| Grant Number | |
|--------------|------------------|
| | (State Use Only) |

NEBRASKA CRIME COMMISSION 2016 Victims of Crime Act (VOCA) & State Victim Assistance (SA) Grant Application

CONTINUATION PROGRAMS – YEAR 2

(Programs funded through VOCA in FY 2015 for 3 year period FY15-FY17) Review the following application carefully as significant changes have been made to the format.

Section I: Applicant Information

| 1. Application Name: (Agency/Organization) [The application must be the agency that will receive and disperse the grant funds] | Name: | City of Grand Island | Telephone: Fax: | (308) 385-5444 (308) 385-5486 | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------|--------------------|--------------------------------------|--|
| 2. Applicant Federal Employer ID #: [Must be the 9 digit number assigned to agency] | 47-600 | 6205 | | | |
| 3. Applicant DUNS#: | 040919 | 0607 | | | |
| 4. Address of Applicant: [PHYSICAL address of agency, Include last four digits of zip code] | P.O. Bo | ox 1968, Grand Island, Nebraska 6880 | 2-1968 | | |
| 5. Title of Project: | Grand 1 | Island/Hall County Victim Assistance | Program | | |
| 6. Project Director: [Receives all grant correspondence] | | Dean Elliott Captain | Telephone Fax: | : (308) 385-5400 (308) 385-5398 | |
| | | delliott@gipolice.org 111 Public Safety Drive Grand Island, NE 68801-8410 | | | |
| 7. Project Coordinator: [Additional Contact Person] | Name: Title: | Kerry Garza Coordinator | Telephone Fax: | : (308) 385-5409 (308) 385-5661 | |
| | Email: Address: | kgarza@gipolice.org 111 Public Safety Drive Grand Island, NE 68801-8410 | | | |
| 8. Fiscal Officer: [Cannot be the Project Director] | Name: Title: | Jessica Gracia Police Records Clerk | Telephone Fax: | (308) 385-5400 (308) 385-5398 | |
| | Email: jgracia@gipolice.org | | | | |
| | Address: | 111 Public Safety Drive Grand Island, NE 68801-8410 | | | |
| 9. Authorized Official: [NOTE: The authorized official would include county board chair, mayor, city administrator, state agency director, chair/vice-chair of non-profit agency] | Name: Title: | Jeremy Jensen Mayor | Telephone: Fax: | (308) 385-5444,140 (308) 385-5486 | |
| director, chain vice-chair of non-profit agency] | Email: Address: | MayorJensen@grand-island.com P.O. Box 1968 Grand Island, NE 68802-1968 | | | |

| Prior Year(s) VOCA Funding Summary | |
|-------------------------------------------------------|---------------------|
| 10. Previous 5 years NCC funding for this project (if | applicable) |
| Grant #11-VA-212 | Amount: \$46,110.00 |
| Grant #12-VA-213 | Amount: \$46,110.00 |
| Grant #13-VA-217 | Amount: \$46,110.00 |
| Grant #14-VA-220 | Amount: \$57,471.00 |
| Grant #15-VA-224 | Amount: \$94,474.00 |

| 11. Total amount of 2015 VOCA year 1 funds not spent at end of fiscal year ending 9/30/16, if applicable: | Amount: \$0 |
|-----------------------------------------------------------------------------------------------------------|-------------|
|-----------------------------------------------------------------------------------------------------------|-------------|

| 12. Describe barriers which prevented obligation of the entirety of FY 2015 funding, if applicable: | | | | | | | | |
|-----------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

BUDGET INCREASE REQUESTS

\$94,474

For consideration for funding increases, applicants must complete ONE of the following applicable sections (A OR B):

Section A: Continuation programs requesting additional funding within the 10% increase threshold: (Section to be utilized for requested increases 10% and under of the total amount awarded in the previous fiscal year. Complete chart and narrative section to justify requests. Specific details will need to be included in the applicable budget section(s) of application.)

Total Amount Awarded FY 2015 Total Amount Requested FY 2016 % increase

\$95,907

Section A Narrative:

1. Detail factors that were unforeseen in the development of the 3 year plan that resulted in the need for increased funding.

We anticipated slight increases this year and in future years due to victim advocate salary increases based on the City of Grand Island's 15-step pay plan.

1.5

2. For each funding increase request: a) identify the specific budget item(s); b) state the amount of the requested budget increase(s); and c) justify how funding increase is necessary for continuation and/or expansion of the program.

When we wrote the VOCA grant last year, we estimated the full-time advocate would be hired in January, so we asked for only 9 months of salary, \$21,902. Also when we wrote the 2015-2016 grant, we estimated her health insurance benefit at \$25,900 (requested \$12,560) based on the cost of traditional (low deductible) insurance for a family. Our full-time advocate elected to enroll in the high-deductible plan and is single. Her cost to the City for health insurance is thus much lower, \$5,179. Even though we are asking for \$28,800, a full year's salary, for her in the 2016-2017 grant, and \$10,416 in fringe benefits, the net request is only 1.5% over last year.

Section II: Budget Summary

Proposed Project Budget Year 2-3 VOCA Cycle FY15-FY17

Fiscal Year 2 budget (October 1, 2016-September 30, 2017) must match those in the application's request. Fiscal Year 3 (October 1, 2017-September 30, 2018) considered proposed amount that are subject to change. Each year will be considered a 12 month period unless otherwise indicated by the applicant.

| | Fiscal Year | 2 - 2016/2017 | Fiscal Year 3- 2017/2018 | | |
|--------------------------------|---------------------|---------------|--------------------------|-------------|--|
| Category | Requested Amount | Match Share | Proposed Amount | Match Share | |
| A. Personnel | \$95,907 | \$14,549 | \$97,000 | \$14,822 | |
| B. Consultants/Contracts | | | 3400 | | |
| C. Travel | | | | | |
| D. Supplies/Operating Expenses | | \$9,428.00 | | \$9,428.00 | |
| E. Equipment | | | | | |
| F. Other Costs | | | | 3,42,22 | |
| G. Indirect Costs | | | | | |
| TOTAL AMOUNT | \$95,907 | \$23,977 | \$97,000 | \$24,250 | |
| % Contribution | 80% | 20% | 80% | 20% | |

BUDGET SUMMARY-Year 2 (FY 2016)

| Category | Requested Amount | Match Share | Total Project Cost |
|--------------------------------|------------------|-------------|--------------------|
| A. Personnel | \$95,907 | \$14,549 | \$110,456 |
| B. Consultants/Contracts | \$ | \$ | \$ |
| C. Travel | \$ | \$ | \$ |
| D. Supplies/Operating Expenses | \$ | \$9,428 | \$ 9,428 |
| E. Equipment | \$ | \$ | \$ |
| F. Other Costs | \$ | \$ | \$ |
| G. Indirect Costs | \$ | \$ | \$ |
| TOTAL AMOUNT | \$95,907 | \$23,977 | \$119,884 |
| % Contribution | 80% | 20% | 100% |

CERTIFICATION:

I hereby certify the information in this application is accurate and as the Authorized Official for this project, hereby agree to comply with all provisions of the grant program and all other applicable state and federal laws.

[NOTE: The Authorized Official position may include the county board chair, mayor, city administrator, state agency director, chair/vice-chair of non-profit organization or any agent that has the legal authority to act on behalf of the organization]

Name of Authorized Official (type or print): Jeremy Jensen

Title: Mayor

Address: P.O. Box 1968

City, State, Zip+4: Grand Island, NE 68802-1968

Telephone: (308) 385-5444, Ext 140

Signature of Authorized Official:

Date: Tune 16 2016

Proposed Project Period (month/day/year): From 10/01/16 To 9/30/17

CATEGORY A - Complete all 3 tables for Category A (wages, fringe, and totals)

PERSONNEL (Wages/Salary)

Personnel- List each position by title/position. Note whether the position is New (N) or Existing (E) within the agency and whether the position is Full Time (FT) or Part Time (PT), the number of hours of personnel work week, and the percentage of time allocated to the project. Show the current annual salary rate and projected salary rate for the next fiscal year (10/1/16-9/30/17).

| Title/Position | N/E | FT/PT | # Hours per Week | % Time Allocated | Current Annual Salary FY2015 | Requested Annual Salary FY2016 | Salary Match | TOTAL COSTS (Requested Salary + Match) |
|---------------------|-----|-------|------------------------|---------------------------------------|---------------------------------------|-----------------------------------------|-----------------|-------------------------------------------------|
| Project Coordinator | E | FT | 40 | 100 | \$43,106 | \$46,171 | \$ 5,349 | \$51,520 |
| Victim Advocate | E | FT | 40 | 100 | \$29,203 | \$28,800 | \$ 3,000 | \$31,800 |
| | | | | | \$ | \$ | \$ | \$ |
| | | | | | \$ | \$ | \$ | \$ |
| | | | | | \$ | \$ | \$ | \$ |
| | | | | | \$ | \$ | \$ | \$ |
| | _ | | | | \$ | \$ | \$ | \$ |
| | | | | | \$ | \$ | \$ | \$ |
| | | | | · · · · · · · · · · · · · · · · · · · | \$ | \$ | \$ | \$ |
| | | | · · | | \$ | \$ | \$ | \$ |

| Total | Total | Total | |
|-----------|---------|----------|--|
| Salary | Salary | Salary | |
| Requested | Match | Costs | |
| \$74,971 | \$8,349 | \$83,320 | |

CATEGORY A: PERSONNEL (Wages/Salary) NARRATIVE:

Detail how salary is calculated (i.e. hourly rates multiplied by hours per year or annual salary) and identify sources of match funds. Include a description of the responsibilities and duties of each position in relationship to fulfilling the project goals and objectives. For existing positions, describe how this funding request complies with non-supplanting requirements.

The City of Grand Island has a 15-step pay plan for non-union employees based on merit. The existing position of **Coordinator** will receive a Step 15 salary of \$46,171.00. This is a full-time position based on 2080 hours per year with 100% of that time devoted to the project. The Coordinator's salary is currently 100% VOCA-funded and the amount of federal funds requested for that position is \$46,171.00. A list of duties includes: provide direct service to victims of crime; recruit, train, and supervise volunteers and full-time victim advocate; maintain proper records of all activities; promote public awareness of victim assistance services; coordinate grant management activities.

Our existing full-time <u>Victim Advocate</u> receives a Step 1 salary of the City's 15-step pay plan for 10 pay periods and a Step 2 salary for 16 pay periods, with 100% of that salary being VOCA-funded. The position is based on 2080 hours per year at the rate of \$13.60 x 10 and \$14.00 x 16, with 100% of that time devoted to the project. The advocate works Monday through Friday 1:00pm to 10:00pm, extending our business hours 5 hours per day. The advocate is trained to work with children as well as adults and provides direct service to victims of crime, maintains proper records of all activities, and promotes public awareness of victim assistance services. We are requesting federal funds for the advocate's salary in the amount of \$28,800.00 (\$13.60 x 80 hrs. x 10 pay periods + \$14.00 x 80 hrs. x 16 pay periods).

<u>Volunteers</u> for the program will provide conservatively 100 hours of service annually, assisting with victim advocacy and public awareness of victim assistance services. 100% of that time will be devoted to the project and will amount to a local match of \$1,500.00 (100 hours x \$15.00). Hall County Attorney's part-time Investigator will provide approximately 250 hours of service annually, assisting the Coordinator by locating victims and providing advocacy. 100% of that time will be devoted to the project and will amount to a Hall County match of \$6,285.00 (250 hours x \$25.14).

The existing position of <u>Project Director</u> will contribute approximately 2% of his time, equal to roughly \$1,870.00 (41.6 hours x \$44.96 per hour), to the project. The Director of the program will consult with the Coordinator regarding the program's activities. He will maintain weekly Coordinator contact, conduct a quarterly staffing, and prepare an annual written employee evaluation. Regarding direct victim service and specific cases, Director will continue to provide support, direction and guidance to Coordinator and victim advocate as needed.

The existing <u>Fiscal Officer</u> will devote 2% of her time, equal to \$678.00 (41.6 hours x \$16.30 per hour) to the project. The Officer will oversee the finances of the project.

Neither the Project Director's nor the Fiscal Officer's hours will be factored into the federal request or match portion of our grant.

Grand Island Police Department <u>Support Staff</u> will continue to provide 32 hours of service to the program. Support personnel and light-duty police officers will assist the program by answering the telephone, reviewing reports, setting up victim files, filing, inputting data and maintaining records. 100% of that time will be devoted to the project and will amount to \$564.00 (32 hours x average \$17.63 per hour) City match.

CATEGORY A – PERSONNEL (Fringe/Benefits)

| Title/Position | N/E | FT/PT | # Hours per Week | % Time Allocated | Requested Fringe | Fringe Match | TOTAL FRINGE |
|---------------------|-----|-------|------------------------|---------------------|---------------------|-----------------|-----------------|
| Project Coordinator | Е | FT | 40 | 100 | \$ 10,520 | \$5,000 | \$ 15,520 |
| Victim Advocate | E | FT | 40 | 100 | \$ 10,416 | \$1,200 | \$ 11,616 |
| | | | | | \$ | \$ | \$ |
| | | | | | \$ | \$ | \$ |
| | | | | | \$ | \$ | \$ |
| | | | | | \$ | \$ | \$ |
| | | | | | \$ | \$ | \$ |
| | | , | · | | \$ | \$ | \$ |
| | | | | | \$ | \$ | \$ |
| | : | | | | \$ | \$ | \$ |

| | Total Requested Fringe | Total Fringe Match | Total Fringe Costs |
|---|------------------------------|-----------------------|-----------------------|
| ĺ | \$ 20,936 | \$ 6,200 | \$ 27,136 |

CATEGORY A: PERSONNEL (Fringe/Benefits) NARRATIVE:

Include description regarding what is included in personnel fringe benefits, how the percentages are prorated for the position and sources of match funds. For existing positions, describe how this funding request complies with non-supplanting requirements.

The total fringe benefits for the Coordinator are estimated at \$15,520.00 and include the following: individual high deductible health insurance (\$5,179.00), individual dental insurance (\$347.00), individual Health Savings Account Employer Contribution (\$1,250.00), Social Security (\$2,863.00), Medicare (\$670.00), Pension (\$2,770.00), Bilingual Pay (\$1,500.00), Health Retirement Account (\$780.00), life insurance (\$78.00), and disability (\$83.00).

The total fringe benefits for the Victim Advocate are estimated at \$11,616.00 and include the following: individual high deductible health insurance (\$5,179.00), individual dental insurance (\$347.00), individual Health Savings Account Employer Contribution (\$1,250.00), Social Security (\$1,785.00), Medicare (\$417.00), Pension (\$1,727.00), Health Retirement Account (\$780.00), life insurance (\$78.00), and disability (\$53).

We are requesting federal funds for fringe benefits in the amount of \$20,936.00 (Coordinator \$10,520.00 + Victim Advocate \$10,416.00) and the remaining \$6,200.00 will be paid by the City of Grand Island as a local match.

CATEGORY A: PERSONNEL TOTAL

| TOTAL WAGES/SALARY | TOTAL WAGES/SALARY MATCH | TOTAL FRINGE | TOTAL FRINGE MATCH | TOTAL PERSONNEL COSTS |
|-----------------------|--------------------------------|--------------|-----------------------|-----------------------|
| \$74,971 | \$8,349 | \$20,936 | \$6,200 | \$110,456 |

CATEGORY D - SUPPLIES AND OPERATING EXPENSES

| Item | Quantity | Unit Price | Amount Requested | Applicant's Match | Total Cos |
|-------------------------|----------|------------|---------------------|----------------------|-----------|
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | | | \$ | \$ | \$ |
| | _ | | \$ | \$ | \$ |
| SUPPLIES EXPENSES TOTAL | | \$ | \$ | \$ | |

| | Rate (per month) | Amount Requested | Applicant's Match | Total Cost |
|---------------------------------------|---------------------|---------------------|-------------------|------------|
| Rent-Equipment | | \$ | \$ | \$ |
| Rent-Facilities | \$463.00 | \$ | \$5,558.00 | \$5,558.00 |
| Telephone | \$ 23.54 | \$ | \$ 282.00 | \$ 282.00 |
| Utilities | | \$ | \$ | \$ |
| Auto Lease | | \$ | \$ | \$ |
| Photo Copying | | \$ | \$ | \$ |
| Printing | | \$ | \$ | \$ |
| Non-Consultant Contracted Services | | \$ | \$ | \$ |
| Bookkeeping/Audit* | | \$ | \$ | \$ |
| Other: Computer User Fees Coordinator | \$149.50 | \$ | \$1,794.00 | \$1,794.00 |
| Other: Computer User Fees Coordinator | \$149.50 | \$ | \$1,794.00 | \$1,794.00 |
| OPERATING EXPENSES TOTAL | | \$ | \$9,428.00 | \$9,428.00 |
| SUPPLIES AND OPERATING EXPEN | ISES TOTAL | <u> </u> | \$9,428.00 | \$9,428.00 |

^{*}Cost of audit is only allowable if agency is required to complete an A-133. Cost must be prorated to all funding sources

SUPPLIES AND OPERATING EXPENSES NARRATIVE:

Include description regarding how the supplies/operating expense request will meet the objectives of the project. Identify sources of match funds. If supplies and operating expenses costs were previously funded through another source, describe how this funding request complies with non-supplanting requirements

No federal funds are being requested for supplies, nor are they included in our match.

No federal funds are being requested for operating expenses, but they will be included in the match portion of our grant.

The Victim Assistance Program office is located in Grand Island's Law Enforcement Center. The City provides this space as an in-kind match. The 306 square foot office, with a secure entrance, provides a private area where we can meet with victims and their families and is appraised at a fair market value of \$14 per square foot, as is the adjoining 91 square foot office. Utilities, 3 cubicles with computers, custodial services, and receptionists are included with the facility. Monthly rent is figured at \$463.00 per month, or \$5,558.00 annually. Telephone service, also provided by the City, is estimated at \$11.77 per user per month x 2 users, or \$282.00 annually, and is included in the match portion of our grant.

The County operates a Spillman software criminal justice program. Included on the system of shared data are the Hall County Sheriff, Hall County Attorney, Hall County Corrections, Hall County Court, and the Grand Island Police Department. The user fee for this system, including Internet, email, and support service is approximately \$149.50 per month, or \$1,794.00 per year, and will be provided for 2 users as a local match of \$3,588.00 (\$1,794.00 x 2).

The City Of Grand Island has made a vehicle available to the Victim Assistance Program staff and volunteers. Grand Island Police Department training funds have been and will be used to send the Program Coordinator and/or Victim Advocate to the annual Crime Victims' Rights Week Conference in Omaha and to other relevant trainings. However, neither expense is figured into the grant.

Total supplies and operating expenses budget is \$9,428.00 provided by Hall County and the City of Grand Island as a local match (\$5,558 rent + \$282 telephone + \$3,588 computer user fees).

Section III: Sustainability, Goals, and Performance Measures

Agency Budget and Funding Sources:

Agency budget should include all sources of funding to support all victim services provided by the program. Add lines as necessary under each category of funding source

| Total Agency Victim Services Budget FY 2015 (Oct. 2015-Sept. 2016) | | |
|--------------------------------------------------------------------|-----------------|--|
| Funding Source | Amount Received | |
| VOCA | \$94,474.00 | |
| OTHER FEDERAL (list below) | | |
| STATE (list below) | | |
| LOCAL (list below) | | |
| OTHER (list below) | | |
| | | |

 Does the agency expect any significant decreases and/or increases from prior year's funding sources (Oct 2015-Sept. 2016) for fiscal year 2016 (Oct 2016-Sept. 2017)? If yes, note funding source and reasons for the expected change. No, the agency does not expect any significant decreases and/or increases from 2015-2016 funding sources.

Activities / Timetables (Limit 2 pages)

Add rows as needed.

Major Activities: Identify any major activities that will be occurring over the course of the project. These
types of activities may be infrequent however; they are essential to the VOCA funded project's success.

| | MAJOR ACTIVITIES | POSITION RESPONSIBLE |
|------|------------------|----------------------|
| None | | |
| | | |
| | | |

Reoccurring Activities: List those activities that will occur throughout the duration of the project. These
activities should focus on the VOCA funded project and task that are allowable under the VOCA grant
program.

| REOCCURRING ACTIVITIES | POSITION RESPONSIBLE | |
|-------------------------------------------------------------------------|------------------------------|--|
| Assist with filing compensation claims | Coordinator, Advocate, | |
| | Volunteers | |
| Provide direct services to crime victims by phone, e-mail, or in person | Coordinator, Advocate, | |
| | Volunteers | |
| Prioritize need for service to Hispanic and elderly victims of crime | Coordinator, Advocate, | |
| | Volunteers | |
| Distribute Surveys | Coordinator, Advocate, | |
| | Volunteers | |
| Conduct Community Presentations on Victim Assistance Program | Coordinator, Advocate, | |
| | Volunteers | |
| Attend Annual Victims' Rights Conference | Coordinator and/or Advocate | |
| Recruit, train, utilize volunteers | Coordinator | |
| Prepare VOCA grant | Coordinator, Fiscal Officer, | |
| | Project Director | |
| Prepare quarterly reports in a timely manner | Coordinator, Fiscal Officer, | |
| | Project Director | |

Continuation Information (Limit 3 pages)

1. Describe the most recent (past year/12 months) funded grant project's accomplishments and milestones.

Retained 1 active volunteer

Updated program brochures and website

Hired and trained new full-time advocate

Expanded business hours to 10:00 p.m. Monday-Friday

Received 2 new computers with VOCA funds

Resolved victim database issues

Continued to provide comprehensive services to crime victims in Hall County

Continued to provide bilingual services to Spanish-speaking victims

Continued to provide services to significant numbers of underserved populations

Developed and distributed victim surveys as a best practice for program evaluation and determination of consumer satisfaction

Increased public awareness of services by distributing brochures and conducting presentations

Continued to coordinate service with community agencies

Continued to meet or exceed goal objectives

Continued to attend LB 1184 Investigative Team Meetings and LB 1184 Treatment Team Meetings

Continued to attend Coordinated Community Response Meetings

Continued to assist with training of new officers for Nebraska Law Enforcement Training Center by doing sexual assault and domestic violence role plays and panel discussions

2. List the results of the project's measurable outcomes achieved.

Our goal last year was that crime victim safety be increased in Hall County. In order to best achieve that goal, we retained two previous years' objectives, both of which at the 6-month mark are on target to exceed our projections. The addition of our full-time advocate didn't occur until the end of the 2nd quarter but has markedly increased our 3rd quarter numbers thus far. One objective was to increase the number of crime victims receiving needed services within the 12-months grant period. In the first two quarters, we served: 1135 victims, 1040 unduplicated (2679 goal), 108 elderly (232 goal), 312 Hispanics (786 goal), and 222 children (395 goal). Another objective was to maintain overall public awareness of victim services by distributing 680 brochures and conducting 4 community presentations. We have distributed 350 brochures and conducted 2 presentations. Our third objective, to increase the number of crime victims receiving advocacy within the 12-month period, although not new did include new performance measures, the number of victims receiving VINE/VINELINK assistance and receiving safety planning assistance. We have provided personal advocacy to 304 victims (590 goal) and criminal justice support/advocacy to 1242 victims (2026 goal). At the 6-month mark 311 victims have received VINE/VINELINK assistance and 64 victims have received safety planning assistance in person. Our fourth objective, also new in the 2015-16 grant year, was to distribute surveys to victims in order to measure the effectiveness of our services. We discuss that in more detail in the next section.

 Describe how the agency is ensuring services are victim centered and evidence based. (i.e. evaluation of client satisfaction, research/tools utilized to ensure practices are based on strong empirical evidence of success, etc.) Following contact with the Victim Assistance Program, victims were asked to give simple yes or no answers to 3 questions: 1) Do you know what resources and help are available and how to access those resources, 2) Do you know more or different strategies for safety than you did before, and 3) Do you have a better understanding of how the justice process works? At the 6-month mark of the grant, we found that we didn't get as many surveys distributed, so we began surveying clients verbally and increased our numbers during this 3rd quarter. Of the 170+ surveyed, 110 responded (65%). Of those who responded, 79 stated said they know more about community resources, 71 said they know more ways to plan for their safety, and 77 said they have a better understanding of the criminal justice process. Verbally, several of those who responded with a "no" told us they already knew about resources and the criminal justice process, and they did not receive assistance with specific detailed safety plans.

We are learning as we go, but are already discussing ways to allow for comments without making the survey too burdensome. We are also looking at ways to encourage more victims to accept our help with safety planning.

4. Explain problems, barriers or challenges during the previously funded grant project. Discuss how these were addressed and the end results.

The majority of our problems are typically routine in nature and related to victims' individual cases as is par for the course with victim advocacy. In these instances we network very closely with our partner agencies and utilize community resources.

Our ongoing struggle has been maintaining volunteers/volunteer hours and, thus, numbers of victims served. This last grant year, we retained I volunteer, a retired deputy county attorney. We hired one of our other active volunteers as our new full-time advocate. Our third volunteer moved to another city. We did recruit another volunteer who stayed only two weeks. There is a lot of time that goes into training and supervising volunteers, and we get behind in other duties, so we are disappointed when they don't stay. Another major issue for us for several years was our insufficient and outdated database. Over this last year, we worked with a company to modify and improve the VCMS (Victim Case Management System). Although there is still room for improvement, we're grateful to be using the program again and to be generating complete and correct statistical reports.

Over the last few years, we began to identify a subset of child victims falling thru the gaps in services. Our CAC was serving child victims and their families only if the child was interviewed in their facility, leaving numerous child victims of abuse, neglect, threats, theft, and harassment who were receiving minimal or no services. Our new full-time advocate, who also works with adults, is now working with those child victims. Because she works 1:00-10:00 pm, children are visiting our office after school and at the end of parents' work days. A few clients have come to our office in the evening to make reports while being accompanied by our full-time advocate. A few clients have come in after hours to fill out protection orders. Numerous are already accustomed to calling and emailing in the evenings.

5. Clearly state how continuation funding is vital to the ongoing success of the program.

The VOCA grant pays the salary and a majority of the benefits of the Grand Island/Hall County Victim Assistance Program's Coordinator, who is a full-time bilingual advocate, and the new full-time advocate. The City of Grand Island and Hall County are committed partners to this project and provide the match for VOCA funding. They've seen especially difficult budgets over the last few years, however, and were forced to cut positions and impose furloughs and wage freezes. While the most recent budget includes the Victim Assistance Program and balances current expenditures with current revenues in a manner that seems sustainable, the future remains uncertain. It is reasonable to assume the City and County would jointly fund a victim/witness unit, but without VOCA funding it is possible the program would experience a reduction in service hours, services provided and, thus, in the number of victims served.

Goals, Objectives & Performance Indicators

For each outcome listed clearly state objectives and performance measures to demonstrate the project's progress towards achieving the stated outcome. Copy the form for each separate outcome.

| Outcomes, Objectives & Performance Mea | sures | |
|---------------------------------------------------------------------------------------------------------------|-----------------|---------------------|
| Outcome: Crime Victim Safety Will Be Increased In Hall County. | | |
| Objective #1: Increase Number of Crime Victims Receiving Needed Service | es Within 12 Mo | onth Period. |
| Performance Measures: | Baseline | Projected |
| | Statistics | Results |
| Number of victims served within 12 months | 2679 | 2706 |
| Number of elderly victims served within 12 months | 232 | 235 |
| Number of Hispanic victims served within 12 months | 786 | 794 |
| Number of children served within 12 months | 375 | 380 |
| Objective #2: Maintain Overall Public Awareness of Program and Services Conducting 4 Community Presentations. | by Distributing | 680 Brochures and |
| Performance Measures: | Baseline | Projected |
| | Statistics | Results |
| Number of brochures distributed | 680 | 680 |
| Number of presentations conducted | 4 | 4 |
| Objective #3: Increase Number of Crime Victims Receiving Advocacy Wit | hin 12 Month P | eriod. |
| Performance Measures: | Baseline | Projected |
| | Statistics | Results |
| Number of crime victims who received personal advocacy | 590 | 596 |
| Number of crime victims who received criminal justice support/advocacy | 2526 | 2551 |
| Number of crime victims referred to or registered for VINE/VINELINK | 500 | 505 |
| Number of crime victims assisted with safety planning | 500 | 505 |
| Objective #4: Increase number of crime victims reporting improvement Program services. | as a result o | f Victim Assistance |
| Performance Measures: | Baseline | Projected |
| | Statistics | Results |
| Number of surveys distributed within 12 months | 500 | 525 |
| Number of surveys completed within 12 months | 200 | 210 |
| Number of crime victims who said they know more about community resources | 200 | 210 |
| Number of crime victims who said they know more ways to plan for their safety | 100 | 105 |
| Number of crime victims who said they have a better understanding of how the justice process works | 100 | 105 |

Complete required forms (Certified Assurances; Certifications Regarding Lobbying, Debarment, & Drug Free Workplace; Applicant Disclosure of Pending Applications) with appropriate signatures in the grant application.

CERTIFIED ASSURANCES

- 1. The applicant assures that federal or state grant funds made available under the Victims of Crime Act (VOCA) and state victim assistance funds will not be used to supplant existing funds, but will be used to enhance or expand direct services to victims of crime.
- 2. The applicant assures that fund accounting, auditing, monitoring, and such evaluation procedures as may be necessary to keep such records as the Nebraska Commission on Law Enforcement and Criminal Justice (Crime Commission) shall prescribe will be provided to assure fiscal control, proper management, and efficient disbursement of funds received under the victim assistance grant program.
- 3. The applicant assures that it shall maintain such data and information and submit such reports, in such form, at such times, and containing such information as the Crime Commission may require.
- 4. The applicant certifies that the program contained in its application will meet requirements as stated in the Victim Assistance Grant Application Kit; that all information presented is correct; that there has been and will be throughout the life of the grant, appropriate coordination with affected agencies; and, that the applicant will comply with all provisions of the Victims of Crime Act and all other applicable federal and state laws.
- 5. The applicant assures that it will comply and all of its contractors will comply, with the non-discrimination requirements of the Victims of Crime Act; Title VI of the Civil Rights Act of 1964; Section 504 of the Rehabilitation Act of 1973 as amended; Title IX of the Education Amendments of 1972; the Age Discrimination Act of 1975; and the Department of Justice Non-Discrimination Regulations 28 CFR Part 42, Subparts C, D, E, and G and, Executive Order 11246, as amended by Executive Order 11375, and their implementing regulations.
- 6. The applicant assures that programs will maintain information on victim services provided by race, national origin, sex, age, and handicap.
- 7. The applicant assures that in the event a federal or state court, or federal or state administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin or sex against a recipient of funds, the recipient will forward a copy of the finding to the Crime Commission and the Office of Civil Rights Compliance (OCRC) of the Office of Justice Programs.
- 8. The applicant assures that, if required, it will formulate an equal employment opportunity program (EEOP) in accordance with 28 CFR 42.301 et. seq., and submit a certification to the state that it has a current EEOP on file which meets the requirements therein.
- 9. The applicant assures that it will comply and contractors will comply, with the provisions of the Office of Justice Programs "Financial and Administrative Guide for Grants," M 7100.01.
- 10. Pursuant to the Office of Management and Budget (OMB) Circular A-133, non-Federal entities expending \$500,000 or more a year from all federal sources shall have a single organization-wide audit conducted in accordance with the provisions of OMB Circular A-133. Non-federal entities that expend less than \$500,000 a year in Federal dollars from all sources are exempt from Federal audit requirements for that year. However, financial records must be maintained in an acceptable accounting system and be available for review or audit by appropriate officials of Federal, state or local agencies.

- 11. Confidentially of Research I rmation. No recipient of monies under e Victims of Crime Act shall use or reveal any research or statistical information furnished under this program by any person and identifiable to any specific private person for any purpose other than the purpose for which such information was obtained in accordance with the Act.
- 12. Confidentiality of Victim Information At no time shall a victim's name, address, phone number or other identifying information be divulged to another individual or agency unless they are a part of the criminal justice system or Health and Human Services system unless the victim has given prior voluntary written consent for such release of information.
- 13. The applicant agrees to submit all required reports in a timely manner.
- 14. The applicant agrees not to utilize federal or state victim assistance funds for crime prevention, community education, services to perpetrators, conference attendance by individual crime victims, lobbying, victim relocation or services to witnesses other than the victim.
- 15. The applicant agrees to establish and maintain a Drug Free Workplace Policy.
- 16. The applicant will comply, and all its contractors will comply with the Equal Treatment for Faith Based Organizations Title 28 C.F.R. part 38.

CERTIFICATION

I certify that I have read and reviewed the above assurances, that the applicant will comply with all provisions of the Victims of Crime Act and all other applicable federal and state laws, and, that the applicant will implement the project as written, if approved by the Crime Commission.

| (SIGNATURE OF AUTHORIZED OFFICIAL) | June 16, 2016 |
|------------------------------------------------------|---------------|
| (SIGNATURE OF AUTHORIZED OFFICIAL) | (DATE) |
| City of Grand Island, P.O. Box 1968, Grand Island, I | NE 68802-1968 |
| (ADDRESS) | |
| Jeremy Jensen | Mayor |
| (TYPED NAME) | (TITLE) |
| 308-385-5444, Ext. 140 | |
| (TELEPHONE NUMBER) | |

CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTER; AND DRUG-FREE WORPLACE REQUIREMENTS

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying" and 28 CFR Part 67, "Government-wide Debarment and Suspension and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered transaction, grant, or cooperative agreement.

1. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

- (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement:
- (b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities," in accordance with its instructions;
- (c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

2. DEBARTMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 28 CFR Part 67, for prospective participants in primary covered transaction, as defined at 28 CFR Part 67. Section 67.510-

- A. The applicant certifies that it and its principals:
- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State of Federal court, or voluntarily excluded from covered transactions by any Federal department of agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State or local) terminated for cause or default; and
- B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIUALS)

The applicant certifies that it will or will continue to provide a drug-free workplace by:

- A. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition:
- B. Establishing an on-going drug-free awareness program to inform employees about—
- (a) The dangers of drug abuse in the workplace;
- (b) The grantee's policy of maintaining a drug-free workplace;
- (c) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (d) The penalties that may be imposed upon employees for drug abuse violation occurring in the workplace;
- C. Notifying the employee in the statement that the employee will:
- (a) Abide by the terms of the statement; and
- (b) Notify the employer in writing of his or her conviction of a criminal drug statute occurring in the workplace no later than five calendar days after such convictions;

The subgrantee shall notify the Crime Commission in writing of any conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.

The subgrantee certifies that it will take one or more of the following actions within 30 calendar days of receiving notice of the conviction:

- A. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- B. Requiring such employee to participate satisfactorily in a drug abuse assistance of rehabilitation program approved for such purpose by a Federal, State or local health, law enforcement, or other appropriate agency;

The subgrantee certifies that it will make a good faith effort to continue to maintain a drug-free workplace.

Organization Name and Address:

City of Grand Island

P.O. Box 1968

Grand Island, NE 68802-1968

Typed Name and Title of Authorized Official Jeremy Jensen, Mayor

Signature Long

June 16, 2016

pplicant Disclosure of Pending Appl. ions:

Applicants are to disclose whether they have pending applications for federally and or state funded grants that include requests for funding to support the same project being proposed under this solicitation and will cover the identical cost items outlined in the budget in the application under this solicitation. Please mark none if you have no pending applications.

| Federal or State Funding Agency | Solicitation Name / Project Name | Name/Phone/E-mail for Point of Contact at Funding Agency |
|---------------------------------|-------------------------------------|-------------------------------------------------------------|
| None | None | None |
| | | |
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Attachments:

Applicants are to attach the following items, if applicable:

Volunteer Job Descriptions (Required for all new programs. Updates from Continuation programs as needed)

Letters of Support (Recommended submission of 5 letters for all applicants)

Memorandums of Understanding (Required for all programs if supporting the funding request)

Indirect Cost Rate verification letter (Required for use of federally negotiated rates)

Non-Profit Status Verification (e.g. 501(c)(3) letter, if applicable to agency)

Match Waiver Request (If applicable)