

Crime Victim Section Survey

1.	Name of program, staff member re	esponding to questionnaire, and phone number	
2.	Date completed:		
3.	What city and county is the program	n located?	
4.	What is/are the primary victim population(s) served by the program?		
	(Please note that percentages should total 100%)		
	Child Abuse	Sexual Assault	
	Domestic Violence	Federal Crimes	
	Survivors of Homicide Victims	Elder Abuse	
	Intoxicated Drivers	Other Offenses of Violence	
	Which marginalized population(s) is/are also served by the program?		
	Disabilities	Immigrant/Refugee Populations	
	LGBT	Other:	



5.	What types of services does your program provide? (check all that apply)			
	Please see definitions for these terms on pages 7 and 8			
	24 Hour On Scene Response	Follow U	р	
	Therapy/Counseling	Group Tr	eatment/Su	ıpport
	Shelter/Safe House	Information and Referral (In Person) Emergency Financial Assistance		
	Criminal Justice Support/Advocacy			
	Emergency Legal Advocacy	Assistanc	e in Filing (Compensation Claim
	Personal Advocacy	Informati	on and Ref	erral (By Telephone)
	Replacement / Clothing	Transport	tation	
	Training for Other Service Providers	Crisis Into	ervention	
	Hospital Advocacy	Other:		
6.	What is the total public funding used specific year?	cally for crim	ne victims se	ervices in the curren
7.	Does your agency serve more than one coun	ty?	Yes	No
	If yes, please list:			
	Does your agency have an office physically lo	ocated in one	e or more o	f these counties?
			Yes	No
	If yes, please list:			



8.	Do other agencies/programs in your area provided by your agency?	provide similar s	ervices/fu Yes	nctions No	that are also
	If you answered 'No', please skip to	question 16			
9.	What specific services are similar? (check all that apply)				
	24 Hour On Scene Response	Follow Up			
	Therapy/Counseling	Group Trea	tment/Suj	pport	
	Shelter/Safe House	Information and Referral (In Person)			
	Criminal Justice Support/Advocacy	Emergency Financial Assistance			
	Emergency Legal Advocacy	Assistance in Filing Compensation Claims			
	Personal Advocacy	Information and Referral (By Telephone)			
	Replacement / Clothing	Transportat	ion		
	Training for Other Service Providers	Crisis Interv	vention		
	Hospital Advocacy	Other:			
10.	Please describe the nature/extent of the signal	milarity:			
11.	If counseling is the similar service (provided by the agency completing this questionnaire) what type of counseling is provided?				
	Crisis Hotline	Crisis Interv	ention		
	Individual Clinical Counseling	Other:			
	Is a licensed professional providing	this service?	Ye	S	No
	If yes, what type of license?				
	LSW	LPC			
	LISW	LPCC			

Other:



12.	If therapy/counseling is the similar service (provided by the agency completing this				
	questionnaire), is a licensed professiona	al providing this service?	Yes	No	
	If yes, what type of license?				
	Psychologist	Psychiatrist			
	LSW	LPC			
	LISW	LPCC			
	Other:				
13.	If group treatment/support is the similar service (provided by the agency completing this questionnaire), is a licensed professional providing this service? Yes No				
	If yes, what type of license?				
	LSW	LPC			
	LISW	LPCC			
	Other:				
14.	If criminal justice advocacy/support is the similar service, to which court(s) is this service provided by your agency/program?				
	Common Pleas Court	Municipal Court			
	County Court				



15.	Is there a Memorandum of Understanding (MOU) or other interagency agreement between both agencies that describes the level and frequency of services provided?		
	Yes	No	
	Please provide a brief	description of the agreement:	
16.	Are there any programs in the com- services to crime victims?	munity not funded by VOCA/SVAA that provide	
	Yes	No	
	If yes, what is the name of the agency?		
	What services are provided? (check	all that apply)	
	24 Hour On Scene Response	Follow Up	
	Therapy/Counseling	Group Treatment/Support	
	Shelter/Safe House	Information and Referral (In Person)	
	Criminal Justice Support/Advocacy	Emergency Financial Assistance	
	Emergency Legal Advocacy	Assistance in Filing Compensation Claims	
	Personal Advocacy	Information and Referral (By Telephone)	
	Replacement / Clothing	Transportation	
	Training for Other Service Provider	cs Crisis Intervention	
	Hospital Advocacy	Other:	



17.	Aside from funding, what are your agency's needs?
18.	What are the unmet needs of victims in your community? Please address any gaps in services as well as any services in the community that are not currently provided
19.	What barriers to service currently exist for victims in your community?



Definitions of Terms Used

- 24 Hour On Scene Response refers to in-person response to the scene of crime with police, or at a hospital or other location to provide crisis intervention and support services
- Follow Up refers to in-person contacts, telephone contacts, and written communications with victims to offer emotional support, provide empathetic listening, to check on a victim's progress, etc.
- Therapy refers to professional psychological and/or psychiatric treatment for individuals, couples, and family members arising from the occurrence of crime. This includes the evaluation of mental health needs, as well as the actual delivery of psychotherapy
- Counseling refers to in-person crisis intervention, emotional support, and guidance and counseling provided by advocates, counselors, mental health professionals, or peers. Such counseling may occur at the scene of the crime, immediately after a crime or be provided on an ongoing basis
- Group Treatment/Support refers to the coordination and provision of supportive group activities and includes self-help, peer, social support, etc.
- Shelter/Safe House refers to offering short and long-term housing and related support services to victims and families following victimization
- Information and Referral (In Person) refers to in-person contacts with victims during which time, services, and available support are identified
- Criminal Justice Support/Advocacy refers to support, assistance, and advocacy provided to victims at any stage of the criminal justice process, to include post-sentencing services and support
- Emergency Financial Assistance refers to cash outlays for transportation, food, clothing, emergency housing, etc.
- Emergency Legal Advocacy refers to filing temporary restraining orders, injunctions, and other
 protective orders, elder abuse petitions, and child abuse petitions but does not include criminal
 prosecution or the employment of attorneys for non-emergency purposes, such as custody disputes, civil suits, etc.



Definitions of Terms Used (cont.)

- Assistance in Filing Compensation Claims includes making the victim aware of the availability
 of crime victim compensation, assisting the victim in completing the required forms, gathering
 the needed documentation, etc. It also may include follow-up contact with the victim compensation agency on behalf of the victim
- Personal Advocacy refers to assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance, intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including worker's compensation, unemployment benefits, welfare, etc; accompanying the victim to the hospital; etc.
- Information and Referral (By Telephone) refers to contacts with victims during which time services and available support are identified. This does not include calls during which counseling is the primary function of the telephone call
- Replacement/Clothing refers to assisting victims with the purchase of security items lost or compromised during victimization, i.e., deadbolt locks, broken window repair, exterior door repair, porch/security light, etc. and to providing clothing as needed
- Crisis Intervention refers to response in person or by phone to provide immediate intervention to those experiencing a crisis reaction to criminal victimization, trigger events or other incidents requiring support and crisis services