

Commonwealth of Virginia Virginia Department of Criminal Justice Services

VOCA Victim Services Grant Program (VSGP): QUARTERLY NARRATIVE REPORT

Grant Number:	20-a3463vp18		
Program Name:	Family Crisis Support Services, Inc.		
Name of Person Completing Report:	Melissa Bowman		
Contact Information (phone & email):	on (276) 679-7240 melissa.bowman@family-crisis.org		
Reporting Period:	Fiscal Year 2020		
	 Quarter 1 (July 1 – September 30) Quarter 3 (January 1 – March 31) 	 Quarter 2 (October 1 – December 31) Quarter 4 (April 1 – June 30) 	
Brief Project Description:	Providing services to survivors of sexual assaul	t and domestic violence.	

INFORMATION & INSTRUCTIONS:

- This form seeks narrative information about your Victim Services Grant Program (VSGP) project during the preceding quarter.
- This form is to be completed and uploaded to the Virginia Department of Criminal Justice Services (DCJS) Grants Management Information System (GMIS).

This form is to be completed <u>in addition to</u> data submitted directly to the federal Performance Measurement Tool (PMT). A copy of your PMT data should also be uploaded to DCJS GMIS.

- Complete this form for the quarterly reporting period marked above.
- Report only on VSGP-funded services and activities.

QUARTERLY NARRATIVE QUESTIONS

1. On an annual basis, the PMT will require that grantees provide the number of requests for services that were unmet during the year, along with a brief explanation. If available, quarterly and year-to-date data can be reported below.

Number of requests for services that were unmet because of organizational capacity issues:

Number during reporting period	0
Fiscal year-to-date total number	0

Please explain:

2. Does your organization formally survey clients for feedback on services received?

\square	Voc
	res

No (proceed to Question 4)

3. On an annual basis, the PMT will request that grantees provide the number of surveys <u>distributed</u> and the number of surveys <u>completed</u>. If available, quarterly and year-to-date data can be reported below.

Number of surveys **distributed** (includes, but is not limited to, those distributed by hand, mail, or electronic methods):

Number during reporting period	30
Fiscal year-to-date total number	

Number of surveys completed:

Number during reporting period	13
Fiscal year-to-date total number	

4. Discuss some of the challenges or changes to your program faced during the course of the reporting period.

During this reporting period our domestic violence and sexual assault shelter remained consistently full. This is the busiest we have seen the shelter in at least 19 years. This became a challenge for staff due to this being a new trend. We sheltered several survivors from outside of our serving area and at times outside of our State. Thankfully, we never had to turn survivors away when they called. At times survivors had to share a room with more than one person but everyone always had a bed and space for their belongings. At times this caused tension among shelter residents and small arguments and disputes over small issues would happen. Staff worked closely with shelter residents providing one on one counseling/support, problem solving, and conflict resolution. Staff increased house meetings to offer mediation and group counseling/support.

5. Provide one brief case study that illustrates and describes the services provided with VSGP funding. Do not use victim names or include any other identifying information.

A young woman and her 2 small children moved to Wise County from another state to flee her abusive relationship of several years. The 2 small children had been exposed to the abuse and the oldest who is 5 years old was struggling with behavior and emotions in school. The survivor and her children moved in with her father here in wise county and her father became verbally abusive to her and the children. FCSS, Inc. first began workign with this survivor in court. FCSS, Inc. assisted her with court accompaniment, systems advocacy, legal information and referrals. FCSS, Inc. assisted with custody issues as well as safety concerns for her ex partner and her father.

The survivor and her 2 small children came to the FCSS, Inc. shelter where they resided for 1 month. While in the shelter, the survivor and her chldren received services such as crisis/supportive counseling, support group, child care referrals, housing referrals and employment information. FCSS, Inc. provided information and referral on the Family Preservation Services that is a project based in the schools for students needing supportive services. FCSS, Inc. provided her with transportation to job interviews and obtaining full time

employment. FCSS, Inc. also assisted the client with obtaining daycare close to her work. FCSS, Inc. referred the client to the FCSS,Inc. homeless rapid rehousing program where they were able to pay for her deposits and first months rent. Advocates assisted the client with the paperwork and provided systems Advocacy with other agency staff. The client was able to find affordable housing close to her work as well.

6. Describe any emerging issues or notable trends affecting crime victim services in your service area.

We continue to see affects of the opiod crisis here in our service area. Both perpetrators and survivors are suffering from addiction and this is effecting their relationship as well as relationships with their children. We have seen an increase in survivors coming into shelter who have lost custody of their children due to addiction. We work with survivors in outreach and shelter who request information and support regarding their addictions daily. We provide systems advocacy and referral to resources. We also provide transportation to appointments and group meetings as well as parenting classes and meetings offered by local mental heatth. We work closely with DSS and survivors to meet requirements and visits with their children.

7. If the program assisted victims of federally investigated or prosecuted crimes, please provide the number of **federal crime victims** below.

Number during reporting period	0
Fiscal year-to-date total number	0