott Risolute would assume duties relating to the Budget Committee.

1. Coronavirus Emergency Supplemental Fund

Mr. Stevens called attention to the memo regarding Coronavirus Emergency Supplemental Fund (CESF).

New Designation

Illinois Department of Corrections

Mr. Stevens said that the Governor's Office has determined the ICJIA must designate 60% of its CESF award to the Illinois Department of Corrections (IDOC) and the Illinois Department of Juvenile Justice (IDJJ) and 40% to local units of government and non-profit organizations. He said staff recommends designating \$9,238,160 in FFY20 CESF funds to IDOC to support Coronavirus Emergency Response Transitional Housing Expansion. He said that the program would focus on an underserved population at an increased risk of being transient and homeless, increasing the likelihood of COVID-19 exposure. Mr. Stevens provided a summary of the program and a detailed explanation of the program's budget line items.

Motion: Mr. Carroll moved to approve the recommended FFY20 CESF designation. Mr. Olson seconded the motion.

Roll Call Vote:

Ms. Clay, Ms. Gallegos, Mr. Delfino, Dr. Olson, Mr. Carroll, Ms. Saltmarsh, Mr. Smith, Ms. Terrones, Ms. Vollen-Katz, and Ms. Wolff voted *Yes*.

Ms. Rollins and Ms. Loizon voted *Present*.

Mr. Jeffreys recused himself from the vote due to his position at the IDOC.

2. State Programs

Mr. Stevens called attention to the memo regarding the State Fiscal Year 2021 Program Appropriations. He noted the *City of Chicago* appropriation would not be addressed at the meeting.

2A. Chicago Area Project

Mr. Hoffman called attention to the supplemental Grant Recommendation Report document regarding recommended Violence Prevention and Reduction (VPR) program funding for the Chicago Area Project. He said the project would provide technical

assistance and monitoring oversight to Legacy Re-Entry, a non-profit, that will provide case management and prevention services to 200 high-risk youth and adults in Waukegan, Northeast Chicago, and Zion. He said services would include conflict resolution training, violence training, entrepreneurship and job readiness training, and specialized mentoring for current and formerly incarcerated individuals.

Motion: Ms. Wolff moved to approve the recommended \$698,608 SFY21 VPR Chicago Area Project designation. Mr. Carroll seconded the motion.

Roll Call Vote:

Ms. Rollins, Ms. Clay, Ms. Gallegos, Mr. Delfino, Ms. Loizon, Dr. Olson, Mr. Carroll, Ms. Saltmarsh, Mr. Smith, Ms. Terrones, Ms. Vollen-Katz, and Ms. Wolff voted *Yes*. The motion passed.

2B. Community Lifeline

Mr. Hoffman called attention to the supplemental Grant Recommendation Report regarding recommended VPR program funding for the Community Lifeline. He said Community Lifeline provides a variety of services in East St. Louis, including de-escalation and non-violence emergency response training, community outreach, community organizing, and victim support groups.

Motion: Ms. Wolff moved to approve the recommended 698,608 SFY21 VPR Community Lifeline designation. Mr. Carroll seconded the motion.

Roll Call Vote:

Ms. Rollins, Ms. Campanelli, Ms. Gallegos, Mr. Delfino, Ms. Loizon, Dr. Olson, Mr. Carroll, Ms. Saltmarsh, Mr. Smith, Ms. Terrones, Ms. Vollen-Katz, and Ms. Wolff voted *Yes*. The motion passed.

Ms. Clay recused herself from the vote due to her personal relationship with the director of Community Lifeline.

2C. Peoria Park District

Mr. Hoffman called attention to the Grant Recommendation Report regarding recommended VPR program funding for the Peoria Park District (PPD). He said that the PPD proposed to serve 175 individuals with a variety of programs, including out-of-school and weekend programming involving sports, job readiness, and re-entry for at-risk youths and their families.

Motion: Ms. Wolff moved to approve the recommended \$698,608 SFY21 VPR PPD designation. Mr. Carroll seconded the motion.

Roll Call Vote:

Ms. Rollins, Ms. Campanelli, Ms. Clay, Ms. Gallegos, Mr. Delfino, Mr. Jeffreys, Ms. Loizon, Dr. Olson, Mr. Carroll, Ms. Saltmarsh, Mr. Smith, Ms. Terrones, Ms. Vollen-Katz, and Ms. Wolff voted *Yes*. The motion passed.

2D. Proviso Leyden Community Council for Community Action Center

Mr. Hoffman called attention to the Grant Recommendation Report regarding recommended VPR funding for the Proviso Leyden Community Council for Community Action Center (PLCCA). He said that PLCCA would support programs via sub-recipient partner agencies. Services will include group therapy, individual therapy, case management, sports mentoring, college mentoring, addressing social and emotional issues, and family advocacy.

Motion: Ms. Wolff moved to approve the recommended \$741,190 SFY21 VPR PLCCA designation. Ms. Vollen-Katz seconded the motion.

Roll Call Vote:

Ms. Rollins, Ms. Campanelli, Ms. Clay, Ms. Gallegos, Mr. Delfino, Mr. Jeffreys, Ms. Loizon, Dr. Olson, Mr. Carroll, Ms. Saltmarsh, Mr. Smith, Ms. Terrones, Ms. Vollen-Katz, and Ms. Wolff voted *Yes*. The motion passed.

2E. City of Chicago

Mr. Stamps said issues regarding the legislation that generated the appropriation for the City of Chicago line item had hindered development of a desirable action plan by the city for the program.

2F. Rockford Park District

Mr. Troup called attention to the Grant Recommendation Report recommended VPR program funding for the Rockford Park District (RPD). He said that RPD was seeking to serve approximately 5,000 youths ages 8 to 18 via a wide range of programs under three categories:

- Leadership development and training.
- Intervention for youths and teens.
- Opportunities for active engagement.

Motion: Ms. Wolff moved to approve the recommended \$698,608 SFY21 VPR RPD designation. Ms. Vollen-Katz seconded the motion.

Roll Call Vote:

Ms. Rollins, Ms. Campanelli, Ms. Clay, Ms. Gallegos, Mr. Delfino, Ms. Loizon, Dr. Olson, Mr. Carroll, Ms. Saltmarsh, Mr. Smith, Ms. Terrones, Ms. Vollen-Katz, and Ms. Wolff voted *Yes*. The motion passed.

2G. Southland Juvenile Justice Council

Mr. Troup called attention to the Grant Recommendation Report regarding recommended VPR program funding for the Southland Juvenile Justice Council (SJJC). He said the funds would be used by the SJJC to provide sub-awards to schools and churches to implement violence prevention and reduction programs, particularly those employing restorative justice practices. He said programs would focus on:

- Physical/mental health services.
- Restorative training, practices and curriculum.
- Trauma informed care.
- Peer jury training.
- Entrepreneurial workshop & leadership training.
- Social & emotional learning.
- Peace, healing & talking circles.

Motion: Ms. Wolff moved to approve the recommended \$2,200,000 SFY21 VPR SJJC designation. Ms. Saltmarsh seconded the motion.

Roll Call Vote:

Ms. Rollins, Ms. Clay, Ms. Gallegos, Mr. Delfino, Ms. Loizon, Mr. Carroll, Ms. Saltmarsh, Ms. Terrones, Ms. Vollen-Katz, and Ms. Wolff voted *Yes*. The motion passed.

2H. Touch by an Angel Community Enrichment Center

Mr. Troup called attention to the Grant Recommendation Report regarding recommended VPR funding for the Touch by an Angel Community Enrichment Center (TBA). He said TBA serves youth who are most likely to be involved in violence as a perpetrator or a victim. He said TBA provides trauma-focused cognitive behavioral therapy, trauma-informed care, and intensive case management services for at-risk youths.

Motion: No motion was made regarding the recommended \$788,500 SFY21 VPR TBA designation.

Mr. Stamps said he would welcome comments from the board on how to strengthen the funding recommendation for the TBA designation. Mr. Delfino said the item could be reintroduced to the Budget Committee for reconsideration at a later date.

Public Comment

None.

Old Business

None.

New Business

None.

Adjourn

Motion: Ms. Saltmarsh moved to adjourn the meeting. Mr. Carroll seconded the motion. The motion passed by unanimous voice vote. The meeting was adjourned at 12:14 p.m.



**ILLINOIS
CRIMINAL JUSTICE
INFORMATION AUTHORITY**

300 W. Adams Street • Suite 200 • Chicago, Illinois 60606 • (312) 793-8550

MEMORANDUM

To: Budget Committee Members

From: Greg Stevens, Associate Director, Federal & State Grants Unit

Date: August 20, 2020

Subject: **FFY20 Coronavirus Emergency Supplemental Fund**

This memo describes recommended FFY20 Coronavirus Emergency Supplemental Fund (CESF) designations.

RECOMMENDED DESIGNATION

After receiving the award, it was determined by the Governor's administration that 60% of the available programmable funds would be utilized by the Illinois Department of Corrections (IDOC) and the Illinois Department of Juvenile Justice (IDJJ) to prevent, prepare for, and respond to the coronavirus. The remaining funds would be available to local units of governments and non-profit organizations, as they do the same.

Of the \$1,538,160 available to IDJJ, they requested a total of \$660,122. The remaining balance of \$878,038 will be added to the \$7,184,213 available to local units of governments and non-profit organizations for a new total of \$8,062,251.

Illinois Department of Juvenile Justice

Staff recommends designating \$660,122 in FFY20 CESF funds to the Illinois Department of Juvenile Justice to support their mission of building youth skills and strengthening families while implementing Coronavirus mitigation strategies.

Further detail is available in the attached Grant Recommendation Report.

RECOMMENDED DESIGNATIONS

At the request of the Ad Hoc Committee, ICJIA issued a Request for Information (RFI) on July 10, 2020 to request applicants submit applications that would demonstrate the ability to distribute funds via sub-grants to their provider networks for one or more of the following categories:

- **Housing:** Transitional and/or emergency housing for persons involved in the criminal justice system and/or those who have experienced violence. This may also include rent assistance allowing participants to remain in their existing housing.
- **Supporting Services:** Supportive services for persons involved in the criminal justice system and/or those who have experienced violence. Services include advocacy, case management, legal services, mental and emotional support, clinical behavioral health services (includes substance use treatment) for adults and children.
- **Agency Support:** Rent and utilities for community-based agencies operations, and/or COVID-19 related supplies and technology.
- **Foodbank:** Receive and distribute food to community-based agencies for their participants.

ICJIA received 104 applications totaling \$71,175,000 in requests. After a careful review process, eleven agencies were selected and are detailed in the attached Budget Committee Recommendation Report. Below is a summary of the number of times each program area is included in the total recommended applications:

- Housing: 6
- Supportive Services: 9
- Agency Support: 3
- Foodbank: 1

Staff recommends designating \$8,062,251 in FFY20 CESF funds to the agencies listed below. Further detail is available in the attached Grant Recommendation Report. Representatives from the applicant agencies will be available at the meeting to answer any questions.

Applicant	Amount Requested	Reduction	Final Designated Amount
Children's Advocacy Center of Illinois	\$953,918	\$(49,343)	\$904,575
Cook County Sheriff's Office	\$483,192	\$(24,994)	\$458,198
Illinois Association of Court Appointed Special Advocates	\$934,957	\$(48,362)	\$886,595
Illinois Coalition Against Domestic Violence	\$1,003,740	\$(51,920)	\$951,820
Illinois Coalition Against Sexual Assault	\$1,072,762	\$(55,490)	\$1,017,272
Lake County Crisis Center DBA A Safe Place	\$1,099,217	\$(56,859)	\$1,042,358
Monroe Foundation	\$419,933	\$(21,722)	\$398,211
Roseland Community Hospital Association	\$499,999	\$(25,863)	\$474,136
The Network: Advocating Against Domestic Violence	\$1,478,439	N/A	\$1,478,439
Urban Growers Collective	\$174,981	\$(9,051)	\$165,930
Wayside Cross Ministries	\$300,248	\$(15,531)	\$284,717
Total	\$8,421,386	\$(359,135)	\$8,062,251

ICJIA staff and a representative from IDJJ will be available at the meeting to answer any questions.

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

<u>Program Name:</u>	Coronavirus Emergency Response Housing and Comprehensive Supports for Youth and Families
<u>Program Agency DUNS:</u>	Illinois Department of Juvenile Justice (IDJJ) - 802855366
<u>Funding Source:</u>	FFY20 Coronavirus Emergency Supplemental Funding Program: \$660,122
<u>Agency Budget:</u>	\$130,728,000
<u>Request Type:</u>	N/A

Program Description

The Illinois Department of Juvenile Justice's (IDJJ) COVID-19 mitigation strategy has been to reduce its youth population and spread youth out. This approach has reduced the number of youth and staff gathered in any enclosed spaces, created adequate housing units for quarantining and isolating youth, as dictated by medical staff, and limited such quarantines because fewer youth are in close contact with any other person(s). This strategy has proved to be very effective and will be continued for the foreseeable future. To achieve this reduced population, DJJ has reviewed and released youth on a slightly accelerated timeline, but still in accordance with its statutory authority and governing rules. Additionally, Aftercare has significantly decreased the frequency of returning youth to secure custody for Aftercare violations. As a result, there is an emerging need for an additional "in between" option, spanning the gap between a secure custody setting and return home. This option will serve as a high-level intervention for youth who are struggling in the community with unsafe behaviors. It will also function as a step-down as some youth may be ready for release from secure custody but require more services and structure than is available in the community. DJJ will contract with a non-profit provider to launch a five to ten youth residential program to address intervention needs for youth at risk of returning to secure custody or who will benefit from a structured, phase step-down from secure custody.

Program Activities

The Illinois Department of Juvenile Justice (DJJ) continues to proactively respond to the unique challenges created by the novel coronavirus pandemic. DJJ is working creatively to fulfill our mission of "building youth skills and strengthening families" in the face of these challenges, in four ways:

- (1) By bolstering the comprehensive services, including housing, offered to youth and families who ware in the community on Aftercare Supervision. This is in recognition of the much greater instability faced by DJJ families in the face of coronavirus.
- (2) By creating a new transitional residential program to serve as a "step-down" from secure custody and a "step-up" alternative to secure custody for youth who struggle with maintain safe behavior in the community.
- (3) By expanding our use of technology within its five secure facilities to increase engagement with Aftercare Specialist, family, and other community-supports.

(4) By strengthening our family engagement activities by providing more support for family members to participate in activities in the facility, when permitted by coronavirus response protocols, and to join a family advisory council using remote meeting technology.

Goals

1. To increase the number of contacts between youth in custody and their families, Aftercare Specialists, and other community-based supports.
2. To provide for the needs of Aftercare youth and family impacted by COVID-19.
3. To strengthen family connections during a youth’s time in custody.
4. To prevent youth from remaining in custody beyond their Target Release Date and to prevent youth from returning to custody.

Priorities

This project effectively addresses the needs of juvenile justice involved youth and families impacted by the pandemic, continues efforts to maintain a low facility population during the pandemic, while implementing best practices for family engagement.

Program Funding Detail

This CESF funding will support up to 16 months of program activity for supportive services and improving communications to provide services remotely.

Budget Detail

	Total
Personnel Total FTE:	-
Fringe	-
Equipment	-
Supplies: 70 Laptops/tablets and related supplies to facilitate video conferencing 50 mobile printers for aftercare specialists	\$109,570
Travel	-
Contractual: Residential step-down programming	\$240,000
Housing and support services	\$125,000
Community-based family engagement services	\$80,000
WiFi access points and service	<u>\$105,552</u>
	\$550,552
Indirect / Other Costs	-
Totals Federal / State and Match:	\$660,122

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

<u>Program Name:</u>	Coronavirus Emergency Supplemental Funding
<u>Program Agency DUNS:</u>	See below
<u>Funding Source:</u>	FFY20 Coronavirus Emergency Supplemental Funding Program:
<u>Agency Budgets:</u>	See below
<u>Request Type:</u>	Request For Information

Program Description

Approximately 8 million dollars has been allocated to fund responses to ICJIA's Request For Information issued on July 10, 2020. The RFI's program design was developed based on the input of the CESF Ad Hoc Advisory Group that met on June 9th and 15th. Through the course of those meetings, the group agreed that the populations served should be victims of violence and/or those impacted by the criminal legal system. In addition, the group directed ICJIA staff to conduct analysis so the funds could be targeted to the highest need areas. ICJIA's Research & Analysis Unit staff determined areas eligible for the CESF opportunity based on high levels of need resulting from and/or exacerbated by the pandemic. Various datasets were examined to determine eligible areas based on recent and current coronavirus-related impacts. See the Research and Analysis Unit's presentation for the results of the analysis. Finally, the Ad Hoc group directed ICJIA to focus on the four program areas, listed below:

1. Housing
 - Transitional and/or emergency housing for persons involved in the criminal justice system and/or those who have experienced violence. This may also include rent assistance allowing participants to remain in their existing housing.
2. Supportive Services
 - Supportive services for persons involved in the criminal justice system and/or those who have experienced violence. Services include advocacy, case management, legal services, mental and emotional support, clinical behavioral health services (includes substance use treatment) for adults and children.
3. Agency Support
 - Rent and utilities for community-based agencies operations.
 - COVID-19 related supplies and technology.
4. Foodbank
 - Receive and distribute food to community-based agencies for their participants.

Program Funding Detail

Funding is expected to support this program for 12 months.

Designations

The total (\$8,421,386) requested by the applicants listed below exceeds the amount that is available (\$8,062,251). ICJIA will request that agencies (with the exception of The Network: Advocating Against Domestic Violence) reduce budgets by 5.17%. The Network is not included in this reduction because their amount was reduced prior to this document being prepared. Staff recommends designating \$8,062,251 in FFY20 CESF funds to the agencies listed below. Further detail is available in the attached Grant Recommendation Report. Representatives from the applicant agencies will be available at the meeting to answer any questions.

Applicant	Amount Requested	Reduction	Final Designated Amount
Children's Advocacy Center of Illinois	\$953,918	\$(49,343)	\$904,575
Cook County Sheriff's Office	\$483,192	\$(24,994)	\$458,198
Illinois Association of Court Appointed Special Advocates	\$934,957	\$(48,362)	\$886,595
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Illinois Coalition Against Sexual Assault	\$1,072,762	\$(55,490)	\$1,017,272
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Urban Growers Collective	\$174,981	\$(9,051)	\$165,930
Wayside Cross Ministries	\$300,248	\$(15,531)	\$284,717
Total	\$8,421,386	\$(359,135)	\$8,062,251

Agency Name: Children's Advocacy Centers of Illinois	DUNS number: 102034282 Total Agency Annual Budget (2018): \$7,973,064
<p>Program Summary: The Children's Advocacy Centers of Illinois (CACI) is a membership organization of the 40 Children's Advocacy Centers (CACs) covering 100 of the 102 counties in Illinois. CACs are essential in providing a formal, comprehensive, integrated and multidisciplinary response to the investigation and disposition of reports of child abuse and maltreatment by requiring the use of collaborative decision making and case management, thereby preventing further trauma of children. CACI reaches out to the underserved or non-served counties through the network of CACs to best serve child abuse victims in Illinois.</p> <p>CACI anticipates twenty-six subgrantees would apply for funds received through this grant that would qualify both for the program areas 1) Supportive Services and 2) Agency Support. Eligibility would be determined by the service area of the CAC as to the disproportionate negative effects that COVID-19 has presented in these areas. Services provided at CACs include, but are not limited to; forensic interviewing, advocacy (individual, family, crime victim compensation assistance, referrals for community resources, referrals for specialized child abuse exams, and mental health services. With the realization is that this pandemic is likely to stretch into and</p>	

possibly through 2021, CACs must consider additional measures to prevent, prepare for, and respond to the coronavirus. For example, the Chicago Children’s Advocacy Center, which served 2700 children last year and had 3830 adult family members seeking assistance, has created protocols to screen for possible COVID-19 cases in order to prevent infections to members of its staff team and those who come to the center for services; however, since forensic interviews and the consequent exposure to the public must continue, the risk to staff of being infected remains high. When someone on the staff team is exposed to an individual who tests positive for COVID-19, the staff person must quarantine to prevent further spread of the infection, resulting in limited capacity to serve child victims. Although Chicago CAC has the largest caseload in Illinois, other CACs will face the same issues on a smaller scale. To address this anticipated need, CACs will be requesting funds to support part-time contractual forensic interviewers to maintain service capacity at times when full-time staff must quarantine due to exposure. An added layer to this concern is the highly specialized nature of the forensic interviewer position as well as the educational and training requirements for Mental Health Professionals working with children who have experienced trauma.

Infection control protocols and practices that are aligned with recommendations of the Centers for Disease Control (CDC) or are required by the city, county, or state have been implemented to protect staff and clients. Many of these require costly supplies or additional contractual costs that could not have been foreseen prior to March of 2020 and are not included in agency budgets. To accommodate these costs, agencies have furloughed staff, left vacant positions unfilled, and reduced services to the public. Many of these costs will recur throughout the pandemic and will continue to come at the expense of supporting victims of crime and their families.

Program Areas: Supportive Services and Agency Support

Priority regions covered: Cook (5 CACs cover entire county), Lake, Winnebago, Champaign, Will, Kankakee, Union, Alexander, and St. Clair plus 17 additional counties	Projected number to be served: 5,000
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	Up to Total
Personnel: .10 FTE	\$8,150
Fringe:	\$0
Equipment:	\$0
Supplies: Program Supplies	\$6,238
Travel: Statewide travel, including mileage and six hotel stays	\$4,530
Contractual: Twenty-six sub-grantees will receive between \$20,000 and \$180,000 (for an average of \$36,000) for a variety of purposes, including: part-time forensic interviewers, advocates, therapists, PPE supplies, laptops, and other technology costs	\$935,000
Indirect / Other Costs:	\$0
Total Budgeted:	\$953,918

Agency Name: Cook County Sheriff’s Office	DUNS number: 156741746 Estimated Agency Annual Budget (2020): \$19,300,000
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Program Summary: The Cook County Sheriff’s Department (CCSO) is an agency driven by a passion to change the face of law enforcement and corrections through advocacy, treatment delivery and policy change, as a means to break the cycle of incarceration and improve the lives of those touched by the criminal justice system. The Cook County Department of Corrections (CCDOC) is one of the largest single site jails in the US, with approximately 77,000 detained individuals circulating through annually and a pre-COVID-19 average daily population of about 5,750 detainees. Following a collaborative approach between a number of criminal justice partners, the courts and community groups, the CCDOC saw a dramatic decrease in the jail population in an effort to prevent the spread of COVID-19 pandemic and as of July, 2020, the CCDOC held 4,746 detainees physically behind the jail’s walls, with another 3,313 individuals on community corrections.

The target population for this grant proposal are detainees who are eligible to re-enter communities — either through discharge, bond court, or the electronic monitoring program by court order— but who cannot be accepted or placed in available housing due to housing providers being at capacity; disqualifying factors within their criminal background that hinder existing contractual housing arrangements or specialized medical needs that cannot be supported due to the high costs associated with housing these individuals.

Of particular need are individuals on the CCDOC’s “No Place to Stay” (NPTS) list. Some of the reasons for being on the NPTS list include: 1) A host (the person who lives at the address at which the participant would be placed) withdraws consent; 2) Individuals are ineligible for placement at alternative housing vendors due to charges involving arson, domestic violence, sex-related crimes and violent offenses; 3) The vendor does not offer adequate quarantine or detox conditions; 4) The vendor not having available beds; and 5) Attempts to contact the potential host are ongoing. Persons on the NPTS list, therefore, have no other alternative but to remain in jail, even though the Court has identified them as eligible to be placed in community corrections.

The number of sub-grantee service providers that the CCSO will work with depends on the range of services that a potential subgrantee could offer and at what scale (eg. how many beds they have). Based on experience, it would be no fewer than two sub-grantees.

Program Areas: Housing

Priority regions covered: 15 of the 16 zipcodes are high priority zipcodes. 60651, 60644, 60624, 60623, 60608, 60621, 60620, 60619, and 60628 which are the most violent areas. Followed by 60629, 60649, 60621, 60617, 60636, 60637, and 60639.	Projected number to be served: 50
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	Total
Personnel: 4.0 FTE Reentry care coordinators	\$188,000
Fringe:	\$116,832
Equipment:	\$0
Supplies: Laptops for new staff and office supplies	\$5,000
Travel:	\$0
Contractual: Telehealth services and sub-recipient(s) for housing (Housing anticipated to cost \$100/day for an average 30-day stay for 50 participants)	\$154,560
Indirect / Other Costs: 10%	\$18,800
Total Budgeted:	\$483,192

Agency Name: Illinois Association of Court Appointed Special Advocates	DUNS number: 022582831 Total Agency Annual Budget (2018): \$269,599
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Program Summary: Illinois Association of Court Appointed Special Advocates (CASA) provides support, training, statewide leadership, collaboration, resources and technical assistance to 31 local CASA/Guardian Ad Litium (GAL) programs in 54 counties across the state, to advocate for the best interest of children involved in the Juvenile Court System due to abuse and neglect.

The proposed program is designed to address the educational challenges faced by up to 8,000 youth in care in response to COVID-19 restrictions on in-person learning in the 2021 academic year. E-learning for school age children and teens during the final trimester of the 2020 academic year proved very difficult for youth in care and their families. These high-risk youth are often already behind in school due to the chaotic lifestyles they experienced before coming into care; many youth don't know how to study; an e-learning curriculum requires self-motivation, which may be lacking; and teachers who are already overwhelmed in a new teaching environment will likely not allow them to provide individual attention to these students.

The need for educational assistance may be the only way we can keep our youth in school, bring them up to grade standards, and relieve their stress. An educational advocacy liaison will provide training and oversight to the 31 sub-grantees on the unique needs of youth in care to succeed in virtual classrooms. This individual will have knowledge of Illinois core curriculum, online learning, and the challenges faced by children in the foster care system.

Program Areas: Supportive Services

Priority regions covered: Champaign, Cook, DuPage, Lake, Kane, Kankakee, St. Clair, Will, Winnebago plus 45 additional counties.	Projected number to be served: 8,000
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	Total
Personnel: 1.0 FTE – Educational advocacy liaison	\$62,500
Fringe:	\$8,381
Equipment:	\$0
Supplies: Laptop, office supplies, and educational materials	\$2,924
Travel:	\$0
Contractual: Thirty-one sub-grantees will receive \$27,541. Each subgrant will include money for part-time staff to conduct the training, annual Zoom subscription, and program supplies.	\$853,771
Indirect / Other Costs: 10%	\$7,381
Total Budgeted:	\$934,957

Agency Name: Illinois Coalition Against Domestic Violence	DUNS number: 168547040 Total Agency Annual Budget (2019): \$18,499,852
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Response: The Illinois Coalition Against Domestic Violence (ICADV) is a 501 (c) 3 membership organization comprised of agencies and individuals supportive of all efforts for the safety of victims of domestic violence and their dependents as well as the accountability of abusers. The administrative office provides advocacy, training and technical assistance to and on behalf of its member agencies and the people they serve. ICADV proposes providing housing assistance to 33 agencies operating in Illinois (with the exception of Cook, Lake, and DuPage counties) to respond to victims of domestic violence and their dependents. People who experience domestic violence cross all socio-economic boundaries and live in every county in the state. If

awarded, ICADV will evenly distribute the allocated funds to community-based non-profits who currently have Victim of Crime Act and/or Violence Against Women Act contracts for services to victims of domestic violence. The current subgrantees have been through a thorough vetting process and are in good standing with their current contracts. This allows ICADV to quickly turn the dollars around during this time of crises and need for immediate response.

All domestic violence services agencies in Illinois have continued to operate throughout the current pandemic. However, due to the restrictions imposed by various orders from Governor JB Pritzker and the lack of treatments or prevention options related to COVID 19, programs have had to reduce capacity for sheltering victims and their children. This leaves survivors with fewer alternatives to living in an abusive environment. ICADV proposes allowing the community-based agencies in its current subgrantee roster to use the requested amount to support housing options for survivors of domestic violence and the dependents. The housing options may consist of the following: 1) emergency placement in hotels due to limited capacity in shelters practicing physical distancing; 2) offer deposits, rents and utilities to move survivors into safer living facilities, including apartments or houses; or 3) provide rent, mortgage and/or utilities in arrears that will allow survivors and their dependents to remain in current housing that is determined safe.

Program Areas: Housing

Priority regions covered: Statewide, with the exception of Cook, Lake, and DuPage counties	Projected number to be served: 17-25 per sub-grantee for a total of 561- 825
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	Total
Personnel: .89 FTE	\$37,934
Fringe:	\$10,720
Equipment:	\$0
Supplies: Laptop, printer, and accessories	\$1,935
Travel: Statewide travel, including mileage, per diem, and five hotel stays	\$1,560
Contractual: Includes administrative costs (\$8,092 for rent, utilities, grant system, advertising) and thirty-three sub-grants (Sub-grantees will receive an average of \$25,833 for a total of \$852,500)	\$860,592
Indirect / Other Costs: 10%	\$90,999
Total Budgeted:	\$1,003,740

Agency Name: Illinois Coalition Against Sexual Assault	DUNS number: 604291997 Agency Annual Budget (2018): \$23,987,364
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Program Summary: The Illinois Coalition Against Sexual Assault (ICASA) has served the State of Illinois as a funding pass-through since 1982, building a statewide network of 30 ICASA-certified Rape Crisis Centers (here after referred to as Rape Crisis Centers) that provide comprehensive, quality, supportive services for sexual assault victims and their significant others as well as prevention services for communities. Rape Crisis Centers are located throughout the state, with offices covering 97 Illinois counties and accessible to 98% of Illinois residents.

ICASA will sub-grant funds to 15-25 Rape Crisis Centers to provide financial housing assistance and supportive services to survivors of sexual assault and their significant others. ICASA will also provide funds to Rape Crisis Centers for agency rent, utilities, personal protective equipment, cleaning supplies, and COVID-19 related technology. The larger portion of funds will be sub-granted to Rape Crisis Centers serving counties most

disproportionately impacted by the number of coronavirus cases including, but not limited to, Cook, Will, DuPage, Lake, and Kane. However, ICASA sub-grantees in rural communities and those with high rates of poverty have been disproportionately economically impacted by the pandemic will be considered as eligible sub-grantees as well. ICASA will determine allocations ranging between \$4,000 to \$300,000 (to be determined by ICASA’s Contracts Review Committee) based on expressed need and the impact of the coronavirus pandemic on the communities served by the Rape Crisis Center.

Program Areas: Housing, Supportive Services and Agency Support

Priority regions covered: Cook, Will, DuPage, Lake, and Kane plus additional areas.

Projected number to be served: 1,300

	Total
Personnel: .65 FTE	\$37,571
Fringe:	\$8,061
Equipment:	\$0
Supplies: Four laptops, docking stations, and monitors; office supplies; PPE supplies	\$9,575
Travel:	\$0
Contractual: Sub-grantees will receive between \$4,000 and \$300,000 to include costs, such as rent, utilities, PPE, cleaning supplies, and technology for a total of \$1,000,000; Electronic services for group chat and interpretation services (\$12,000); administrative costs (\$5,555)	\$1,017,555
Indirect / Other Costs:	\$0
Total Budgeted:	\$1,072,762

Agency Name: Lake County Crisis Center DBA A Safe Place

DUNS number: 122324247

Total Agency Annual Budget (2018): \$3,868,311

Program Summary: For nearly 42 years, lead entity, Lake County Crisis Center DBA A Safe Place (ASP) has been the only organization in Lake County, IL solely devoted to domestic violence and human trafficking. Guided by the mission of being the leading advocate for eliminating domestic violence and human trafficking in northern Illinois, A Safe Place offers comprehensive services that provide a safety net to assist victims and their children and reduce the likelihood that they will need to return to a violent environment. Services are designed to meet the immediate crisis and long-term needs of victims and their children, and to prevent future violence. Nearly 70% of A Safe Place’s clients are people of color, including Latinx (38% of clients) and African American (31.5% of clients), high-risk demographics for developing COVID-19. Those who are in Section 8 housing are now unemployed cannot pay for food or rent. Heart disease, high blood pressure, and other chronic conditions are common to victims and predispose them to the most severe form of the disease. The demand for services has increased tremendously. As compared to just 3 months ago, calls to our crisis hotline increased 635% and we are serving nearly four times more people through our shelter program. To help meet this need, A Safe Place proposes to provide housing and supportive services. As a founder and current leader of the Partnership for a Safer Lake County, A Safe Place will engage with eight Lake-county-based fellow Partnership member agencies that provide housing and supportive services as sub-grantees. Combined, the nine agencies will provide housing assistance and supportive services (case management and legal representation) for 137 families (average family size is 2.5 people) for an estimated 343 people. The program serves A Safe Place’s target population plus victims of violence served by these agencies: Catholic

Charities (low-income, homeless); PADS (low-income, homeless, disabled often due to mental illness); Mother's Trust (low income children and families); One Hope United (homeless youth without families ages 17-24); Lake County Veterans Family Services Foundation (veterans and families; disabled veterans or veterans with mental health diagnoses); Stepping Stones (trafficked victims and their children), Mano a Mano (Spanish speaking immigrants); and NICASA (individuals with a mental health diagnosis).

Program Areas: Housing, Supportive Services
Priority regions covered: Lake County Projected number to be served: 137 families

	Total
Personnel: 3.4 FTE	\$175,065
Fringe:	\$39,113
Equipment:	\$0
Supplies: Laptops and office supplies	\$15,100
Travel: Local travel	\$1,800
Contractual: Costs related to space to administer the program (\$24,457); Rental assistance, first month's rent and security deposit, past due rental assistance (\$725,278); nine sub-awards for \$10,000 each (\$5,000 for case management and \$5,000 for legal representation) for a total of \$90,000	\$839,735
Indirect / Other Costs: (10%)	\$28,404
Total Budgeted:	\$1,099,217

Agency Name: Monroe Foundation DUNS number: 831674978
Total Agency Annual Budget (2019): \$118,500

Program Summary: Founded in 1991 the Monroe Foundation is a 29-year-old community reinvestment advocacy organization whose mission is to educate, link and fund community development projects within low-to-moderate income communities in the state of Illinois. As a mission-driven institution, the organization is established to break the cycle of poverty and disinvestment in disadvantaged neighborhoods primarily in the Chicago and the West Suburban areas. The Monroe Foundation has a strong history of helping the vulnerable, the poor, the unemployed, the ex-offender, and at-risk youth solve their critical needs and access available resources to improve their living conditions.

With this funding opportunity, through 20 community-based organizations, the Monroe Foundation will provide sub-grants to eight CBO's for individuals to receive rent and utility payments; six COBs for individuals to receive counseling, job training/placement, and other supportive services; and six CBOs to receive emergency supplies for individuals, technology assistance for agencies, and rent/utility assistance for agencies.

Program Areas: Housing, Supportive Services and Agency Support
Proposed priority regions: Austin, North Lawndale, Englewood, and Roseland and the Proviso Township including Maywood, Bellwood, Hillside, and Broadview. Projected number to be served: 10,000

	Total
Personnel: 3.0 FTE	\$120,500

Fringe:	\$9,219
Equipment:	\$0
Supplies: Two iPads and Office supplies	\$2,038
Travel:	\$0
Contractual: Twenty sub-grants to provide agency support (eight), housing support (six), and supportive services (six) for an average of \$12,500.	\$250,000
Indirect / Other Costs: 10%	\$38,176
Total Budgeted:	\$419,933

Agency Name: Roseland Community Hospital	DUNS number: 067456863 Total Agency Annual Budget (2018): \$38,936,615
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Program Summary: Roseland Community Hospital (RCH) is the lead organization for this application. RCH is an acute service, 162-bed hospital located at 45 W. 111th Street on Chicago’s far South Side. RCH opened in 1924 with a mission to provide care to residents of the Roseland neighborhood and surrounding communities. Since that time, RCH has maintained this deliberate focus despite a myriad of social, economic and political changes that dramatically affected the surrounding neighborhoods.

RCH targeted population is comprised of a mix of men and women between the ages of 18 – 55 that have identified previous mental illness issues and/or substance abuse problems. RCH’s traditional demographics are residents of the Roseland and surrounding south Chicago communities. 85% are African American men and women between the ages of 35 – 55. 38% have reported some type of mental-illness and 32% are substance abusers. Currently RCH serves as Roseland community’s anchor within a desert of healthcare facilities. Shortage of access to healthy food, lack of shelter and high statistics of violence. RCH and our partners seek to combat this trend of social deterrents impacting our resident’s health and well-being.

Specific to the submission of this grant response, RCH will employ a staff-person onsite at Cook County jail. Their role would be to identify individuals that are being released from jail. That are in need of in/out-patient support services. The majority of these individuals suffer from mental health issues and substance use. Once identified these individuals will work with a RCH Case Manager who will refer to the hospital (in-patient services) or our partner for out-patient services.

RCH in-patient services would be various medical treatments, procedures and support inside the hospital, and/or a referral to our partner the Healthcare Alternative Systems, Inc. (H.A.S.). H.A.S. is a 501(c)3 non-profit organization providing behavioral health services to Chicago and the surrounding communities. The organization’s mission aligns extremely well with RCH and H.A.S. has a long history of successful programming. H.A.S. will serve as a direct sub-grantee under the lead of RCH for this grant program.

Program Areas: Supportive Services

Priority regions covered: Roseland and surrounding neighborhoods	Projected number to be served: 200
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	Total
Personnel: 4.0 FTE	\$235,000
Fringe:	\$41,999
Equipment:	\$0
Supplies: Laptops and office supplies	\$8,000
Travel:	\$0

Contractual: Sub-grant to H.A.S to provide counseling and assistance to participants	\$215,000
Indirect / Other Costs:	\$0
Total Budgeted:	\$499,999

Agency Name: The Network-Advocating Against Domestic Violence	DUNS number: 130253630
	Total Agency Annual Budget (2018): \$1,515,614

Program Summary: The Network: Advocating Against Domestic Violence (The Network) is a collaborative membership organization dedicated to improving the lives of those impacted by domestic violence through education, public policy and advocacy, and the connection of community members to direct service providers. The Network provides education, advocacy, and organizing on behalf of 39 member organizations, all of whom provide direct services to survivors of domestic violence in Cook or DuPage counties. In addition, the Network operates the Illinois Domestic Violence Hotline, which provided crisis support to 24, 861 survivors of domestic violence in 2019.

During the COVID-19 crisis the Network engaged in media outreach and funding advocacy on behalf of survivors and providers to ensure that domestic violence services continued during the pandemic and providers were able to maintain operations in response to enhanced need created by the shelter in place order. The Network is submitting this application on behalf of our member providers in an effort to continue this sustaining and supportive role and ensure continuity of services to survivors most affected by COVID-19 and domestic violence. The Network intends to provide grants to 34 of our 39 member organizations. We would expect to service a combined 25,000 survivors over the upcoming grant period if funding is received. The emergent need for supportive services for crisis services stems from the limitations the Covid-19 crisis has placed on reaching domestic violence survivors and on the prohibitions, it has placed on survivors appearing for services and support in person. The shelter in place order, which was a necessary public health measure, placed survivors in great danger as they were forced to remain in an unsafe living environment. Current shelter residents were displaced into hotels and providers shifted models to provide community-based support. Providers cannot continue to sustain the increased costs of community-based service provision without additional revenue. Providers are also struggling to shift to remote services due to a lack of technology and confidential networks. It is imperative that providers receive additional funding to advertise services and implement remote tele-health services to ensure safety for domestic and sexual violence survivors. In addition, providers are working with clients who are experiencing far greater hardship than in previous years. These hardships are economic, largely related to the number of survivors who work in industries most affected by Covid-19 and social, related to the number of survivors balancing survivorship with additional parenting responsibilities resulting from the shift to remote learning. Network member providers have reported that survivors are remaining in unsafe living environments longer due to the pandemic, meaning many survivors have presented for services after enduring significant physical violence and requiring intensive counseling and trauma informed services.

At a provider level, working remotely has laid bare the inadequate technology which has required staff to use personal computers to work remotely. In addition, a combined group of legal advocacy providers established an Order of Protection hotline using low-cost/free technology, but advocates anticipate challenges as we seek to sustain this model and begin to simultaneously serve walk-ins at the Domestic Violence Courthouse again. Creating parallel points of entry for our emergency services will be necessary to ensure ongoing access for our client population, but will strain our existing staff resources. Providers need support to bolster our ability to serve clients regardless of whether they access legal services remotely or in person. Providers also need access

to PPE and technology. These costs, normally covered with fundraising dollars, have increased because of increased demand.

Program Areas: Housing, Supportive Services and Agency Support

Priority regions covered: Chicago, Suburban Cook, DuPage Projected number to be served: 25,000

	Total
Personnel: 1.75 FTE	\$106,250
Fringe:	\$12,189
Equipment:	\$0
Supplies:	\$0
Travel:	\$0
Contractual: Thirty-four sub-grantees will receive an average of \$40,000 per sub-grant. Sub-grants will include costs for emergency housing/shelter; technology that will allow survivors to participate in tele-health or other remote services; and PPE	\$1,360,000
Indirect / Other Costs:	\$0
Total Budgeted:	\$1,478,439

Agency Name: Urban Growers Collective

DUNS number: 081203591

Total Agency Annual Budget (2018): \$885,343

Program Summary: Urban Growers Collective works with our farmers, food business partners, and community patterns to coordinate a community-based emergency food distribution program that distributes both fresh produce boxes and nutritionally dense, culturally appropriate prepared meals to those in need. Urban Growers Collective works with our community partners (schools, churches, health centers, social service centers, etc.) to identify and reach out to those who are most impacted by the coronavirus and food access. This includes individuals and households with children. A majority of the individuals who receive emergency food assistance are Black, African American, or Latinx.

Three sub-grantees have been identified to support the project: Midwest Foods will support produce procurement and box packaging; while Black, Indigenous, People of Color (BIPOC)-owned food businesses ChiFresh Kitchen, and Coopertiva Visionarias will support creation of prepared meals. 25 social service agencies have been partnered with to distribute boxes after delivery to participants

Program Areas: Foodbank

Priority regions covered: 10 of the 12 zipcodes are high priority zipcodes 60608, 60615, 60617, 60620, 60621,60639, 60623, 60624, 60632, 60637, 60649, 60653, 60662

Projected number to be served: 5,000 boxes of food and 10,000 prepared meals

	Total
Personnel: .42 FTE	\$21,886
Fringe:	\$2,188
Equipment:	\$0
Supplies: Fuel for delivery vehicle, PPE, produce	\$15,000

Travel:	\$0
Contractual: Three sub-grants/sub-contracts for prepared meals and meal boxes. An anticipated 5,000 boxes of food and 10,000 meals will be paid for by these funds.	\$120,000
Indirect / Other Costs: 10%	\$15,907
Total Budgeted:	\$174,981

Agency Name: Wayside Cross Ministries	DUNS number: 025998832
	Total Agency Annual Budget (2018): \$147,700

Program Summary: Wayside Cross Ministries (WCM) was founded in 1928 to serve transient men whose lives lacked hope and direction. Today, through six divisions, its reach has broadened and extends to reach the working poor, homeless families, women and women with children, at-risk youth, impoverished families, ex-offenders, incarcerated individuals, refugees, victims of natural disasters, and fire burnout victims. Although Wayside’s reach has broadened, its faith-based mission remains the same, to honor God by loving and serving the afflicted and powerless whose lives lack hope and direction due to poverty, addictions, neglect, abuse, and violence. Support is offered to everyone without regard to age, religion, sex, race, sexual orientation, or creed. The services that are provided are: food, shelter, mentoring and counseling; both in-person and through email, housing, access to healthcare, job assistance, job trade program, education, food, clothing, shelter, educational printed materials, personal development plan, prison correspondence program, postage, behavioral health services, mental and emotional support, on-the-job training, job training program, computer center access, legal services, transportation, online training, and options for parolees to transition to transitional housing program. WCM proposes to incorporate a COVID-19 Educational Program into the aforementioned programs and hire a dedicated chaplain position for the road trips. This program will provide and encourage COVID-19 best practices and educational information, as recommended by the CDC. The program will include verbal, audio and visual communications and materials that will provide information on prevention tips, virus symptoms, good hygiene practices, social distancing, and symptomatic and asymptomatic individuals. Additionally, education will be provided on: intensifying cleaning and disinfection of facilities, regular symptom screening for new intake and clients after returning from passes, importance of seeking help when symptoms are present, reporting symptom procedures, and how daily life may be impacted due to COVID-19. Due to the impact on mental health, staff will provide formal and informal counseling. All materials will align with CDC recommendations.

Program Areas: Supportive Services	
Priority regions covered: DuPage, Will, as well as well 15 additional counties.	Projected number to be served: 10,000

	Total
Personnel: 2.74 FTE	\$151,092
Fringe:	\$69,857
Equipment:	\$0
Supplies: Educational materials	\$5,000
Travel: Statewide travel to various jails/prisons throughout service area	\$13,299
Contractual:	\$0
Indirect / Other Costs: 25.5%	\$61,000
Total Budgeted:	\$300,248

Summary of Maximum Amounts

	Total
Personnel Total FTE: 21.05	\$1,143,948
Fringe	\$318,559
Equipment	\$0
Supplies	\$70,810
Travel	\$21,189
Contractual	\$6,606,216
Indirect / Other Costs	\$260,667
Totals Federal / State and Match:	\$8,421,386



**ILLINOIS
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300 W. Adams Street • Suite 200 • Chicago, Illinois 60606 • (312) 793-8550

MEMORANDUM

TO: Budget Committee Members

FROM: Greg Stevens, Associate Director, Federal & State Grants Unit

Date: August 20, 2020

RE: **Federal Fiscal Year 2016 Justice Assistance Grants Plan Adjustment
Federal Fiscal Year 2017 Justice Assistance Grants Plan Adjustment
Federal Fiscal Year 2018 Justice Assistance Grants Plan Adjustment**

DESIGNATION REDUCTIONS

FFY16 and FFY17 Justice Assistance Grants (JAG) funds recently returned to ICJIA by agencies at the ends of the funding performance periods are listed below. Staff recommends making these funds available for future use.

Entity - Program	Reason for Rescission	FFY16	FFY17
City of Champaign - Partnerships to Reduce Violent Crime	Contractual funds remained unspent.	\$92,984	
Cook County Public Defender's Office - Mitigation Program	Loss of personnel.		\$32,502
Braidwood Police Department - Police-Led Diversion / Deflection	Changes in administration. Grantee requested termination.		\$41,662
Winnebago County - Youth Recovery Court	Less staff needed due to COVID-19.		\$11,728
Totals:		\$92,984	\$85,892

RECOMMENDED DESIGNATIONS

Notice of Funding Opportunity: Comprehensive Law Enforcement Response to Drugs

In keeping with the JAG Strategic Plan approved on June 27, 2019 by ICJIA Board and the approval of the JAG Implementation Plan on October 17, 2019 by Budget Committee, the set-aside for the Comprehensive Law Enforcement Response to Drugs NOFO was approved at the March 12, 2020 Budget Committee meeting. The committee

approved the use of \$3.5 million in then-available JAG FFY17 and FFY18 funds to issue a competitive notice of funding opportunity in the second quarter of 2020. Proposals were solicited in May for three types of programming:

1. Police-led substance use deflection programs.
2. Multijurisdictional narcotic prosecution programs.
3. Multijurisdictional large-scale narcotic trafficking enforcement.

The three-pronged strategy is designed to address both the supply and demand for narcotics. These three prongs include police-led deflection, multijurisdictional large-scale narcotic trafficking enforcement, and multijurisdictional narcotic prosecution units.

1. Police-Led Deflection

Individuals face a range of obstacles to entering or gaining access to treatment, including uncertainty about how to access services, shame and stigma, denial of substance use disorder or substance misuse, costs and lack of insurance/Medicaid, transportation, treatment waiting lists, and prior negative treatment experiences. Police agencies across the nation have implemented promising police deflection programs.

Deflection serve as a point of contact for individuals seeking treatment. The programs entail substance users either voluntarily contacting the police or being contacted via outreach efforts. Users are offered SUD treatment without fear of arrest, and police provide referral and transportation to treatment facilities as well as linkages to other appropriate support services. Police can immediately connect individuals to appropriate human and social services, including assessment, case management, peer mentoring, and treatment, while avoiding potential criminal justice system entry.

2. Multijurisdictional Narcotic Prosecution Units

Multijurisdictional narcotic prosecution units were designed to address the complexities of prosecuting drug trafficking crimes. For example, in drug trafficking cases, prosecution need strong evidence proving the involvement in a single enterprise to distribute narcotics, as well as an understanding the drug trafficking organization, its day-to-day operations, and links to organized crime and overseas suppliers. These narcotics units work with police officers to provide prosecutorial oversight to those cases so that the evidence will withstand legal challenges and lead to a successful prosecution. While there is not enough research to draw conclusions on specialized narcotic prosecution units, research examining other specialized prosecution units showed the units reduced the likelihood of case rejection; cases were likely to move forward to the next stage of adjudication.

3. Multijurisdictional Large-Scale Narcotic Trafficking Enforcement

Drug trafficking is the cultivation, manufacture, distribution, and sale of drugs. Trafficking of drugs is a violent enterprise due to the need to exhibit strength and force to

competitors and rivals, as well as for retribution against lower-level distributors who do not sell. Despite violence and risk of law enforcement involvement and punishment, the potentially great monetary rewards tempt some into drug trafficking. Drug trafficking directly contributes to violent crime, availability of illicit drugs, growing numbers of drug-users, and increasing numbers of drug-related hospitalizations and deaths. Therefore, drug trafficking constitutes a major threat to public health and the well-being of society as a whole.

To combat drug trafficking, states use multijurisdictional drug task forces, which are made up of law enforcement officers from state, county, and local police departments to pool resources and more efficiently and effectively combat the drug distribution in multiple jurisdictions. Outcome evaluations have found that multijurisdictional drug task forces are more effective at making more serious drug arrests than non-drug task force law enforcement.

This table compares available fund distribution within the 2020 funding opportunity’s three categories with how JAG funds were previously distributed to the programs.

Program Category	Previous Distribution	NOFO
Law enforcement deflection	\$170,480	\$159,480
Narcotics prosecution	\$1,537,220	\$1,438,014
Narcotics enforcement	\$2,033,712	\$1,902,506
Totals:	\$3,741,412	\$3,500,000

At the close of the NOFO, staff received a total of thirty applications, of which two were for the deflection program, eight were for the prosecution program, and twenty were for the drug enforcement program. Applications were scored through a merit-based review process by six teams of reviewers made up of in-house and outside reviewers. The selection process was based on NOFO guidance allowing for any unused funds in one category to be distributed to another category.

Staff recommends making the following designations. These recommendations are pursuant to the conclusion of the merit-based review of applications. The attached Funding Briefs provide descriptions of the three program categories.

Program Category / Entity	FFY17	FFY18
1. Police-led deflection		
Cook Co Sheriff’s Office		\$79,500
Dixon Police Department	\$79,500	
Subtotal:	\$79,500	\$79,500
2. Multijurisdictional narcotic prosecution units		
Cook County SAO		\$700,000
DuPage County SAO		\$150,000
Kane County SAO		\$127,431
Kankakee County SAO		\$100,000

Lasalle County SAO		\$98,886
Madison County SAO	\$85,540	
McHenry County SAO		\$98,417
Will County SAO		\$106,613
Subtotal:	\$85,540	\$1,381,347
3. Multijurisdictional large-scale narcotic trafficking enforcement		
Blackhawk Drug TF		\$94,274
Central IL Enforcement Group		\$110,855
DuPage Metropolitan Enforcement Group		\$108,284
East Central IL TF		\$119,859
Joliet Metropolitan Area Narcotic Squad		\$111,715
Lake County MEG		\$197,778
North Central Narcotics TF		\$198,968
Quad City Metropolitan Enforcement Group		\$149,251
South Eastern IL Drug TF		\$107,202
Southern IL Drug TF		\$150,000
Southern IL Enforcement Group		\$113,996
State Line Area Narcotics TF		\$95,997
Task Force 6		\$51,285
Vermillion County Metropolitan Enforcement Group		\$140,457
West Central IL TF		\$122,550
Subtotal:	\$0	\$1,872,471
Totals:	\$165,040	\$3,333,318

Summary of Available Funds

The table below describes JAG funds under each federal fiscal year that will be available after adoption of the recommendations described in this memo:

Currently Available	FFY16	FFY17	FFY18	TOTAL
Local	\$264,426	\$352	\$0	\$264,778
State	\$1,672	\$0	\$666,743	\$668,415
Local Formula Fund Allocation	\$0	\$0	\$515,592	\$515,592
Interest Available*	\$57,644	\$3,451	\$13,738	\$74,833
Total	\$323,742	\$3,803	\$1,196,073	\$1,523,618
Original Federal Award	\$6,742,363	\$6,511,233	\$6,575,576	
Expiration	9/30/2020	9/30/2021	9/30/2021	

*As of 7/29/20.

Staff will be available at the meeting to answer any questions.

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Law Enforcement-led Deflection Program

Program Agency DUNS: Provided in chart below

Funding Source: Justice Assistance Grants (JAG) FFY17, FFY18/ No match

Request Type: Notice of Funding Opportunity #2094-1397

Program Description

On May 1, the Authority posted a Notice of Funding Opportunity (NOFO) to solicit proposals for three types of programs comprising a comprehensive law enforcement response to narcotics: law enforcement-based deflection programs, multijurisdictional large-scale trafficking enforcement programs, and multijurisdictional narcotic prosecution programs. The goal of this solicitation is to increase public safety and reduce the large social and economic cost of drugs use through specialized enforcement and prosecution of drug traffickers and the use of treatment over incarceration for low-level offenders.

The Authority implemented a Grant Accountability and Transparency Act (GATA)-compliant merit-based review process in which applications were reviewed and scored by a team of Authority grant and research staff. Applicants were screened for GATA compliance and supplanting. Two proposals are recommended are funded based on this process.

Program Activities

Law enforcement agencies have recognized that arrest and prosecution of low-level drug users does not enhance community safety or effectively reduce demand, as drug users repeatedly cycle through the criminal justice system but never address their addiction. In response, law enforcement agencies have crafted new models to reduce demand by deflecting drug users from involvement in the criminal justice to meaningful treatment. The two programs recommended for funding are built on partnerships with community health care and substance abuse treatment resources.

To be eligible for funding, deflection programs must:

- Be run by a local law enforcement agency, county sheriff's department, or a multi-jurisdictional cooperative law enforcement unit for which an Implementing Agency has been identified.
- Collaborate and partner with other police departments, if needed, to generate a wider pool of participants.
- Have a full-time service coordinator.
- Utilize the self-referral model with outreach.

- Provide training of police officers and development of intake protocol.
- Provide follow-up and aftercare. The program must follow-up with participants after treatment to determine if further services or case management are needed.
- Provide alternative options for potential participants when treatment beds or services are not available.

Goals

To increase public safety and reduce the large social and economic cost of narcotics use through the use of specialized enforcement and prosecution of drug traffickers and the use of treatment over incarceration for low-level offenders.

Priorities

The recommended programs address the following JAG Goals/Priority for Drug Enforcement and Treatment Programs:

Goal: To support research-informed and promising drug enforcement and treatment efforts by providing resources to programs that break the cycle of system involvement in the criminal justice system for people who abuse legal and illegal drugs and substances, that ensure the safety of the crime victim and the public, and that promote the payment of restitution to crime victims and to support evidence based programs that enhance public safety and reduce the amount of drugs and substances illegally manufactured and distributed.

Program Funding Detail

Under GATA grants are initiated through a NOFO process. Grants initiated through a NOFO may be supported for a maximum of three years.

Budget Detail

This JAG funding will support transportation for deflections clients, training for officers, supplies for outreach, and a sub-contract with a substance abuse provider.

Program	DUNS	FFY17	FFY18
Cook County Sheriff's Office	005525829		\$79,500
Dixon Police Department	082046194	\$79,500	
Total:		\$79,500	\$79,500

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: **Multijurisdictional Large-scale Narcotic Prosecution Program**

Program Agency DUNS: **Provided below**

Funding Source: **Justice Assistance Grants (JAG) FFY17, FFY18 / No match**

Request Type: **Notice of Funding Opportunity #2094-1397**

Program Description

On May 1st, the Authority posted a Notice of Funding Opportunity (NOFO) to solicit proposals for three types of programs comprising a comprehensive law enforcement response to narcotics: law enforcement-based deflection and diversion programs, multijurisdictional large-scale trafficking enforcement programs, and multijurisdictional narcotic prosecution programs. The goal of this solicitation is to increase public safety and reduce the large social and economic cost of drugs use through specialized enforcement and prosecution of drug traffickers and the use of treatment over incarceration for low-level offenders.

The Authority implemented a Grant Accountability and Transparency Act (GATA)-compliant merit-based review process in which applications were reviewed and scored by a team of Authority grant and research staff. Applicants were screened for GATA compliance and supplanting. Eight proposals are recommended are funded based on this process.

Program Activities

Drug prosecution units were designed to address the complexities of prosecuting drug trafficking crimes. For example, in drug trafficking cases, the prosecution needs strong evidence proving the involvement in a single enterprise to distribute drugs, as well as an understanding the drug trafficking organization, its day-to-day operations, and links to organized crime and overseas suppliers. These drugs units work with law enforcement officers to provide prosecutorial oversight to those cases so that the evidence will withstand legal challenges and lead to a successful prosecution. While there is not enough research to draw conclusions on specialized drug prosecution units, research examining other specialized prosecution units have shown these units reduce the likelihood of case rejection.

To be eligible for funding, drug prosecution programs must:

- Be run by a county state's attorney's office or the Office of the State's Attorney's Appellate Prosecutor.
- Provide a memorandum of understanding demonstrating collaborative involvement with one or more drug trafficking enforcement units, as defined in Category 3.

Goals

To increase public safety and reduce the large social and economic cost of narcotics use through the use of specialized enforcement and prosecution of drug traffickers and the use of treatment over incarceration for low-level offenders.

Priorities

The recommended programs address the following JAG Goals/Priority for Prosecution, Court Programs, and Indigent Defense:

Goal: To support all public prosecutors, including appellate prosecutors, by providing the resources and training necessary to assist them in protecting public safety by holding offenders accountable while ensuring the constitutional rights of the accused and enforcing crime victims' constitutional and statutory rights.

Funding Prospectus

Under the Grants Accountability and Transparency Act (GATA) grants are initiated through a Notice of Funding Opportunity process. Grants initiated through a NOFO may be supported for a maximum of three years.

Budget Detail**Multijurisdictional Large-scale Narcotic Prosecution Units:**

This JAG funding will support a percentage of 24 FTE salaries, a percentage of 6 FTE fringe, travel for 2 trainings and office supplies.

Program Category / Entity	DUNS	FFY17	FFY18
Cook County SAO	005525829		\$700,000
DuPage County SAO	135836026		\$150,000
Kane County SAO	963572417		\$127,431
Kankakee County SAO	075621631		\$100,000
Lasalle County SAO	071421994		\$98,886
Madison County SAO	040140154	\$85,540	
McHenry County SAO	082044694		\$98,417
Will County SAO	968949904		\$106,613
Totals:		\$85,540	\$1,381,347

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: **Multijurisdictional Large-scale Trafficking Enforcement Program**

Program Agency DUNS: **Provided below**

Funding Source: **Justice Assistance Grants (JAG) FFY18 / No match**

Request Type: **Notice of Funding Opportunity #2094-1397**

Program Description

On May 1st, the Authority posted a Notice of Funding Opportunity (NOFO) to solicit proposals for three types of programs comprising a comprehensive law enforcement response to narcotics: law enforcement-based deflection and diversion programs, multijurisdictional large-scale trafficking enforcement programs, and multijurisdictional narcotic prosecution programs. The goal of this solicitation is to increase public safety and reduce the large social and economic cost of drugs use through specialized enforcement and prosecution of drug traffickers and the use of treatment over incarceration for low-level offenders.

The Authority implemented a Grant Accountability and Transparency Act (GATA)-compliant merit-based review process in which applications were reviewed and scored by a team of Authority grant and research staff. Applicants were screened for GATA compliance and supplanting. Fifteen proposals are recommended are funded based on this process.

Program Activities

In order to combat drug trafficking, states use multijurisdictional drug task forces, which are made up of law enforcement officers from state, county, and local police departments to pool resources and more efficiently and effectively combat the drug distribution in multiple jurisdictions. Outcome evaluations have found that multijurisdictional drug task forces are more effective at making more serious drug arrests than non-drug task force law enforcement.

To be eligible for funding, drug trafficking enforcement programs must:

- Be run by a cooperative unit comprised of three or more law enforcement agencies for which an Implementing Agency has been identified.
- Have a written interagency agreement between all participating agencies defining activities and responsibilities.
- Provide a memorandum of understanding demonstrating collaborative involvement with drug prosecution toward meeting the program's goals and objectives.
- Have a plan of intelligence sharing via computerized networking.
- Have a plan for forfeiture sharing, including how funds will be used.
- Provide a letter of commitment to staffing the program from each participating agency.

- Provide a plan for submitting current task force personnel rosters with updated personnel status for U.S. Bureau of Justice Assistance Center for Task Force Integrity and Leadership training.

Goals

To increase public safety and reduce the large social and economic cost of narcotics use through the use of specialized enforcement and prosecution of drug traffickers and the use of treatment over incarceration for low-level offenders.

Priorities

The recommended programs address the following JAG Goals/Priority for Law Enforcement Programs:

Goal: To support law enforcement by providing them with the resources necessary to protect and serve the community through the development and implementation of data driven, promising, or research-informed policing strategies that protect public safety and reduce crime, particularly violent crime.

Funding Prospectus

Under the Grants Accountability and Transparency Act (GATA) grants are initiated through a Notice of Funding Opportunity process. Grants initiated through a NOFO may be supported for a maximum of three years.

Budget Detail

Multijurisdictional Large-Scale Narcotic Trafficking Enforcement:

This JAG funding will support a percentage of 68 FTE salaries, overtime, and increases, a percentage of 17 FTE fringe, travel for 3 trainings, office supplies, equipment including evidence locker, portable radios, 3 vehicles, and medical kits. Funding will also support contractual services including maintenance for vehicle fleet, phone/internet service, security alarm service, cellular service, and payroll service.

Program Category / Entity	DUNS	FFY18
Blackhawk Drug TF	034063404	\$94,274
Central IL Enforcement Group	054218524	\$110,855
DuPage Metropolitan Enforcement Group	138831636	\$108,284
East Central IL TF	055784664	\$119,859
Joliet Metropolitan Area Narcotic Squad	020035838	\$111,715
Lake County MEG	082049834	\$197,778
North Central Narcotics TF	074579608	\$198,968
Quad City Metropolitan Enforcement Group	079130928	\$149,251

South Eastern IL Drug TF	031585680	\$107,202
Southern IL Drug TF	618229785	\$150,000
Southern IL Enforcement Group	022732361	\$113,996
State Line Area Narcotics TF	034684092	\$95,997
Task Force 6	100960561	\$51,285
Vermillion County Metropolitan Enforcement Group	079148581	\$140,457
West Central IL TF	075901603	\$122,550
Total:		\$1,872,471



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300 W. Adams Street • Suite 200 • Chicago, Illinois 60606 • (312) 793-8550

MEMORANDUM

TO: Budget Committee Members

FROM: Greg Stevens, Associate Director, Federal & State Grants Unit

DATE: August 20, 2020

RE: **FFY18 Violence Against Women Act (VAWA) Plan Recommendations**

DESIGNATION REDUCTION

The Peoria County Probation Department recently returned \$2,212 of its \$125,048 designation for its Domestic Violence Multi-Disciplinary Team program because those funds remained unspent at the end of the grant's performance period. Staff recommends reducing the designation by \$2,212 and making those funds available for future programming.

RECOMMENDED DESIGNATIONS

VAWA Culturally Specific Services Program

The VAWA Formula grant requires that recipients of the award use no less than 10% of the amount allocated for victim services to enhance culturally specific services for victims of sexual assault, domestic violence, dating service and stalking. Grantees must be a culturally specific community-based program with experience in servicing or capacity to serve victims of domestic violence and sexual violence.

At the June 20, 2019, Budget Committee Meeting, the Budget Committee approved issuance of a notice of funding opportunity for up to \$300,000 in FFY18 VAWA funds.

ICJIA issued the notice of funding opportunity in February 2020 to solicit applications from culturally specific agencies to provide services to victims of domestic violence and sexual assault to be supported with FFY18 VAWA funds. The notice detailed federal VAWA requirements and program outline.

Eight applications were received and scored by a team of ICJIA grant and research staff, following ICJIA's Grant Accountability and Transparency Act-compliant, merit-based review process. Three of the eight were selected for funding.

Staff recommends designating \$300,000 in FFY18 VAWA funds to the programs listed below for an initial 12 months. The actual awards may be less than the request made but not more.

PROGRAM	FFY18
Apna Ghar	\$100,000
Healthcare Alternative Systems	\$100,000
KAN-WIN	\$100,000
Total	\$300,000

See the attached Grant Recommendation Reports for further detail.

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Culturally Specific Services Program – Apna Ghar

Program Agency DUNS: 798559993

Funding Source: FFY18 Violence Against Women Act: \$100,000; No Match

Agency Budget: \$2,076,500

Request Type: Notice of Funding Opportunity #1744-1269

Program Description

The Violence Against Women Act (VAWA) Culturally Specific services program enhances culturally specific services for victims of sexual assault, domestic violence, dating violence, and stalking. This program creates a unique opportunity for culturally specific community-based organizations to address the critical needs of victims of domestic violence and sexual assault in a manner that affirms a victim’s culture and effectively addresses language and communications barriers.

Program Activities

Apna Ghar will provide critical, comprehensive, culturally competent services, and conduct outreach and advocacy across communities to end gender violence. Apna Ghar seeks to end gender violence through an approach of highly effective and innovative services for survivors, advocacy and community education and accountability.

Apna Ghar will serve immigrant and refugee survivors of gender violence, including underserved, newly arrived Asian and Asian American immigrants and refugees.

Goals

Goal 1: Provide culturally specific services to victims of domestic violence, sexual assault, stalking, or human trafficking.	
Process Objectives (5 minimum)	Performance Measures
<i>Provide culturally specific services to [100% of victims] of limited English proficiency.</i>	<i>Number of victims of limited English proficiency who received culturally specific services.</i>
<i>Provide immigration advocacy to [100% of victims].</i>	<i>Number of victims who received immigration advocacy services.</i>
<i>Provide language/translation/interpretation</i>	<i>Number of victims who received</i>

<i>services to [100% of victims].</i>	<i>language/translation/interpretation services.</i>
<i>Provide culturally specific counseling services to [# of victims].</i>	<i>Number of victims who received culturally specific counseling services.</i>
<i>Provide transportation to [100% of victims who request transportation].</i>	<i>Number of victims who received transportation.</i>

Goal 2: Strengthen responses to victims of culturally specific groups by providing training to professionals of mainstream/traditional victim service, social service, legal/justice system, health care, or other community partners about culturally specific responses to domestic violence, sexual assault, stalking, or human trafficking.	
Process Objectives (5 minimum)	Performance Measures
<i>Provide 4 trainings to professionals from legal organizations about cultural diversity and oppression and culturally specific responses to victims.</i>	<i>Number of training sessions held.</i>
<i>Train 40 people from legal organizations about cultural diversity and oppression and culturally specific responses to victims</i>	<i>Number of people trained.</i>
<i>Provide 2 trainings to professionals from mainstream/victim service organizations about cultural diversity and oppression and culturally specific responses to victims.</i>	<i>Number of training sessions held.</i>
<i>Train 20 people from legal organizations about cultural diversity and oppression and culturally specific responses to victims</i>	<i>Number of people trained.</i>
<i>Provide 6 trainings to professionals from health care professionals about cultural diversity and oppression and culturally specific responses to victims.</i>	<i>Number of training sessions held.</i>
<i>Train 60 people from legal organizations about cultural diversity and oppression and culturally specific responses to victims</i>	<i>Number of people trained.</i>
<i>Reach at least 200 people through outreach and awareness activities</i>	<i>Number of outreach activities. Number of people reached.</i>

Outcome Objectives	Performance Measures
<i>80% of training participants will have increased knowledge about cultural diversity and oppression.</i>	<i>Number of people trained. Number of training attendees demonstrating increased knowledge about cultural diversity and oppression.</i>
<i>80% of training participants will have increased knowledge about culturally specific responses to victims.</i>	<i>Number of people trained. Number of training attendees demonstrating increased knowledge about culturally specific responses to victims.</i>

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include public awareness, core services, and increasing funding for services to underserved victims.

Program Funding Detail

This designation would support the first 12 months of a 36-month funding period. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not Applicable

Budget Detail

	Total
Personnel	\$80,000
Fringe	\$14,880
Travel	\$2,380
Equipment	\$0
Supplies	\$2,740
Contractual	\$0
Indirect / Other Costs	\$0
Totals Federal / State and Match:	\$100,000

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Culturally Specific Services Program – Healthcare Alternative Systems

Program Agency DUNS: 076860691

Funding Source: FFY18 Violence Against Women Act: \$100,000; No Match

Agency Budget: \$7,356,309

Request Type: Notice of Funding Opportunity #1744-1269

Program Description

The Violence Against Women Act (VAWA) Culturally Specific services program enhances culturally specific services for victims of sexual assault, domestic violence, dating violence, and stalking. This program creates a unique opportunity for culturally specific community-based organizations to address the critical needs of victims of domestic violence and sexual assault in a manner that affirms a victim’s culture and effectively addresses language and communications barriers.

Program Activities

HAS will offer bilingual, culturally responsive services for Spanish-speaking clients and often undocumented domestic violence victims. Program participants receive a comprehensive spectrum of services onsite that include individual support (crisis, telephone, and in-person), safety planning, domestic violence psychoeducation and counseling, court advocacy, community referrals, and support groups. This program has standardized the phone assessment to its protocol to determine the appropriateness of placement and efficient service. After the phone assessment, a bilingual intake assistant schedules the participant’s initial session with the counselor who reviews the phone screening to determine how the person was referred to the program, the presenting issues, and level of lethality.

Domestic violence counselors and advocates have worked together to update and modify surveys and assessments so that tools used for evaluation may be beneficial to both participants and counselors—and efficient in court settings. Additionally, the bilingual staff has worked at translating all documents to provide more culturally relevant services for the Spanish-speaking community. Every service plan includes a case management goal because it is imperative that staff maintain linkage agreements with partners to ensure a strong referral network for services.

Goals

Goal 1: Provide culturally specific services to victims of domestic violence, sexual assault, stalking, or human trafficking.	
Process Objectives (5 minimum)	Performance Measures

<i>Provide culturally specific services to 150 of limited English proficiency.</i>	<i>Number of victims of limited English proficiency who received culturally specific services.</i>
<i>Provide immigration advocacy to 50.</i>	<i>Number of victims who received immigration advocacy services.</i>
<i>Provide language/translation/interpretation services to 50.</i>	<i>Number of victims who received language/translation/interpretation services.</i>
<i>Provide culturally specific counseling services to 100.</i>	<i>Number of victims who received culturally specific counseling services.</i>
<i>Provide transportation to 65.</i>	<i>Number of victims who received transportation.</i>
Outcome Objectives (2 minimum)	Performance Measures
<i>70% of victims served will know more ways to plan for their safety.</i>	<i>Percent of victims served who report knowing more ways to plan for their safety.</i>
<i>85% of victims served will know more about community resources.</i>	<i>Percent of victims served who report knowing more about community resources.</i>

Goal 2: Strengthen responses to victims of culturally specific groups by providing training to professionals of mainstream/traditional victim service, social service, legal/justice system, health care, or other community partners about culturally specific responses to domestic violence, sexual assault, stalking, or human trafficking.	
Process Objectives (5 minimum)	Performance Measures
<i>Provide 2 to professionals from [organization type or discipline] about cultural diversity and oppression and culturally specific responses to victims.</i>	<i>Number of training sessions held.</i>
Outcome Objectives	Performance Measures
<i>[100% of training attendees] will have increased knowledge about cultural diversity and oppression.</i>	<i>Number of people trained. Number of training attendees demonstrating increased knowledge about cultural diversity and oppression.</i>
<i>[100% of training attendees] will have increased knowledge about culturally specific responses to victims.</i>	<i>Number of people trained. Number of training attendees demonstrating increased knowledge about culturally specific responses to victims.</i>

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include public awareness, core services, and increasing funding for services to underserved victims.

Program Funding Detail

This designation would support the first 12 months of a 36-month funding period. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not Applicable

Budget Detail

	Total
Personnel	\$90,000
Fringe	\$10,000
Travel	\$0
Equipment	\$0
Supplies	\$0
Contractual	\$0
Indirect / Other Costs	\$0
Totals Federal / State and Match:	\$100,000

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Culturally Specific Services Program – KAN WIN

Program Agency DUNS: 939671442

Funding Source: FFY18 Violence Against Women Act: \$100,000; No Match

Agency Budget: \$1,179,849

Request Type: Notice of Funding Opportunity #1744-1269

Program Description

The Violence Against Women Act Culturally Specific services program enhances culturally specific services for victims of sexual assault, domestic violence, dating violence, and stalking. This program creates a unique opportunity for culturally specific community-based organizations to address the critical needs of victims of domestic violence and sexual assault in a manner that affirms the victim's culture and effectively addresses language and communications barriers.

Program Activities

This program increases access to services for limited English proficient victims of crime including domestic violence, sexual assault, stalking, and human trafficking with a focus on East and Southeast Asian communities. KAN-WIN will accomplish this by training community members to become Multilingual Advocates. Multilingual Advocates will provide culturally relevant and linguistically specific initial response to victims and make appropriate referrals. The program also will provide holistic healing and peer support opportunities through counseling and group art therapy sessions, expand legal advocacy services by partnering with the North Suburban Legal Aid Clinic to offer free legal clinics and potential intakes for legal representation, and promote awareness of victim services by working directly with community members and ethnic media outlets

Goals

Goal 1: Increase KAN-WIN and community partners' capacity to respond to the needs of victims in crisis.

While KAN-WIN's current linguistic capacity includes Korean, Japanese, Chinese (Mandarin and Cantonese), and Spanish, more language help is needed to serve the diversity of KAN-WIN's clientele. To fill this need, KAN-WIN will recruit and train community members to become Multilingual Advocates. Multilingual Advocates will receive intensive education on cultural sensitivity and other challenges and barriers faced by immigrant victims such as victim-blaming culture

Goal 2: Increase counseling, peer support, and healing opportunities for victims and their families a through individual counseling and art therapy sessions.

In immigrant and linguistically isolated communities, counseling, therapy, and other mental

health related services are difficult to access due to the limited linguistic capacity of many mainstream service organizations and the victims' lack of health insurance and financial means to afford assistance, among other factors

Goal #3: Connect victims to legal advocacy services and gain access to legal consultation and representation through community collaboration.

Through the free legal clinic, KAN-WIN seeks to offer a safe space for victims to gain a thorough understanding of legal options in their own language from experts in the field without any pressure to participate in the criminal justice system or process.

Goal #4: Promote awareness of victim services through direct engagement of community members and ethnic media outlets.

It is necessary to engage in culturally grounded peer outreach by using networks of community members to build trust and create awareness around available services. Multilingual Advocates will play this pivotal role in peer outreach by partnering with KAN-WIN to engage their network of friends, families, and acquaintances and utilize their own strengths to educate them about gender-based violence issues. KAN-WIN will also produce flyers, promotional items, and stickers for Multilingual Advocates to translate to various languages specific to their communities so they can be displayed at local ethnic businesses. Multilingual Advocates will also reach out to ethnic media outlets to issue articles and advertisements in different languages and connect KAN-WIN to churches and temples, which are important hubs for community and often the first place immigrants turn to for support

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include public awareness, core services, and increasing funding for services to underserved victims.

Program Funding Detail

This designation would support the first 12 months of a 36-month funding period. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not Applicable

Budget Detail

	Total
Personnel	\$66,169
Fringe	\$8,115
Equipment	\$0
Supplies	\$4,200

Travel	\$0
Contractual	\$21,516
Indirect / Other Costs	\$0
Totals Federal / State and Match:	\$100,000



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MEMORANDUM

TO: Budget Committee Members
FROM: Greg Stevens, Associate Director, Federal & State Grants Unit
DATE: August 20, 2020
RE: **FFY19 Violence Against Women Act (VAWA) Sexual Assault Services Programs (SASP) Plan Recommendations**

RECOMMENDED DESIGNATIONS

Human Sex Trafficking Services Program

At the June 20, 2019, Budget Committee Meeting, the committee approved issuance of a notice of funding opportunity for up to \$538,160 in FFY19 VAWA SASP funds. This funding opportunity aimed to improve services for and the response to victims of sexual assault who have also experienced human sex trafficking.

ICJIA issued the notice of funding opportunity in June 2020. The notice detailed federal VAWA requirements and provided a program outline. Funded programs must offer services as direct intervention in response to sexual assault victimization or that assist direct intervention in response to sexual assault victimization.

Six applications were received and scored by a team of ICJIA grant and research staff, following ICJIA’s Grant Accountability and Transparency Act-compliant, merit-based review process. Three of the eight were selected for funding.

Staff recommends designating \$515,000 in FFY19 VAWA SASP funds to the programs listed below for an initial 12 months. The actual awards may be less than the request made, but not more.

PROGRAM	FFY19
A Safe Place	\$175,000
Family Resources	\$175,000
Life Span	\$175,000
Total	\$525,000

See the attached Grant Recommendation Reports for further detail.

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Human Sex Trafficking Services Program – A Safe Place

Program Agency DUNS: 122324277

Funding Source: FFY19 Violence Against Women Act (VAWA) Sexual Assault Services Program (SASP) \$175,000; No Match

Agency Budget: \$5,667,249

Request Type: Notice of Funding Opportunity #1743-1539

Program Description

Program Activities

A Safe Place (ASP) will provide direct intervention services for 45 human sex trafficking victims and their dependent children during the 12-month grant period. ASP’s Human Trafficking Program already incorporates survivor-informed policies and practices, which are victim-centered, and uses a trauma-informed approach. ASP’s Human Trafficking Program’s services will include crisis intervention, safety planning, case management, and the identification of external resources and assistance in accessing them. Additionally, ASP will offer and provide human sex trafficking victims with services that they agree to participate in, including: all forms of advocacy (i.e. medical, dental, legal [including orders of protection]; housing, education, employment, economic, immigration, and help with navigating public benefits and resources); individual and/or group counseling; mental health services; substance use disorder treatment/services (universally needed by victims); life skills/fundamental skills training to improve daily living and/or enhance independence; workforce skills training/job search assistance, transportation to services or court proceedings; interpretation/translation services (ASP already has bilingual Spanish/English; and Russian/English and uses Lark interpretation services for other languages); childcare; clothing, food, and basic necessities.

Requested funds will allow ASP to provide the wraparound services mentioned above and add a family therapist who will offer mental health services; survivor-led mentoring and support groups; increased access to healthcare; vicarious trauma training for all ASP staff, since the majority of staff encounter human sex trafficking victims and their children.

Goals

Goal: Expand and enhance effective, victim-centered, trauma-informed services for victims of human sex trafficking.	
Process Objectives	Performance Measures
Process objectives (4 minimum) – Process objectives describe intended activities/services/strategies that will be delivered with program implementation. Applicants should include the four listed below plus additional objectives for each additional service offered.	

Required Services	
Provide (45#) victims with crisis intervention.	Number of victims who received crisis intervention.
Provide (25#) victims with safety planning.	Number of victims who received safety planning.
Provide (25#) victims with case management.	Number of victims who received case management.
Provide (45#) victims with referrals to external supports and services.	Number of victims who received referrals to external supports and services.
Other (Optional) Services – Use additional rows below to include similar process objectives for each service to be offered.	
Provide (≥ 5) victims with medical care	Number of victims who received medical care.
Provide counseling for (≥ 10) victims	Number of victims who received counseling.
Provide substance abuse services for (≥ 20) victims	Number of victims who received substance abuse services.
Provide a Survivor-led Support Group for (≥ 10) victims of HST	Number of victims who participated in the Survivor-led Support Group.
Outcome Objectives	Performance Measures
Outcome objectives (1 minimum) – Outcome objectives are changes you hope to see in your target population(s) as a result of services. Applicants may use one of the examples OR develop their own.	
<i>(36 or ≥80%) of victims served will report that most of their needs were addressed with services.</i>	<i>(36 or ≥ 80%) of victims served reporting most of their needs were addressed with services.</i>
<i>(36 or ≥80%) of victims served will know more about community resources.</i>	<i>(36 or ≥ 80%) of victims served will know more about community resources.</i>

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include funding core direct services to victims of all crime types and increasing public awareness.

Program Funding Detail

This designation would support the first 12 months of a 36-month funding period. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not applicable.

Budget Detail

	Total
Personnel: Approximately 2.0 FTE (1 FTE Family Therapist; 1 FTE Peer Mentoring/Support Group Counselor/Leader)	\$92,253
Fringe:	\$25,147
Travel: Estimated travel expenses for local travel	\$3,024
Equipment: Computer equipment	\$4,000
Supplies: General office & program supplies	\$3,777
Contractual: Estimated cost for office space, internet services, trainings and client assistance	\$33,234
Indirect / Other Costs	\$13,565
Totals Federal / State and Match:	\$175,000

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Human Sex Trafficking Services Program – Family Resources

Program Agency DUNS: 078086246

Funding Source: FFY19 Violence Against Women Act Sexual Assault Services Program:
\$175,000; No Match

Agency Budget: \$9,903,811

Request Type: Notice of Funding Opportunity #1743-1539

Program Description

Family Resources' Illinois Braking Traffik Program is a component of their Survivor Services Department. The mission of our Braking Traffik program is to support and enable the discovery of, and response to, incidents of human trafficking through a survivor-centered, trauma-informed, multidisciplinary, and collaborative approach. The purpose of Braking Traffik is to provide community outreach and education, legislative advocacy, and comprehensive services to survivors of human sex trafficking.

Program Activities

Illinois Braking Traffik Program assists survivors in meeting immediate, short, and long-term needs along a continuum of care, supporting them throughout their healing journey.

Their service delivery model is survivor-centered, allowing survivors to regain control in their lives and move to a place of self-sufficiency. Their staff receive specialized training to ensure that services are trauma-informed and offered in a culturally, linguistically and age appropriate manner. This includes offering bi-lingual Spanish-speaking services and utilizing translation services for other languages. Core components of the program include:

Crisis intervention: The center provides 24-hour crisis intervention and crisis hotline via telephone or in person for survivors or their non-offending significant others (partners, friends, family, etc.). Their Crisis Line Advocates mainly provide this service. They also utilize non-paid volunteers to cover a rotating schedule. Crisis line services may include a risk assessment and initial safety planning when this is appropriate. The main goal of this service is to provide immediate support and, offer assistance for engagement in services and referrals to other social services agencies.

Safety and Service Planning: A survivor's safety plan guides all service planning, utilizing and expanding on interventions the survivor already uses to keep themselves and their children safe. A survivor's safety plan is created the first time they meet with an advocate and is reviewed each time the survivor meets with any staff member. Service plans are individualized, survivor-driven, and guided by the safety plan. The survivor establishes goals and objectives based on their needs and strengths. The service plan consists of long and short-term goals for each survivor; acting as the road map that guides service delivery. The service plan is reviewed

each time the advocate or counselor meets with the survivor. This provides opportunity for the survivor to identify any safety concerns, to change goals that may no longer be relevant, and to recognize the success they have had while in services. Those successes are the key to re-building a survivor's self-esteem; helping them see their personal strengths/capabilities to ultimately regain control of their lives. As services conclude, a survivor's service plan is updated in a manner that bears ongoing safety planning in mind and helps guide referrals for appropriate community resources.

Case management, advocacy and referral services: Braking Traffik assists survivors and significant others by advocating on their behalf. Advocacy services include, but are not limited to: immigration, employment, systems, child protection/welfare, children's services, legal (emergency, civil, and criminal), medical, and divorce/custody/visitation. They provide assistance by way of referral and ongoing case management to help reduce barriers to accessing supports (child care, transportation, translation, etc.); as well as assistance providing referrals and coordinating services to substance abuse treatment facilities, mental health agencies, disability service providers, unemployment, etc.

Additionally, Braking Traffik provides comprehensive training/technical assistance and additional direct services. Comprehensive training and technical assistance are provided to law enforcement; social services; child welfare systems; medical personnel; attorneys/judges; schools; faith based groups; transportation, manufacturing, and hospitality industries; refugee resettlement agencies; legislators; youth; landlords; and LGBTQ (lesbian, gay, bisexual, transgender, queer/questioning) serving agencies. The direct services provided to survivors include: mentoring and support groups; counseling; economic empowerment services; emergency food, clothing, and transportation assistance; translation/interpretation services; life skills; immediate shelter and related supportive services; a volunteer program; public awareness (public service campaigns and community outreach); and restorative justice work to collaborate with non-traditional partners in the community to address the issue of human trafficking.

Goals

Goal: Expand and enhance effective, victim-centered, trauma-informed services for victims of human sex trafficking.	
Process Objectives	Performance Measures
Process objectives (4 minimum) – Process objectives describe intended activities/services/strategies that will be delivered with program implementation. Applicants should include the four listed below plus additional objectives for each additional service offered.	
Required Services	
Provide (<u>75</u>) victims with crisis intervention.	Number of victims who received crisis intervention.
Provide (<u>75</u>) victims with safety planning.	Number of victims who received safety planning.
Provide (<u>75</u>) victims with case management.	Number of victims who received case management.
Provide (<u>75</u>) victims with referrals to external supports and services.	Number of victims who received referrals to external supports and services.
Other (Optional) Services – Use additional rows below to include similar process objectives for each service to be offered.	

Provide 75 victims with general advocacy	Number of victims who received general advocacy.
Provide 25 victims with individual/group counseling	Number of victims who received individual/group counseling.
Provide 25 victims with transportation assistance	Number of victims who received transportation assistance.
Provide 5 victims with interpretation/translation	Number of victims who received interpretation/translation assistance.
Provide 75 victims with life skills/fundamental skills	Number of victims who received life skills/fundamental skills.
Provide 10 victims with survivor-led mentoring/support groups	Number of victims who received survivor-led mentoring/support groups.
Connect 75 victims with specialized services	Number of victims who are connected to specialized services.
Outcome Objectives	Performance Measures
Outcome objectives (1 minimum) – Outcome objectives are changes you hope to see in your target population(s) as a result of services. Applicants may use one of the examples OR develop their own.	
Increase accessibility to human sex trafficking services by addressing the needs of 75 HST survivors.	Number of survivors reporting that their needs were addressed with services.
Decrease victimizations through increased prevention by providing professional trainings to 15 community resources, schools, or other professional settings	Number of professional trainings offered in Rock Island, Henry and Mercer Counties.
Provide prevention workshops to 25 community resources, schools, or other professional settings.	Number of workshops offered in Rock Island, Henry and Mercer Counties.

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include funding core direct services to victims of all crime types and increasing public awareness.

Program Funding Detail

This designation would support the first 12 months of a 36-month funding period. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not applicable.

Budget Detail

	Total
Personnel: Approximately 2.55 FTE (2 FTE Advocates; .10 FTE Program Director; .10 FTE Program Supervisor; .05 FTE HR Generalist; .05 FTE Grant Accountant; .05 FTE Volunteer Coordinator; .10 FTE Crisis Line 1 Monitor; .10 FTE Crisis Line 2 Monitor)	\$95,068
Fringe:	\$28,520
Travel: Estimated travel expenses for local travel	\$2,376
Equipment: Computer equipment (2 laptops)	\$1,700
Supplies: General office & program supplies	\$5,000
Contractual: Estimated cost for staff trainings, client assistance	\$17,342
Indirect / Other Costs:	\$14,991
Totals Federal / State and Match:	\$175,000

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Human Sex Trafficking Services Program – Life Span

Program Agency DUNS: 057400087

Funding Source: FFY19 Violence Against Women Act (VAWA) Sexual Assault Services Program (SASP) \$175,000; No Match

Agency Budget: \$3,368,037

Request Type: Notice of Funding Opportunity #1743-1539

Program Description

Life Span is seeking funding to expand its Human Trafficking Project (HTP) and provide data-driven, trauma-informed, client-centered, and comprehensive services to victims of sexual assault and sex trafficking. While Life Span program administrators recognized assess incoming clients for trafficking and wait for referrals from other programs, they recognized a need to extend their reach to find those most at-risk for sexual assault and sex trafficking.

Program Activities

The HTP will strategically extend services into communities where sex trafficking and sexual assault is happening or likely to happen. These communities are selected based on existing data about vulnerabilities to trafficking. An evaluation portion of the project will continuously explore new areas to embed services and identification strategies that seem to be most effective, including settings that facilitate referrals.

The HTP will enhance local systems of care that are in the targeted communities and strengthen the ability of partners and communities to respond to sex trafficking. At the same time, the program will work to raise awareness of sex trafficking and the victimization that it causes.

Goals

Goal: Expand and enhance effective, victim-centered, trauma-informed services for victims of human sex trafficking.	
Process Objectives	Performance Measures
Process objectives (4 minimum) – Process objectives describe intended activities/services/strategies that will be delivered with program implementation. Applicants should include the four listed below plus additional objectives for each additional service offered.	
Required Services	
Provide (_60_) victims with crisis intervention.	Number of victims who received crisis intervention.
Provide (_60_) victims with safety planning.	Number of victims who received safety planning.

Provide (_20_) victims with case management.	Number of victims who received case management.
Provide (_20) victims with referrals to external supports and services.	Number of victims who received referrals to external supports and services.
Other (Optional) Services – Use additional rows below to include similar process objectives for each service to be offered.	
Provide 60 victims with information about legal remedies	Number of clients who received information about civil legal remedies Number of clients who received information about criminal legal remedies, including charges Number of clients who received information about family law matters Number of clients who received information about immigration. Number of clients who received information about expungement of criminal records related to trafficking experience
Provide 45 victims with legal advice	Number of clients who received legal advice regarding protective orders Number of clients who received legal advice about family law matters Number of clients who received legal advice about immigration matters
Provide 20 victims with legal representation in protective order and/or family law matters	Number of clients who received are represented on protective order cases
Provide 10 victims with legal information about crime victims rights	Number of clients who received legal assistance related to intervention with other organizations in addressing the consequences of victimization
Provide 60 victims with safety planning	Number of clients who receive safety planning
Provide 45 victims with referrals and case management.	Number of clients who received case management assistance Number of clients who received referrals to services.
Increase capacity of five organizations to respond to human trafficking	Number of organizations who receive specialized training on human trafficking Number of organizations who receive capacity building assistance
Outcome Objectives	Performance Measures
Outcome objectives (1 minimum) – Outcome objectives are changes you hope to see in your target population(s) as a result of services. Applicants may use one of the examples OR develop their own.	
25% of victims served will report that most of their needs were addressed with services.	15 victims served reporting most of their needs were addressed with services.
75% of victims served will report that they learned more about resources in their	45 victims served will report they have learned about community resources.

community.	
100% of victims served will report that they developed a safety plan	60 victims served will report they have increased knowledge on safety.

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include funding core direct services to victims of all crime types and increasing public awareness.

Program Funding Detail

This designation would support the first 12 months of a 36-month funding period. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not applicable.

Budget Detail

	Total
Personnel: Approximately 2.6 FTE Training Coordinators (.50 FTE Staff Attorney; 1 FTE Community Outreach Advocate; .10 FTE Director of Policy & Advocacy; 1 FTE Program Assistant)	\$124,875
Fringe:	\$29,137
Travel: Estimated travel expenses for local travel & one out of state conference	\$3,513
Equipment:	
Supplies: General office & program supplies	\$6,771
Contractual: Trainer, case management system, conference registration fees	\$8,483
Indirect / Other Costs:	\$2,221
Totals Federal / State and Match:	\$175,000



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MEMORANDUM

To: Budget Committee Members
From: Greg Stevens, Associate Director, Federal & State Grants Unit
Date: August 20, 2020
Subject: **FFY18 Victims of Crime Act Plan Adjustment**

This memo describes recommended FFY18 Victims of Crime Act (VOCA) designations.

RECOMMENDED DESIGNATIONS

Services to Victims of Domestic Violence

In keeping with the priorities identified by ICJIA’s Ad Hoc Victim Services Committee, staff recommends designating \$455,000 in FFY18 funds to the Chicago Department of Family and Support Services to fund the Statewide Domestic Violence Hotline. Please see the attached Grant Recommendation Report for more information.

Illinois Helping Everyone Access Linked Systems (HEALS)

At the June 20, 2019, Budget Committee Meeting, the Committee approved issuance of a notice of funding opportunity for up to \$2.7 million in FFY17 VOCA funds for the Illinois Helping Everyone Access Linked Systems (HEALS) project. HEALS supports cross-system collaborations that alleviate the burden of finding services to address child and youth victimization. These collaborations must ensure appropriate care and services are made available to all victims from their first point of contact, such as doctor’s offices, schools, local police stations, or sheriff’s offices. Staff recommends designating \$4,203,154 in FFY18 VOCA funds to the seven programs listed below for an initial 12 months.

Agency Name	FFY18 Amount
Catholic Charities	\$666,667
City of Rockford	\$216,988
Egyptian Health Department	\$800,000
Egyptian Health Department	\$666,667
Erie Neighborhood House	\$666,667
Lake County Crisis Center	\$666,667
Macon County (Child 1 st Center)	\$140,565
University of Illinois-Chicago	\$378,933
TOTALS	\$4,203,154

Trauma Recovery Centers

The purpose of the Trauma Recovery Center (TRC) program is to support comprehensive mental health and case management services through implementation of the TRC model based in San Francisco, Calif. The TRC model serves victims of violent crime and their families in underserved communities with high levels of violence. Underserved communities are those in which significant numbers of people face substantial barriers to accessing needed services. Vulnerable and underserved populations include young people of color, those who are homeless, LGBTQ+ people, people with chronic mental health issues and/or substance use disorders, and non-English speaking people. Those living in poverty also face substantial barriers to treatment access. These barriers include, but are not limited to, a lack of transportation or childcare, language accessibility, and social stigma attached to seeking help. An ICJIA victims needs assessment confirmed these barriers to treatment and identified a lack of services that are sensitive to the needs of vulnerable victims in Illinois.

The TRC model addresses both the psychological and tangible needs of violent crime victims and their families, particularly those in underserved groups. The model uses coordinated and comprehensive clinical case management to provide trauma-informed, evidence-based mental health services. 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. The model uses early and assertive outreach and coordinated clinical case management to provide services to victims whose trauma needs require a greater level of engagement than traditional service models generally provide. In this model, a single clinician actively engages with victims to provide both clinical intervention and case management and works toward client-defined priorities. The model offers mental health interventions and advocacy services in tandem, simultaneously addressing the multifaceted social and tangible needs of victims. The model eases access to a variety of resources, allowing for services tailored to individual needs.

Staff recommends designating \$4,203,154 in FFY18 VOCA funds to the five programs listed below for an initial 12 months of a 36-month program period.

Agency Name	FFY18 Amount
Advocate Christ Medical Center	\$1,200,000
Advocate Condell Medical Center	\$781,793
OSF Health Care System, dba St. Francis Medical Center (Peoria)	\$798,580
OSF Health Care System, dba St. Anthony Medical Center (Rockford)	\$793,099
Southern Illinois University School of Medicine	\$933,944
TOTALS	\$4,507,416

Please see the attached Grant Recommendation Reports for more information.

Staff will be available at the meeting to answer any questions.

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

<u>Program Name:</u>	City of Chicago, Department of Family and Support Services - Domestic Violence Hotline
<u>Program Agency DUNS:</u>	942439068
<u>Funding Source:</u>	FFY18 Victims of Crime Act: \$455,000; Match: \$497,365
<u>Agency Budget:</u>	\$400 Million
<u>Request Type:</u>	Notice of Funding Opportunity #1474-561

Program Description

The Domestic Violence Hotline is a 24-hour, confidential toll-free resource that serves as a clearinghouse providing domestic violence victims with immediate information about their safety planning, available options, and how to access supportive services. Callers can obtain a direct three-way link to domestic violence resources including shelter, counseling, legal advocacy, and children's services.

Program Activities

The City of Chicago Department of Family and Support Services contracts with the Network Advocating Against Domestic Violence to staff the Domestic Violence Hotline 24 hours a day, seven days per week. Trained Victim Information and Referral Advocates (VIRAs) assist victims, law enforcement, faith leaders, and various community stakeholders with information and referrals to supportive services when requested. This grant will be directed toward personnel cost associated with staffing the hotline and partially funding of the following positions:

- Hotline director
- Three supervisors for each of the shifts (one for each eight-hour shift)
- Eight full-time VIRAs
- Six part-time VIRAs
- Three hourly VIRAs

Match funding will support training to the hotline staff to ensure they are kept abreast of the best practices and industry standards for the provision of crisis intervention services and assistance and operational expenses.

Goals

The goal of the program is to provide direct services to domestic violence victims to alleviate trauma and suffering incurred from victimization.

Priorities

Funding to support the Domestic Violence Hotline corresponds with ICJIA's funding priority of addressing fundamental needs of victims. When victims call the Domestic Violence Hotline for assistance, they are made aware of the options available to them and are provided safety planning, referrals to shelter, counseling, legal services, and referrals to numerous other forms of assistance and/or services. Additionally, having access to the Language Line removes a considerable barrier by affording victims the opportunity to communicate in their native language, which provides a measure of relief as they seek to reclaim lives free of violence and abuse.

Program Funding Detail

The Domestic Violence Hotline has consistently provided unparalleled assistance and support to victims of domestic violence and other stakeholders since its inception in 1998. The Domestic Violence Hotline remains the only entity capable of directly linking victims to the services they seek by being a single point of access to assistance. The ability to make one telephone call and obtain emotional support, safety planning, shelter referrals, legal advocacy, and referrals to an array of other services is critically important for domestic violence victims as they eliminate many of the barriers they face when seeking to free themselves and their dependent children from violence. No other hotline in Chicago or Illinois offers the depth of experience and quality in providing assistance, information, and referrals to services to victims, concerned family and friends, and various other community stakeholders.

The Domestic Violence Hotline has consistently exceeded the goals established for the program based the volume of calls responded to within the City of Chicago and throughout the state. Victims, concerned family and friends, faith leaders, law enforcement, and a host of community stakeholders continue to rely on the Domestic Violence Hotline as the single point of access for domestic violence information, assistance, and referrals to service

Past Performance

During the past 12 months:

- 3,248 clients received information about the criminal justice process.
- 3,248 clients received information about victims' rights, how to obtain notifications, etc.
- 13,021 clients received referrals to other victim service providers.
- 4,870 clients received referrals to other services, supports and resources.
- 20,051 callers received assistance or information about filing for victim compensation.
- 2,476 clients received hotline/crisis counseling.

ICJIA has no administrative or programmatic concerns.

Budget Detail

	Total
Personnel Total FTE:	\$0
Fringe	\$0
Equipment	\$0
Supplies	\$0
Travel	\$0
Contractual: Subcontract with the Network Advocating Against Domestic Violence for 14.5 FTE Victim Information and Referral Advocates (VIRAs), Hotline Director, and Supervisors. Subcontract includes operational costs including program promotion and printing costs; phone system upgrade; insurance; office supplies; and local travel.	\$952,365
Indirect / Other Costs	\$0
Totals Federal / State and Match:	\$952,365

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Illinois Helping Everyone Access Linked Systems - Catholic Charities

Program Agency DUNS: 06-9958528

Funding Source: FFY18 Victims of Crime Act: \$666,667; Match: \$166,667

Agency Budget: \$186,521,020

Request Type: Notice of Funding Opportunity #1564-1132

Program Description

In late 2017, ICJIA was awarded a U.S. Office of Victims of Crime grant to implement the Illinois Helping Everyone Access Linked Systems (Illinois HEALS) initiative, a six-year project that seeks to improve the identification, connection, and service engagement of those impacted by violence. Informed by a 15-month planning process, the Illinois HEALS Action Plan encourages cross-system collaboration to strengthen community capacity for recognizing when victimization has occurred and connecting and engaging young victims and families in needed services. In 2019, ICJIA released a notice of funding opportunity to select community based programs in which the grantee engages other entities to recognize, connect and engage child victims of violence and their families in trauma-informed, culturally relevant responses and services. The seven funded programs, which represent the diversity of the state, proposed projects that involve multiple systems working collaboratively to address the needs of child and youth victims in their communities. Some of the systems and services involved include home visiting programs, public schools, child welfare agencies, public health departments, mental health providers, youth serving organizations, law enforcement, and grassroots groups. The projects were executed in February-March 2020 and are responding to the challenges of the COVID-19 pandemic by adapting service delivery to support the families of child and youth victims.

Program Activities

Using CDC guidelines to stop the spread of COVID19, Catholic Charities Heals will adapt to provide services via telehealth and work with Chicago Public Schools to assist students. To increase site referrals, which had dropped due to remote work and decreased client contact resulting from the pandemic, Catholic Charities Heals staff has conducted outreach in the Back of the Yards and Little Village communities to promote the program and discuss potential for client referrals from other social services agencies with clients that meet program criteria. Catholic Charities Heals also has conducted virtual trainings.

Goals

GOAL: Develop cross-system partnerships that meet the needs of individuals, families, and communities by convening local providers and developing policies and practices that further the work. At minimum, the project partners must demonstrate an ongoing collaborative relationship that supports the effective provision of services to the community.

<u>Process</u>	<u>Process</u>	1 st 9 Months- Projected	1 st 9 Months – Actual	1 st 9	Next 12 Months –
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<u>Objectives/Standards</u>	<u>Performance Measures</u>		(Quarters 1 & 2))	Months - Objective met?	Projected
Members of cross-system partnerships will regularly convene and attend 1 meeting per quarter .	Number of meetings per time.	3	Unable to conduct due to COVID-19 and agencies closed to outside visitors or not being safe to meet with large groups inside. CC Heals was able to conduct individual meetings with staff at Taller de Jose, Kolbe House, Whittier Elementary, Chavez Elementary, CC Casa Catalina and Youth Mentoring Program	No – unable to safely convene all individuals in large group setting	CC Heals staff will engage staff at partner sites in one meeting per quarter and offer these meetings virtually if unable to safely meet in person.
	Total number of members attending each meeting.	At minimum, CC Heals would meet with administrative/supervisory staff at partner sites. (principals, school counselors or social workers, supervisor/managers)	- Chavez Elementary: 3/13 - Principal -Taller de Jose: 3/23 and 6/3 – 2 supervisory staff -Kolbe House: 3/17 -4 staff and 5/19 – 2 supervisory staff -Whittier Elementary: 4/9 - met with school counselor and 6/9 – 20 staff consisting of teachers, principal, and school counselor -Youth Mentoring Program: 4/3 and 5/15 -Casa Catalina 3/16- Supervisor	No – unable to safely convene all individuals in large group setting	CC Heals staff will engage staff at partner sites in one meeting per quarter and offer these meetings virtually if unable to safely meet in person. CC Heals staff plans to meet with direct service staff during the next 12 months.
	Percentage of members attending each meeting based on total number of members.	75% of staff to attend meetings	- Chavez Elementary: 3/13 - Principal -Taller de Jose: 3/23 and 6/3 – 2 supervisory staff -Kolbe House: 3/17 -4 staff and 5/19 – 2 supervisory staff -Whittier Elementary: 4/9 - met with school counselor and 6/9 – 20 staff consisting of teachers, principal, and school counselor -Youth Mentoring Program: 4/3 and 5/15 - Casa Catalina 3/16- Supervisor	No – unable to safely convene all individuals in large group setting	CC Heals staff will engage staff at partner sites in one meeting per quarter and offer these meetings virtually if unable to safely meet in person. CC Heals staff plans to meet with direct service staff during next 12 months.
	Number of members from each partner	75% of staff to attend meetings	- Chavez Elementary: 3/13 - Principal -Taller de Jose: 3/23 and 6/3 – 2 supervisory staff	No – unable to safely convene all individuals	CC Heals staff will engage staff at partner sites in one meeting per quarter

	agency who attended each meeting.		-Kolbe House: 3/17 -4 staff and 5/19 – 2 supervisory staff -Whittier Elementary: 4/9 - met with school counselor and 6/9 – 20 staff consisting of teachers, principal, and school counselor -Youth Mentoring Program: 4/3 and 5/15 - Casa Catalina 3/16- Supervisor	in large group setting	and offer these meetings virtually if unable to safely meet in person. CC Heals staff plans to meet with direct service staff during next 12 months.
	Percentage of members from each partner agency who attended each meeting based on total number of members from each agency.	75% of staff to attend meetings	- Chavez Elementary: 3/13 - Principal -Taller de Jose: 3/23 and 6/3 – 2 supervisory staff -Kolbe House: 3/17 -4 staff and 5/19 – 2 supervisory staff -Whittier Elementary: 4/9 - met with school counselor and 6/9 – 20 staff consisting of teachers, principal, and school counselor -Youth Mentoring Program: 4/3 and 5/15 - Casa Catalina 3/16- Supervisor	No – unable to safely convene all individuals in large group setting	CC Heals staff will engage staff at partner sites in one meeting per quarter and offer these meetings virtually if unable to safely meet in person. CC Heals staff plans to meet with direct service staff during next 12 months.
Develop and adopt protocols that guide the structure and governance of cross-system partnership.	Number of protocols developed.	2 total	Unable to create new protocols due to being unable to meet in groups due to guidelines to prevent spread of COVID-19.	No – unable to safely convene all individuals in large group setting	CC Heals staff will hold one meeting per quarter with partner agencies and will develop minimally 2 protocols by 9/30/21.
	Number of protocols approved: list agencies that developed and approved protocols	2 total that can be utilized at all 7 sites.	Unable to create new protocols due to being unable to meet in groups due to guidelines to prevent spread of COVID-19.	No – unable to safely convene all individuals in large group setting	CC Heals staff will hold one meeting per quarter with partner agencies and will develop minimally 2 protocols by 9/30/21.

GOAL: Strengthen the abilities of systems and communities to recognize child and youth victims by fostering community awareness and appropriate screening practices.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected

<p>Provide trainings on appropriate screening practices to each relevant setting in which victims are encountered.</p> <p>List trainings:</p> <ul style="list-style-type: none"> -Identifying and Screening for Victims of Crime -Identifying and Screening for Human Trafficking Victims -Identifying and Screening for Family Violence -Identifying and Screening for Elder Abuse -Identifying and Screening for Victims of Community Violence -Detecting and Assessing Signs of Sexual Abuse 	<p>Number and types of relevant settings that received training.</p>	<p>Staff will create trainings to be offered to each partner site based on their staff needs and client population.</p>	<p>Trainings did not occur due to being unable to meet in groups due to guidelines to prevent spread of COVID-19. CC Heals staff did offer the ability to provide these trainings virtually.</p>	<p>No - Trainings did not occur due to being unable to meet in groups due to guidelines to prevent spread of COVID-19. CC Heals staff did offer the ability to provide these trainings virtually.</p>	<p>Staff will offer the ability to provide at least 1 training per quarter. CC Heals will give partner sites the ability to have these trainings done virtually.</p>
	<p>Number of trainings provided (for each setting)</p>	<p>Staff will offer the ability to provide at least 1 training per quarter.</p>	<p>Trainings did not occur due to being unable to meet in groups due to guidelines to prevent spread of COVID-19. CC Heals staff did offer the ability to provide these trainings virtually.</p>	<p>No- Trainings did not occur due to being unable to meet in groups due to guidelines to prevent spread of COVID-19. CC Heals staff did offer the ability to provide these trainings virtually. CC Heals did create trainings in preparation to provide trainings when able to safely convene in a group setting.</p>	<p>Staff will offer the ability to provide at least 1 training per quarter. CC Heals will give partner sites the ability to have these trainings done virtually.</p>
	<p>Number of attendees at each training (for each setting)</p>	<p>Goal of no less than 75% of staff attending</p>	<p>Trainings did not occur due to being unable to meet in groups due to guidelines to prevent spread of COVID-19. CC Heals staff did offer the ability to provide these trainings virtually</p>	<p>No- Trainings did not occur due to being unable to meet in groups due to guidelines to prevent spread of COVID-19. CC Heals staff did offer the ability to provide these trainings virtually. CC Heals did create trainings in preparation to provide trainings when able to safely convene in group setting.</p>	<p>Per training - Goal of no less than 75% of staff attending</p>
<p>Coordinate community awareness events and activities to increase understanding of topics related to violence and</p>	<p>Number of community awareness events.</p>	<p>1 per quarter</p>	<p>Did not occur due to being unable to meet in groups due to guidelines to prevent spread of COVID-19</p>	<p>No – staff at both CC and partner sites working remotely, and unable to safely</p>	<p>Will coordinate 1 per quarter.</p>

victimization.	Number of attendees at each training.	Goal of no less than 75% of staff attending	Did not occur due to being unable to meet in groups due to guidelines to prevent spread of COVID-19	meet for community events. No- Trainings did not occur due to being unable to meet in groups due to guidelines to prevent spread of COVID-19. CC Heals staff did offer the ability to provide these trainings virtually. CC Heals did create trainings in preparation to provide trainings when able to safely convene in group setting.	Will collaborate with partner sites to create trainings that are specific to the community and the clients they serve to enhance their ability to be sensitive to victims' needs.
Develop and adopt 2 setting-specific protocols for responding to screening practices. List protocols: -Respond to victimization when victimization is identified in an early childhood education system -Respond to victimization when victimization is identified among high-risk youth -Respond to victimization when victimization is identified in a grassroots/faith-based organization	Number of setting-specific protocols.	2 per site	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered the ability to provide these meetings virtually to accommodate needs.	CC Heals staff to meet with partner sites virtually to discuss their victim needs, population, and opportunities for growth in creating new protocols to respond to victimization.

Provide trainings about the response protocol to 75% of staff in each relevant setting.	Number of trainings provided.	1 training per protocol established per site	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	CC Heals staff to meet with partner sites virtually to discuss their victim needs, population, and opportunities for growth in creating new protocols to respond to victimization. Trainings will be provided virtually to accommodate changing COVID19 guidelines.
	Number of staff (in each setting).	Attempt to engage 75% of staff at each setting	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	CC Heals staff to meet with partner sites virtually to discuss their victim needs, population, and opportunities for growth in creating new protocols to respond to victimization. Trainings will be provided virtually to accommodate changing COVID19 guidelines.
	Number of trainings provided (in each setting).	1 training per protocol established	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of	CC Heals staff to meet with partner sites virtually to discuss their victim needs, population, and opportunities for

				COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	growth in creating new protocols to respond to victimization. Trainings will be provided virtually to accommodate changing COVID19 guidelines.
	Number of staff trained about the protocol (for each setting).	Attempt to engage 75% of staff at each setting	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	CC Heals staff to meet with partner sites virtually to discuss their victim needs, population, and opportunities for growth in creating new protocols to respond to victimization. Trainings will be provided virtually to accommodate changing COVID19 guidelines.

	Percentage of staff trained about the protocol based on total number of staff (in each setting).	At least 75% of staff to attend training and will offer multiple options for times to train most amount of staff	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	CC Heals staff to meet with partner sites virtually to discuss their victim needs, population, and opportunities for growth in creating new protocols to respond to victimization. Trainings will be provided virtually to accommodate changing COVID19 guidelines.
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GOAL: Connect young victims and their families to appropriate resources and services and collaborate cross-systems through a multidisciplinary team (MDT) or similar framework that supports care coordination and facilitates effective referral processes.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1 st 9 Months - Projected	1 st 9 Months - Actual	1 st 9 Months - Objective met?	Next 12 Months - Projected
Develop 2 protocols that guide information sharing practices.	Number of protocols developed.	2 per site	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate	Will work with partner sites to ensure each site has information sharing practices. Partner sites and CC Heals with establish ROIs and referrals that ensure confidentiality and informed consent. CC Heals staff to create 2 protocols that can guide information sharing practices, which can be used to all partner sites.

				needs.	
Provide trainings on protocols related to information sharing practices to 75% of staff.	Number of trainings provided.	1 per new protocol developed	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	CC Heals staff will provide 1 training to each site regarding information sharing practices.
	Number of staff (for each setting).	75% of staff to attend	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	75% of staff from each site to attend trainings, number of staff will vary based on sites staffing patterns.
	Number of trainings provided (for	1 per new protocol develop	None	No – CC Heals staff was unable to meet with sites due to	CC Heals staff will provide 1 training to each site regarding

	each setting).			guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	information sharing practices.
	Number of staff trained about the protocols related to information sharing practices (for each setting).	75% of staff to attend from each site	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols. CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	75% of staff from each site to attend trainings, number of staff will vary based on sites staffing patterns.
	Percentage of staff trained about protocols related to information sharing practices based on total number of	75% of staff to attend from each site	None	No – CC Heals staff was unable to meet with sites due to guidelines to prevent the spread of COVID19 and each agencies change in daily work protocols.	75% of staff from each site to attend trainings, number of staff will vary based on sites staffing patterns.

	staff (for each setting).			CC Heals offered meetings with supervisory staff at sites to discuss sites needs to enhance their work with clients and to provide these meetings virtually to accommodate needs.	
Provide referrals to 75% of victims in each setting.	Number of victims who needed referrals (for each setting).	Will ensure that each client engaged in CC Heals program will work with clinician and given referrals to additional services as deemed necessary.	1 Client referred to services with CC Heals from Youth Mentoring Program.	No – CC Heals staff continues to do outreach in the community to promote the program and increase client referrals.	CC Heals staff to work towards meeting goal of engaging 280 clients.
	Number of victims referred to direct services (for each setting).	Will ensure that each client engaged in CC Heals program will work with clinician and given referrals to additional services as deemed necessary. CC Heals has goal of each clinician having up to 30 clients and each intern having up to 10 clients.	1 Client referred to services with CC Heals from Youth Mentoring Program.	No – CC Heals staff continues to do outreach in the community to promote the program and increase client referrals.	CC Heals staff to work towards meeting goal of engaging 280 clients.
	Percentage of victims referred to direct services based on total number of victims who needed referrals (for each setting).	Will ensure that each client engaged in CC Heals program will work with clinician and given referrals to additional services as deemed necessary. CC Heals has goal of each clinician having up to 30 clients and each intern having up to 10 clients.	Staff at partner sites were unable to provide overall count of “victims” in their agency but 1 Client referred to services with CC Heals from Youth Mentoring Program. Client is currently receiving therapy services.	No – CC Heals staff continues to do outreach in the community to promote the program and increase client referrals.	CC Heals staff to work towards meeting goal of engaging 280 clients.

	Number of follow-ups made as a result of referral (for each setting).	Will ensure that each client engaged in CC Heals program will work with clinician and given referrals to additional services as deemed necessary. CC Heals has goal of each clinician having up to 30 clients and each intern having up to 10 clients.	CC Heals staff was able to get client enrolled in therapy services immediately following referral.	No – CC Heals staff continues to do outreach in the community to promote the program and increase client referrals.	CC Heals staff to work towards meeting goal of engaging 280 clients.
	Percentage of follow-ups made as a result of referral based on total number of referrals (for each setting).	Will ensure that each client engaged in CC Heals program will work with clinician and given referrals to additional services as deemed necessary. CC Heals has goal of each clinician having up to 30 clients and each intern having up to 10 clients.	CC Heals staff was able to get client enrolled in therapy services immediately following referral.	No – CC Heals staff continues to do outreach in the community to promote the program and increase client referrals.	CC Heals staff to work towards meeting goal of engaging 280 clients.

GOAL: Promote practices that engage young persons who have experienced victimization and their family members in an array of services that are culturally specific and humble, accessible, and relevant by developing the professional workforce and enhancing service capacity and quality.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	<u>1st 9 Months - Projected</u>	<u>1st 9 Months - Actual</u>	<u>1st 9 Months - Objective met?</u>	<u>Next 12 Months - Projected</u>
Provide direct service-related trainings to 75 % of staff. List types of training. -Addressing Destructive Interpersonal Dynamics -Anxiety and Children -Brain Development	Number of staff (for each setting).	75% of staff at each site to attend relevant trainings.	Unable to meet with partner sites and provide trainings based on recommendations of group guidelines to prevent spread of COVID-19. CC Heals staff was in contact with partner sites to discuss training opportunities, created trainings to be shared, and asked for feedback from partnerships regarding trainings that could be	CC Heals staff was in contact with partner sites to discuss changing protocols and return to work plans. CC Heals staff created the following trainings with the plan to conduct these trainings when people can	CC Heals staff to continue developing the listed types of trainings and will offer to partner sites virtually if unable to meet in person.

<p>from the Trauma Perspective</p> <ul style="list-style-type: none"> -Child Abuse and Neglect -Childhood Fears and Social-Emotional Development in Children -Childhood Mental Health -Children with Sexual Behavioral Problems -Client Engagement -Etiology of Sexual Problematic -Behaviors Regarding Children and Youth -Grief and Domestic Violence in the Home -Grief Issues -How the Environment Affects Children -Negative Child Behaviors and How to Respond to them in the Classroom -Sexual Abuse -Special Needs in the Classroom -Suicide Education and Assessment Training -The Effects of Violence and Trauma on Child and Parent -The Impact of Trauma -Trauma and Community Violence -Trauma and the Impact on Learning -Typical and Atypical Child Development -Usual and Expected Sexual Behaviors in Children -Vicarious Trauma -Violence Prevention 			<p>beneficial to their staff.</p>	<p>safely meet in larger groups and also offered virtual trainings:</p> <ul style="list-style-type: none"> -Brain Development from the Trauma Perspective -Suicide Education and Assessment Training -The Impact of Trauma -Vicarious Trauma -Child Abuse and Neglect -How to handle strong emotions -Stabilizing on strengths during crisis -Compassion Fatigue, Comparative Grief, and Self-Care Promoting Healthy Dating Relationships in Adolescents 	
<p>Number and types of training provided (for each setting).</p>		<p>At least 1 training to be offered to each site to accommodate training needs and victim/client needs.</p>	<p>Unable to meet with partner sites and provide trainings based on recommendations of group guidelines to prevent spread of COVID-19. CC Heals staff was in contact with partner sites to discuss training opportunities, created trainings to be shared, and asked for feedback from partnerships regarding trainings that could be beneficial to their staff.</p>	<p>CC Heals staff was in contact with partner sites to discuss changing protocols and return to work plans. CC Heals staff created the following trainings with the plan to conduct these trainings when people can safely meet in larger groups and also offered</p>	<p>CC Heals staff to continue developing the listed types of trainings and will offer to partner sites virtually if unable to meet in person.</p>

				virtual trainings: -Brain Development from the Trauma Perspective -Suicide Education and Assessment Training -The Impact of Trauma -Vicarious Trauma -Child Abuse and Neglect -How to handle strong emotions -Stabilizing on strengths during crisis -Compassion Fatigue, Comparative Grief, and Self-Care Promoting Healthy Dating Relationships in Adolescents	
	Number of staff who direct service-related trainings (for each setting).	At least 2 CC Heals staff to conduct each training.	Unable to meet with partner sites and provide trainings based on recommendations of group guidelines to prevent spread of COVID-19. CC Heals staff was in contact with partner sites to discuss training opportunities, created trainings to be shared, and asked for feedback from partnerships regarding trainings that could be beneficial to their staff.	CC Heals staff was in contact with partner sites to discuss changing protocols and return to work plans. CC Heals staff created the following trainings with the plan to conduct these trainings when people can safely meet in larger groups and also offered virtual trainings: -Brain Development from the Trauma	CC Heals staff to continue developing the listed types of trainings and will offer to partner sites virtually if unable to meet in person.

				Perspective -Suicide Education and Assessment Training -The Impact of Trauma -Vicarious Trauma -Child Abuse and Neglect -How to handle strong emotions -Stabilizing on strengths during crisis -Compassion Fatigue, Comparative Grief, and Self-Care -Promoting Healthy Dating Relationships in Adolescents	
	Percentage of staff who attended direct service-related trainings based on total number of staff (for each setting).	75% of staff at each site to attend relevant trainings.	Unable to meet with partner sites and provide trainings based on recommendations of group guidelines to prevent spread of COVID-19. CC Heals staff was in contact with partner sites to discuss training opportunities, created trainings to be shared, and asked for feedback from partnerships regarding trainings that could be beneficial to their staff.	CC Heals staff was in contact with partner sites to discuss changing protocols and return to work plans. CC Heals staff created the following trainings with the plan to conduct these trainings when people can safely meet in larger groups and also offered virtual trainings: -Brain Development from the Trauma Perspective -Suicide Education and Assessment Training	CC Heals staff to continue developing the listed types of trainings and will offer to partner sites virtually if unable to meet in person.

				<ul style="list-style-type: none"> -The Impact of Trauma -Vicarious Trauma -Child Abuse and Neglect -How to handle strong emotions -Stabilizing on strengths during crisis -Compassion Fatigue, Comparative Grief, and Self-Care Promoting Healthy Dating Relationships in Adolescents 	
<p>Provide direct services to 90% of victims requesting services in each setting.</p> <p>List types of services. Case management Therapy Capacity building trainings</p>	<p>Projected total number of victims served (for each type of service).</p>	<p>Clinicians to work towards caseload of 30 clients and interns towards 10 clients each.</p>	<p>Capacity Building Trainings: -Youth Mentoring Program – CC Heals staff provided capacity building trainings to staff and clients in their program. 5/26/2020 “How to handle strong emotions”; and 5/27/2020 and 5/28/2020 “Stabilizing on strengths during a crisis”</p> <p>Therapy and case management: 1 client currently receiving services</p>	<p>Provided successful capacity building trainings but continue to need to develop client referrals</p>	<p>CC Heals will continue to be in contact with staff and administration at partner sites to discuss their guidelines for reopening and their agency policies to safely allow visitors, and take guidance from the state of Illinois to safely reopen. CC Heals to provide telehealth services and trainings done virtually.</p>
	<p>Number of victims who requested direct services (for each type of service).</p>	<p>Clinicians to work towards caseload of 30 clients and interns towards 10 clients each.</p>	<p>Capacity Building Trainings: -Youth Mentoring Program – CC Heals staff provided capacity building trainings to staff and clients in their program. 5/26/2020 “How to handle</p>	<p>Provided successful capacity building trainings but continue to need to develop client referrals</p>	<p>CC Heals will continue to be in contact with staff and administration at partner sites to discuss their guidelines for reopening and their agency policies to safely allow visitors, and take guidance</p>

			<p>strong emotions”; and 5/27/2020 and 5/28/2020 “Stabilizing on strengths during a crisis”</p> <p>Therapy and case management: 1 client currently receiving services</p>		<p>from the state of Illinois to safely reopen. CC Heals to provide telehealth services and trainings done virtually.</p>
Number of victims who received direct services (for each type of service).	Clinicians to work towards caseload of 30 clients and interns towards 10 clients each.	<p>Capacity Building Trainings: -Youth Mentoring Program – CC Heals staff provided capacity building trainings to staff and clients in their program. 5/26/2020 “How to handle strong emotions”; and 5/27/2020 and 5/28/2020 “Stabilizing on strengths during a crisis”</p> <p>Therapy and case management: 1 client currently receiving services</p>	<p>Provided successful capacity building trainings but continue to need to develop client referrals</p>	<p>CC Heals will continue to be in contact with staff and administration at partner sites to discuss their guidelines for reopening and their agency policies to safely allow visitors, and take guidance from the state of Illinois to safely reopen. CC Heals to provide telehealth services and trainings done virtually.</p>	
Percentage of victims who received direct services based on total number of victims who requested services (for each type of service).	Clinicians to work towards caseload of 30 clients and interns towards 10 clients each.	<p>Capacity Building Trainings: -Youth Mentoring Program – CC Heals staff provided capacity building trainings to staff and clients in their program. 5/26/2020 “How to handle strong emotions”; and 5/27/2020 and 5/28/2020 “Stabilizing on strengths during a crisis”</p>	<p>Provided successful capacity building trainings but continue to need to develop client referrals</p>	<p>CC Heals will continue to be in contact with staff and administration at partner sites to discuss their guidelines for reopening and their agency policies to safely allow visitors, and take guidance from the state of Illinois to safely reopen. CC Heals to provide telehealth services and trainings done virtually.</p>	

			Therapy and case management: 1 client currently receiving services		
Provide adequate supervision that contributes to creating a supportive work environment for project staff. List type of supervision (e.g., individual, group) and frequency (sessions per month) for each type of project staff	Number of project staff who need supervision (for each type of project staff).	6 staff needing supervision -Clinical manager: Danielle Renyer -Clinicians: Hannah Davis, Nia Henry, Scott Kupferschmidt, and Arellys Perez -Student Interns: Jennifer Lorenz and Rubi Ortiz	All staff received supervision	Yes	CC Heals to continue with same supervision schedule. For FY21, Program Director will supervise Clinical Manager and Clinicians and Clinical Manager will supervise Interns.
Project Coordinator/Clinical Manager: -Bi-weekly individual supervision from Department Director -Monthly individual supervision from Department Director and Associate Vice President -Quarterly Youth Behavioral Health Services Managers Meeting -Quarterly Child, Youth, and Family Services Managers Meeting	Type of supervision conducted (for each type of project staff).	Individual supervision for clinicians and interns conducted by clinical manager, Danielle Renyer. Clinical manager supervised by department director, Hector Rivera. Clinical manager participated in youth behavioral health services managers meetings and child, youth, and family services managers meetings.	Individual supervision for clinicians and interns conducted by clinical manager, Danielle Renyer. Clinical manager supervised by department director, Hector Rivera. Clinical manager participated in youth behavioral health services managers meetings and child, youth, and family services managers meetings.	Yes	CC Heals to continue with same supervision schedule. For FY21, Program Director will supervise Clinical Manager and Clinicians and Clinical Manager will supervise Interns.
Therapist/Case Managers and Interns: -Weekly individual supervision -Weekly group supervision -Monthly team meetings	Number of supervision sessions conducted with project staff members per month (type of project staff).	Clinicians receive once a week individual supervision, interns receive once a week supervision, Clinical manager received bi-weekly individual supervision. Project staff participate in weekly staff meetings/group supervision.	Clinicians receive once a week individual supervision, interns receive once a week supervision, Clinical manager received bi-weekly individual supervision. Project staff participate in weekly staff meetings/group supervision.	Yes	CC Heals to continue with same supervision schedule. For FY21, Program Director will supervise Clinical Manager and Clinicians and Clinical Manager will supervise Interns.

<p>Establish manageable caseload of # for each type of project staff.</p> <p>List type of project staff. 5 Therapist/Case Managers – Average caseload will be approximately 30 clients. 6 Student Intern Volunteers – Average caseload will be approximately 10 clients.</p>	<p>Number of relevant project staff with # caseloads.</p>	<p>All staff will work towards full caseload.</p>	<p>Since staff starting on 5/18, CC Heals continues to work towards securing client referrals and has received 1 who started in services.</p>	<p>CC Heals staff continues to reach out to partner sites to discuss referral process and discuss potential for client referrals. CC Heals staff has done outreach to parishes and social services in the community, and has promoted the program and discussed program eligibility. CC Heals staff has informed partner sites of ability to provide telehealth services to their clients. CC Heals was able to start providing services to 1 client starting 6/12.</p>	<p>Staff to work towards establishing approximately 30 clients for each clinician and 10 clients for each student intern.</p>
	<p>Percentage of relevant project staff with # caseloads based on total number of relevant project staff.</p>	<p>All staff will work towards full caseload</p>	<p>Since staff starting on 5/18, CC Heals continues to work towards securing client referrals and has received 1 who started in services.</p>	<p>CC Heals staff continues to reach out to partner sites to discuss referral process and potential for client referral. CC Heals staff has done outreach to parishes and social services in the community, and promoted the program and discussed program eligibility. CC Heals is able to provide telehealth</p>	<p>Staff to work towards establishing approximately 30 clients for each clinician and 10 clients for each student intern.</p>

				services.	
Provide training and education to project staff related to creating a healthy work environment (e.g., stress, vicarious trauma).	Number of staff (for each type of training).	Up to 11 staff at each training	See attached for each training/webinar staff members completed	Yes	Staff to continue researching relevant trainings to attend that will enhance their work with clients.
List types of training. -Coping with Stress -Self-Care/Stress Management -Stress Management -Vicarious Trauma -Effective Communication in the Workplace -Managing Change in the Workplace -Managing Your Time	Number and types of training provided (for each type of training).	Staff to attend trainings specific to their own area of growth and ways to effectively engage clients and promote self-care practices.	See attached for each training/webinar staff members completed	Yes	Staff to continue researching relevant trainings to attend that will enhance their work with clients.
	Number of staff who attended training (for each type of training).	Staff to attend trainings specific to their own area of growth and ways to effectively engage clients and promote self-care practices.	See attached for each training/webinar staff members completed	Yes	Staff to continue researching relevant trainings to attend that will enhance their work with clients.
	Percentage of staff who attended training based on total number of staff (for each type of training).	Staff to attend trainings specific to their own area of growth and ways to effectively engage clients and promote self-care practices.	See attached for each training/webinar staff members completed	Yes	Staff to continue researching relevant trainings to attend that will enhance their work with clients.

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include #1 Public Awareness; #2 Fundamental Needs; #3 Core Services, #4 More Advocates, More Places; #6 Multiple Victimization; #7 Multi-disciplinary Responses; #8 Trauma-informed and focused Services; #11 Evidence-informed practices; and #12 Facilitating Program Evaluation.

Program Funding Detail

This designation would support 12 months of program funding, representing months 10 through 21 of 36 months of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

It is too early to evaluate the grantee's performance due to the shortened first grant period and the COVID pandemic.

Budget Detail

	Total
Personnel Total FTE: 16.457 Including 7 clinicians, 7 Intern counselors, a Clinical Manager, Program Director, as well as administrative and support staff.	\$550,184
Fringe: 25.5%	\$140,287
Equipment:	\$0
Supplies: Includes office supplies, laptops, office phones, and community training materials	\$27,790
Travel: Includes cross-site visits & local travel	\$12,097
Contractual: Includes cell phones, professional development training, software maintenance, and client assistance.	\$35,651
Indirect / Other Costs: 8.79%	\$67,332
Totals Federal / State and Match:	\$833,341

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Illinois Helping Everyone Access Linked Systems - City of Rockford

Program Agency DUNS: 136666174

Funding Source: FFY18 Victims of Crime Act: \$216,988; Match: \$54,247

Agency Budget: \$293,958,425

Request Type: Notice of Funding Opportunity #1564-1132

Program Description

In 2017, ICJIA was awarded a U.S. Office of Victims of Crime grant to implement the Illinois Helping Everyone Access Linked Systems (Illinois HEALS) initiative, a six-year project that seeks to improve the identification, connection, and service engagement of those impacted by violence. Informed by a 15-month planning process, the Illinois HEALS Action Plan encourages cross-system collaboration to strengthen community capacity for recognizing when victimization has occurred and connecting and engaging young victims and families in needed services. In 2019, ICJIA released a notice of funding opportunity to select community based programs in which the grantee engages other entities to recognize, connect and engage child victims of violence and their families in trauma-informed, culturally relevant responses and services. The seven funded programs, which represent the diversity of the state, proposed projects that involve multiple systems working collaboratively to address the needs of child and youth victims in their communities. Some of the systems and services involved include home visiting programs, public schools, child welfare agencies, public health departments, mental health providers, youth serving organizations, law enforcement agencies, and grassroots groups. The projects were executed in February-March 2020 and are responding to the challenges of the COVID-19 pandemic by adapting service delivery to support the families of child and youth victims.

Program Activities

City of Rockford HEALS was initiated just three months ago and within that time a project coordinator, case manager, and therapist have been hired. Staff have received some training and developed referral partnerships with organizations that work with children in the community. The program is located in the new Rockford Family Peace center and staff is preparing to provide virtual services until in-person sessions are possible again.

Goals

GOAL: Develop cross-system partnerships that meet the needs of individuals, families, and communities by convening local providers and developing policies and practices that further the work. At minimum, the project partners must demonstrate an ongoing collaborative relationship that supports the effective provision of services to the community.					
<u>Process Objectives/Standards</u>	<u>Process Performance</u>	1st 9 Months-	1st 9 Months –	1st 9 Months - Objective	Next 12 Months – Projected

<u>rds</u>	<u>Measures</u>	<u>Projected</u>	<u>Actual (Quarters 1 & 2))</u>	<u>met?</u>	
Members of cross-system partnerships will regularly convene and attend 1 meeting per month.	Number of meetings per time.	9	0	No, the grant agreement was approved and executed in the second quarter, and the project manager hired. Invitations were extended to community agencies to join the cross-system partnership. The first partner meeting scheduled for July and will be scheduled monthly for the remainder of the project period of performance.	Program plan to continue our monthly meetings into the next funding year, totaling 12 meetings.
	Total number of members attending each meeting.	12	0	The Kick-off meeting in July is scheduled to have five partner agencies represented. 9 people attended.	Each partner agency will designate two staff to attend each meeting. In the next quarter, Program anticipate adding three additional agencies, bringing the total to 14.
	Percentage of members attending each meeting based on total number of	80%	0%	Program did not meet this goal for quarter 1-2,	80% projected in next

	members.			quarter 3 had a 90% attendance, and with 9/10 of the invited members were able to attend.	
	Number of members from each partner agency who attended each meeting.	2	0	Program have not yet met this goal in the first two quarters, but for the third quarter, 4/5 invited agencies had 2 representatives, with one agency only having one person available at that time. Program is collaborating on a schedule for August that allows for all parties to attend.	2
	Percentage of members from each partner agency who attended each meeting based on total number of members from each agency.	80%	0%	As above, program did not hold meetings during the first two quarters, but program plans to meet this percentage for the third quarter.	80%
Develop and adopt	Number of protocols developed.	5	0	Program did not meet this	Program plan to develop

<p>5 protocols that guide the structure and governance of cross-system partnership.</p>				<p>objective for the first two quarters due to delays in approval and COVID. For the third quarter, program is planning to develop protocols for all 5 agencies.</p>	<p>protocols for each of the additional 3 agencies Program plan to add in the projected year.</p>
	<p>Number of protocols approved: list agencies that developed and approved protocols</p>	<p>5</p>	<p>0</p>	<p>Program did not meet this objective for the first two quarters due to delays in approval and COVID. For the third quarter, program is planning to get 1 of the protocols approved.</p>	<p>Program plan to focus heavily on getting the protocols developed in the previous funding period approved, as well as approving the protocols for the additional 3 agencies Program plan to add in the projected year.</p>

GOAL: Strengthen the abilities of systems and communities to recognize child and youth victims by fostering community awareness and appropriate screening practices.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Provide 5 trainings on appropriate screening practices to each relevant setting (3) in which victims are encountered. List trainings: 1. CANs training 2. The Trauma Assessment 3. YASI Assessment	Number and types of relevant settings that received training.	3	0	Program did not meet the objective for the first two quarters due to delays in approval and COVID. For the 3 rd quarter, program is working to reevaluate what trainings they want to offer given the changes in cross system partners.	Our goal for the projected year is give the trainings Program Were unable to during the current period, while adding 3 trainings for the 3 settings that will be added by the planned 3 new referral partners.
	Number of trainings provided (for each setting)	5	0	Program did not meet the objective for the first two quarters due to delays in approval and COVID. For the 3 rd quarter, program is working to reevaluate what trainings they want to offer given the experiences and abilities of the now-	Our goal is to provide the 5/setting trainings from the first funding period, plus the trainings for the planned additional 3 partners.

				hired YSN staff who will be giving these trainings. 3 rd quarter will focus on tailoring the selected trainings to better fit the Rockford community and IL-HEALS team. The goal is to train in at least 1 training before the end of the first funding period.	
	Number of attendees at each training (for each setting)	15-25, dependent on size of organization	0	Program did not meet this goal for the first 2 quarters due to delays in approvals and COVID. Program is hoping to meet this goal for the training. Program plan to provide before the end of the funding period.	15-25, dependent on size of organization
Coordinate 5 community awareness events and activities to increase understanding of	Number of community awareness events.	5	0	Program did not meet this goal for the first 2 quarters due to delays in approvals	While it will depend on COVID, our goal is to do 5 community events. Program

<p>topics related to violence and victimization.</p>				<p>and COVID preventing any kind of gathering. In the 3rd quarter, program will discuss pivoting to virtual community awareness events and what a COVID-community event could look like.</p>	<p>will plan to have these as virtual community awareness events until it becomes safe to gather again. If that happens, Program will pivot towards in-person events.</p>
	<p>Number of attendees at each training.</p>	<p>50</p>	<p>0</p>	<p>Program did not meet this goal in the first two quarters due to delays in approvals and COVID. COVID will most likely prevent program from reaching this objective in the 3rd quarter.</p>	<p>50 – virtual or in-person will depend on COVID</p>
<p>Develop and adopt 3 setting-specific protocols for responding to screening practices. List protocols: 1. First responder protocol 2. Educator’s protocol (school</p>	<p>Number of setting-specific protocols.</p>	<p>3</p>	<p>0</p>	<p>Program did not meet this objective in the first two quarters due to delays in approvals and COVID. The first partnership meeting to begin</p>	<p>Our goal is to finish the protocols Program started developing in the previous funding period and focus heavily on getting them approved. Program also plan to develop</p>

setting) 3. Criminal Justice Involved Youth (juvenile justice center)				discussing referral protocols is scheduled for July. Protocols will be shifted from original goal because the program has changed agency partners, but program still has protocols for each setting. Our goal is to have 1 developed by the end of the 3 rd quarter.	protocols for the additional 3 agencies Program hope to add as partners during this funding cycle.
Provide trainings about the response protocol to 30% of staff in each relevant setting.	Number of trainings provided.	5	0	Program did not meet this goal for the first two quarters due to delays in approval and COVID. Because protocols need to be approved in order to be trained, it is unlikely Program will be able to meet this goal in the 3 rd quarter either.	Our goal is to give trainings on the 3 original protocols (once approved), as well as trainings for the 3 additional partners Program plan on adding during this funding cycle.
	Number of staff (in each setting).	25-200	0	Program did not meet this goal because no protocols	25-200

				have been developed yet. Program has begun our partnership meetings to develop these protocols during the 3 rd quarter.	
	Number of trainings provided (in each setting).	2	0	Program did not meet this goal because no protocols have been developed yet. Program has begun partnership meetings to develop these protocols during the 3 rd quarter.	2
	Number of staff trained about the protocol (for each setting).	8-60, depending on organization	0	Program did not meet this goal because no protocols have been developed yet. Program has begun partnership meetings to develop these protocols during the 3 rd quarter.	8-60, depending on organization
	Percentage of staff trained about the protocol based on total number of staff (in each setting).	30%	0%	Program did not meet this goal because no protocols have been developed yet. Program has begun	30%

				partnership meetings to develop these protocols during the 3 rd quarter	
GOAL: Connect young victims and their families to appropriate resources and services and collaborate cross-systems through a multidisciplinary team (MDT) or similar framework that supports care coordination and facilitates effective referral processes.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Develop 5 protocols that guide information sharing practices.	Number of protocols developed.	5	0	Program did not meet this objective in the first two quarters due to delays in approvals and COVID. The first partnership meeting to begin discussing information sharing protocols is scheduled for July. The goal is to have 1 developed by the end of the 3 rd quarter.	Our goal is to finish the protocols Program started developing in the previous funding period and focus heavily on getting them approved. Program also plan to develop protocols for the additional 3 agencies Program hope to add as partners during this funding cycle.
Provide 5 trainings on protocols related to information sharing practices to 30% of staff.	Number of trainings provided.	5	0	Program did not meet this goal for the first two quarters due to delays in approval and COVID. Because protocols need to be	Our goal is to give trainings on the 3 original protocols (once approved), as well as trainings for the 3 additional partners Program plan on adding during this

				fully approved in order to be trained, it is unlikely program will be able to meet this goal in the 3 rd quarter either	funding cycle.
	Number of staff (for each setting).	25-200, depending on the organization	0	Program did not meet this goal because no protocols have been developed yet. Program has begun partnership meetings to develop these protocols during the 3 rd quarter	25-200, depending on the organization
	Number of trainings provided (for each setting).	2	0	Program did not meet this goal because no protocols have been developed yet. Program has begun partnership meetings to develop these protocols during the 3 rd quarter	2
	Number of staff trained about the protocols related to information sharing practices (for each setting).	8-60, depending on the organization	0	Program did not meet this goal because no protocols have been developed yet. Program has begun	8-60

				partnership meetings to develop these protocols during the 3 rd quarter	
	Percentage of staff trained about protocols related to information sharing practices based on total number of staff (for each setting).	30%	0	Program did not meet this objective for the first or second quarter, but Program is currently collaborating with our partner agencies to determine how many of their staff work in direct services in order to meet this goal in the 3 rd quarter.	30%
Provide referrals to 75% of victims in each setting.	Number of victims who needed referrals (for each setting).	Dependent on when services begin	0-direct services not started	Program did not meet the objective for the first two quarters due to delays in starting direct services. Program is hoping to meet this goal of serving victims in the 3 rd quarter as Program start direct services in July.	30/setting

	Number of victims referred to direct services (for each setting).	Dependent on when services begin	0-direct services not started	Program did not meet the objective for the first two quarters due to delays in starting direct services. Program is hoping to meet this goal for the 3 rd quarter as Program start direct services in July.	15/setting
	Percentage of victims referred to direct services based on total number of victims who needed referrals (for each setting).	75%	0%-direct services not started	Program did not meet the objective for the first two quarters due to delays in starting direct services. Program is hoping to meet this goal for the 3 rd quarter as Program start direct services in July.	75%
	Number of follow-ups made as a result of referral (for each setting).	Dependent on when direct services begin	0-direct services not started	Program did not meet the objective for the first two quarters due to delays in starting direct services. Program is hoping to meet this goal for the 3 rd quarter as Program start	210 (all referred individuals will receive a follow up, whether or not services can be provided)

				direct services in July.	
	Percentage of follow-ups made as a result of referral based on total number of referrals (for each setting).	75%	0%-direct services not started	Program did not meet the objective for the first two quarters due to delays in starting direct services. Program is hoping to meet this goal for the 3 rd quarter as it starts direct services in July.	75%

GOAL: Promote practices that engage young persons who have experienced victimization and their family members in an array of services that are culturally specific and humble, accessible, and relevant by developing the professional workforce and enhancing service capacity and quality.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	<u>1st 9 Months - Projected</u>	<u>1st 9 Months - Actual</u>	<u>1st 9 Months - Objective met?</u>	<u>Next 12 Months - Projected</u>
Provide direct service-related trainings to 30% of staff. List types of training: Trauma 101 Domestic Violence/Sexual Assault 101 Implicit Bias Training Accessibility 101	Number of staff (for each setting).	25-200, depending on the organization	0	Program did not meet the objective for the first two quarters due to delays in approval and COVID. The goal is to have 1 training before the end of the first funding period.	25-200, depending on the organization
	Number and types of training provided (for each setting).	2	0	Program did not meet the objective for the first two quarters due	2

				to delays in approval and COVID. For the 3 rd quarter, program is working to reevaluate training offerings given the experiences and abilities of the now-hired YSN staff. 3 rd quarter will focus on tailoring the selected trainings to better fit the IL-HEALS team. The goal to train in at least 1 training before the end of the first funding period.	
	Number of staff who direct service-related trainings (for each setting).	8-60, depending on the organization	0	TBD	8-60, depending on the organization
	Percentage of staff who attended direct service-related trainings based on total number of staff (for each setting).	30%	0%	TBD	30%
Provide direct services to 75% of victims requesting	Projected total number of victims served (for each type of service).	Dependent on start of services	0	Program did not meet the objective for the first two	75

services in each setting. List types of services. Assessment Case management Therapeutic intervention – individual Additional referrals as needed				quarters due to delays in starting direct services. Program is hoping to meet this goal for the 3 rd quarter as program starts direct services in July.	
	Number of victims who requested direct services (for each type of service).	Dependent on start of services	0	Program did not meet the objective for the first two quarters due to delays in starting direct services. Program is hoping to meet this goal for the 3 rd quarter as it starts direct services in July.	100
	Number of victims who received direct services (for each type of service).	Dependent on start of services	0	Program did not meet the objective for the first two quarters due to delays in starting direct services. Program is hoping to meet this goal for the 3 rd quarter as it starts direct services in July.	Total: 75 Assessment: 75 Case mgmt:40 Therapeutic intervention: 40 Referrals: 75

	Percentage of victims who received direct services based on total number of victims who requested services (for each type of service).	75%	0	Program did not meet the objective for the first two quarters due to delays in starting direct services. Program is hoping to meet this goal for the 3 rd quarter as it starts direct services in July.	75%
Provide adequate supervision that contributes to creating a supportive work environment for project staff. List type of supervision (e.g., individual, group) and frequency (sessions per month) for each type of project staff: Individual supervision, 4+sessions per month – Therapist Individual Supervision, 4+ sessions per month – Case Manager Individual supervision, 4+sessions per month – Intern Individual supervision,	Number of project staff who need supervision (for each type of project staff).	4	1-project manager	Program did not meet this goal for the first two quarters because the YSN program staff that required supervision were not approved to work until the 3 rd quarter. The project manager began weekly supervision immediately upon hire in May and Program plan to meet this goal for all staff in the 3 rd quarter.	4
	Type of supervision conducted (for each type of project staff).	Weekly for direct service staff (therapist,	Weekly supervision for the project	Program met this goal for the project manager	Weekly for direct service staff (therapist, case manager, intern),

<p>2+sessions per month – Project Manager</p>		<p>case manager, intern), minimum biweekly for project manager.</p>	<p>manager starting in May (upon hire).</p>	<p>because immediately upon hire, began weekly supervision. Program did not meet this goal for the direct service staff for the first two quarters because of the delay in their approval. There is a schedule in place for weekly supervision for the YSN staff to meet this objective in the 3rd quarter.</p>	<p>minimum biweekly for project manager.</p>
	<p>Number of supervision sessions conducted with project staff members per month (type of project staff).</p>	<p>Minimum 4/month for direct service staff. Minimum 2/month for project manager.</p>	<p>Project manager: 4/month starting in May.</p>	<p>Program met this goal for the project manager because immediately upon hire, began weekly supervision, adding up to 4/month during May and June. Program did not meet this goal for the direct service staff for the first two quarters because of the</p>	<p>Minimum 4/month for direct service staff. Minimum 2/month for project manager.</p>

				delay in their approval. There is a schedule in place for weekly supervision for the YSN staff to meet this objective in the 3 rd quarter.	
Establish manageable caseload of # for each type of project staff. List type of project staff. Therapist caseload = 15 Case Manager caseload = 20 Intern (MA) caseload (group) = 10	Number of relevant project staff with # caseloads.	3	0	Program did not meet the objective for the first two quarters due to delays in starting direct services. Program hopes to meet this goal for the 3 rd quarter as we start direct services in July.	3
	Percentage of relevant project staff with # caseloads based on total number of relevant project staff.	100%	0	Did not meet the objective for the first two quarters due to delays in starting direct services. Program is hoping to meet this goal for the 3 rd quarter as it starts direct services in July.	100%
Provide 2 training	Number of staff (for each type of training).	4	4	Did not meet the objective for the first	4

and education to 4 project staff related to creating a healthy work environment (e.g., stress, vicarious trauma). List types of training. Trauma 101 Vicarious Trauma/Self Care				two quarters due to the delay in contract approval. The goal is to meet this objective in the 3 rd quarter.	
	Number and types of training provided (for each type of training).	2	0	Did not meet the objective for the first two quarters due to delays in contract approval. The goal is to provide at least 1 training before the end of the funding period.	3
	Number of staff who attended training (for each type of training).	3	0	Did not meet the objective for the first two quarters due to delays in contract approval. The goal is to meet this objective in the 3 rd quarter.	3
	Percentage of staff who attended training based on total number of staff (for each type of training).	75%	0%	Did not meet the objective for the first two quarters due to delays in contract approval. The goal is to	75%

				meet this objective in the 3 rd quarter.	
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Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include:

- Core direct services to victims of all crime types.
- Fund services for underserved victims of crime.
- Promote multidisciplinary responses to victimization.
- Encourage trauma-informed and trauma-focused services.
- Encourage the use of evidence-informed (or promising) and evidence-based practices and programming.

Program Funding Detail

This designation would support 12 months of funding, representing months 10 through 21 of 36 months of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not applicable.

Budget Detail

	Total
Personnel Total FTE: 1.1 – Includes Project Manager and supervisor	\$51,396
Fringe: 19.98% plus health insurance	\$38,641
Equipment:	\$0
Supplies: Office and therapeutic supplies	\$2,511
Travel: Cross site visits	\$3,292
Contractual: Sub-grant to Youth Services Network for therapist, case manager, and supervisor; cellphone; travel	\$162,595
Indirect / Other Costs: 10% de minimis	\$10,238
Totals Federal / State and Match:	\$268,673

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Illinois Helping Everyone Access Linked Systems - Egyptian Health Department (Demonstration Site)

Program Agency DUNS: 112426812

Funding Source: FFY18 Victims of Crime Act: \$800,000; Match: \$200,000

Agency Budget: \$12,450,442

Request Type: Notice of Funding Opportunity #1564-1132

Program Description

In late 2017, ICJIA was awarded a U.S. Office of Victims of Crime grant to implement the Illinois Helping Everyone Access Linked Systems (Illinois HEALS) initiative, a six-year project that seeks to improve the identification, connection, and service engagement of those impacted by violence. Informed by a 15-month planning process, the Illinois HEALS Action Plan encourages cross-system collaboration to strengthen community capacity for recognizing when victimization has occurred and connecting and engaging young victims and families in needed services. In order to test community implementation of the action plan, an Illinois HEALS demonstration site was selected and housed within Egyptian Public Health Department (EHD) in Eldorado. The demonstration site serves Franklin, Gallatin, Saline, White, and Williamson counties. EHD offers a system of care, Project Connect 2.0, which serves children with serious emotional disturbances. The demonstration project expands service provision to a larger group of children, youth, and families who have experienced violence and the program's service area. EHC's System of Care is a national model of coordinated care. An Illinois HEALS research analyst is conducting a process evaluation to document how the action plan was implemented. Illinois HEALS staff work closely with Egyptian staff as well as the National Council on Juvenile and Family Court Judges.

Program Activities

At the multi-county level, the System of Care coordinator will convene representatives of other collaboratives to identify gaps in services for child, youth and family victims of violence. Four resource coordinators convene the local providers to identify victims and coordinate services. The resource coordinators attend virtual trainings and hold virtual county-level meetings for local providers to share resources. Through matching funds, Egyptian Health Department's family resource developers provide some of those services. In addition, evidence-based therapeutic services will be provided by trained clinicians. The hired service coordinator manages the mechanics of clinical referrals and ensures appropriate services are provided. Finally, a volunteer coordinator engages community members interested in supporting victims in a variety of settings.

Goals

Goal: Link and enhance the local Systems of Care (SOC) that meets the needs of individuals, families, and communities by convening local coordinating bodies, and developing policies and practices that further the work.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	Year One-Projected	Year One – Actual (Quarters 1-3)	Year One - Objective met?	Year Two – Projected
Meet with key leadership from existing projects to assess previously completed needs assessment work	Name and number of leadership meetings	14	13	Yes	Engage the 14th projected collaborative as well as new projects which have emerged
IL HEALS Advisory Council will develop and distribute MOU language with IL HEALS principles and practices to 12 partners	Number of MOUs developed.	1	1	Yes	Additional MOUs may be needed after new protocols or practices have been developed
	Number and name of coordinating bodies who received MOU	12	15	Yes	Distribute to any newly engaged partners
	Number and name of coordinating bodies who adopted IL HEALS principles and practice	5	8	yes	We will strive to have 3 new coordinating bodies adopt HEALS principles and practice
Convene IL HEALS Advisory Council by appointing representatives from existing collaborative projects and meet four times per year	Total number of representatives from each collaborative project appointed to the IL HEALS Advisory Council	2 per collaborative = 28	22	No	Continue to recruit and engage council members
	Number of IL HEALS Advisory Council meetings	4	6	Yes	Moved meeting to bimonthly
	Number of IL HEALS Advisory council members who attended each	20	Avg = 16	Yes	Continue to engage members to at least meet the goal of 1 member per

	meeting				collaborative present.
25% of the representatives of the Advisory Council will be child or youth victims or their family members.	Percentage of self-reported victims or their families participating in IL HEALS Advisory Council.	5	2	No	Recruit and engage persons victims or family members by way of working with partners and resource teams
Care Mapping will be conducted by IL HEALS Advisory Council to identify gaps in care	Name and number of care resources identified for victims of crime	Conduct environmental scan of community resource, create lists or “guides”	Resource guide(s) submitted previously	Yes	Continue to map resources, updating and editing guides as needed.
	Name and number of gaps identified for victims of crime	Conduct scan as well as ask council and resource team members	1	Yes	Identifying gaps in care is a continual measure within the resource teams
IL HEALS Advisory Council will develop and publish white papers on best or promising practices and policy recommendations to other agencies or organizations in the region.	Number of white papers developed	4	0	No	White paper topics have been discussed and an outline has been initiated for one; will continue this objective as the project progresses
	Number of white papers published	1	0	No	Discuss the appropriate direction of potential paper topic and timeframe
	Number of agencies or organization who adopted policy recommendations	50%	0	No	Once paper process is determined, will track adoption

GOAL: Strengthen the abilities of systems and communities to recognize child and youth victims by fostering community awareness and appropriate screening practices.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	<u>Year One-Projected</u>	<u>Year One – Actual (Quarters 1-3)</u>	<u>Year One - Objective met?</u>	<u>Year Two – Projected</u>
Provide trainings on appropriate screening recognition practices to community-based settings. List trainings: -YMHFA -CARES -Trauma 101 -Psychological First Aid	Number and types of community-based settings that received training.	6	8	Yes	12; Working on a universal training piece to include with existing trainings within community; a number of settings will be projected once curriculum is set
	Number of trainings provided (for each setting)	no projection made	YMHFA-1 CARES – 3 Trauma 101- 3 Psychological First Aid	Yes	These existing trainings will continue to also be promoted and presented into year 2
	Number of attendees at each training (for each setting)	no projection made	13 65 15 53	Yes	Will continue to engage new individuals for trainings
IL HEALS Advisory Council will conduct mapping of formal and informal screening practices for victims of crime and identify gaps.	Number and types of existing screening practices conducted with victims of crime identified.	<15	>20	yes	Continue to map types of screening practices as projects evolve and develop
	Number and types of gaps identified.	No projection made	2	yes	Continue to discuss and track gaps
Coordinate community awareness events and activities regarding signs, symptoms, impact, and how to respond to past or current victimization	Number and types of community awareness events and activities.	2	0	No	Events planned for year one were cancelled due to COVID19; working with NCJFCJ & ICJIA to develop an awareness campaign to be implemented in year

					2
	Number of attendees for each community awareness event or activity	No projection made	0	No	Due to the current environment, it is difficult to project at this time
Convene child-serving sector experts and develop five protocols for the screening and linking of victims to services	Number of protocols developed utilizing child-serving sector experts	5	0	No	Some members of the council and demo site team are part of subcommittees in existing partnering projects also discussing screening practices & protocols. Continued work and progress for this objective in year two
Provide trainings about the response protocol to 50% of staff in each relevant setting.	Number of trainings provided.	1	0	No	Determine response protocol and training thereof
	Number of staff (in each setting).	50%	0	No	50%
	Number of trainings provided (in each setting).	1	0	No	5
	Number of staff trained about the protocols (for each setting).	50%	0	Not yet initiated	50%
	Percentage of staff trained about the protocols based on total number of staff (in each setting).	50%	0	Not yet initiated	50%
Increase the number of youth and young adults screened for past or current victimization	Number of youth and young adults screened.	Determine the number of youth & young	Not initiated/tracked	Not initiated/tracked	Developing a protocol and tracking system in order to evaluate

		adults screened			this objective
GOAL: Connect young victims and their families to appropriate resources and services and collaborate cross-systems through a multidisciplinary team (MDT) or similar framework that supports care coordination and facilitates effective referral processes.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	<u>Year One-Projected</u>	<u>Year One – Actual (Quarters 1-3)</u>	<u>Year One - Objective met?</u>	<u>Year Two – Projected</u>
County resource team members will regularly convene and attend 1 meetings per month	Number of county resource team meetings held per (time period)	1 per month, per county	6	yes	All counties have not begun regularly standing meetings, so in year 2, all counties will have monthly meetings and continue to recruit appropriate members
	Total number of county resource team members who attended each meeting	5-10	Avg=9.8	Yes	Average of 9 per meeting
Provide trainings on protocols related to information sharing practices to 100% of staff.	Number of trainings provided.	No specific projection made	2 - Progress Monitoring Tool	Yes	Determine # of information sharing practices to projection
	Number of staff (for each setting).	100%	1- n/a 2- 12	No	100%
	Number of trainings provided (for each setting).	No specific projection made	1	yes	Determine # of information sharing practices to projection
	Number of staff trained about the protocols related to information sharing practices (for each setting).	100%	1 -11 2 -12	yes	100%
	Percentage of staff trained about protocols related to information sharing practices based on total number of staff	100%	1 -n/a 2 100 %	yes	100%

	(for each setting).				
Facilitate resource coordination by providing referrals to services and providing resource information to 10% of victims	Number of referrals made to victims	10%	23	yes	These numbers only reflect contacts made to coordinators
	Number of referrals made through IRIS, resource platform	No specific projection made	0	No	Implementation of the system was delayed due to COVID19. Plan to revisit in year two, post new school year and service delivery changes
	Number and types of services victims were referred to	No specific projection made	Women's center (domestic violence), food pantries, counseling services, housing, Family Resource Developers, WADI, faith-based charity organization, COVID relief resources	yes	Continue building partnerships with victim services and resources
	Number of resource packets distributed by resource coordinators	No specific projection made	50-100 VOC brochures and resource coordinator promotional postcards	yes	More comprehensive packets developed as the teams convene and determine needs
Provide training to relevant users of project resource guide or interactive resource	Number of trainings on the resource guide or interactive resource platform	1 per agency/provider on platform	Not yet initiated	No	Set trainings once platform is launched

platform (e.g., IRIS).	provided to relevant users				
	Number of attendees at each training	Relevant users determined per provider	0	No	Agencies or providers who come on to the platform will determine relevant users and utilization level. Those users will receive training.
	Number of people utilizing resource guide or interactive resource platform	12	0	No	Guides are being reviewed and updated with the coordinators and resource teams. They are also discussing ways in which both the guide and eventual platform can be utilized best
IL HEALS Advisory Council will develop protocols related to community standard of practice for referral management and expectations	Number of protocols related to community standard of practice developed by IL HEALS Advisory Council.	1	Not yet initiated	No	To be determined as the referral platform is implemented

GOAL: Promote practices that engage young persons who have experienced victimization and their family members in an array of services that are culturally specific and humble, accessible, and relevant by developing the professional workforce and enhancing service capacity and quality.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	<u>Year One-Projected</u>	<u>Year One – Actual (Quarters 1-3)</u>	<u>Year One - Objective met?</u>	<u>Year Two – Projected</u>
Provide workforce training on evidence-based practices for victims to 25% of staff.	Number and types of EBP training.	4	TFCBT=1 PCIT=4 MAP=4	yes	Continued trainings and progress monitoring to ensure fidelity; EMDR training date
List types of training: -TFCBT -PCIT	Number of training participants (for each training)	25%	TFCBT=39 PCIT=17 MAP=28	yes	25%

-MAP -EMDR					
IL HEALS Advisory Council will conduct mapping of current practices related to self-care and supports for staff	Number of self-care and support resources identified	No specific projection made	Anticipated in Q4	No (not at time of report)	Plan to initially assess via survey through council as many projects/agencies are focusing heavily on self-care
	Name and number of gaps related to self-care and support resources identified	No specific projection made	Anticipated in Q4	No (not at time of report)	Will track upon initiation
IL HEALS Advisory Council will develop and distribute best practices guides related to self-care and supports for staff	Number of best practices guides related to staff self-care and supports developed	1	Not yet initiated	no	1 - Will work collaboratively with existing and overlapping projects
Provide self-care and supports for staff including regular supervision meetings.	Number and type of staff receiving self-care training or supports	No specific projection made	Not yet initiated	no	Will develop process for tracking this data post best practice determinations as well as projection %
Conduct workforce recruitment practices such as PSAs, recruitment events, and training on resources and effective strategies to organizations	Develop and disseminate resource guide on recruitment strategies	1	Not yet initiated	No	1 -To be discussed as site team and then with advisory council. Assess needs across partner agencies and supporting workforce initiatives
	Number of PSAs shared	1	Not yet initiated	No	See above
	Number of recruitment events attended	1	Not yet initiated	No	See above
Develop and implement EBP Enhanced Reimbursement protocols by enrolling	Number of protocols developed	1	1	yes	See above
	Number of providers enrolled in the EBP Enhanced	60	78	Yes	Continue to monitor roster providers and update as providers

providers Include list of providers enrolled in the EBP enhanced reimbursement roster	Reimbursement Roster				are trained, certified or ineligible
Provide EBP treatment services to 75% of victims requesting services	Number of victims who requested EBP treatment services (for each type of EBP treatment service)	75%	not able to track at this point	No	75% - Determine how to track and report this #
List types of EBP treatment services: -TFCBT -EMDR -MAP -PCIT	Number of victims who received EBP treatment services (for each type of EBP treatment service)	75%	TFCBT=17 EDMR=0 MAP=21 PCIT=3	No	These numbers only reflect a small number of services being provided at this time. We have implemented a data tracking system and not all providers have accessed and begun submitting data
Workforce will increase sustainability of victim support providers and clinicians.	Percentage of turnover rate for victim support providers and clinicians	% increase	Not yet initiated	No	Determine a way to track this percentage rate

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include #1 Public Awareness; #2 Fundamental Needs; #3 Core Services, #4 More Advocates, More Places; #6 Multiple Victimization; #7 Multi-disciplinary Responses; #8 Trauma-informed and focused Services; #11 Evidence-informed practices; and #12 Facilitating Program Evaluation.

Program Funding Detail

This designation would support 12 months of funding, representing months 10 through 21 of 36 months of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

In the first 11 months of this grant, the demonstration site has had great success in engaging local collaboratives to contribute to the HEALS Advisory Council. The demonstration site has hired all staff positions and the resource coordinators are meeting with regional providers to meet victim needs. The subcontractor has provided

evidence based clinical trainings and has developed the fidelity monitoring tool that assists in ensuring that clinicians are applying the therapy with fidelity.

Budget Detail

	Total
Personnel Total FTE: 12.15 – Includes 5 Family Resource Developers, 3 Counselors, 3 Coordinators (SOC, Service, Volunteer), 5 County Resource Coordinators, Program Director, and administrative support	\$429,075
Fringe: 32.67%	\$140,181
Equipment	\$0
Supplies: Includes office supplies, program promotional material, and electronic file sharing platform	\$9,840
Travel: Local travel between partner counties	\$12,064
Contractual: Includes subcontract with Stress & Trauma Treatment Center for EBP trainings, subcontracts with 8 partner agencies for EBP Rate Enhancement, purchase of electronic resource & referral platform, and phone/internet services	\$337,400
Indirect / Other Costs: 10% de minimis	\$82,443
Totals Federal / State and Match:	\$1,011,003

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Illinois Helping Everyone Access Linked Systems - Egyptian Health Department

Program Agency DUNS: 112426812

Funding Source: FFY18 Victims of Crime Act: \$666,667; Match: \$166,667

Agency Budget: \$12,450,442

Request Type: Notice of Funding Opportunity #1564-1132

Program Description

In late 2017, ICJIA was awarded a U.S. Office of Victims of Crime grant to implement the Illinois Helping Everyone Access Linked Systems (Illinois HEALS) initiative, a six-year project that seeks to improve the identification, connection, and service engagement of those impacted by violence. Informed by a 15-month planning process, the Illinois HEALS Action Plan encourages cross-system collaboration to strengthen community capacity for recognizing when victimization has occurred and connecting and engaging young victims and families in needed services. In 2019, ICJIA released a notice of funding opportunity to select community based programs in which the grantee engages other entities to recognize, connect and engage child victims of violence and their families in trauma-informed, culturally relevant responses and services. The seven funded programs, which represent the diversity of the state, proposed projects that involve multiple systems working collaboratively to address the needs of child and youth victims in their communities. Some of the systems and services involved include home visiting programs, public schools, child welfare agencies, public health departments, mental health providers, youth serving organizations, law enforcement agencies, and grassroots groups. The projects were executed in February-March 2020 and are responding to the challenges of the COVID-19 pandemic by adapting service delivery to support the families of child and youth victims.

Program Activities

Serving a largely rural group of 16 counties in southern Illinois that indicate disproportionately high rates of child abuse and neglect, the Early Childhood Systems of Care Program focuses on linking and expanding early childhood education and social service cross-system collaboration for child victims under five years old and their families. This collaboration has held virtual meetings in preparation for project implementation. The program has hired a service coordinator who is completing lengthy Nurse Family Partnership trainings and assisted in the hiring of the nurse home visitor and supervisor positions.

Goals

GOAL: Develop cross-system partnerships that meet the needs of individuals, families, and communities by convening local providers and developing policies and practices that further the work. At minimum, the project partners must demonstrate an ongoing collaborative relationship that supports the effective provision of services to the community.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months-Projected	1st 9 Months – Actual (Quarters 1 & 2))	1st 9 Months - Objective met?	Next 12 Months – Projected
Members of cross-system partnerships will regularly convene and attend ___# of meetings per month.	Number of meetings per time.	6	11	met	Will continue to meet as scheduled
	Total number of members attending each meeting.		Approximately 60 Zoom meetings, no sign in sheets	met	Will continue to meet as scheduled
	Percentage of members attending each meeting based on total number of members.				
	Number of members from each partner agency who attended each meeting.				
	Percentage of members from each partner agency who attended each meeting based on total number of members from each agency.				
Develop and adopt protocols that guide the structure and governance of cross-system partnership.	Number of protocols developed.	5	0	Not initiated	Will work with MATFC
	Number of protocols approved: list agencies that developed and approved protocols				

GOAL: Strengthen the abilities of systems and communities to recognize child and youth victims by fostering community awareness and appropriate screening practices.					
Process Objectives/Standards	Process Performance Measures	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Provide trainings on appropriate screening practices to each relevant setting in which victims are encountered. List trainings: Trauma 101-June 4, 2020.	Number and types of relevant settings that received training.	20	1	Not initiated	Will work with MATFC. Subcontract was not finalized until May 2020, now some additional questions sent on July 10, 2020, but continuing to provide services.
	Number of trainings provided (for each setting)				
	Number of attendees at each training (for each setting)	6			
Coordinate community awareness events and activities to increase understanding of topics related to violence and victimization.	Number of community awareness events.	20	0	Not initiated	Have had several events planned but had to cancel due to COVID-19
	Number of attendees at each training.				
Develop and adopt __20__# setting-specific protocols for responding to screening practices. List protocols:	Number of setting-specific protocols.	20	0	Not initiated	Will work with MATFC and EHD to develop.
Provide trainings about	Number of trainings provided.				
	Number of staff (in each setting).				
	Number of trainings provided (in each setting).	75%	0	Not initiated	

the response protocol to _75_% of staff in each relevant setting.	Number of staff trained about the protocol (for each setting).				
	Percentage of staff trained about the protocol based on total number of staff (in each setting).				
GOAL: Connect young victims and their families to appropriate resources and services and collaborate cross-systems through a multidisciplinary team (MDT) or similar framework that supports care coordination and facilitates effective referral processes.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1 st 9 Months - Projected	1 st 9 Months - Actual	1 st 9 Months - Objective met?	Next 12 Months - Projected
Develop __5_# protocols that guide information sharing practices.	Number of protocols developed.	5	0	Not Initiated	Will work with MATFC, SICCF, and EHD to develop.
Provide trainings on protocols related to information sharing practices to _75_% of staff.	Number of trainings provided.	Not Yet Initiated			Will work with MATFC, SICCF, and EHD to develop.
	Number of staff (for each setting).				
	Number of trainings provided (for each setting).				
	Number of staff trained about the protocols related to information sharing practices (for each setting).				
	Percentage of staff trained about protocols related to information sharing practices based on total number of staff (for each setting).				
	Number of victims who needed referrals (for each setting).		3		Will work with MATFC, SICCF, and EHD to increase.

Provide referrals to _90_% of victims in each setting.	Number of victims referred to direct services (for each setting).		14		
	Percentage of victims referred to direct services based on total number of victims who needed referrals (for each setting).				
	Number of follow-ups made as a result of referral (for each setting).		3		
	Percentage of follow-ups made as a result of referral based on total number of referrals (for each setting).		3		

GOAL: Promote practices that engage young persons who have experienced victimization and their family members in an array of services that are culturally specific and humble, accessible, and relevant by developing the professional workforce and enhancing service capacity and quality.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1 st 9 Months - Projected	1 st 9 Months - Actual	1 st 9 Months - Objective met?	Next 12 Months - Projected
Provide direct service-related trainings to __100_% of staff. List types of training. Progress Monitoring Tool	Number of staff (for each setting).		10		Will work with MATFC, SICCF, and EHD to increase
	Number and types of training provided (for each setting).		1 Progress Monitoring Tool		
	Number of staff who direct service-related trainings (for each setting).		10		
	Percentage of staff who attended direct service-related trainings based on total number of staff (for each setting).				
Provide direct services to ____100_% of	Projected total number of victims served (for each type of service).		14		

<p>victims requesting services in each setting.</p> <p>List types of services.</p>	<p>Number of victims who requested direct services (for each type of service).</p> <p>Number of victims who received direct services (for each type of service).</p> <p>Percentage of victims who received direct services based on total number of victims who requested services (for each type of service).</p>		<p>14</p> <p>14</p>		
<p>Provide adequate supervision that contributes to creating a supportive work environment for project staff.</p> <p>List type of supervision (e.g., individual, group) and frequency (sessions per month) for each type of project staff</p>	<p>Number of project staff who need supervision (for each type of project staff).</p> <p>Type of supervision conducted (for each type of project staff).</p> <p>Number of supervision sessions conducted with project staff members per month (type of project staff).</p>	<p>4</p> <p>PCIT TFCBT MAP</p> <p>8-PCIT 6-TFCBT 9 MAP</p>	<p>4</p>	<p>met</p>	<p>Will work with MATFC, SICCF, and EHD to increase</p>
<p>Establish manageable caseload of 25 for each type of project staff.</p> <p>List type of project staff.</p>	<p>Number of relevant project staff with # caseloads.</p>	<p>25</p>	<p>0</p>	<p>Not Yet Initiated</p>	<p>Hired Nurse Family Partnership Supervisor May 1, 2020. Nurse Supervisor has completed Unit 1 and 2 Education for NFP. NFP Supervisor also participated in Supervisor Training-all these trainings were virtual. NFP</p>

					administrator will participate in NFP Admin training in August. Interviewed 2 potential candidates and offered employment to both, 1 accepted. Hired 1 NFP Nurse Home visitor start date July 28,2020. Will continue to recruit for an additional nurse through agency Facebook page, NFP. Also created a video for social media outreach
	Percentage of relevant project staff with # caseloads based on total number of relevant project staff.				
Provide training and education to project staff related to creating a healthy work environment (e.g., stress, vicarious trauma). List types of training.	Number of staff (for each type of training).	10	0	Not Yet Initiated	Will work with MATFC, SICCF, and EHD to increase
	Number and types of training provided (for each type of training).				
	Number of staff who attended training (for each type of training).				
	Percentage of staff who attended training based on total number of staff (for each type of training).				

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include #1 Public Awareness; #2 Fundamental Needs; #3 Core Services, #4 More Advocates, More Places; #6 Multiple Victimization; #7 Multi-disciplinary Responses; #8 Trauma-informed and focused Services; #11 Evidence-informed practices; and #12 Facilitating Program Evaluation.

Program Funding Detail

This designation would support 12 months of program funding, representing months 10 through 21 of 36 months of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

It is too early to evaluate the grantee’s performance due to the shortened first grant period and the COVID pandemic.

Budget Detail

	Total
Personnel Total FTE: 7.8 – Includes 9 nurses, a nurse supervisor, services coordinator, program coordinator, and administration	\$361,328
Fringe: 32.67%	\$118,047
Equipment	\$0
Supplies: Laptops for new staff, promotional materials, office and program supplies	\$19,950
Travel: Cross-site visits, coalition meetings, and local travel	\$21,195
Contractual: Subawards with Stress & Trauma Treatment Center and Nurse Family Partnership, cell phone, landline, and internet service	\$262,738
Indirect / Other Costs: 10% de minimis	\$58,582
Totals Federal / State and Match:	\$841,840

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Illinois Helping Everyone Access Linked Systems - Erie Neighborhood House

Program Agency DUNS: 013466441

Funding Source: Victims of Crime Act FFY18: \$666,667; Match: \$166,667

Agency Budget: \$9,433,949

Request Type: Notice of Funding Opportunity: #1564-1132

Program Description

In 2017, ICJIA was awarded a U.S. Office of Victims of Crime grant to implement the Illinois Helping Everyone Access Linked Systems (Illinois HEALS) initiative, a six-year project that seeks to improve the identification, connection, and service engagement of those impacted by violence. Informed by a 15-month planning process, the [Illinois HEALS Action Plan](#) encourages cross-system collaboration to strengthen community capacity for recognizing when victimization has occurred and connecting and engaging young victims and families in needed services. In 2019, ICJIA released a notice of funding opportunity to select community based programs in which the grantee engages other entities to recognize, connect, and engage child victims of violence and their families in trauma-informed, culturally relevant responses and services. The seven funded programs, which represent the diversity of the state, proposed projects that involve multiple systems working collaboratively to address the needs of child and youth victims in their communities. Some of the systems and services involved include home visiting programs, public schools, child welfare agencies, public health departments, mental health providers, youth serving organizations, law enforcement agencies, and grassroots groups. The projects were executed in February-March 2020 and respond to the challenges of the COVID-19 pandemic by adapting service delivery to support the families of child and youth victims.

Program Activities

Erie Neighborhood House is committed to collaborating with and linking systems to provide meaningful support for youth and their families that have diverse experiences of victimization. Erie Neighborhood House will continue to work closely with Department of Child and Family Services) and Chicago Public Schools and provide opportunities for legal aid and support through Chicago Volunteer Legal Services.

Due to the transitions many sectors and agencies have experienced due to the outbreak of COVID-19, Erie Neighborhood House is focusing less on interpersonal training and collaboration with partners and more on developing clear and supportive referral structures and expanded service provision for these collaborative partnerships. These relationships will be solidified with MOUs describing the new referral process, updated to adjust for COVID-19 protocols.

Erie has hired budgeted staff, provided training to new staff, and provided virtual services to young victims and their families.

Goals

GOAL: Develop cross-system partnerships that meet the needs of individuals, families, and communities by convening local providers and developing policies and practices that further the work. At minimum, the project partners must demonstrate an ongoing collaborative relationship that supports the effective provision of services to the community.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months-Projected	1st 9 Months – Actual (Quarters 1 & 2))	1st 9 Months - Objective met?	Next 12 Months – Projected
Members of cross-system partnerships will regularly convene and attend <u>5</u> # of meetings per month.	Number of meetings per time.	1	2	Yes	1
	Total number of members attending each meeting.	10	9	No	8
	Percentage of members attending each meeting based on total number of members.	100%	90%	No	100%
	Number of members from each partner agency who attended each meeting.	1-3	1-4	Yes	2
	Percentage of members from each partner agency who attended each meeting based on total number of members from each agency.	100%	90%	No	100%
Develop and adopt protocols that guide the structure and governance of cross-system partnership.	Number of protocols developed.	4	2	No	4
	Number of protocols approved: list agencies that developed and approved protocols	4	2	No	4

GOAL: Strengthen the abilities of systems and communities to recognize child and youth victims by fostering community awareness and appropriate screening practices.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Provide trainings on appropriate screening practices to each relevant setting in which victims are encountered. List trainings: Trauma Informed Programming and Practice, Case Management, Cultural Competence	Number and types of relevant settings that received training.	Erie House, CPS, DCFS, CVLS: 1 training offered for each topic. Total: 3 trainings	2	No	3
	Number of trainings provided (for each setting)	3	3	Yes	3
	Number of attendees at each training (for each setting)	N/A	Average 8	Yes	10
Coordinate community awareness events and activities to increase understanding of topics related to violence and victimization.	Number of community awareness events.	3	5	Yes	5
	Number of attendees at each training.	25	Average 13	No	15
Develop and adopt 5 setting-specific protocols for responding to screening practices. List protocols: Best Practices of Confidentiality, Implementing Screening & Assessment Tools, Staff & Client Safety Policy, Referral System	Number of setting-specific protocols.	5	2	No	5

Implementation, Crisis and Community Response Policy					
Provide trainings about the response protocol to 100% of staff in each relevant setting. Trainings provided monthly during program initiation then transitioning to quarterly as needed. A training pamphlet and check-ins will be developed to help new staff learn the protocols.	Number of trainings provided.	5	2	No	5
	Number of staff (in each setting).	25 staff at Erie House; 10 at CPS; 5 at DCFS; 2 at CVLS	16	No	25 staff at Erie House; 5 at CPS; 2 at DCFS; 2 at CVLS
	Number of trainings provided (in each setting).	5	2	No	5
	Number of staff trained about the protocol (for each setting).	42	14	No	34
	Percentage of staff trained about the protocol based on total number of staff (in each setting).	100%	33%	No	100%
GOAL: Connect young victims and their families to appropriate resources and services and collaborate cross-systems through a multidisciplinary team (MDT) or similar framework that supports care coordination and facilitates effective referral processes.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Develop 3 protocols that guide information sharing practices: Consulting and Supervision; Implementing Referral System; Best Practices of Confidentiality	Number of protocols developed.	3	1	No	3
	Number of trainings provided.	5	2	No	5
	Number of staff (for each setting).	25 staff at Erie House;	10	No	25 staff at Erie House; 5 at

Provide trainings on protocols related to information sharing practices to 100% of staff. Trainings provided frequently at onset and then as needed. A training pamphlet and check-ins will be developed to allow new staff to be made familiar with the protocols.		10 at CPS; 5 at DCFS; 2 at CVLS			CPS; 2 at DCFS; 2 at CVLS
	Number of trainings provided (for each setting).	5	2	No	5
	Number of staff trained about the protocols related to information sharing practices (for each setting).	42	14	No	34
	Percentage of staff trained about protocols related to information sharing practices based on total number of staff (for each setting).	100%	33%	No	100%
Provide referrals to 100% of victims in each setting.	Number of victims who needed referrals (for each setting).	200	50	No	200
	Number of victims referred to direct services (for each setting).	200	1	No	200
	Percentage of victims referred to direct services based on total number of victims who needed referrals (for each setting).	100%	100%	Yes	100%
	Number of follow-ups made as a result of referral (for each setting).	150	1	No	150
	Percentage of follow-ups made as a result of referral based on total number of referrals (for each setting).	100%	100%	Yes	100%

GOAL: Promote practices that engage young persons who have experienced victimization and their family members in an array of services that are culturally specific and humble, accessible, and relevant by developing the professional workforce and enhancing service capacity and quality.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1 st 9 Months - Projected	1 st 9 Months - Actual	1 st 9 Months - Objective met?	Next 12 Months - Projected
Provide direct service-related trainings to 75% of staff. List types of training: Bullying, Trauma-informed Care, Dating Violence, Suicide Prevention, Domestic Violence, Tools & Resources, Cultural Competence, Youth Mental Health First Aid, Mandated Reporter Training, Sexual Assault	Number of staff (for each setting).	15 staff at Erie House; 10 at CPS; 5 at DCFS; 2 at CVLS	0	No	15 staff at Erie House; 5 at CPS; 2 at DCFS; 2 at CVLS
	Number and types of training provided (for each setting).	7 of 10 trainings from list (to left) provided	0	No	7 of 10 trainings from list (to left) provided
	Number of staff who direct service-related trainings (for each setting).	15 staff Erie House, 7 CPS, 2 CVLS attend direct service-related trainings	0	No	15 staff at Erie House; 5 at CPS; 2 at DCFS; 2 at CVLS
	Percentage of staff who attended direct service-related trainings based on total number of staff (for each setting).	75%	0	No	75%
Provide direct services to 90% of victims requesting services in each setting. List types of services: Individual Therapy, Group Therapy, Cohort-Based Youth	Projected total number of victims served (for each type of service).	200	50	No	200
	Number of victims who requested direct services (for each type of service).	267	50	No	267
	Number of victims who received direct services (for each type of service).	200	50	No	200

Programs; Case Management and Referrals; Family Civil Legal Services	Percentage of victims who received direct services based on total number of victims who requested services (for each type of service).	90%	100%	Yes	90%
Provide adequate supervision that contributes to creating a supportive work environment for project staff. List type of supervision (e.g., individual, group) and frequency (sessions per month) for each type of project staff: Individual Supervision (weekly/biweekly), Clinical Case Consultation (weekly/biweekly), Team Meetings (Monthly information sharing, problem solving, and consultation)	Number of project staff who need supervision (for each type of project staff).	7	7	Yes	16
	Type of supervision conducted (for each type of project staff).	(to the left)	Those listed to the left	Yes	We will keep the same types of supervision
	Number of supervision sessions conducted with project staff members per month (type of project staff).	4	4	Yes	4
Establish manageable caseload of # for each type of project staff.	Number of relevant project staff with # caseloads.	Youth Program Manager (5), Youth Advocate (30 case management; 15 cohort youth), Youth	Youth Case Manager: 10	No	Youth Program Manager (5), Youth Advocacy Coordinator (15), Youth Advocacy Specialist, (25 case management; 15

		Ambassadors (N/A), Clinicians (25/year; 40 in youth groups), Attorney (60)			cohort youth), Community Intake Specialist (10), Community Support Specialist (25) Clinicians (25/year; 10 in youth groups), CVLS; Attorney (60)
	Percentage of relevant project staff with # caseloads based on total number of relevant project staff.	100%	33%	No	100%
Provide training and education to project staff related to creating a healthy work environment (e.g., stress, vicarious trauma). List types of training: Biweekly case consultations; bimonthly processing staff meetings; Trauma Informed Care; Vicarious Trauma/Trauma Stewardship; Restorative Justice Circle Keeping; Staff and Client Safety; Sexual Harassment; Self-Care; Team Retreats and Team-Building	Number of staff (for each type of training).	20	18	No	18
	Number and types of training provided (for each type of training).	12	12	Yes	12
	Number of staff who attended training (for each type of training).	20	18	No	18
	Percentage of staff who attended training based on total number of staff (for each type of training).	75%	100%	Yes	75%

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include #1 Public Awareness; #2 Fundamental Needs; #3 Core Services, #4 More Advocates, More Places; #6 Multiple Victimization; #7 Multi-disciplinary Responses; #8 Trauma-informed and focused Services; #11 Evidence-informed practices; and #12 Facilitating Program Evaluation.

Program Funding Detail

This designation would support 12 months of funding, representing months 10 through 21 of 36 months of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

It is too early to evaluate the grantee’s performance due to the shortened first grant period and the COVID pandemic.

Budget Detail

	Total
Personnel Total FTE: 16.4 – Includes Youth Program Manager, 3 Youth Ambassadors, 3 Clinical Therapists, 2 Youth Program Specialists, Community Support Specialist, Community Intake Specialist, Youth Program Coordinator, Youth Advocacy Coordinator, Community Resource Coordinator, and Project Director	\$544,032
Fringe: 22%	\$119,686
Equipment:	\$0
Supplies: Office Supplies, PPE for use in office	\$11,448
Travel: Cross site visits and local travel	\$2,802
Contractual: Sub-award to Chicago Volunteer Legal services for bilingual attorney; sub-contract to Center for Urban Research and Learning (CURL) for program evaluation, development of referral system	\$116,700
Indirect / Other Costs: 10% de minimis	\$71,967
Totals Federal / State and Match:	\$866,635

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Illinois Helping Everyone Access Linked Systems - Lake County Crisis Center DBA A Safe Place

Program Agency DUNS: 122324277

Funding Source: FFY18 Victims of Crime Act (VOCA): \$666,667; Match: \$166,667

Agency Budget: \$6,342,000

Request Type: NOFO #1564-1132

Program Description

In late 2017, ICJIA was awarded a U.S. Office of Victims of Crime grant to implement the Illinois Helping Everyone Access Linked Systems (Illinois HEALS) initiative, a six-year project that seeks to improve the identification, connection, and service engagement of those impacted by violence. Informed by a 15-month planning process, the Illinois HEALS Action Plan encourages cross-system collaboration to strengthen community capacity for recognizing when victimization has occurred and connecting and engaging young victims and families in needed services. In 2019, ICJIA released a notice of funding opportunity to select community based programs in which the grantee engages other entities to recognize, connect and engage child victims of violence and their families in trauma-informed, culturally relevant responses and services. The seven funded programs, which represent the diversity of the state, proposed projects that involve multiple systems working collaboratively to address the needs of child and youth victims in their communities. Some of the systems and services involved include home visiting programs, public schools, child welfare agencies, public health departments, mental health providers, youth serving organizations, law enforcement agencies, and grassroots groups. The projects were executed in February-March 2020 and, like community-focused efforts nationwide, are responding to the challenges of the COVID-19 pandemic by adapting service delivery to support the families of child and youth victims.

Program Activities

A Safe Place hired a project coordinator to lead the cross-sector La Paloma Cares project, serve as a liaison to the Partnership for a Safer Lake County to create a formal cross-system structure of over 30 organizations to recognize, connect, and engage victims in a coordinated way. This will be done through an enhanced partnership structure, member linkages and education, and connections with five Lake County schools to educate them about abuse and facilitate victim identification and service referrals. While the collaborations are delayed due to COVID, the agency has been able to rent an office site and hire and train staff. The site holds regular hours, providing services virtually.

Goals

GOAL: Develop cross-system partnerships that meet the needs of individuals, families, and communities by convening local providers and developing policies and practices that further the work. At minimum, the project partners must demonstrate an ongoing collaborative relationship that supports the effective provision of services to the community.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months- Projected (1/1/20-9/30/20)	1st 9 Months – Actual (Quarters 1 & 2)	1st 9 Months - Objective met?	Next 12 Months – Projected (10/1/20-9/30/20)
Members of cross-system partnerships will regularly convene and attend 60% of meetings held per month.	Number of meetings per time.	38 total (April – Sep)	N/A	In process due to COVID-19; the Partnership for a Safe Lake County has not met due to CDC and State of IL guidelines	38 total (April – Sep)
	Total number of members attending each meeting.	15	N/A		15
	Percentage of members attending each meeting based on total number of members.	60	N/A		60
	Number of members from each partner agency who attended each meeting.	1	N/A		1
	Percentage of members from each partner agency who attended each meeting based on total number of members from each agency.	60% of direct service staff who come into contact with the public	N/A		60% of direct service staff who come into contact with the public
Develop and adopt protocols that guide the structure and governance of cross-system partnership.	Number of protocols developed.	2	N/A		2
	Number of protocols approved: list agencies that developed and approved protocols	2 protocols approved by 10 participating agencies	N/A		2 protocols approved by 10 participating agencies
GOAL: Strengthen the abilities of systems and communities to recognize child and youth victims by fostering community awareness and appropriate screening practices.					

Process Objectives/Standards	Process Performance Measures	1st 9 Months - Projected	1st 9 Months - Actual	1st 9Months - Objective met?	Next 12 Months - Projected
Provide trainings on appropriate screening practices to each relevant setting in which victims are encountered. List trainings: Victim/trauma assessment (for professionals)	Number and types of relevant settings that received training.	10	3	In process; considering COVID-19 and starting in Aprils, we have done well	7
	Number of trainings provided (for each setting)	Not listed in our proposal	2	yes	
	Number of attendees at each training (for each setting)	30	35 people attended the HEALS presentation online training. 28 staff attended the Trauma assessment training.	Exceeded	50
Coordinate community awareness events and activities to increase understanding of topics related to violence and victimization. Healthy Relationships (for students); Symposium for professionals	Number of community awareness events.	5 school sites; 1 full day Symposium per site	Not allowed in schools during this period due to COVID-19; conducted online trainings for others; see narrative	In process	5 school sites; may not be able to do a symposium due to social distancing and crowd limits. Will adjust this to meet infection control standards (in person vs virtual)
	Number of attendees at each training.	250 students/school; 250 Symposium attendees	85 total in just 1 quarter	In process	250
Develop and adopt 1# setting-specific protocols for responding to screening practices. List protocols: Victim/Trauma Assessment Tool	Number of setting-specific protocols.	1	N/A- Partnership did not meet due to COVID-19	In process	1 Partnership Scheduled to meet Nov. 2020
	Number of trainings provided.	4	N/A Delayed due to COVID-19	In process	4
	Number of staff (in each setting).	20	N/A	In process	20

Provide trainings about the response protocol to 50% of staff in each relevant setting.	Number of trainings provided (in each setting).	10	N/A	In process	10
	Number of staff trained about the protocol (for each setting).	100	N/A	In process	100
	Percentage of staff trained about the protocol based on total number of staff (in each setting).	50%	N/A	In process	50%

GOAL: Connect young victims and their families to appropriate resources and services and collaborate cross-systems through a multidisciplinary team (MDT) or similar framework that supports care coordination and facilitates effective referral processes.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	<u>1st 9 Months - Projected</u>	<u>1st 9 Months - Actual</u>	<u>1st 9 Months - Objective met?</u>	<u>Next 12 Months - Projected</u>
Develop 12 protocols that guide information sharing practices. <ul style="list-style-type: none"> Partnership Job Descriptions Partnership Bylaws 10 Linkage Agreements with minimum of 10 agencies 	Number of protocols developed.	12	N/A Delayed due to COVID-19; Partnership did not meet	In process	12
Provide trainings on protocols related to information sharing practices to 60% of staff.	Number of trainings provided.	4	N/A	In process	4
	Number of staff (for each setting).	Average of 20 direct services staff per location	N/A	In process	Average of 20 direct services staff per location
	Number of trainings provided (for each setting).	4 trainings at 10 locations	N/A	In process	4 trainings at 10 locations
	Number of staff trained about the protocols related to information sharing practices (for each	110	35 ASP staff	In process	110

	setting).				
	Percentage of staff trained about protocols related to information sharing practices based on total number of staff (for each setting).	60%	75%	In process	60%
Provide referrals to 50% of victims in each setting.	Number of victims who needed referrals (for each setting).	20	88	Exceeded	88
	Number of victims referred to direct services (for each setting).	10	109	Exceeded	109
	Percentage of victims referred to direct services based on total number of victims who needed referrals (for each setting).	50%	Counseling: 100% Immigration: 38% Housing: 55% Legal: 16% Other : 65%	Exceeded	65%
	Number of follow-ups made as a result of referral (for each setting).	16	24 4 of the 5 clients referred to Mano a Mano have already started their immigration process as evidenced via weekly phone calls to Mano a Mano staff. 20 of the 48 clients referred to Housing received calls from staff, completed applications and received orientation about programs for which they can	Exceeded	24

			qualify as reported by clients.		
	Percentage of follow-ups made as a result of referral based on total number of referrals (for each setting).	20	38% follow up with immigration process 42% Follow up with Housing	Exceeded	38

GOAL: Promote practices that engage young persons who have experienced victimization and their family members in an array of services that are culturally specific and humble, accessible, and relevant by developing the professional workforce and enhancing service capacity and quality.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	<u>1st 9 Months - Projected</u>	<u>1st 9 Months - Actual</u>	<u>1st 9 Months - Objective met?</u>	<u>Next 12 Months - Projected</u>
<p>Provide direct service-related trainings to 80% (40/50) ASP and 25% (5/20) Mano a Mano staff.</p> <p>List types of training.</p> <ul style="list-style-type: none"> • <i>40-Hour ICADV training</i> • <i>the Illinois HEALS Project</i> • <i>ICJIA requirements</i> • <i>Partners (Partnership for a Safer Lake County, Mano a Mano, schools)</i> • <i>Trauma Informed Training</i> • <i>ICADV/NCADV webinars</i> • <i>Self-care & Vicarious Stress</i> 	Number of staff (for each setting).	50 ASP 20 Mano a Mano	<p>HEALS staff have participated in 120 training webinars!</p> <p>2 HEALS (100%) staff participated of the ICJIA Cross system project presentation on April 1st</p> <p>25 ASP (53%), 2 HEALS (100%) & 2 Mano a Mano (100%) staff attended Trauma informed training on April 24 conducted by CYN trainers.</p> <p>35 ASP (75%) & 2 HEALS (100%) staff participated in a two part training about Sanctuary model (May 12 & May 26)</p>	In process	50 ASP 20 Mano a Mano

<ul style="list-style-type: none"> DHS Guidance Manual LGBTQ victims 			conducted by ASP		
	Number and types of training provided (for each setting).	9 topics; see list on left	See list above	In process	9 topics; see list on left
	Number of staff who direct service-related trainings (for each setting).	40 ASP 5 Mano a Mano 45 total	2 HEALS staff attended 20 trainings	In process	40 ASP 5 Mano a Mano 45 total
	Percentage of staff who attended direct service-related trainings based on total number of staff (for each setting).	80% (40/50)ASP 25% (5/20)Mano a Mano	Direct Care trainings: 50% HEALS staff Self-Care trainings: 100% HEALS staff	In process	80% (40/50)ASP 25% (5/20)Mano a Mano
<p>Provide direct services to 95% of victims requesting services in each setting.</p> <p>List types of services.</p> <p>For DV or HT victims it is based on their individual service plan (what they want and need) may include: 24-hour Crisis Hotline and Emergency Response Services and Outreach, Workforce development/ employment assistance, Emergency shelter Economic assistance, Legal Advocacy Services, Counseling, support groups, case management, & life skills training Education related supports, Housing advocacy, Economic</p>	Projected total number of victims served (for each type of service).	100	109	Exceeded	100
	Number of victims who requested direct services (for each type of service).	70 with ASP and Mano a Mano services plus 30 who self disclosed at school or were referred by the partnership	109	Exceeded	100
	Number of victims who received direct services (for each type of service).	95	Children's services: 21 Housing: 48 Immigration: 5 Legal: 14	In process	95
	Percentage of victims who received direct services based on total number of victims who requested services (for each type of service).	95	Children's services: 100% Immigration: 38% Housing: 55% Legal: 16% Other : 65%	In process	95

assistance, Counseling, support groups, case management, life skills training, Children's services, Health Care, Immigration advocacy					
Provide adequate supervision that contributes to creating a supportive work environment for project staff.	Number of project staff who need supervision (for each type of project staff).	5	2 We have hired all staff requiring supervision at this time	Achieved	5
List type of supervision (e.g., individual, group) and frequency (sessions per month) for each type of project staff <i>Individual weekly and project staff meeting weekly</i>	Type of supervision conducted (for each type of project staff).	Per Clinical Supervision of Mental Health Personnel Policy	Per Clinical Supervision of Mental Health Personnel Policy	Achieved	Per Clinical Supervision of Mental Health Personnel Policy
	Number of supervision sessions conducted with project staff members per month (type of project staff).	8	14	Exceeded	8
Establish manageable caseload of (see # below by role) for each type of project staff. List type of project staff. (caseloads are in parentheses) <ul style="list-style-type: none"> • <i>Case Manager</i> (100 with Safe Youth and Project Coordinator support) • <i>Therapists</i> (50 each) • <i>Psychiatrist</i> (30) • <i>Immigration DOJ Accredited Representative</i> 	Number of relevant project staff with # caseloads.	7	<ul style="list-style-type: none"> • Safe Youth: Street Intervention: 20 Therapist: 65 Bilingual Therapist: 36 Case Manager: 7 HEALS: 2 therapists/counselors actively providing services. Therapist I: 47 active and recurrent individual clients 29 clients divided into 3 groups. HEALS Director/Therapist II: 	Exceeded	7

(70) • <i>Immigration Legal Assistant (70)</i>			20 active and recurrent individual clients. Immigration DOJ Accredited Representative : 15 active cases.		
	Percentage of relevant project staff with # caseloads based on total number of relevant project staff.	100	Safe Youth: 100% HEALS Therapist I: 100% HEALS Therapist II: 30% DOJ: 21%	In process	100
Provide training and education to project staff related to creating a healthy work environment (e.g., stress, vicarious trauma). List types of training. See direct service training category above. Is the same.	Number of staff (for each type of training).	50 ASP 20 Mano a Mano	2 staff participating in 6 and provide 3 trainings	In process	50 ASP 20 Mano a Mano
	Number and types of training provided (for each type of training).	-	Self-Care: 5 (participated) DV Education: 3 (provided)	Achieved	Self-Care: 5 (participated) DV Education: 3 (provided)
	Number of staff who attended training (for each type of training).	40 ASP 5 Mano a Mano	Self-care: 2 staff	In process	40 ASP 5 Mano a Mano
	Percentage of staff who attended training based on total number of staff (for each type of training).	80% (40/50) ASP 25% (5/20) Mano a Mano	2% (2/50) ASP 0% Mano a Mano	In process	80% (40/50) ASP 25% (5/20) Mano a Mano

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include #1 Public Awareness; #2 Fundamental Needs; #3 Core Services, #4 More Advocates, More Places; #6 Multiple Victimization; #7 Multi-disciplinary Responses; #8 Trauma-informed and focused Services; #11 Evidence-informed practices; and #12 Facilitating Program Evaluation.

Program Funding Detail

This designation would support 12 months of funding, representing months 10 through 21 of 36 months of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

It is too early to evaluate the grantee's performance due to the shortened first grant period and the COVID pandemic.

Budget Detail

	Total
Personnel Total FTE: 6 – Includes Program Coordinator, Case Manager, 3 Therapists, 3 Counselors, and administrative support	\$387,102
Fringe: 22.57%	\$87,356
Equipment	\$0
Supplies: 3 laptops for new staff, office furniture & phones, program brochures, and supplies for educational presentations to clients	\$11,024
Travel: Cross-site visits and local travel	\$4,580
Contractual: Includes subawards for 10 community partner organizations, Mano a Mano, and psychiatry services provider,	\$292,753
Indirect / Other Costs: 10% de minimis	\$50,519
Totals Federal / State and Match:	\$833,334

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Illinois Helping Everyone Access Linked Systems - County of Macon DBA Child 1st Center

Program Agency DUNS: 078459896

Funding Source: FFY18 Victims of Crime Act: \$194,973; Match: \$48,743

Agency Budget: \$69,618,392

Request Type: Notice of Funding Opportunity: #1564-1132

Program Description

In late 2017, ICJIA was awarded a U.S. Office of Victims of Crime grant to implement the Illinois Helping Everyone Access Linked Systems (Illinois HEALS) initiative, a six-year project that seeks to improve the identification, connection, and service engagement of those impacted by violence. Informed by a 15-month planning process, the Illinois HEALS Action Plan encourages cross-system collaboration to strengthen community capacity for recognizing when victimization has occurred and connecting and engaging young victims and families in needed services. In 2019, ICJIA released a notice of funding opportunity to select community based programs in which the grantee engages other entities to recognize, connect and engage child victims of violence and their families in trauma-informed, culturally relevant responses and services. The seven funded programs, which represent the diversity of the state, proposed projects that involve multiple systems working collaboratively to address the needs of child and youth victims in their communities. Some of the systems and services involved include home visiting programs, public schools, child welfare agencies, public health departments, mental health providers, youth serving organizations, law enforcement agencies, and grassroots groups. The projects were executed in February-March 2020 and, like community-focused efforts nationwide, are responding to the challenges of the COVID-19 pandemic by adapting service delivery to support the families of child and youth victims

Program Activities

Macon County HEALS services include therapy for child and youth victims and uses a coalition model to improve community awareness about victimization and resources for children, youth, and families. Law enforcement will be trained to better recognize child and youth victims and to connect them with the Macon County HEALS project for services and support that include active case management. The project coordinator has been hired, other staff hires are in process, and a site location has been rented and furnished. The Macon County HEALS project is located in the new Community Care Campus which houses Baby TALK early childhood education program, a substance abuse treatment program, Crossing Healthcare, Northeast Community Fund and food pantry, and Decatur-Macon County Opportunities Corporation. The goal is to provide access to services when it is convenient for families in a location that is easily accessible. The program staff will be available for drop-in case management services and evening flexibility also will be offered.

Goals

GOAL: Develop cross-system partnerships that meet the needs of individuals, families, and communities by convening local providers and developing policies and practices that further the work. At minimum, the project partners must demonstrate an ongoing collaborative relationship that supports the effective provision of services to the community.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months-Projected	1st 9 Months – Actual (Quarters 1 & 2))	1st 9 Months - Objective met?	Next 12 Months – Projected
Members of cross-system partnerships will regularly convene and attend 1# of meetings per month.	Number of meetings per time.	9	1	No	12
	Total number of members attending each meeting.	9	2	No	9
	Percentage of members attending each meeting based on total number of members.	45	20	No	50%
	Number of members from each partner agency who attended each meeting.	9	2	No	9
	Percentage of members from each partner agency who attended each meeting based on total number of members from each agency.	45%	20%	No	45%
Develop and adopt protocols that guide the structure and governance of cross-system partnership.	Number of protocols developed.	3	0	No	3
	Number of protocols approved: list agencies that developed and approved protocols	3	0	No	3

GOAL: Strengthen the abilities of systems and communities to recognize child and youth victims by fostering community awareness and appropriate screening practices.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Provide trainings on appropriate screening practices to each relevant setting in which victims are encountered. List trainings: <i>November 2020, February 2021, April 2021</i>	Number and types of relevant settings that received training.	3	0	No	3
	Number of trainings provided (for each setting)	3	0	No	3
	Number of attendees at each training (for each setting)	20	0	No	20
Coordinate community awareness events and activities to increase understanding of topics related to violence and victimization.	Number of community awareness events.				4
	Number of attendees at each training.				25
Develop and adopt 3# setting-specific protocols for responding to screening practices. List protocols: <i>Initial response time frame</i> <i>Developing of goals with clients</i> <i>Case review time line and procedures</i>	Number of setting-specific protocols.	3	0	No	3
Provide trainings about the response protocol to 50% of staff in each	Number of trainings provided.	3	0	No	3
	Number of staff (in each setting).				12
	Number of trainings provided (in each setting).				1

relevant setting.	Number of staff trained about the protocol (for each setting).				6
	Percentage of staff trained about the protocol based on total number of staff (in each setting).	50%	0	No	50%

GOAL: Connect young victims and their families to appropriate resources and services and collaborate cross-systems through a multidisciplinary team (MDT) or similar framework that supports care coordination and facilitates effective referral processes.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Develop 2# protocols that guide information sharing practices.	Number of protocols developed.	2	0	No	2
Provide trainings on protocols related to information sharing practices to 75% of staff.	Number of trainings provided.				3
	Number of staff (for each setting).				12
	Number of trainings provided (for each setting).				1
	Number of staff trained about the protocols related to information sharing practices (for each setting).				9
	Percentage of staff trained about protocols related to information sharing practices based on total number of staff (for each setting).				50%
	Number of victims who needed referrals (for each setting).				606
	Number of victims referred to direct services (for each				61

Provide referrals to 10% of victims in each setting.	setting).				
	Percentage of victims referred to direct services based on total number of victims who needed referrals (for each setting).				10%
	Number of follow-ups made as a result of referral (for each setting).				61
	Percentage of follow-ups made as a result of referral based on total number of referrals (for each setting).				10%

GOAL: Promote practices that engage young persons who have experienced victimization and their family members in an array of services that are culturally specific and humble, accessible, and relevant by developing the professional workforce and enhancing service capacity and quality.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Provide direct service-related trainings to 100% of staff. List types of training. <i>Trauma Informed Care</i> <i>Victim Advocacy</i> <i>Mandated Reporting</i>	Number of staff (for each setting).				3
	Number and types of training provided (for each setting).				3
	Number of staff who direct service-related trainings (for each setting).				3
	Percentage of staff who attended direct service-related trainings based on total number of staff (for each setting).				100%
Provide direct services to 100% of victims	Projected total number of victims served (for each type				50

requesting services in each setting.	of service).				
List types of services. <i>Service planning</i> <i>Advocacy</i> <i>Referral/Linkage</i> <i>Case Management</i>	Number of victims who requested direct services (for each type of service).				35
	Number of victims who received direct services (for each type of service).				35
	Percentage of victims who received direct services based on total number of victims who requested services (for each type of service).				100
Provide adequate supervision that contributes to creating a supportive work environment for project staff. List type of supervision (e.g., individual, group) and frequency (sessions per month) for each type of project staff <i>Individual supervision once a week</i> <i>Group staff supervision once every 2 weeks</i>	Number of project staff who need supervision (for each type of project staff).				3
	Type of supervision conducted (for each type of project staff).				Individual and Group
	Number of supervision sessions conducted with project staff members per month (type of project staff).				30
Establish manageable caseload of # for each type of project staff. <i>Each of the 2 case managers will have a caseload of no more than 12 families and the Project Coordinator may have a case load of no more</i>	Number of relevant project staff with # caseloads.				3
	Percentage of relevant project staff with # caseloads based on total number of relevant project staff.				100%

than 3 families. List type of project staff. <i>Project Coordinator</i> <i>2 case managers</i>					
Provide training and education to project staff related to creating a healthy work environment (e.g., stress, vicarious trauma). List types of training. <i>Trauma Stewardship</i> <i>MDT Resiliency</i> <i>Training through Children's Advocacy Centers of Illinois</i>	Number of staff (for each type of training).				3
	Number and types of training provided (for each type of training).				2
	Number of staff who attended training (for each type of training).				3
	Percentage of staff who attended training based on total number of staff (for each type of training).				100%

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include #1 Public Awareness; #2 Fundamental Needs; #3 Core Services, #4 More Advocates, More Places; #6 Multiple Victimization; #7 Multi-disciplinary Responses; #8 Trauma-informed and focused Services; #11 Evidence-informed practices; and #12 Facilitating Program Evaluation.

Program Funding Detail

This designation would support 12 months of funding, representing months 10 through 21 of 36 months of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

It is too early to evaluate the grantee's performance due to the shortened first grant period and the COVID pandemic.

Budget Detail

	Total
Personnel Total FTE: 3.18 – HEALS Project Coordinator, MDT Coordinator, 2 Case Managers, Crisis Interventionist, Director	\$150,178
Fringe: 18.08% plus health insurance	\$57,250
Equipment:	\$0
Supplies: Office supplies, therapeutic materials, and training materials	\$4,133
Travel: Cross site visits and local travel	\$2,162
Contractual: Subcontract with Decatur Psychological Associates, staff training, promotional materials, cell and office phone service, and website development/maintenance	\$30,901
Indirect / Other Costs:	\$0
Totals Federal / State and Match:	\$244,624

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: University of Illinois at Chicago

Program Agency DUNS: 098987217

Funding Source: FFY18 Victims of Crime Act: \$378,933; Match \$94,733

Agency Budget: \$2,351,446,000

Request Type: NOFO #1564-1132

Program Description

In late 2017, ICJIA was awarded a U.S. Office of Victims of Crime grant to implement the Illinois Helping Everyone Access Linked Systems (Illinois HEALS) initiative, a six-year project that seeks to improve the identification, connection, and service engagement of those impacted by violence. Informed by a 15-month planning process, the Illinois HEALS Action Plan encourages cross-system collaboration to strengthen community capacity for recognizing when victimization has occurred and connecting and engaging young victims and families in needed services. In 2019, ICJIA released a Notice of Funding Opportunity to select community based programs in which the grantee engages other entities to recognize, connect and engage child victims of violence and their families in trauma-informed, culturally relevant responses and services. The seven funded programs, which represent the diversity of the state, proposed projects that involve multiple systems working collaboratively to address the needs of child and youth victims in their communities. Some of the systems and services involved include home visiting programs, public schools, child welfare agencies, public health departments, mental health providers, youth serving organizations, law enforcement agencies and grassroots groups. Most of the contracts were executed in February or March 2020 and, like community-focused efforts nationwide, are responding to the challenges of the COVID-19 pandemic by adapting service delivery to support the families of child and youth victims.

Program Activities

The Total Access Collaborative for Trauma Informed Care (TACTIC) is a collaboration between the Urban Youth Trauma Project, Park Forest Police Department, Aunt Martha's Youth Services and other community partners. Task force meetings have developed trust and positive relationships among partners so that the project can successfully recognize, connect and engage youth impacted by trauma and violence. Staff have met regularly to develop communication channels and referral pathways and conducted trainings for partner agency staff.

Goals

GOAL: Develop cross-system partnerships that meet the needs of individuals, families, and communities by convening local providers and developing policies and practices that further the work. At minimum, the project partners must demonstrate an ongoing collaborative relationship that supports the effective provision of services to the community.

<u>Process Objectives/ Standards</u>	<u>Process Performance Measures</u>	1 st 9 Months- Projected	1 st 9 Months – Actual (Quarters 1 & 2))	1 st 9 Months -Objective met?	Next 12 Months – Projected
<p>Members of cross-system partnerships will regularly convene and attend 4 quarterly task force meetings and 12 service coordination meetings per month with UIC and community coordinator.</p>	<p>Number of meetings per time.</p>	<p><i>-Task force:</i> 1 per quarter <i>-Service coordinatio</i> <i>n:</i> 1 per month for each of the 5 partners</p>	<p><i>-Task Force:</i> 0 <i>-Service coordination meetings:</i></p> <ul style="list-style-type: none"> • Rachel Wax: weekly (4 weeks x 3 months = 12) • PFPD: Monthly (3 months x 1 meeting=3) • AMHW: Monthly (3 months x 1 meeting=3) • D163: Monthly (3 months x 1 meeting=3) • D227: Monthly (3 months x 1 meeting=3) 	<p><i>-Task Force:</i> Objective not met. First meeting will take place quarter 3 <i>-Service Coordination</i> goals met for # meetings</p>	<p>4</p>
	<p>Total number of members attending each meeting.</p>	<p><i>-Task Force:</i> 18 <i>-Service Coordination:</i> <i>n:</i> 12</p>	<p><i>-Task Force:</i> N/A <i>-Service Coordination:</i> 8</p>	<p><i>-Task Force:</i> Objective not met <i>-Service Coordination</i> : Partial</p>	<p><i>-Task Force:</i> 18 <i>-Service Coordination:</i> 12</p>

	Percentage of members attending each meeting based on total number of members.	<u>-Task Force</u> : 75% <u>-Service coordination</u> : 75%	<u>-Task Force</u> : N/A <u>-Service Coordination</u> : 67%	<u>-Task Force</u> : Objective not met <u>-Service Coordination</u> : Partial	<u>-Task Force</u> : 75% <u>-Service coordination</u> : 75%
	Number of members from each partner agency who attended each meeting.	<u>Rachel Wax</u> : 1 <u>AMHW</u> : 2 <u>PFPD</u> : 2 <u>District 163</u> : 12 <u>District 227</u> : 2	<u>Rachel Wax</u> : 1 <u>AMHW</u> : 3 <u>PFPD</u> : 2 <u>District 163</u> : 1 <u>District 227</u> : 1	<u>Rachel Wax</u> : Yes <u>AMHW</u> : Yes <u>PFPD</u> : Yes <u>District 163</u> : partial <u>District 227</u> : Partial	<u>Rachel Wax</u> : 1 <u>AMHW</u> : 2 <u>PFPD</u> : 2 <u>District 163</u> : 12 <u>District 227</u> : 1
	Percentage of members from each partner agency who attended each meeting based on total number of members from each agency.	<u>Rachel Wax</u> : 100% <u>AMHW</u> : 75% <u>PFPD</u> : 75% <u>District 163</u> : 75% <u>District 227</u> : 75%	<u>Rachel Wax</u> : 100% <u>AMHW</u> : 150% <u>PFPD</u> : 100% <u>District 163</u> : 10% <u>District 227</u> : 50%	<u>Rachel Wax</u> : Yes <u>AMHW</u> : Yes <u>PFPD</u> : Yes <u>District 163</u> : partial <u>District 227</u> : Partial	<u>Rachel Wax</u> : 100% <u>AMHW</u> : 75% <u>PFPD</u> : 75% <u>District 163</u> : 75% <u>District 227</u> : 75%
Develop and adopt protocols that guide the structure and governance of cross-system partnership.	Number of protocols developed.	4 protocols: -TACTIC task force Goals Tracking -ACCESS/-AMWH referrals -Handle with Care -YVPE / Caregiver groups	4 protocols: -TACTIC task force Goals Tracking -ACCESS/-AMWH referrals -Handle with Care -YVPE / Caregiver groups	Yes	4 protocols: -TACTIC task force Goals Tracking -ACCESS/-AMWH referrals -Handle with Care -YVPE / Caregiver groups
	Number of protocols approved: list agencies that developed and approved protocols	<u>UIC & Rachel Wax</u> : 4 (all) <u>PFPD</u> : 2 -Handle with Care -ACCESS / referrals to Aunt	<u>UIC & Rachel Wax</u> : 4 (all) <u>PFPD</u> : 2 -Handle with Care -ACCESS / referrals to Aunt Martha's	UIC & Rachel Wax: Yes PFPD: Yes AMHW: Yes District 163: Yes District 227: No	<u>UIC & Rachel Wax</u> : 4 (all) <u>PFPD</u> : 2 -Handle with Care -ACCESS / referrals to Aunt Martha's

		<p>Martha's</p> <p><u>AMHW</u>: 2 -ACCESS / Referral tracking -YVPE / Caregiver groups</p> <p><u>District 163</u>: 2 -Handle with Care, ACCESS / Referrals to Aunt Martha's</p> <p><u>District 227</u>: 2 -Handle with Care, ACCESS / Referrals to Aunt Martha's</p>	<p><u>AMHW</u>: 2 -ACCESS / Referral tracking -YVPE / Caregiver groups</p> <p><u>District 163</u>: 2 -Handle with Care, ACCESS / Referrals to Aunt Martha's</p> <p><u>District 227</u>: 0 -Handle with Care, ACCESS / Referrals to Aunt Martha's</p>		<p><u>AMHW</u>: 2 -ACCESS / Referral tracking -YVPE / Caregiver groups</p> <p><u>District 163</u>: 2 -Handle with Care, ACCESS / Referrals to Aunt Martha's</p> <p><u>District 227</u>: 2 -Handle with Care, ACCESS / Referrals to Aunt Martha's</p>
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GOAL: Strengthen the abilities of systems and communities to recognize child and youth victims by fostering community awareness and appropriate screening practices.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1 st 9 Months - Projected	1 st 9 Months - Actual	1 st 9 Months - Objective met?	Next 12 Months - Projected
<p>Provide trainings on appropriate screening practices to each relevant setting in which victims are encountered. List trainings: -YOUTH-CAN (Trauma awareness and prevention strategies) -Handle with Care ACCESS / Referral YVPE / Caregiver groups TST-SA</p>	<p>Number and types of relevant settings that received training.</p>	<p>AMWH: -YOUTH-CAN -YVPE Caregiver groups -TST-SA</p> <p>PFPD -Handle with Care -ACCESS -YOUTH-CAN</p> <p>District 163 & 227: -YOUTH-CAN -ACCESS / Referral -Handle with Care</p>	<p>AMWH: -YOUTH-CAN -YVPE Caregiver groups</p> <p>PFPD -Handle with Care -YOUTH-CAN -ACCESS</p> <p>District 163: -YOUTH-CAN -ACCESS / Referral -Handle with Care</p>	<p>Partially met</p>	<p>AMWH: -YOUTH-CAN follow up -YVPE Caregiver groups follow up -TST-SA</p> <p>PFPD -Handle with Care follow up -ACCESS follow up</p> <p>-YOUTH-CAN follow up</p> <p>District 163: for remaining staff -YOUTH-CAN -ACCESS / Referral -Handle with Care</p> <p>District 227: -YOUTH-CAN -ACCESS /</p>

					Referral -Handle with Care
	Number of trainings provided (for each setting)	AMWH: 3 PFPD: 3 District 163 & 227: 3 -	AMWH: 3 PFPD: 2 District 163: 2 District 227: 0	AMWH: yes PFPD: partial District 163: partial District 227: no	AMWH: -3 AMWH: yes PFPD: 2 District 163: 3 District 227: 3
	Number of attendees at each training (for each setting)	AMWH: 15 PFPD: 40 District 163: 150 District 227: 25	AMWH: 25 (23 YOUTH-CAN) + 2 YVPE) PFPD: 13 (HWC & ACCESS) District 163: 35 (28 HWC / ACCESS) +7 (YOUTH-CAN) District 227: 0	AMWH: Yes PFPD: Partial District 163: Partial District 227: No	AMWH: 15 PFPD: 40 District 163: 150 District 227: 25
Coordinate community awareness events and activities to increase understanding of topics related to violence and victimization.	Number of community awareness events.	1 event projected	Awareness campaign was held entirely via social media due to quarantine, lasting 25 days (5	Partial. In person event was not possible due to quarantine, but social media campaign was successful	Social media campaign is projected, with partner involvement

			weeks)		
	Number of attendees at each training.	50 projected	N/A	N/A	N/A
Develop and adopt <u>2</u> # setting-specific protocols for responding to screening practices. List protocols: -ACCESS Screening and referral protocol in PFPD and school settings with coordinated AMHW response -Handle with Care initiative in PFPD and school settings with coordinated AMHW response	Number of setting-specific protocols.	2	2	Yes	2
Provide trainings about the response protocol to ___% of staff in each relevant setting.	Number of trainings provided.	2	2	Yes	2
	Number of staff (in each setting).	PFPD: 40 District 163: 30 District 227: 2	PFPD: 13 District 163: 28 District 227: 0	Partial	PFPD: 40 District 163: 30 District 227: 2
	Number of trainings provided (in each setting).	PFPD: 1 District 163: 1 District 227: 1	PFPD: 1 District 163: 1 District 227: 0	Partial	PFPD: 1 District 163: 1 District 227: 1
	Number of staff trained about the protocol (for each setting).	PFPD: 40 District 163: 30 District 227: 2	PFPD: 13 District 163: 28 District 227: 0	Partial	PFPD: 40 District 163: 30 District 227: 2

	Percentage of staff trained about the protocol based on total number of staff (in each setting).	PFPD: 75% District 163: 75% District 227: 75%	PFPD: 32.5% District 163: 93.3% District 227: 0%	Partial	PFPD: 75% District 163: 75% District 227: 75%
GOAL: Connect young victims and their families to appropriate resources and services and collaborate cross-systems through a multidisciplinary team (MDT) or similar framework that supports care coordination and facilitates effective referral processes.					
<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Develop <u>2</u> # protocols that guide information sharing practices.	Number of protocols developed.	2 (Handle with Care & ACCESS)	2	Yes	2
Provide trainings on protocols related to information sharing practices to ___% of staff.	Number of trainings provided.	2	2	Yes	2
	Number of staff (for each setting).	PFPD: 40 District 163: 30 District 227: 2	PFPD: 13 District 163: 28 District 227: 0	Partial	PFPD: 40 District 163: 30 District 227: 2
	Number of trainings provided (for each setting).	PFPD: 1 District 163: 1 District 227: 1	PFPD: 1 District 163: 1 District 227: 0	Partial	PFPD: 1 District 163: 1 District 227: 1
	Number of staff trained about the protocols related to information sharing practices (for each setting).	PFPD: 40 District 163: 30 District 227: 2	PFPD: 13 District 163: 28 District 227: 0	Partial	PFPD: 40 District 163: 30 District 227: 2
	Percentage of staff trained about protocols related to information sharing practices based on total number of staff (for each setting).	PFPD: 75% District 163: 75% District 227: 75%	PFPD: 32.5% District 163: 93.3% District 227: 0%	Partial	PFPD: 75% District 163: 75% District 227: 75%

Provide referrals to _100_% of victims in each setting.	Number of victims who needed referrals (for each setting).		PFPD: 25	- PFPD: Yes -Other partners: Will begin tracking next quarter	
	Number of victims referred to direct services (for each setting).		PFPD: 25	- PFPD: Yes -Other partners: Will begin tracking next quarter	
	Percentage of victims referred to direct services based on total number of victims who needed referrals (for each setting).	100%	PFPD: 100%	- PFPD: Yes -Other partners: Will begin tracking next quarter	100%
	Number of follow- ups made as a result of referral (for each setting).		PFPD: 21	- PFPD: Yes -Other partners: Will begin tracking next quarter	
	Percentage of follow- ups made as a result of referral based on total number of referrals (for each setting).	100%	PFPD 84%	- PFPD: Partial -Other partners: Will begin tracking next quarter	100%

GOAL: Promote practices that engage young persons who have experienced victimization and their family members in an array of services that are culturally specific and humble, accessible, and relevant by developing the professional workforce and enhancing service capacity and quality.

<u>Process Objectives/Standards</u>	<u>Process Performance Measures</u>	1st 9 Months - Projected	1st 9 Months - Actual	1st 9 Months - Objective met?	Next 12 Months - Projected
Provide direct service- related trainings to _75_% of staff. List types of training. ● Youth Violence Prevention Engagement	Number of staff (for each setting).	AMHW -YOUTH- CAN:15 -YVPE Caregiver: 2 -TST-SA: 15	AMHW: YOUTH- CAN: 23 YVPE Caregiver: 2 TST-SA: N/A (not offered)	Partial	AMHW -YOUTH- CAN follow up:15 -YVPE Caregiver advanced: 2 -TST-SA: 15

<p>Curriculum youth and caregiver curriculum</p> <ul style="list-style-type: none"> TST-SA: Integrated treatment training for youth serving clinicians and counselors 	<p>Number and types of training provided (for each setting).</p>	<p>3 trainings projected: -YOUTH-CAN -YVPE Caregiver -TST-SA</p>	<p>2 trainings provided: -YOUTH-CAN -YVPE Caregiver</p>	<p>Partial</p>	
	<p>Number of staff who direct service-related trainings (for each setting).</p>	<p>AMHW -YOUTH-CAN:15 -YVPE Caregiver: 2 -TST-SA: 15</p>	<p>AMHW: -YOUTH-CAN: 23 -YVPE Caregiver: 2 -TST-SA: N/A</p>	<p>Partial</p>	<p>AMHW -YOUTH-CAN:15 -YVPE Caregiver: 2 -TST-SA: 15</p>
	<p>Percentage of staff who attended direct service-related trainings based on total number of staff (for each setting).</p>	<p>AMHW -YOUTH-CAN:75% -YVPE Caregiver: 75% -TST-SA: 75%</p>	<p>AMHW -YOUTH-CAN:96% -YVPE Caregiver: 100% of staff to implement curriculum -TST-SA: N/A</p>	<p>Partial</p>	<p>AMHW -YOUTH-CAN follow up:75% -YVPE Caregiver follow up: 75% -TST-SA: 75%</p>
<p>Provide direct services to <u>75</u>% of victims requesting services in each setting.</p> <p>List types of services.</p> <ul style="list-style-type: none"> Case management (support connecting to needed services such as shelter, healthcare, legal assistance, application for crime victim compensation funds) Integrated, trauma informed treatment at school and 	<p>Projected total number of victims served (for each type of service).</p>		<p>-Case management: 25 -Therapy / Crisis intervention : 11</p>	<p>Case management: yes YVPE caregiver groups: Not started</p>	
	<p>Number of victims who requested direct services (for each type of service).</p>		<p>-Case management: 16 -Therapy / Crisis intervention : 10</p>	<p>-Case management: yes -YVPE caregiver groups: Not started</p>	
	<p>Number of victims who received direct services (for each type of service).</p>		<p>-Case management: 14 -Therapy / Crisis</p>	<p>-Case management: yes -YVPE caregiver</p>	

<p>mental health settings</p> <ul style="list-style-type: none"> • YVPE Caregiver groups 	<p>Percentage of victims who received direct services based on total number of victims who requested services (for each type of service).</p>		<p>intervention : 10</p>	<p>groups: Not started</p>	
<p>Provide adequate supervision that contributes to creating a supportive work environment for project staff.</p> <p>List type of supervision (e.g., individual, group) and frequency (sessions per month) for each type of project staff</p>	<p>Number of project staff who need supervision (for each type of project staff).</p>	<p>-UIC: 2 staff and 5 volunteers - Community Coordinator : Rachel Wax (1) -PFPD: 2 -AMHW: 2 -District 163: 6 -District 227: 2</p>	<p>-UIC: 3 staff and 4 volunteers - Community Coordinator : Rachel Wax (1) -PFPD: 2 -AMHW: 3 -District 163:1 -District 227: 1</p>	<p>Partial</p>	
	<p>Type of supervision conducted (for each type of project staff).</p>	<p>UIC: Weekly individual and group supervision provided by project director, Liza Suarez</p> <p>Community Coordinator: Weekly individual supervision with Rachel Wax provided by Liza Suarez</p>	<p>UIC: Weekly individual and group supervision provided by project director, Liza Suarez</p> <p>Community Coordinator: Weekly individual supervision with Rachel Wax provided by Liza Suarez</p>	<p>Yes</p>	<p>UIC: Weekly individual and group supervision provided by project director, Liza Suarez</p> <p>Community Coordinator: Weekly individual supervision with Rachel Wax provided</p>

		<p>PFPD: Monthly phone / web meetings with Rachel Wax & Liza Suarez</p> <p>AMHW: Monthly phone/web meetings with Rachel Wax & Liza Suarez</p> <p>District 163: Monthly /web meetings with Rachel Wax & Liza Suarez</p> <p>District 227: Monthly phone meetings with Rachel Wax</p>	<p>PFPD: Monthly phone / web meetings with Rachel Wax & Liza Suarez</p> <p>AMHW: Monthly phone/web meetings with Rachel Wax & Liza Suarez</p> <p>District 163: Monthly /web meetings with Rachel Wax & Liza Suarez</p> <p>District 227: Monthly phone meetings with Rachel Wax</p>		<p>by Liza Suarez</p> <p>PFPD: Monthly phone / web meetings with Rachel Wax & Liza Suarez</p> <p>AMHW: Monthly phone/web meetings with Rachel Wax & Liza Suarez</p> <p>District 163: Monthly /web meetings with Rachel Wax & Liza Suarez</p> <p>District 227: Monthly phone meetings with Rachel Wax</p>
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	Number of supervision sessions conducted with project staff members per month (type of project staff).	- UIC : 20 weekly / individual meetings per month - Community Coordinator : 8 meetings per month with Dr. Suarez and UYTC team, 1 meeting per month with each partner (8 additional meetings) - PFPD : one per month - District 163 : one per month - District 227 : one per month	- UIC : 20 weekly / individual meetings per month - Community Coordinator : 8 meetings per month with Dr. Suarez and UYTC team, 1 meeting per month with each partner (8 additional meetings) - PFPD : one per month - District 163 : one per month - District 227 : one per month	Yes	- UIC : 20 weekly / individual meetings per month - Community Coordinator : 8 meetings per month with Dr. Suarez and UYTC team, 1 meeting per month with each partner (8 additional meetings) - PFPD : one per month - District 163 : one per month - District 227 : one per month
Establish manageable caseload of # for each type of project staff. List type of project staff.	Number of relevant project staff with # caseloads.	AMHW : 2 District 163 : 6 District 227 : 2	AMHW : Not started District 163 : Not started District 227 : Not started	In progress	AMHW : 2 District 163 : 6 District 227 : 2
	Percentage of relevant project staff with # caseloads based on total number of relevant	AMHW : 75% District 163 : 75% District	Not started	Not started	

	project staff.	227: 75%			
<p>Provide training and education to project staff related to creating a healthy work environment (e.g., stress, vicarious trauma).</p> <p>List types of training. -Self-care and vicarious trauma topic during all TACTIC project training and consultation activities -Sharing resources through monthly project newsletter on managing vicarious trauma, stress, burnout, and self-care. -Modeling self-care strategies as part of the standard agenda during quarterly TACTIC Task Force meetings.</p>	Number of staff (for each type of training).		- YOUTH-CAN and YVPE Caregiver trainings covered self care and discussed with 27 partner staff		
	Number and types of training provided (for each type of training).	-Self care topic in YOUTH-CAN training -Sharing self care resources electronically -Self care modeling at TACTIC task force meetings	2 trainings covered self-care -68 Self-Care resources shared with partners electronically	AMHW objective met, Others pending	
	Number of staff who attended training (for each type of training).	AMHW: 75 District 163: 150 District 227: 25	27 staff viewed YOUTH-CAN training video: -20 from AMHW - 7 from District 163 18 participants from AMHW attended YOUTH-	AMHW: 75 District 163: 150 District 227: 25	

			CAN live discussion training.		
			2 AMHW clinicians attended Caregiver groups training.		
	Percentage of staff who attended training based on total number of staff (for each type of training).	75% projected	AMHW: 100% of staff who will participate directly in providing caregiver groups and be part of the TACTIC Task Force partnership attended the training (5) -96 % of total clinical staff attended the YOUTH-CAN training -For other partners, direct training will take place next quarter.	75%	

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include #1 Public Awareness; #2 Fundamental Needs; #3 Core Services, #4 More Advocates, More Places; #6 Multiple Victimizations; #7 Multi-disciplinary Responses; #8 Trauma-informed and focused Services; #11 Evidence-informed practices; and #12 Facilitating Program Evaluation.

Program Funding Detail

This designation would support 12 months of funding, representing months 10 through 21 of 36 months of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

It is too early to evaluate the grantee's performance due to the shortened first grant period and the COVID pandemic.

Budget Detail

	Total
Personnel Total FTE: 2.4 – Includes Project Director, Program Coordinator, Program Evaluator, and 5 student volunteers	\$123,226
Fringe: 35.25%	\$43,440
Equipment	\$0
Supplies: Office supplies and public awareness materials	\$18,000
Travel: Cross site meetings	\$2,968
Contractual: Subcontract with Rachel Wax as Community Engagement Coordinator, subawards to Park Forest Chicago Heights School District, Rich Township High School, Park Forest Police Department, and Aunt Martha's Health & Wellness to provide law enforcement officer overtime, school staff overtime, social service agency staff time to attend referral and service coordination meetings and trainings	\$225,200
Indirect / Other Costs: 36%	\$69,830
Totals Federal / State and Match:	\$482,664

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Advocate Trauma Recovery Center at Advocate Christ Medical Center

Program Agency DUNS: 003222804

Funding Source: FFY18 Victims of Crime Act: \$1,200,000; Match Amount: \$240,011

Agency Budget: \$1,115,050,209

Request Type: Notice of Funding Opportunity #2232-2388

Program Description

The Advocate Trauma Recovery Center (TRC) is an innovative program that addresses the needs of adult and child trauma survivors in a unique way by providing a comprehensive, specialized, and holistic treatment not often available through traditional mental health services. Advocate TRC focuses on the comprehensive treatment of trauma survivors by providing multiple social service needs (e.g., housing, food, medical insurance, education, jobs, and clothing), individual, group, and family therapeutic services, and medication management for adults and children. Often, patients present with emergent needs that require immediate attention and linkage to extensive social and behavioral health services to reduce further destabilization following traumatic injury.

Program Activities

Funding will primarily provide support for staff salaries. The team will provide individual and group therapy, extensive social services, and psychiatric services. Funding also will cover training for the team members to ensure they are providing evidence-based and trauma-informed care. Services will be provided in both outpatient and hospital settings to maximize the number of survivors that are able to receive services.

Goals

Goal: To provide comprehensive advocacy and mental health services to victims of violent crime.	
Projections for Period of Performance: August 2020 – August 2021 ¹	
Objective	Performance Measure
<i>OUTREACH ACTIVITIES</i>	

¹Projected Metrics calculated using ARIMA and Polynomial Regression Projections when historical data provided sample sizes sufficient for statistical projections

<p># <u>59</u> outreach meetings held with community organizations to provide information about TRC program and services.</p>	<p># of meetings held with community organizations to provide information about TRC program and services.</p> <p># of community organizations provided with information about TRC program and services.</p>
<p># <u>22</u> public awareness events to provide information about TRC program and services to the community.</p>	<p># public awareness events to provide information about TRC program and services to the community.</p> <p># of community residents provided with information about TRC program and services.</p>
<p># <u>848</u> clients that will be contacted through individual outreach and informed about TRC program and services.</p>	<p># of clients provided information about the TRC program and services.</p> <p># of times staff provided information about the TRC programs and services.</p>
INFORMATION & REFERRAL	
<p># <u>72</u> clients will receive information about the criminal justice process.</p> <p><i>#163 times staff will provide information about the criminal justice process</i></p>	<p># of clients provided information about the criminal justice process.</p> <p># of times staff provided information about the criminal justice process.</p>
<p># <u>91</u> clients will receive information about victim rights, how to obtain notifications, etc.</p> <p><i>#173 times staff will provide information about victim rights, how to obtain notifications, etc.</i></p>	<p># of clients provided information about victim rights, how to obtain notifications, etc.</p> <p># of times staff provided information about victim rights, how to obtain notifications, etc.</p>
<p># <u>129</u> clients will receive referrals to other victim service providers.</p> <p><i>#221 times staff will provide referrals to other victim service providers</i></p>	<p># of clients provided with referrals to other victim service providers. Please list the agencies to which you referred.</p> <p># of times staff provided referrals to other victim service providers.</p>

<p>#398 clients will receive referrals to other services, supports, and resources</p> <p><i>#1190 times staff will provide referrals to other services, supports, and resources</i></p>	<p># ____ clients provided with referrals to other services, supports, and resources.</p> <p># of times staff provided referrals to other services, supports, and resources.</p>
PERSONAL ADVOCACY/ACCOMPANIMENT	
<p>#290 clients will receive individual advocacy (e.g., assistance applying for public benefits).</p> <p><i>#768 times staff will provide individual advocacy</i></p>	<p># of clients provided individual advocacy (e.g., assistance applying for public benefits).</p> <p># of times staff provided individual advocacy (e.g., assistance applying for public benefits).</p>
<p>#22 clients will receive victim advocacy/accompaniment to emergency medical care.</p> <p><i>#30 times staff will provide victim advocacy/accompaniment to emergency medical care.</i></p>	<p># of clients provided victim advocacy/accompaniment to emergency medical care.</p> <p># of times staff provided victim advocacy/accompaniment to emergency medical care.</p>
<p>#16 clients will receive victim advocacy /accompaniment to medical forensic exam.</p> <p><i>#23 times staff will provide victim advocacy/accompaniment to medical forensic exam</i></p>	<p># of clients provided victim advocacy/accompaniment to medical forensic exam.</p> <p># of times staff provided victim advocacy/accompaniment to medical forensic exam.</p>
<p>#18 clients will receive law enforcement interview advocacy/accompaniment.</p> <p><i>#19 times staff will provide law enforcement interview advocacy/accompaniment.</i></p>	<p># of clients provided law enforcement interview advocacy/accompaniment.</p> <p># of times staff provided law enforcement interview advocacy/accompaniment.</p>
<p>#168 clients will receive assistance filing for victim compensation.</p> <p><i>#182 times staff will provide assistance filing for victim compensation.</i></p>	<p># of clients provided assistance filing for victim compensation.</p> <p># of times staff provided assistance filing for victim compensation.</p>
<p>#13 clients will receive immigration assistance</p> <p><i>#29 times staff will provide immigration assistance</i></p>	<p># of clients provided immigration assistance.</p> <p># of times staff provided immigration assistance.</p>

<p>#132 clients will receive assistance intervening with an employer, creditor, landlord, or academic institution.</p> <p><i>#141 times staff will provide assistance intervening with an employer, creditor, landlord, or academic institution.</i></p>	<p># of clients provided with assistance intervening with an employer, creditor, landlord, or academic institution.</p> <p># of times staff provided assistance intervening with an employer, creditor, landlord, or academic institution.</p>
<p>#57 clients will receive child or dependent care assistance.</p> <p><i>#110 times staff will provide receive child or dependent care assistance.</i></p>	<p># of clients provided with child or dependent care assistance.</p> <p># of times staff provided child or dependent care assistance.</p>
<p>#120 clients will receive transportation assistance.²</p>	<p># of clients provided with transportation assistance.</p> <p># of times staff provided transportation assistance.</p>
<p>#14 clients will receive interpreter services.</p> <p><i>#29 times staff will provide interpreter services</i></p>	<p># of clients provided with interpreter services.</p> <p># of times staff provided interpreter services.</p>
<p># 110 clients will receive employment assistance (e.g., help creating a resume or completing a job application).</p> <p><i>#244 times staff will provide employment assistance</i></p>	<p># of clients provided with employment assistance (e.g., help creating a resume or completing a job application).</p> <p># of times staff provided employment assistance (e.g., help creating a resume or completing a job application).</p>
<p># 48 clients will receive education assistance (e.g., help completing GED, college application).</p> <p><i>#71 times staff will provide receive education assistance.</i></p>	<p># clients provided with education assistance (e.g., help completing a GED or college application).</p> <p># of times staff provided education assistance (e.g., help completing a GED or college application).</p>

² Note: This projection is based on seasonally adjusted data which includes data from pre-COVID, in-person treatment model. We anticipate providing significantly less transportation now that many services are conducted virtually.

<p># 43 clients will receive economic assistance (e.g., help creating a budget, repairing credit, providing financial education).</p> <p><i>#45 times staff will provide economic assistance</i></p>	<p># of clients provided with economic assistance (e.g., help creating a budget, repairing credit, providing financial education).</p> <p># of times staff provided economic assistance (e.g., help creating a budget, repairing credit, providing financial education).</p>
<p>EMOTIONAL SUPPORT OR SAFETY SERVICES</p>	
<p># 6 clients will receive counseling, case management, or therapy services in a non-program location (e.g. homes, libraries, parks).³</p>	<p># of clients provided with counseling, case management, or therapy services in a non-program location.</p> <p># of sessions provided by staff in a non-program location.</p>
<p># 62 clients will receive crisis intervention.</p> <p>#521 times staff will provide crisis intervention</p>	<p># of clients provided with crisis intervention.</p> <p># of crisis intervention sessions provided by staff.</p>
<p>#566 clients will receive individual counseling (Non-crisis counseling or follow-up either in-person or virtually (or via phone, e-visit, etc.)).</p> <p><i>#2376 individual counseling sessions will be provided.</i></p>	<p># of clients provided with individual counseling.</p> <p># of individual counseling sessions provided by staff.</p>
<p># 566 clients will receive therapy.</p> <p><i>#1732 therapy sessions will be provided by staff</i></p>	<p># of clients provided with therapy.</p> <p># of therapy sessions provided by staff.</p>

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include:

- Core direct services to victims of all crime types.
- Fund services for underserved victims of crime.
- Promote multidisciplinary responses to victimization.
- Encourage trauma-informed and trauma-focused services.

³ Projections based on on pre-COVID data, there was no statistical method of estimation available that has been proven predictive of impact over time of COVID-related changes in patient engagement by location to integrate into the model

- Encourage the use of evidence-informed (or promising) and evidence-based practices and programming.

Program Funding Detail

This designation would support 12 months of funding. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not Applicable.

Budget Detail

	Total
Personnel Total FTE: 19.3 - 5 Psychology fellows; 1 Program Manager; 1 TRC Director; 1 Trauma Recovery Specialist	\$1,034,672
Fringe	\$208,051.00
Equipment	\$0
Supplies: Client transportation; print program materials; 5 computers	\$18,790.00
Travel: Local travel	\$2,875.00
Contractual: Rent, Trauma Focused Cognitive Behavior Psychotherapist	\$57,784.00
Indirect / Other Costs	\$0
Totals Federal / State and Match:	\$1,322,172

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Advocate Trauma Recovery Center at Advocate Condell Medical Center

Program Agency DUNS: 142122477

Funding Source: FFY18 Victims of Crime Act FFY18: \$781,793; Match: \$156,365

Agency Budget: \$339,545,427

Request Type: Notice of Funding Opportunity #2232-2388

Program Description

Advocate Condell Medical Center will form Lake County’s first trauma recovery center (TRC), a holistic, inclusive, and trauma-informed program that will provide comprehensive and evidence-based services to victims, survivors, and families of intentional violence. Guided by a mission to aid in the recovery and establishment of personal safety and stability, the Advocate Condell Medical Center TRC will offer case management, psychiatry, and therapeutic services (individual, group, and family) to the area’s most vulnerable population. Services will adhere to culturally humble and trauma-informed guidelines, as well as follow best care practices by data-driven research, including utilization of therapeutic interventions with evidence-based efficacy for treatment of trauma-and-stressor related disorders. The Condell Medical Center will act as the TRC’s home base and accept referrals for victims living in Lake, Kane, Kendall and McHenry counties.

Program Activities

Funding will primarily provide support for staff salaries. The team will provide individual and group therapy, extensive social services, and psychiatric services. Funding also will cover training for the team members to ensure they are providing evidence-based and trauma-informed care. Services will be provided in both outpatient and hospital settings to maximize the number of survivors that are able to receive services.

Goals

Goal: To provide comprehensive advocacy and mental health services to victims of violent crime.	
Projections for Period of Performance: August 2020 – August 2021 ¹	
Objective	Performance Measure

¹Projected Metrics calculated using ARIMA and Polynomial Regression Projections when historical data provided sample sizes sufficient for statistical projections using the regression coefficient calculated by comparing trauma ED visits to Condell to trauma ED visits to CMC (simulating target outreach population). To model expansion, the CMC rate of service volume growth during the program initiation year was applied to the model.

<i>OUTREACH ACTIVITIES</i>	
<u>29</u> outreach meetings held with community organizations to provide information about TRC program and services.	<p># of meetings held with community organizations to provide information about TRC program and services.</p> <p># of community organizations provided with information about TRC program and services.</p>
<u>16</u> public awareness events to provide information about TRC program and services to the community.	<p># public awareness events to provide information about TRC program and services to the community.</p> <p># of community residents provided with information about TRC program and services.</p>
<u>551</u> clients that will be contacted through individual outreach and informed about TRC program and services.	<p># of clients provided information about the TRC program and services.</p> <p># of times staff provided information about the TRC programs and services.</p>
<i>INFORMATION & REFERRAL</i>	
<u>47</u> clients will receive information about the criminal justice process.	<p># of clients provided information about the criminal justice process.</p> <p># of times staff provided information about the criminal justice process.</p>
<u>59</u> clients will receive information about victim rights, how to obtain notifications, etc.	<p># of clients provided information about victim rights, how to obtain notifications, etc.</p> <p># of times staff provided information about victim rights, how to obtain notifications, etc.</p>
<u>32</u> clients will receive referrals to other victim service providers.	<p># of clients provided with referrals to other victim service providers.</p> <p># of times staff provided referrals to other victim service providers.</p>

<p>180 clients will receive referrals to other services, supports, and resources</p>	<p># clients provided with referrals to other services, supports, and resources.</p> <p># of times staff provided referrals to other services, supports, and resources.</p>
<p><i>PERSONAL ADVOCACY/ACCOMPANIMENT</i></p>	
<p>189 clients will receive individual advocacy (e.g., assistance applying for public benefits).</p>	<p># of clients provided individual advocacy</p> <p># of times staff provided individual advocacy</p>
<p>14 clients will receive victim advocacy/accompaniment to emergency medical care.</p>	<p># of clients provided victim advocacy or accompaniment to emergency medical care.</p> <p># of times staff provided victim advocacy or accompaniment to emergency medical care.</p>
<p>12 clients will receive victim advocacy /accompaniment to medical forensic exam.</p>	<p># of clients provided victim advocacy or accompaniment to medical forensic exam.</p> <p># of times staff provided victim advocacy or accompaniment to medical forensic exam.</p>
<p>12 clients will receive law enforcement interview advocacy/accompaniment.</p>	<p># of clients provided law enforcement interview advocacy/accompaniment.</p> <p># of times staff provided law enforcement interview advocacy/accompaniment.</p>
<p>110 clients will receive assistance filing for victim compensation.</p>	<p># of clients provided assistance filing for victim compensation.</p> <p># of times staff provided assistance filing for victim compensation.</p>
<p>12 clients will receive immigration assistance</p>	<p># of clients provided immigration assistance.</p> <p># of times staff provided immigration assistance.</p>
<p>85 clients will receive assistance intervening with an employer, creditor, landlord, or academic institution.</p>	<p># of clients provided with intervention assistance</p> <p># of times staff provided intervention assistance</p>

37 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.
36 clients will receive transportation assistance. ²	# of clients provided with transportation assistance. # of times staff provided transportation assistance.
14 clients will receive interpreter services.	# of clients provided with interpreter services. # of times staff provided interpreter services.
72 clients will receive employment assistance (e.g., help creating a resume or completing a job application).	# of clients provided with employment assistance # of times staff provided employment assistance
42 clients will receive education assistance (e.g., help completing GED,college application).	# clients provided with education assistance # of times staff provided education assistance
28 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).
EMOTIONAL SUPPORT OR SAFETY SERVICES	
6 clients will receive counseling, case management, or therapy services in a non-program location (e.g. homes, libraries, parks). ³	# of clients provided with counseling, case management, or therapy services in a non-program location. # of sessions provided by staff in a non-program location.

² Note: This projection is based on seasonally adjusted data from the CMC TRC over 12-months which includes pre-COVID, in-person treatment model. We anticipate providing significantly less transportation now that many services are conducted virtually.

³ Projections based on pre-COVID data, there was no statistical method of estimation available that has been proven predictive of impact over time of COVID-related changes in patient engagement by location to integrate into the model

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include:

- Core direct services to victims of all crime types.
- Fund services for underserved victims of crime.
- Promote multidisciplinary responses to victimization.
- Encourage trauma-informed and trauma-focused services.

Program Funding Detail

This designation would support 12 months of funding. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not applicable.

Budget Detail

	Total
Personnel Total FTE: 10.50 - 4 psychology student fellows; 1 clinical psychologist; 1 clinical adult and adolescent psychologist; 2 trauma recovery specialists; 1 data analyst; 1 lead psychologist; 1 TRC director	\$636,963
Fringe Benefits	\$117,559
Equipment; Color Printer	\$6,645
Supplies: Office supplies; emergency food, shelter, and clothing assistance; medical supplies for psychiatric therapy.	\$33,629
Travel: Local Travel	\$2,875
Contractual: Rent, 7 staff trainings, security for front door camera, telehealth services	\$140,487
Indirect / Other Costs	\$0
Totals Federal / State and Match:	\$781,793

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Trauma Recovery Center - Saint Francis Medical Center

Program Agency DUNS: 808068485

Funding Source: FFY18 Victims of Crime Act: \$798,580; Match: \$199,645

Agency Budget: FY2020 OSF Health Care \$3,110,739,000

Request Type: Notice of Funding Opportunity #2232-1253

Program Description

OSF Strive, Peoria - Trauma Recovery Center (within Saint Francis Medical Center) will provide high-quality behavioral health care at no cost to Peoria survivors of crime. Comprehensive services provided will include therapy, case management, medication management, and legal advocacy. Services will be accessible at several locations at during home and community visits. The program will follow SAMHSA’s Six Key Principles of Trauma Informed Approach and incorporate the nine core elements of the UCSF TRC model.

Program Activities

OSF Strive, Peoria - TRC provides therapy, case management, tele-psychiatry (medication management), and legal advocacy services to survivors of violent crime. Services are provided to residents of Peoria City ages 14 and older who are survivors, family members, or witnesses to a violent crime. The program serves clients at Saint Francis Medical Center inpatient and at three outpatient locations. The program also provides in-home and community visits, as appropriate, including at local parks, libraries, and recreation centers. Clients will benefit from emergency assistance funds for housing, transportation, food, and clothing to aid in their recovery in the aftermath of a crime.

Goals

Goals of the OSF Trauma Recovery Center 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 for the individual who has been impacted by violent crime.

Goal: To provide comprehensive advocacy and mental health services to victims of violent crime.	
Objective	Performance Measure
<i>OUTREACH ACTIVITIES</i>	
# 25 outreach meetings held with community organizations to provide information about TRC	# of meetings held with community organizations to provide information

<p>program and services.</p>	<p>about TRC program and services.</p> <p># of community organizations provided with information about TRC program and services.</p>
<p># 15 public awareness events to provide information about TRC program and services to the community.</p>	<p># public awareness events to provide information about TRC program and services to the community.</p> <p># of community residents provided with information about TRC program and services.</p>
<p># 200 clients that will be contacted through individual outreach and informed about TRC program and services.</p>	<p># of clients provided information about the TRC program and services.</p> <p># of times staff provided information about the TRC programs and services.</p>
<p><i>INFORMATION & REFERRAL</i></p>	
<p># 110 clients will receive information about the criminal justice process.</p>	<p># of clients provided information about the criminal justice process.</p> <p># of times staff provided information about the criminal justice process.</p>
<p>#150 clients will receive information about victim rights, how to obtain notifications, etc.</p>	<p># of clients provided information about victim rights, how to obtain notifications, etc.</p> <p># of times staff provided information about victim rights, how to obtain notifications, etc.</p>
<p># 75clients will receive referrals to other victim service providers.</p>	<p># of clients provided with referrals to other victim service providers.</p> <p>Please list the agencies to which you referred.</p> <p># of times staff provided referrals to other victim service providers.</p>

<p># 300 clients will receive referrals to other services, supports, and resources (includes legal, medical, faith-based organizations, etc.)</p>	<p># ____ clients provided with referrals to other services, supports, and resources.</p> <p># of times staff provided referrals to other services, supports, and resources.</p>
<p><i>PERSONAL ADVOCACY/ACCOMPANIMENT</i></p>	
<p>#85 clients will receive individual advocacy (e.g., assistance applying for public benefits).</p>	<p># of clients provided individual advocacy (e.g., assistance applying for public benefits).</p> <p># of times staff provided individual advocacy (e.g., assistance applying for public benefits).</p>
<p>#0 clients will receive victim advocacy/accompaniment to emergency medical care.</p>	<p># of clients provided victim advocacy/accompaniment to emergency medical care.</p> <p># of times staff provided victim advocacy/accompaniment to emergency medical care.</p>
<p>#0 clients will receive victim advocacy/accompaniment to medical forensic exam.</p>	<p># of clients provided victim advocacy/accompaniment to medical forensic exam.</p> <p># of times staff provided victim advocacy/accompaniment to medical forensic exam.</p>
<p>#15 clients will receive law enforcement interview advocacy/accompaniment.</p>	<p># of clients provided law enforcement interview advocacy/accompaniment.</p> <p># of times staff provided law enforcement interview advocacy/accompaniment.</p>
<p>#90 clients will receive assistance filing for victim compensation.</p>	<p># of clients provided assistance filing for victim compensation.</p> <p># of times staff provided assistance filing for victim compensation.</p>
<p>#5 clients will receive immigration assistance</p>	<p># of clients provided immigration</p>

<p>(e.g., special visas, continued presence application, and other immigration relief).</p>	<p>assistance. # of times staff provided immigration assistance.</p>
<p>#55 clients will receive assistance intervening with an employer, creditor, landlord, or academic institution.</p>	<p># 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.</p>
<p>#0 clients will receive child or dependent care assistance.</p>	<p># of clients provided with child or dependent care assistance. # of times staff provided child or dependent care assistance.</p>
<p>#60 clients will receive transportation assistance.</p>	<p># of clients provided with transportation assistance. # of times staff provided transportation assistance.</p>
<p>#5 clients will receive interpreter services.</p>	<p># of clients provided with interpreter services. # of times staff provided interpreter services.</p>
<p># 60 clients will receive employment assistance (e.g., help creating a resume or completing a job application).</p>	<p># 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).</p>
<p># 70 clients will receive education assistance (e.g., help completing a GED or college application).</p>	<p># clients provided with education assistance (e.g., help completing a GED or college application).</p>

	# of times staff provided education assistance (e.g., help completing a GED or college application).
# 35 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).
<i>EMOTIONAL SUPPORT OR SAFETY SERVICES</i>	
# 50 clients provided with counseling, case management, or therapy services in a non-program location (e.g. homes, libraries, parks).	# of clients provided with counseling, case management, or therapy services in a non-program location. # of sessions provided by staff in a non-program location.
#70 clients will receive crisis intervention.	# of clients provided with crisis intervention. # of crisis intervention sessions provided by staff.
# 150 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.
# 280 clients will receive therapy.	# of clients provided with therapy. # of therapy sessions provided by staff.
# 50 clients will receive group support.	# of clients provided group support. # of staff-provided group support sessions.

<p># 80 clients will receive emergency financial assistance.</p>	<p># of clients provided with emergency financial assistance.</p> <p># of times staff provided emergency financial assistance.</p>
<p><i>SHELTER/HOUSING SERVICES</i></p>	
<p>#10 clients will receive relocation assistance.</p>	<p># of clients provided with relocation assistance.</p> <p># of times staff provided relocation assistance.</p>
<p># 80 clients will receive housing advocacy, or help with implementing a plan for obtaining housing (e.g., accompanying client to apply for Section 8 housing)</p>	<p># 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)</p> <p># 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)</p>
<p><i>CRIMINAL/CIVIL JUSTICE SYSTEM ASSISTANCE</i></p>	
<p># 15 clients will receive criminal advocacy/accompaniment.</p>	<p># of clients provided criminal advocacy/accompaniment.</p> <p># of times staff provided criminal advocacy/accompaniment.</p>
<p># 10 clients will receive civil advocacy/accompaniment (includes victim advocate assisting with orders of protection).</p>	<p># of clients provided civil advocacy/accompaniment.</p> <p># of times staff provided civil advocacy/accompaniment.</p>

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include:

- Core direct services to victims of all crime types.
- Fund services for underserved victims of crime.
- Promote multidisciplinary responses to victimization.
- Encourage trauma-informed and trauma-focused services.
- Encourage the use of evidence-informed (or promising) and evidence-based practices and programming.

Program Funding Detail

This designation would support 12 months of funding, representing the first year of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not applicable.

Budget Detail

	Total
Personnel Total FTE: 10.6 positions are TRC Therapists and case managers.	\$614,292
Fringe	\$184,288
Equipment	\$0
Supplies	\$0
Travel	\$0
Contractual: Psychiatric advanced practice nurse and supervisor.	\$126,720
Indirect / Other Costs	\$0
Totals Federal / State and Match:	\$925,300

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Trauma Recovery Center - Saint Anthony Medical Center

Program Agency DUNS: 074589433

Funding Source: FFY18 Victims of Crime Act: \$793,099; Match: \$198,275

Agency Budget: FY2020 OSF Health Care: \$3,110,739,000

Request Type: Notice of Funding Opportunity #2232-1253

Program Description

OSF Saint Anthony Medical Center will continue to develop the Trauma Recovery Center (TRC) program based on the University of California San Francisco TRC model. The TRC is being developed to provide a safety net of services to victims of crime ages 14 and older who are not likely to engage in mainstream mental health or social services. Specialized services, such as outreach, therapy, case management, advocacy, and psychiatry, will be delivered by a trauma-informed and well-educated staff to help survivors deal with the emotional wounds of interpersonal violence.

Program Activities

OSF –St. Anthony will follow the standards of the University of California San Francisco TRC Model. As domestic violence and firearm trauma will be a repeating incident in the program’s service area, staff will have specific training in domestic violence and gun violence. The program will follow the TRC core elements:

- Assertive outreach and engagement through peer support specialist helping our clients process their trauma.
- Inclusive treatments of victims of all type of crime with formal collaboration of the Family Peace Center through the Mayor of Rockford’s office,
- Comprehensive mental health and support service by treating clients through crisis intervention, group therapy and medication management.
- Accountable services by providing a 16-session program for clients.
- Use of trauma-informed, evidence-based practices by training and updating staff on the following: motivational interviewing, Seeking Safety, cognitive behavioral therapy, dialectical behavior and cognitive processing therapy to establish trust within clients.

- Inclusive treatment of clients with complex problems by training staff to understand that many of these emotional or behavioral issues are “normal” for those that experience trauma and focusing program services on helping clients through these difficult issues.
- Clinical case management by assertive case management, including, but not limited to, accompanying a client to court proceedings, medical appointments, or other community appointments as needed; case management services, such as assistance in completing and filing applications for victim compensation, help with filing a police report, assistance with obtaining safe housing and financial entitlements, linkages to medical care, providing assistance securing employment, working as a liaison to other community agencies, law enforcement, or other supportive service providers, as needed.
- Coordinated care tailored to individuals’ needs by coordinating psychotherapy and case management through a single point of contact for the survivor with support from an integrated multidisciplinary trauma treatment team.
- Multidisciplinary staff team by having four clinical therapist, two case managers, and a psychiatrist through Regroup for clients and peer support specialist to ensure clients feel supported.

Goals

Goal: To provide comprehensive advocacy and mental health services to victims of violent crime.	
Objective	Performance Measure
<i>OUTREACH ACTIVITIES</i>	
# 4 outreach meetings held with community organizations to provide information about TRC program and services.	# of meetings held with community organizations to provide information about TRC program and services. # of community organizations provided with information about TRC program and services.
# 5 public awareness events to provide information about TRC program and services to the community. (Due to COVID-19 these public awareness events may only happen online.)	# public awareness events to provide information about TRC program and services to the community. # of community residents provided with information about TRC program and services.
# __25__ clients that will be contacted through individual outreach and informed about TRC program and services.	# of clients provided information about the TRC program and services.

	# of times staff provided information about the TRC programs and services.
<i>INFORMATION & REFERRAL</i>	
# __25__ 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.
# __25__ 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.
# __15__ clients will receive referrals to other victim service providers, i.e., Remedies Renewing Lives, Youth Services Bureau, Rockford Sexual Assault, and Carrie-Lynn Center.	# 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.
# __25__ clients will receive referrals to other services, supports, and resources (includes legal, medical, faith-based organizations, etc.)	# __25__ clients provided with referrals to other services, supports, and resources. # of times staff provided referrals to other services, supports, and resources.
<i>PERSONAL ADVOCACY/ACCOMPANIMENT</i>	
# __25__ 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).
# __25__ clients will receive victim	# of clients provided victim

<p>advocacy/accompaniment to emergency medical care.</p>	<p>advocacy/accompaniment to emergency medical care.</p> <p># of times staff provided victim advocacy/accompaniment to emergency medical care.</p>
<p>#_2__ clients will receive victim advocacy/accompaniment to medical forensic exam.</p> <p>(Another agency by the name of Rockford Sexual Assault, will be the agency that would provide this service with clients.) We may do it on a very limited bases.</p>	<p># of clients provided victim advocacy/accompaniment to medical forensic exam.</p> <p># of times staff provided victim advocacy/accompaniment to medical forensic exam.</p>
<p>#_10__ clients will receive law enforcement interview advocacy/accompaniment.</p>	<p># of clients provided law enforcement interview advocacy/accompaniment.</p> <p># of times staff provided law enforcement interview advocacy/accompaniment.</p>
<p>#_15_ clients will receive assistance filing for victim compensation.</p>	<p># of clients provided assistance filing for victim compensation.</p> <p># of times staff provided assistance filing for victim compensation.</p>
<p>#_5__ clients will receive immigration assistance (e.g., special visas, continued presence application, and other immigration relief).</p>	<p># of clients provided immigration assistance.</p> <p># of times staff provided immigration assistance.</p>
<p>#_5__ clients will receive assistance intervening with an employer, creditor, landlord, or academic institution.</p>	<p># of clients provided with assistance intervening with an employer, creditor, landlord, or academic institution.</p> <p># of times staff provided assistance intervening with an employer, creditor, landlord, or academic institution.</p>
<p>#_5__ clients will receive child or dependent</p>	<p># of clients provided with child or</p>

<p>care assistance.</p>	<p>dependent care assistance.</p> <p># of times staff provided child or dependent care assistance.</p>
<p>#_25_ clients will receive transportation assistance.</p>	<p># of clients provided with transportation assistance.</p> <p># of times staff provided transportation assistance.</p>
<p>#_15_ clients will receive interpreter services.</p>	<p># of clients provided with interpreter services.</p> <p># of times staff provided interpreter services.</p>
<p>#_25_ clients will receive employment assistance (e.g., help creating a resume or completing a job application).</p>	<p># of clients provided with employment assistance (e.g., help creating a resume or completing a job application).</p> <p># of times staff provided employment assistance (e.g., help creating a resume or completing a job application).</p>
<p>#_10_ clients will receive education assistance (e.g., help completing a GED or college application).</p>	<p># clients provided with education assistance (e.g., help completing a GED or college application).</p> <p># of times staff provided education assistance (e.g., help completing a GED or college application).</p>
<p>#_10_ clients will receive economic assistance (e.g., help creating a budget, repairing credit, providing financial education).</p>	<p># of clients provided with economic assistance (e.g., help creating a budget, repairing credit, providing financial education).</p> <p># of times staff provided economic assistance (e.g., help creating a budget, repairing credit, providing financial education).</p>
<p><i>EMOTIONAL SUPPORT OR SAFETY SERVICES</i></p>	

# __50__ clients provided with counseling, case management, or therapy services in a non-program location (e.g. homes, libraries, parks).	# of clients provided with counseling, case management, or therapy services in a non-program location. # of sessions provided by staff in a non-program location.
# __5__ clients will receive crisis intervention.	# of clients provided with crisis intervention. # of crisis intervention sessions provided by staff.
#__75__ 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.
# __50__ clients will receive therapy.	# of clients provided with therapy. # of therapy sessions provided by staff.
# __25__ clients will receive group support.	# of clients provided group support. # of group support sessions provided by staff.
# 5__ clients will receive emergency financial assistance. (through Catholic Charities and the Salvation Army)	# of clients provided with emergency financial assistance. # of times staff provided emergency financial assistance.
<i>SHELTER/HOUSING SERVICES</i>	
#__5__ clients will receive relocation assistance.	# of clients provided with relocation assistance. # of times staff provided relocation assistance.
# _5_ clients will receive housing advocacy, or	# of clients provided with receive housing

help with implementing a plan for obtaining housing (e.g., accompanying client to apply for Section 8 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)
<i>CRIMINAL/CIVIL JUSTICE SYSTEM ASSISTANCE</i>	
# <u>25</u> clients will receive criminal advocacy/accompaniment.	# of clients provided criminal advocacy/accompaniment. # of times staff provided criminal advocacy/accompaniment.
# <u>25</u> 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.

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include:

- Core direct services to victims of all crime types.
- Fund services for underserved victims of crime.
- Promote multidisciplinary responses to victimization.
- Encourage trauma-informed and trauma-focused services.
- Encourage the use of evidence-informed (or promising) and evidence-based practices and programming.

Program Funding Detail

This designation would support 12 months of funding, representing Year 1 of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not applicable.

Budget Detail

	Total
Personnel Total FTE: 10.00 - Clinician Therapist and Case Managers	\$610,072
Fringe	\$183,021
Equipment	\$0
Supplies	\$0
Travel	\$0
Contractual: Psychiatric Advanced Practice Nurse (12 hrs./week). Supervisor (2 hrs./week).	\$119,200
Indirect / Other Costs	\$0
Totals Federal / State and Match:	\$925,300

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Trauma Recovery Centers - Southern Illinois University School of Medicine

Program Agency DUNS: 038415006

Funding Source: FFY18 Victims of Crime Act: \$933,944; Match: \$233,486

Agency Budget: \$873,309,286

Request Type: Notice of Funding Opportunity #2232-1388

Program Description

The Springfield Trauma Recovery Center (TRC), housed within Southern Illinois University School of Medicine, will expand existing trauma-specific programming, bringing together strands of trauma-specific services offered by multiple agencies. The TRC will represent a culmination of years of creating strong clinical and case management services specifically for individuals who traditionally struggle to access high quality medical and mental health care. This funding would help remove silos for potential clients, bringing together disciplines and organizations to collaborate on the common goal. A TRC serving Sangamon County would make it possible for clients to move between legal, medical, and social service systems easily and seamlessly, with a clinician trained in trauma as the focal point of care. While SIU strives to make training, wellness, and professional development a priority, this funding will build on what is already being done. A variety of services will be provided to survivors of crime, including therapy, case management, psychiatry, and others.

Program Activities

This funding will support salary for individuals providing direct services to clients, salary for individuals assisting with the operations of this grant, indirect costs, financial support for client needs, funding to pay certified individual in trauma-informed yoga, costs associated with daily operations, such as office supplies, costs associated with travel to required monthly ICJIA meetings in Chicago, and funding for wellness and professional development for staff (coaching, trainings, and similar activities). All funds will directly relate to ensuring that staff are able to provide high quality services for clients.

Goals

Goal: To provide comprehensive advocacy and mental health services to victims of violent crime.	
Objective	Performance Measure
<i>OUTREACH ACTIVITIES</i>	
12 outreach meetings held with community organizations to provide information about TRC program and services.	12 meetings held with community organizations to provide information about TRC program and services.

	24 community organizations provided with information about TRC program and services.
6 public awareness events to provide information about TRC program and services to the community.	6 public awareness events to provide information about TRC program and services to the community. 180 community residents provided with information about TRC program and services.
150 clients that will be contacted through individual outreach and informed about TRC program and services.	150 clients provided information about the TRC program and services. 220 times staff provided information about the TRC programs and services.
<i>INFORMATION & REFERRAL</i>	
125 clients will receive information about the criminal justice process.	125 clients provided information about the criminal justice process. 125 times staff provided information about the criminal justice process.
125 clients will receive information about victim rights, how to obtain notifications, etc.	125 clients provided information about victim rights, how to obtain notifications, etc. 125 times staff provided information about victim rights, how to obtain notifications, etc.
94 clients will receive referrals to other victim service providers.	94 (75%) clients provided with referrals to other victim service providers. Please list the agencies to which you referred. 94 (75%) times staff provided referrals to other victim service providers.
125 clients will receive referrals to other services, supports, and resources (includes legal, medical, faith-based organizations, etc.)	125 (100%) clients provided with referrals to other services, supports, and resources. 375 times staff provided referrals to other services, supports, and resources.
<i>PERSONAL ADVOCACY/ACCOMPANIMENT</i>	
62 clients will receive individual advocacy (e.g., assistance applying for public benefits).	62 (50%) clients provided individual advocacy (e.g., assistance applying for public benefits). 62 (50%) times staff provided individual advocacy (e.g., assistance applying for public benefits).
31 clients will receive victim advocacy/accompaniment to emergency medical care.	31 (25%) clients provided victim advocacy/accompaniment to emergency medical care.

	31 (25%) times staff provided victim advocacy/accompaniment to emergency medical care.
13clients will receive victim advocacy/accompaniment to medical forensic exam.	13 (10%) clients provided victim advocacy/accompaniment to medical forensic exam. 13 (10%) times staff provided victim advocacy/accompaniment to medical forensic exam.
19clients will receive law enforcement interview advocacy/accompaniment.	19 (15%) clients provided law enforcement interview advocacy/accompaniment. 19 (15%) of times staff provided law enforcement interview advocacy/accompaniment.
62clients will receive assistance filing for victim compensation.	62 (50%) clients provided assistance filing for victim compensation. 62 (50%) of times staff provided assistance filing for victim compensation.
0-1 clients will receive immigration assistance (e.g., special visas, continued presence application, and other immigration relief).	0-1 (1%) clients provided immigration assistance. 0-1 times staff provided immigration assistance.
18clients will receive assistance intervening with an employer, creditor, landlord, or academic institution.	18 (15%) clients provided with assistance intervening with an employer, creditor, landlord, or academic institution. 18 times staff provided assistance intervening with an employer, creditor, landlord, or academic institution.
62clients will receive child or dependent care assistance.	62 (50%) clients provided with child or dependent care assistance. 62 times staff provided child or dependent care assistance.
100clients will receive transportation assistance.	100 (80%) clients provided with transportation assistance. 300 times staff provided transportation assistance.
6clients will receive interpreter services.	6 (5%) clients provided with interpreter services. 96 times staff provided interpreter services.
62 clients will receive employment assistance (e.g., help creating a resume or completing a job application).	62 (50%) clients provided with employment assistance (e.g., help creating a resume or

	<p>completing a job application).</p> <p>100 times staff provided employment assistance (e.g., help creating a resume or completing a job application).</p>
62 clients will receive education assistance (e.g., help completing a GED or college application).	<p>62 (50%) provided with education assistance (e.g., help completing a GED or college application).</p> <p>62 times staff provided education assistance (e.g., help completing a GED or college application).</p>
62 clients will receive economic assistance (e.g., help creating a budget, repairing credit, providing financial education).	<p>62 (50%) clients provided with economic assistance (e.g., help creating a budget, repairing credit, providing financial education).</p> <p>100 times staff provided economic assistance (e.g., help creating a budget, repairing credit, providing financial education).</p>
<i>EMOTIONAL SUPPORT OR SAFETY SERVICES</i>	
62 clients provided with counseling, case management, or therapy services in a non-program location (e.g. homes, libraries, parks).	<p>62 (50%) clients provided with counseling, case management, or therapy services in a non-program location.</p> <p>480 sessions provided by staff in a non-program location.</p>
37 clients will receive crisis intervention.	<p>37 (30%) clients provided with crisis intervention.</p> <p>50 crisis intervention sessions provided by staff.</p>
125 clients will receive individual counseling (Non-crisis counseling or follow-up either in-person or over the phone (or via email, Facebook, etc.)).	<p>125 (100%) clients provided with individual counseling.</p> <p>1000 individual counseling sessions provided by staff.</p>
125 clients will receive therapy.	<p>125 clients provided with therapy.</p> <p>1000 therapy sessions provided by staff.</p>
50 clients will receive group support.	<p>50 (40%) clients provided group support.</p> <p>300 group support sessions provided by staff.</p>
18 clients will receive emergency financial assistance.	<p>18 (15%) clients provided with emergency financial assistance.</p> <p>36 clients provided emergency financial assistance.</p>
<i>SHELTER/HOUSING SERVICES</i>	
18 clients will receive relocation assistance.	<p>18 (15%) clients provided with relocation assistance.</p>

	18 clients provided relocation assistance.
31 clients will receive housing advocacy, or help with implementing a plan for obtaining housing (e.g., accompanying client to apply for Section 8 housing)	31 (25%) 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) 31 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)
<i>CRIMINAL/CIVIL JUSTICE SYSTEM ASSISTANCE</i>	
31 clients will receive criminal advocacy/accompaniment.	31 (25%) clients provided criminal advocacy/accompaniment. 124 clients provided criminal advocacy/accompaniment.
18 clients will receive civil advocacy/accompaniment (includes victim advocate assisting with orders of protection).	18 (15%) clients provided civil advocacy/accompaniment. 25 times staff provided civil advocacy/accompaniment.

Priorities

The 2017 Ad Hoc Victim Services Committee priorities fulfilled under this program include:

- Core direct services to victims of all crime types.
- Fund services for underserved victims of crime.
- Promote multidisciplinary responses to victimization.
- Encourage trauma-informed and trauma-focused services.
- Encourage the use of evidence-informed (or promising) and evidence-based practices and programming.

Program Funding Detail

This designation would support nine months of funding, representing the first none of 36 months of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not applicable

Budget Detail

	Total
Personnel Total FTE: 6.19 – Includes Physician, 3 therapists, child psychiatrist, LCSW, 2 consultants, TRC liaison, project evaluator, program coordinator, and program director	\$346,582
Fringe: 58%	\$202,057
Equipment	\$0
Supplies: Laptops, office supplies, office furniture, and therapeutic materials	\$7,376
Travel: Required monthly meetings and outreach clinic	\$14,892
Contractual: Case management and staff development training, assessment tools for coaching, subcontract for trauma-informed yoga therapeutic services, subcontract with Memorial Behavioral Health for Clinical Supervisor, and medication management services	\$382,249
Indirect / Other Costs: 31%	\$295,478
Totals Federal / State and Match:	\$1,248,634



**ILLINOIS
CRIMINAL JUSTICE
INFORMATION AUTHORITY**

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MEMORANDUM

TO: Budget Committee Members

FROM: Greg Stevens, Associate Director, Federal and State Grants Unit

DATE: June 18, 2020

RE: State Fiscal Year 2021 Program Appropriations:

**Safe From the Start
Trauma Recovery Center Program
Street Intervention Program
Violence Prevention and Reduction**

This memo describes proposed designations, pending State Fiscal Year 2021 appropriation, for programs referenced above. Staff are available to answer any questions.

A. Safe From the Start

The Safe from the Start (SFS) grant program is designed to assist in the development, implementation, and evaluation of comprehensive and coordinated community-based models to identify, assess, and serve children, primarily ages 0 to 5, who have been exposed to violence in their home and/or community.

The evaluator is responsible for maintaining a central database that contains specific data on children and families from each site upon assessment. The evaluator trains SFS staff at each site on data entry and database utilization. The sites are required to enter the information from the assessment tools into the database, without identifying information, on a monthly basis. Evaluators analyze entered data. The results provide comprehensive statewide overview of SFS accomplishments and activities. SFS sites contact the evaluator for technical assistance on assessment tools, outcome questions, database training. SFS sites use data culled in program model review, grant applications, and reports. The SFS Evaluation grantee will be expected to continue to apply this approach.

Staff recommends designating the SFY21 SFS grant to ICJIA's Research & Analysis Unit for a 10-months funding period. Further details are available in the attached Grant Recommendation Report.

Implementing Agency	Geographic Area	DUNS #	Designation Amount
Illinois Criminal Justice Information Authority Research and Analysis Department	State of Illinois	844932843	\$125,000

B. Trauma Recovery Services

East St. Louis School District 189 proposes to create a three-pronged Violence Prevention Trauma Services program to address violence and trauma in the East St. Louis Community by focusing on the students within it. The program will serve students and families who have been involved with violence as a perpetrator or a victim: those who have prior justice system involvement, youth who are disconnected from school and work, and youth who are coping with trauma symptoms after witnessing or experiencing violence. The program will activate a mental health trauma team to respond to student crises during after school/weekend hours, and we will also support student survivors of trauma and their families with individual and family counseling and supports. The program will use a billboard campaign across the city featuring our student Peace Warriors, who are all trauma survivors, to raise public awareness of the program.

Staff recommends designating \$752,000 in SFY21 state-appropriated Trauma Recovery Services funds to East St. Louis School District 189 to support a TRC program. Further details are available in the attached Grant Recommendation Report.

C. Street Intervention Program

At the June 18, 2020 Budget Committee meeting, the Budget Committee approved a \$5,778,832 SFY21 Street Intervention Program (SIP) designation to Metropolitan Family Services (MFS) for their Communities Partnering 4 Peace (CP4P) program. The amount designated was based on previous fiscal year's designated amount. However, based on the amount of administrative funds that ICJIA will be utilizing for SFY21, we have identified additional funds that MFS proposes to use for the following purposes:

	Anticipated Total
Personnel Total FTE: .80 FTE (10 months) for a grant/contract monitor	\$44,333
Fringe	\$11,305
Supplies: PPE for COVID-19	\$8,096
Travel:	\$0
Contractual: Sub-contract with <i>The Network: Advocating Against Domestic Violence</i> to accept calls from the <i>Crime Prevention and Information Center</i> and subsequently initiate deployment of a community violence outreach worker to the scene of a gun crime.	\$120,000
Indirect / Other Costs: (Federally approved rate of 17.7%)	\$9,848
Total	\$193,582

Staff recommends increasing the current designation to Metropolitan Family Services for its CP4P program by \$193,582 in SFY21 SIP funds, raising the total designation to \$5,972,414 in SFY21 SIP funds.

D. Violence Prevention and Reduction

Proposed Violence Prevention and Reduction designations pursuant to State Fiscal Year 2021 appropriations for programs are described in the table below. Up to six percent of each appropriation has been retained by ICJIA for administrative purposes.

Implementing Agency	Program	Appropriation	Designation
City of Chicago	Violence Prevention and Reduction	\$788,500	\$741,190
Touch by an Angel Community Enrichment Center	Violence Prevention and Reduction	\$788,500	\$741,190
TOTAL		\$1,577,000	\$1,482,380

Please see the attached Grant Recommendation Reports for more information on this recommended designation.

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Evaluation - Illinois Criminal Justice Information Authority

Program Agency DUNS: 844932843

Funding Source: SFY21 Safe from the Start \$125,000

Agency Budget: \$273,562,3000

Request Type: New Grant

Program Description

The Safe from the Start (SFS) grant program is designed to assist in the development, implementation, and evaluation of comprehensive and coordinated community-based models to identify, assess, and serve children, ages 0 to 5 who have been exposed to violence in their home and/or community.

For many years, SFS evaluation has been conducted by the University of Illinois at Chicago, however their researchers are unable to continue working under the grant in SFY21. With this grant, ICJIA will conduct the evaluation program internally through the Research & Analysis Unit.

The evaluator is responsible for maintaining a central database that contains specific data on children and families from each site upon assessment. The evaluator trains SFS staff at each site on data entry and database utilization. The sites are required to enter the information from the assessment tools into the database, without identifying information, on a monthly basis. Evaluators analyze entered data. The results provide comprehensive statewide overview of SFS accomplishments and activities. SFS sites contact the evaluator for technical assistance on assessment tools, outcome questions, database training. SFS sites use data culled in program model review, grant applications, and reports. The SFS Evaluation grantee will be expected to continue to apply this approach.

Program Activities

Program activities include:

1. Provide evaluation training and technical assistance to SFS grantees.
2. Submit year-end report comparing SFS data across sites and across years to ICJIA.
3. Submit a promising practices report describing the relationship between treatment characteristics and child outcomes to ICJIA.
4. Maintain and analyze SFS evaluation measures database.

Goals

The Safe From the Start Evaluation Program will provide evaluation oversight, technical assistance, and training to Safe From the Start Implementation Program grantees. Safe From the Start direct service data will be disseminated through an annual report.

Priorities

The financial burden of children's exposure to violence on public systems, including child welfare, social services, law enforcement, juvenile justice, and education is staggering when combined with the loss of productivity over children's lifetimes.¹ Without intervention, young children exposed to violence are at risk for cognitive delays and emotional and social difficulties that can lead to additional victimization and later juvenile justice involvement.

Program Funding Detail

This designation will support a funding period of 10 months. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and depend on fund availability.

Past Performance

The Safe From the Start Evaluation methodology is a well-validated, quasi-experimental alternate treatments design involving matching the pre- and post- intervention assessment data of child and adult clients to measure reduction in parental stress and trauma symptoms. Direct service sites use the information gleaned from the assessment each year to document services, pursue additional funding, and to inform program development to improve services for children and their families.

The following articles have been published using the Safe From the Start data:

Risser, H., Schewe, P.A., et al., (2019). Utilization of evidence-based psychotherapy models at community-based mental health settings for young children exposed to violence. Manuscript submitted for publication.

Risser, H.J., Messinger, A., Fry, D., Davidson, L.L. & Schewe, P.A. (2013). Do maternal and paternal mental illness and substance abuse predict treatment outcomes for children exposed to violence? *Child Care in Practice*. 19(3), 221-236.

Schewe, P.A., Risser, H.J. & Messinger, A. (2013). Safe From the Start: Evaluating Interventions for Children Exposed to Violence, *Journal of Aggression, Maltreatment & Trauma*. 22(1), 67-86.

Risser, H.J. & Schewe, P.A. (2013). Engaging Families in Services: Promising Practices for Children and Caregivers Exposed to Violence, *Journal of Aggression, Maltreatment & Trauma*. 22(1), 87-108.

Kaufman, J.S., Ortega, S., Schewe, P.A., Kracke, K., & Safe Start Demonstration Project Communities. (2011). Characteristics of Young Children Exposed to Violence: The Safe Start Demonstration Project, *Journal of Interpersonal Violence*, 26(10), 2042-2072.

Schewe, P.A. (2008). Direct Service Recommendations for Children and Caregivers Exposed to Community and Domestic Violence. *Best Practices in Mental Health: An International Journal*, 4(1), 31-47.

¹ Listenbee, R. L., Jr., et al. 2012. Report of the Attorney General's National Task Force on Children Exposed to Violence. Washington, DC: U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention.

Staggs, S.L., Schewe, P., White, M., Davis, E., & Dill, E. (2007). Changing systems by changing individuals: The incubation approach to systems change. *American Journal of Community Psychology*, 39, 365-379.

Schewe, P.A. (2004). Interventions for children exposed to domestic violence. *The Community Psychologist*, 37(4), 31-34.

Schewe, P.A. (2004). Interventions for children exposed to domestic violence. *The Community Psychologist*, 37(4), 31-34.

Budget Detail

Personnel: Costs 1.0 FTE position for Principle Investigator/Research Analyst responsible for overseeing all aspects of the research design, data collection, analysis, and report writing, 0.5 FTE Research Analyst, and .0833 FTE Victim Studies Manager (Project Management).	\$95,831
Fringe: Costs are for approximately 1.5833 staffing	\$12,736
Supplies: Laptop and docking stations for staff use, assessments and shipping	\$3,863
Travel: Travel expenses for 3 site visits	\$70
Indirect Costs	\$12,500
Total:	\$125,000

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Violence Prevention Trauma Services - East St. Louis

Program Agency DUNS: 079926424

Funding Source: Trauma Recovery Services SFY21: \$800,000

Agency Budget: \$90 million

Request Type: State Appropriation

Program Description

One of the biggest gaps in service in East St. Louis, IL includes the lack of staff and support for students after school hours. Our district is still working on creating robust activities for all students besides sports, our mental health resources are overwhelmed, and our police department is understaffed. Many of our families are single-parent households with parents working multiple jobs to make ends meet causing youth to oftentimes return to homes with no adult supervision. In the 2019-2020 school year, we lost six students to gun violence. In the 2020-2021 school year, the year ended with four of our middle school students murdered. Besides gun and gang violence, our students are also often faced with suicide, bullying, homelessness, house fires, child abuse, human trafficking, domestic violence, sexual assaults, mental health crises, and car crashes. All of these traumas take a toll on students, families, and the community. Most of these traumatic events happen outside of the regular school day. Many of the offenders are teens and the recidivism rate in our community is high. Therefore, East St. Louis School District 189 is requesting funds to implement a Trauma Recovery Center for youth affected by violence in East St. Louis, IL.

East St. Louis School District 189 proposes to create a three-pronged Violence Prevention Trauma Services program to address violence and trauma in our East St. Louis Community by focusing on the students within it. We will lead a billboard campaign across the city using our student Peace Warriors--who are all trauma survivors; we will activate a mental health trauma team to respond to student crises during after school/weekend hours, and we will also support student survivors of trauma and their families with individual and family counseling and supports. Our program will serve students and families who have been involved with violence as a perpetrator or a victim: those who have prior justice system involvement, youth who are disconnected from school and work, and youth who are coping with trauma symptoms after witnessing or experiencing violence.

Program Activities

1. Our communications department will provide support in developing materials and conducting public awareness activities related to the school district and we will also subcontract services to create our own media presence. We will promote the proposed program through social media (Facebook, Twitter and Instagram), through brochures and fliers distributed throughout the community and by community partners, through direct communication with youth through District 189, Peace Warriors student group, and through the city's emergency services, the Coroner's office, and the juvenile detention center.

2. Potential participants for the response team services will be identified by the above means. Those students/families will receive emergency services as well as the offer to join our counseling program. Other potential participants will be identified by school staff and community partners of student/families who have experienced a traumatic experience within the last twelve months of the start of the program.

3. For all services (case management and therapy), our agency will utilize a robust data collection system. Data includes the referral source, demographic information, school information, risk and protective factors, assessment information, progress towards goals and objectives, and outcomes.

Goals

State the goal(s) the funding will achieve.

Prevention Goal: To implement a violence prevention strategy that focuses on youth population.
Objectives
Reach 26,000 residents through an awareness and marketing/social media campaign.
Trauma informed therapy will be provided to 50 students/families.
Emergency response services will be provided to 50 students/families.
The risk factors to be addressed: <ul style="list-style-type: none"> ● Exposure to a traumatic event. ● Students who have been involved with violence as a perpetrator or a victim. ● Students who have prior justice system involvement. ● Youth who are disconnected from school. ● Youth who are coping with trauma symptoms after witnessing or experiencing violence.

Prevention Goal: To provide training to staff.
Objectives
Training to be provided: <ul style="list-style-type: none"> ● 12 staff to receive Wraparound Training. Designed to provide managers the skills necessary to implement the Wraparound model. ● 7 staff to receive Emergency Response Training. ● 6 staff receiving trauma-focused cognitive behavioral therapy training.

Priorities

In 2012, ICJIA's enabling statute was expanded to include responsibilities related to violence prevention. These responsibilities include distributing grants to community and statewide organizations, other units of local and state government, and public school districts that address violence prevention in a comprehensive and collaborative manner.

Program Funding Detail

This designation would support 10 to 11 months of funding designated by the State of Illinois.

Past Performance

N/A

Budget Detail

	Total
Personnel Total FTE:	
1 FTE Coordinator @ \$65,000	
1 .25 FTE Intake Data Analyst @ \$32,000	
10 .25 FTE Clinicians/Case Managers @ \$10,000 ea (\$100,000)	\$327,000
5 .25 FTE Trauma Response Team Members @ \$18,000 (\$90,000)	
2 .25 FTE Youth Leader @ \$10,000 (\$20,000)	
1 .25 FTE Safety Officer @ \$20,000	
Fringe \$17,356 (IMRF 5.15% x \$337,000) Medicare, FICA, Medical, Dental, Vision, Life for 1 FTE Coordinator (\$114,116)	\$31,472
Equipment:	-
Supplies: Office supplies, street supplies, marketing supplies	\$20,000
Travel	-
Contractual \$342,000	
Youth Voice: Peace Warriors \$20,000	
Childcare Staff \$10,000	
Outreach: Advertisement Campaign \$82,000	\$342,000
Outreach: Crimestoppers \$200,000	
Training: Alive and Well Trauma Training \$10,000	
MST-FIT for incarcerated youth \$10,000	
Wraparound Training \$10,000	
Indirect / Other Costs (not to exceed 5.93%)	\$31,528
Totals Federal / State and Match:	\$752,000

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Violence Prevention and Reduction - City of Chicago / Chicago Department of Public Health

Program Agency DUNS: 956049399

Funding Source: Violence Prevention and Reduction SFY21; \$788,500

Agency Budget: \$221,938,636

Request Type: State Appropriation (Direct Line Item Appropriation)

Program Description

The Chicago Westside Street Outreach Initiative (WSOI) is a violence prevention effort designed to leverage evidence-based violence prevention interventions in three of Chicago's most dangerous and historically disenfranchised communities. The WSOI will engage community organizational partners who are best suited to engage, support, redirect, and nurture persons at the highest risk of involvement in dangerous and/or lethal violence.

Program Activities

The Chicago Department of Public Health (CDPH) Westside Street Outreach Initiative will provide Street Outreach focused supports to three community areas within Chicago: West Garfield, East Garfield, and Humboldt Park. CDPH will identify a community partner as a subrecipient. CDPH staff will serve as the program monitor with monthly contact with the program, oversight of all invoicing activities and direct involvement in community and partner progress and troubleshooting efforts along with staff from the Mayor's Office on Violence Reduction as needed to ensure program success.

The strategies in these communities would be street outreach, which is a key component of the city's overall violence reduction strategy. Street Outreach programs actively work in "the streets" to engage individuals who are at immediate and high risk of being either victims or perpetrators of violence. Street Outreach staff engage with these individuals in a variety of settings, including parks, homes, street corners, community centers, schools, hospitals, or any place these individuals frequent. Street Outreach staff are focused on building relationships with persons at high-risk so that they can promote peace by mediating potential and existing conflicts. The staff also serve as connectors to services and as a support to both the individuals and their families. Street Outreach efforts are typically conducted in the afternoons/evenings and late at night when violence is most prevalent. Some key street outreach activities include:

- Engage and support individuals and groups at high risk of violence
- Reclaim public spaces for safe activities for the entire community
- Respond to critical incidents such as shootings and homicides to de-escalate tension and rumor control
- Support victims and their families
- Conduct proactive peace building activities

- Mediate and resolve conflicts between street groups
- Make referrals for services and support

Chicago Street Outreach programs are incorporated in the police department notification system (CPIC) wherein partners are made aware of incidents. Additional daily calls managed by the MO staff will ensure the programs are responsive to calls for service and engagement of persons at high risk of involvement in violence. Persons who are known to be vulnerable include those who are recently incarcerated, recently injured by violence, recently survived the homicide of close family and friends, and persons seeking services.

Program partners will be required to have the administrative capacity to collect and store digitally, important information (individual and in aggregate) about incidents, staff activities, and participant characteristics, services rendered and outcomes and impacts. This data collection process will be informed by CDPH and the analytical partners to ensure that program and broader impact analysis goals are considered.

Community awareness of the program will be managed via passive engagement of routine marketing (distribution of materials) and active engagement of partners in communities via visits and presentations.

Specific Activities:

- Training: Planned training sessions will be provided to subgrantee program staff by content experts (in-person and remotely) as needed.
- Street Outreach: Street Outreach workers will respond to shootings and other violent acts in the identified neighborhood. Street Outreach workers will identify individuals and families who have experienced violence and/or who are at risk of committing violent acts and attempt to interrupt the cycle of violence through engagement with the individuals, families, and communities involved.
- Wraparound Services: Mental and behavioral health services will be referred or provided as needed to support individuals and families.

Goals

- To provide Street Outreach services to respond to incidences of violence in the identified neighborhoods of Chicago. Services will be provided to individuals and families who have experienced violence and/or who are at risk of committing violent acts to interrupt cycles of violence and engage them in prosocial supports such as housing services, job security, educational supports, etc, with the goal of reducing incidences of violence throughout the identified areas.
- To make available wraparound services, particularly in mental and behavioral health, to improve the quality of life of individuals at risk of committing violence and to stave off potential violent incidences and to support those who have experienced violence.

Prevention Goal: To interrupt cycles of violence in the Chicago neighborhoods of West Humboldt Park, East Garfield Park, and West Garfield Park* by engaging individuals and families that have experienced violence and/or are at risk of committing violence through Street Outreach and wraparound services.	
Objectives	Performance Measures
Crisis support and post-incident engagement services will be provided to 150 individuals (50 per community).	<ul style="list-style-type: none"> • Participant referral source (referral, outreach worker connection, etc.) • Participant interactions (number of solo and group meetings)

	<ul style="list-style-type: none"> • Number of mediations • Number of mediations by type • Canvassing numbers
Case management support services will be provided to 150 individuals (50 per community).	<ul style="list-style-type: none"> • Number of case management referrals • Number of case management referral by type • Number of case management referrals to each organization • Number of staff employed from community areas served • Trauma-informed training for staff
<p>Risk factors addressed</p> <ul style="list-style-type: none"> • Disconnection from school • Disconnection from employment • History of trauma • History of law enforcement involvement • Disruption in problem solving and self regulation • Family disruption • Housing instability • Unmet medical concerns 	8 risk factors addressed
<p>Protective factors addressed</p> <ul style="list-style-type: none"> • Connection to community caregivers • Willingness to pursue future goals with support • Conflict resolution and incident mitigation • Mental Wellness • Mentoring • Anger management 	6 protective factors addressed
<p>Outcome Objectives -- In the long term, this program will achieve the following and would look to measure:</p> <ul style="list-style-type: none"> • Decreases in participant justice system involvement • Decreases in participant victimization • Decreases in community violence levels • Increases in community perceptions of safety 	<p>Program partners will be required to participate in a data collection process informed by CDPH and the analytical partners to ensure that program and broader impact analysis goals are considered. Measures for outcome objectives are TBD.</p>

Prevention Goal: To provide training to staff.	
Objectives	Performance Measures
<p>Trainings held for program staff. Topics include:</p> <ul style="list-style-type: none"> - Street Outreach Principles of Practice - Kingian Nonviolence - Trauma Informed Practices - Restorative Practices with Youth - Restorative Practices with Adults and Community Leaders - Psychological First Aid - Mental Health First Aid 	<p>11 trainings will be held during the period of performance</p> <p>12 staff members will receive training (4 per anticipated site)</p>

<ul style="list-style-type: none"> - Community Safety and Crisis Management - Compassionate care for grieving families - Understanding Criminal Justice and Law Enforcement Practices - Crisis Intervention Training with Police 	
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Priorities

In 2012, ICJIA’s enabling statute was expanded to include responsibilities related to violence prevention. These responsibilities include distributing grants to community and statewide organizations, other units of local and state government, and public school districts that address violence prevention in a comprehensive and collaborative manner.

Program Funding Detail

This designation would support 12 months of funding, representing Year 1 of programming. Any future designation recommendations for this program will be pursuant to staff analysis of program performance and will depend on fund availability.

Past Performance

Not applicable. This is the first performance period for this program.

Budget Detail

	Total
Personnel	\$0
Fringe	\$0
Equipment	\$0
Supplies	\$0
Travel	\$0
Contractual (Subaward to community partner to administer Street Outreach and wraparound services in three neighborhoods of Chicago*)	\$741,190
Subgrant for services in West Humboldt Park	\$247,063
Subgrant for services in East Garfield Park	\$247,063
Subgrant for services in West Garfield Park	\$247,063
Indirect / Other Costs	\$0
Total Budgeted:	\$741,190

***NOTE: Funding for service provision in West Garfield Park is pending legislative action. We are requesting approval to designate funds for services in this neighborhood, but if this anticipated legislative change does not occur, the full amount of the award will instead be reprogrammed to services in just the two neighborhoods of West Humboldt Park and East Garfield Park.**

BUDGET COMMITTEE GRANT RECOMMENDATION REPORT

Program Name: Violence Prevention and Reduction - Touch By An Angel Community Enrichment Center, NFP

Program Agency DUNS: 081331754

Funding Source: Violence Prevention and Reduction SFY21; \$788,500

Agency Budget: \$1,090,500

Request Type: State Appropriation (Direct Line Item Appropriation)

Program Description

Touch By An Angel Community Enrichment Center (TBAA CEC) is a nonprofit organization dedicated to improving community health and well-being by building momentum among the youth of the community for effective primary prevention of violence. The violence prevention and reduction program of TBAA CEC is designed to address the problems of community and street violence in the Chicago community of Austin. TBAA CEC will focus efforts on youth most likely to be involved with violence as a perpetrator or a victim: those who have prior justice system involvement, youth who are disconnected from school and work, and youth who are coping with trauma symptoms after witnessing or experiencing violence.

Program Activities

TBAA CEC will pair intensive case management with Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). TF-CBT has exhibited the strongest research evidence for the effectiveness of the treatment of any comparable treatment model for this population. But clinical treatment alone cannot change the life trajectories of traumatized youth who may be disconnected from school and whose communities suffer from systemic issues. TBAA's program will work with youth and their family to stabilize the youth in school and address immediate family crises such as lack of stable housing, substance abuse or other basic human needs issues, including the problems that initially led the youth to criminal activity (for youth with prior justice system involvement) or that have the potential to lead youth to perpetrate or experience criminal activity and violence.

In addition to addressing risk factors of violence through TF-CBT, TBAA CEC's violence prevention and reduction program also attempts to increase protective factors experienced by its youth population. As such, the program will also connect the youth with community resources and engagement such as College 101 touring and Culinary Arts classes to improve the youths' relationships and communication with adults and peers, and to provide marketable skills, positive experiences, and a vision of future success. These activities will be paired with the counseling services mentioned above to help the youth improve coping skills and reduce symptoms of trauma as part of a comprehensive, holistic approach.

The youth participants of these programs will be identified in a number of different ways to ensure that youth in need of these programs have the opportunity to participate. TBAA CEC is in the process of developing referral relationships with schools, churches, and other nonprofit organizations in the area, and will be encouraging

these organizations to refer youth to the programs from which they may benefit. In addition, TBAA has planned an extensive media outreach program using radio advertisements, local newspaper advertisements, and social media marketing to ensure that the youth, their families, and other community leaders are aware of the opportunities provided by this program. This will increase the likelihood of self-referrals to the program, as well as informal referrals for youth that may not be well-identified through traditional referrals. Finally, our program uses Field Operators who will be active in the community to both recruit volunteers and to identify and refer potential participants.

Specific Activities:

- Touch By An Angel CEC has a College 101 & Touring program for youth ages 15-24. We have partnered with I Know I Can Educational Services to provide a youth-centered, holistic approach to work readiness and college exploration.
- Touch By An Angel CEC's program also utilizes natural, safe, and structured youth engagement activities such as team sports (basketball) and an urban gardening program to provide more opportunities for youth to recreate and interact in a comfortable, positive environment. TBAA will also provide occasional community recreation activities using mobile game trucks, bouncy houses, and other fun events to draw community youth together and foster positive relationships through shared recreation.
- TBAA also operates a Media Arts program to close the digital divide that our underserved youth experience on a daily basis. Youth and community members are taught a variety of subjects using our media and technology equipment to learn not only Media Arts but also useful skills such as interviewing, public speaking, resume building, and career pathway information in fields such as journalism and meteorology.
- Touch By An Angel has a culinary arts program in partnership with Colorful Cafe, LLC. The culinary arts program will support in the understanding of kitchen skills, and food & equipment identification.
- TBAA also has The Rise Youth Development Program. The Rise Program identifies promising young students who would otherwise be forced to drop out of school and gives them the tools to break the cycle of poverty and violence. In addition to providing academic scholarships, TBAA has partnered with The Westside Behavioral Health taskforce, and I Know I Can Educational Services to offer comprehensive support services and mentors, counselors, and psychologists, and engage students in workshops, community service, and visits to local businesses and universities that transform the way youth think about their futures.

Goals

State the goal(s) the funding will achieve.

- A primary goal of our College 101 program is to develop increased academic motivation in our youth.
- A goal of our culinary arts program is for youth to gain the understanding of team building, group leadership, general math & accounting skills, nutritional science and the importance of communication.

Prevention Goal: To implement a violence prevention strategy that focuses on youth population in the Chicago community of Austin.	
Objectives	Performance Measures
Trauma Informed Therapy and Case Management services will be provided.	An estimated 100 youth and their families will receive intensive trauma informed therapy and case management

<p>Rise Youth Development Program services will be provided?</p> <p>Extracurricular opportunities will be open to participants (Media Arts resources, Basketball, Urban Garden, Community youth engagement gatherings)</p>	<p>services. These services include individual & family therapy, support groups, Cognitive Behavioral Therapy and home visits.</p> <p>Approximately 100 youth will be served.</p> <p>Approximately 100 youth will be served.</p>
<p>College tours will be organized for youth participants.</p> <p>Culinary classes will be provided to youth participants.</p>	<p>12 college tours will be completed, with 15 participants per tour. Approximately 100 individuals provided with a tour of at least one college.</p> <p>12 sessions of culinary classes will be provided, with 15 students per class. Approximately 100 individuals provided with extracurricular culinary instruction.</p>
<p>Outcome Objectives:</p> <ul style="list-style-type: none"> • TBAA’s goal is to see a decline in youth disconnected from school, and youth more receptive to new suggestions and enriching ideas. • The objective of the culinary program is to have youth learn a variety of profession-specific and general business skills that includes: Culinary Foundation & Understanding, Group Leadership, Math & Accounting, Nutritional Science, and Communication. The primary goals for the youth: Respect their peers, Respect Space & Equipment, Respect Customers, & Respect Established Procedures and Methods. 	<p>60% of students more engaged in secondary education, and 50% interested in enrollment into post-secondary education institutes.</p> <p>50% of students more engaged in their secondary education, and 50% interested to enroll for this vocational trade.</p>
<p>4 (#) risk factors addressed</p> <ul style="list-style-type: none"> • Disconnection from school • Risk or presence of abuse & neglect • Lack of problem-solving skills • Maladaptive family relationships 	<p>75% of participants report decreased presence of risk factors (based on comparison of pre- and post-service questionnaires).</p>
<p>4 (#) protective factors addressed</p> <ul style="list-style-type: none"> • Development of resilient temperament • Positive social interactions/relationships with other youth and with adults • Conflict resolution skills 	<p>75% of participants report increased presence of protective factors (based on comparison of pre- and post-service questionnaires).</p>

<ul style="list-style-type: none"> • Anger management skills • Positive goals for future success • Development of constructive/marketable skills 	
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Prevention Goal: To provide training to staff.	
Objectives	Performance Measures
Staff trainings in relevant areas offered for program staff.	2 staff trainings held. 7 staff and contractors trained.

Priorities

In 2012, ICJIA’s enabling statute was expanded to include responsibilities related to violence prevention. These responsibilities include distributing grants to community and statewide organizations, other units of local and state government, and public school districts that address violence prevention in a comprehensive and collaborative manner.

Program Funding Detail

This designation would support 12 months of funding appropriated by the State of Illinois for violence prevention and reduction activities for fiscal year 2021.

Past Performance

Not applicable. This is the first performance period for this program.

Budget Detail

	Total
Personnel (Total FTE: 3.7)	\$221,579
Executive Director (70%)	\$91,000
Director of Youth Services (100%)	\$50,000
Program Associate (100%)	\$44,579
Administrative Assistant for Program (100%)	\$36,000
Fringe (FICA 7.65%)	\$16,951
Equipment	\$0
Supplies	\$18,150
Tablets for Media Arts program (15 @ \$400 ea)	\$6,000
Desktop computers for Media Arts program (3 @ \$700 ea)	\$2,100
Camcorders for Media Arts program (3 @ \$250 ea)	\$750
Podiums for Media Arts program (2 @ \$375 ea)	\$750
Camera tripods for Media Arts program (3 @ \$250 ea)	\$750
Microphones for Media Arts program (4 @ \$100 ea)	\$400

Green screens for Media Arts program (2 @ \$200 ea)	\$400
Basketball equipment (including hardware, netting, basketballs, bags)	\$2,000
Urban Garden maintenance equipment (soil, garden tools, gloves, kneeling pad)	\$2,000
Fence to surround program areas to promote safety and privacy for youth)	\$3,000
Travel (Staff travel for college tours – in-state; two round-trip visits to each of twelve colleges for three employees serving as adult supervision for the trips)	\$8,700
Contractual	\$475,810
Mental Health therapy community coordination and services (Subaward to Bobby E. Wright Comprehensive Behavioral Health Center)	\$200,000
Career Coaching, College Exploration, and Work Readiness Program (Subaward to I Know I Can Educational Services)	\$54,000
College Touring – Transportation for Youth Participants (Subcontract to Diamond Elite Transportation)	\$30,000
Culinary Program (Subaward to Colorful Café, LLC)	\$34,000
Mobile Fun Trucks and Bouncy Houses (Subcontract TBD)	\$21,600
Field Operators (Subcontracts/1099s to independent contractors with ties to and experience in the community to serve as outreach, referring, coordinating, and training representatives and to carry out the external-facing mission of the program. 5 Field Operators at \$20,000/yr each)	\$100,000
Marketing/Advertising (Local ads in print, radio, billboard, and social media to raise awareness of the program among potential participants and encourage self-referral or referral by community members)	\$36,272
Indirect / Other Costs	\$0
Total Budgeted:	\$741,190