

## FY2011 PERFORMANCE PLAN Office of Victim Services

#### **MISSION**

The mission of the Office of Victim Services (OVS) is to ensure that all individuals who are victimized by violent crime have access to and obtain quality services offered by skilled providers at District and community agencies.

#### SUMMARY OF SERVICES

OVS administers federal and District grants to agencies and organizations that offer services to crime victims, including crisis intervention, counseling, case management, outreach, education, and housing; advises the Executive Office of the Mayor on policy and legislation relevant to crime victims; and provides leadership in the development and implementation of new victim-related initiatives and programs.

#### AGENCY WORKLOAD MEASURES

| Measure  | FY2008<br>Actual | FY 2009<br>Actual | FY 2010<br>YTD |
|--|------------------|-------------------|----------------|
| # of Sexual Assault<br>Forensic Examinations<br>performed                      | Baseline         | 232               | 160            |
| % of domestic violence<br>victims identified as high<br>risk for lethality     | Baseline         | NA                | 20%            |
| % of OVS staff time spent<br>on program management<br>and technical assistance | Baseline         | 25%               | 40%            |

OBJECTIVE 1: Create and sustain a coordinated community response to all victims of violent crime that is sensitive, respectful, age appropriate and culturally competent.

#### **INITIATIVE 1.1: Engaging Youth Exposed to Violence.**

OVS-funded community based programs respond to youth victims of violence to engage them on healthy living practices while addressing the impact of violence on their personal well being. In FY 2011, OVS youth programs will expand to include retreats; neighborhood programs; and an interactive web-based resource. Youth experiencing trauma as a result of victimization will be linked to school based mental health programs. Outcomes: • Age appropriate outreach to promote healthy living and address victimization • Effective and timely intervention.

# INITIATIVE 1.2: Sexual Assault Forensic Examinations (SAFE): Drug Facilitated Sexual Assault.

OVS funds and provides oversight for the Sexual Assault Nurse Examiner (SANE) Program, which is anchored at Washington Hospital Center and includes



all hospitals in the District where a SAFE exam is likely to be conducted. Drug facilitated sexual assault (DFSA) and incapacitated sexual assault (ISA) cases in the District that present for the SAFE exam are increasing. The availability of testing for DFSA and ISA in conjunction with the SAFE exam is a critically important component for a coordinated sexual assault response to be effective, comprehensive and victim focused. All reporting and non reporting victims who present for the SAFE and disclose that they were incapacitated at the time of the assault are offered the test. Clear protocols have been implemented that ensure that SANEs are able to sensitively screen for DFSA/ISA and specimens are correctly preserved and transported to labs while maintaining chain of custody. Results are transmitted in a timely manner to the SAFE program to provide feedback to the victim and to law enforcement (if desired by patient) for evidence. In FY 2011, OVS will contract with the Office of the Chief Medical Examiner to conduct toxicology screening for DFSA and ISA. Outcomes: • Coordinated, sensitive, expeditious evaluation of and care for victims of sexual assault • Increased capacity for evidence collection for the investigation and prosecution of cases.

OBJECTIVE 2: Maintain respectful, articulate, and productive relationships with all partnering agencies and organizations to improve services to crime victims.

### **INITIATIVE 2.1: High Risk Domestic Violence Initiative (HRDVI).**

A significant number of victims of domestic violence in the District are assessing high for lethality and are in danger of losing their lives at the hands of their abusers. Often victims lack means to alter their personal circumstances in ways that will increase their safety. Little can be done to reduce lethality without a coordinated effort by District agencies, domestic violence service providers and federal criminal justice stakeholders to respond to the victim's immediate case management needs and to quickly address the threat that the abuser poses. In FY 2010, OVS oversaw the creation of a High Risk Domestic Violence Initiative (HRDVI) case management response team comprised of six District agencies and one not for profit organization. The HRDVI seeks to enhance victim safety through a comprehensive, cross-agency response to the service needs of victims and their children; and to reduce abuser access to victims and their children through prompt information sharing among criminal justice stakeholders. The HRDVI protocol is currently implemented in high risk areas of PSAs 5, 6, and 7. These areas account for 25% of all 911 calls for domestic violence in the District. In FY 2011, OVS will support the expansion of the HRDVI to other areas of the city and oversee the implementation of a HRDVI crisis information management system that will enhance the sharing of vital confidential victim information between participating agencies. Outcomes: • Coordinated response protocols for victims of domestic violence assessed high for lethality • Real time information sharing to streamline the response. • OVS facilitated training of first responding law enforcement officers and frontline advocates.



## PROPOSED KEY PERFORMANCE INDICATORS

| Measure   | FY2009<br>Actual | FY2010<br>Target | FY2010<br>YTD    | FY2011<br>Projection | FY2012<br>Projection | FY2013<br>Projection |
|---|------------------|------------------|------------------|----------------------|----------------------|----------------------|
| # of youth in<br>participating in<br>outreach activities <sup>1</sup>   | 513              | 650              | 698              | 900                  | 1100                 | 1200                 |
| # of youth expressing<br>satisfaction with their<br>experience of the<br>outreach programs  | Not<br>Available | Not<br>Available | Not<br>Available | 65%                  | 70%                  | 75%                  |
| % of sexual assault victims receiving the DFSA/ISA toxicology screen as part of the SAFE exam.                                    | 0                | Not<br>Available | Not<br>Available | 20%                  | 20%                  | 20%                  |
| % of SAFE cases<br>receiving post<br>exposure HIV<br>prophylaxis  | 33%              | 40%              | 67%              | 55%                  | 55%                  | 55%                  |
| Number of victims<br>served at the<br>Lighthouse<br>(cumulative)  | 2472             | 3800             | 4984             | 5200                 | 5400                 | 5600                 |
| % of subgrantee's budget spent on programmatic costs <sup>2</sup>   | Not<br>Available | Not<br>Available | Not<br>Available | 65%                  | 65%                  | 65%                  |
| % of scheduled<br>monitoring reports as<br>defined in agency<br>monitoring plan<br>completed for each<br>grant award <sup>3</sup> | Not<br>Available | Not<br>Available | Not<br>Available | 100%                 | 100%                 | 100%                 |

<sup>&</sup>lt;sup>1</sup> Youth participated in 12 youth clubs in FY 2009 and 26 youth clubs in FY 2010.

<sup>&</sup>lt;sup>2</sup> The Wise Giving Alliance of the Better Business Bureau identifies 65% to be an industry standard for this measure http://www.bbb.org/us/Charity-Standards/. This metric measures all subgrantees' programmatic costs as a percentage of their overall costs.

<sup>3</sup> Pursuant to 11.4 of the Grants Manual and Source Book all District agencies must complete monitoring reports.

All District agencies should be in compliance with this standard. The standard is 100%.