

**OFFICE FOR VICTIMS OF CRIME  
DEVELOPING FUTURE VICTIM SPECIALISTS FOR  
AMERICAN INDIAN/ALASKA NATIVE VICTIMS OF CRIME  
PERFORMANCE MEASURES**

The following pages detail the questions and performance measures for the Office for Victims of Crime’s (OVC) Developing Future Victim Specialists for American Indian/Alaska Native (AI/AN) Victims of Crime grant program.

## GOAL AND OBJECTIVES

The primary goal of this project is to develop victim service professionals that will provide direct victim services to AI/AN victims in locations that are remote and where positions are hard to fill. This will be accomplished by engaging interested individuals, including college and university students, who are from, or live and attend school in, these areas.

Objectives include the following:

1. Establish and administer a structured program that links individuals interested in victim service careers to internship or residency opportunities with either Bureau of Indian Affairs (BIA) or Tribally-run victim services program. Applicants may include incentives for participants, including, but not limited to, a stipend, course credit, or priority consideration for future employment opportunities.
2. Provide supervision and training to participants in the program by experienced victim service professionals.
3. Establish baseline data for performance metrics and a data collection process to support an assessment of this initiative.

## Structure of the Questionnaire

This questionnaire is divided into five question banks plus grant activity. You must provide a response for each measure. Baseline questions gather information about activities that occurred prior to the grant becoming operational. They are asked of new grantees during the first reporting period only.

## Reporting Period

Grantees must enter this data directly in the Justice Grants system (JustGrants) on a semiannual basis. A table detailing the submission deadlines is below.

Semiannual Reporting in JustGrants		
Reporting Period	Submission Period	Deadline
January 1–June 30	July 1–30	July 30
July 1–December 31	January 1–30	January 30

If you have any questions about the performance measures, please email the OVC performance management Helpdesk at [ovcpmt@usdoj.gov](mailto:ovcpmt@usdoj.gov), or call toll free at 844–884–2503. If you have any questions about the JustGrants system, please visit <https://justicegrants.usdoj.gov> for resources or email [justgrants.support@usdoj.gov](mailto:justgrants.support@usdoj.gov).

## COMPANION MANUAL

### *How to report on baseline measures:*

Baseline questions gather information about activities that occurred prior to the grant becoming operational. These measures are denoted with the term “Baseline” preceding the question. All other questions should be answered based on activities conducted during the reporting period.

### **How to record the number of hours for a training:**

The number of hours for a training is the length of the curriculum that an intern attended. For example, if five interns attended an 8-hour training, the number of hours for that training is 8.

### **How to record multi-day training:**

If interns attend a multi-day training (e.g., a conference), each multi-day training should be recorded as one training. If an intern attends the full training, then the number of hours of training would be the length of the multi-day event. For example, a training that is 3 days at 8 hours per day would total 24 hours of training. If an intern only attends a portion of a multi-day event, the number of hours of training would be the length of time that the intern actually attended the training. Using the previous example, if an intern attended only 1 day of the 3-day training, then the number of hours would total 8 hours of training.

### **How to define a new individual:**

A new individual is someone who is receiving services from your organization for the first time.

## GRANT ACTIVITY

### **1. Is this the last reporting period during which the award will have data to report?**

*Instruction: For example, the award end date has passed, or no additional grant project activity will take place.*

- A. Yes
- B. No

### **2. Was there grant activity during the reporting period?**

*Instruction: Grant activity occurs when the grantee has obligated, expended, or drawn down grant funds to implement objectives proposed in the OVC-approved grant application. An answer of “yes” indicates that the program is operational and should remain so until the grant closes out.*

- A. Yes
- B. No (If No, please explain why there was no grant activity during the reporting period)

## TRAINING

### 1. Number of trainings that were conducted during the reporting period.

*Instruction: Please report the number of training opportunities that were conducted by the grantee organization for interns under this program.*

### 2. Select the types of training conducted by the grantee organization during the reporting period.

- Internship Roles and Responsibilities
- History or Overview of The Victim Assistance Field
- Impact of Historical Trauma or Root Causes of Violence
- The Role of the Victim Advocate or Specialist
- Program Administration
- Case Management and Documentation
- Data Collection and Management
- Laws and Legal Systems
- Victims' Rights
- Cultural Awareness and/or Sensitivity
- Ethics, Confidentiality and/or Privacy Concerns in Victim Services
- Self-Awareness Or Self-Care for Advocates
- Collaboration or Working with Partners
- Specialized Victimization Topics (E.G., Supporting Child Abuse, Domestic Violence, LGBTQ, Elder Abuse, Missing and Murdered Indigenous Persons, Etc.)

*If selected, please specify.*

- Other

*If Other, please specify.*

### 3. Number of participants who attended or completed training during the reporting period.

*Instruction: Please only report the number of **interns** under this program who attended training.*

### 4. Number of hours of internal training delivered to participants during the reporting period.

*Instruction: Please only report the number of hours of training delivered to **interns** under this program.*

### 5. Did any of the internal trainings offer a course completion credential, educational credit, or any type of related certification?

A. **Yes** (If Yes, please list the type of credential(s), credit(s), or certification(s) received)

B. **No** (If No, please skip to the next question)

### 6. Did program interns attend any external trainings during the reporting period?

*Instruction: External trainings refer to any training opportunities that were conducted by an organization other than the grantee or subgrantee organization. These may include live (whether in-person or online) or virtual training opportunities.*

A. **Yes** (If Yes, please list the number of external trainings that were attended during the reporting period)

B. **No** (If No, please skip to the question about feedback surveys)

**7. Select the types of external trainings that interns attended during the reporting period.**

- Internship Roles and Responsibilities
- History or Overview of The Victim Assistance Field
- Impact of Historical Trauma or Root Causes of Violence
- The Role of The Victim Advocate or Specialist
- Program Administration
- Case Management and Documentation
- Data Collection and Management
- Laws And Legal Systems
- Victims' Rights
- Cultural Awareness and/or Sensitivity
- Ethics, Confidentiality and/or Privacy Concerns in Victim Services
- Self-Awareness or Self-Care for Advocates
- Collaboration or Working with Partners
- Specialized Victimization Topics (e.g., Supporting Child Abuse, Domestic Violence, LGBTQ, Elder Abuse, Missing and Murdered Indigenous Persons, etc.)  
*If selected, please specify.*
- Other  
*If Other, please specify.*

**8. Number of interns who completed external trainings during the reporting period.**

*Instruction: Please only report the number of **interns** under this program who attended training.*

**9. Number of hours of external training delivered to interns during the reporting period.**

*Instruction: Please only report the number of hours of training delivered to **interns** under this program.*

**10. Did any of the external trainings offer a course completion credential, educational credit, or any type of related certification?**

- A. **Yes** (*If Yes, please list the type of credential(s), credit(s), or certification(s) received*)
- B. **No** (*If No, please skip to the next question*)

**11. Were feedback surveys distributed to, and collected from, interns at the end of trainings delivered?**

*Instruction: Please include feedback received from interns on both internal (conducted by the grantee or subgrantee organization) and external trainings. Please note, feedback on external trainings can be received informally from **intern** participants. You are **not** expected to get feedback directly from a survey that may have been administered by the organization that conducted the training.*

- A. **Yes**
- B. **No** (*If No, please skip to the next section*)

**12. Number of interns who completed a post-training feedback survey.**

**13. Number of interns who completed a post-training feedback survey who indicated overall satisfaction with the training.**

**14. Number of interns who completed a post-training feedback survey who identified an increase in knowledge up to 6 months post-training.**

*Instruction: Grantees may measure the increase in knowledge with the method of their choosing.*

15. Number of interns who completed a post-training feedback survey who indicated preparedness to implement the training topics or concepts post-training.
16. Number of interns who completed a post-training feedback survey who reported planning to implement training knowledge and objectives post-training.

## COLLABORATIVE PARTNERSHIPS

1. **Baseline: Number of groups/organizations/agencies participating in the initiative prior to grant funding.**
2. **Number of new groups/organizations/agencies participating in the initiative as a result of grant funding during the reporting period.**

*Instruction: Report any new partners whose involvement in the project or initiative is dependent upon grant funding (i.e., the partner would not be involved without grant funds). This includes organizations that received grant funds directly as well as organizations that are involved in the initiative through the support of grant funding but may not have directly received grant funds. "New" refers to the first time that a group/organization/agency participated in the initiative. This number should be an unduplicated count, regardless of the number of times they participated. For the first reporting period of your award, all groups/organizations/agencies participating in the initiative should be counted as new.*

3. **Total number of groups/organizations/agencies involved in the initiative during the reporting period?**

*Instruction: Report the total number of groups that are currently active and involved in the initiative. This includes organizations that may have been involved before the grant started, those that became involved due to grant funding, and those that became involved after the grant started but are not dependent on grant funds in any way.*

## STRATEGIC PLANNING

1. **Number of planning documents (e.g., logic models, internship program guidelines, standard operating procedures) that were completed during the reporting period.**
2. **Identify the planning documents that were completed during this reporting period.**

- **Mission and/or Vision Statement**
- **Advisory Board Charter**
- **Community Partnership Memoranda of Understanding or Memoranda of Agreement**
- **Internal Needs or Strengths Assessment**
- **Community Needs or Strengths Assessment**
- **Program Logic Model**
- **Action Plan**
- **Evaluation Plan**
- **Sustainability Plan**
- **Data Collection Plan**
- **Standard Operating Procedures**
- **Other**

*If Other, please describe.*



Working Group Partner		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Tribal Criminal Justice Agencies	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other State/Tribal Partner	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Federal Law Enforcement Agencies	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
U.S. Attorney's Office	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Federal Partner	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mental Health Care Providers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual Assault Nurse Examiners/Forensic Nurses	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance Abuse Treatment Providers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Health Care Providers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Foundations/Philanthropic/Faith-Based Organizations	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Training And Technical Assistance Providers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Private-Sector/Business Community Partner or Provider	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Researcher, Evaluator, or Statistical Analysis Center	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other Nonprofit or Specialized Expertise Partner	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## APPLICANT MEASURES

These program measures are specific to Developing Future Victim Specialists grantees.

1. Baseline: Length of internship program (in months).
2. Total number of applications received during the reporting period.
3. Number of applications from qualified applicants received during the reporting period.
4. Number of applicant interviews conducted during the reporting period.
5. Number of applicants accepted to or hired to the internship program during the reporting period.
6. Number of interns beginning the internship program during the reporting period.
7. Number of entrance interviews or surveys conducted during the reporting period.
8. Of the number of entrance interviews or surveys conducted, report the number of interns who indicated that they felt prepared or very prepared to serve in the victim services field.
9. Number of interns who completed the internship program during the reporting period.
10. Number of exit interviews or surveys conducted during the reporting period.
11. Of the number of exit interviews or surveys conducted, report the number of interns who indicated that they felt prepared or very prepared to serve in the victim services field.
12. Of the number of exit interviews or surveys conducted, report the number of interns who indicated that they plan to pursue a career in victim services upon completion of the internship program.

**13. Of the number of interns who indicated that they plan to pursue a career in victim services during their exit interview or survey, please report each of the following, as applicable—**

**Number of interns who plan to remain at their host site:**

**Number of interns who plan to move to a new organization: Number of interns who plan to pursue additional education:**

**Other:**

*If Other, please describe.*

**14. Number of victims served by all staff members at the internship host site locations.**

*Instruction: Please report the total number of victims served by staff members at all sites where interns worked. This number should be an unduplicated count of victims served.*

**15. Number of victims served by interns at the internship host site locations.**

*Instruction: Please report the total number of victims served by interns at all sites worked. This number should be an unduplicated count of victims served.*