



Commonwealth of Virginia
Virginia Department of Criminal Justice Services
VOCA Victim Services Grant Program (VSGP):
QUARTERLY NARRATIVE REPORT

Grant Number: 20-A4722VP18

Program Name: Crime Survivor Mental Health Support

Name of Person

Completing Report: Bruce Cruser

Contact Information

(phone & email): 804 257-5591 ext. 102 bruce.cruser@mhav.org

Reporting Period: Fiscal Year 2020

Quarter 1 (July 1 – September 30)

Quarter 2 (October 1 – December 31)

Quarter 3 (January 1 – March 31)

Quarter 4 (April 1 – June 30)

Brief Project

Description: Peer recovery support to crime victims in recovery from mental health trauma.

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 in addition to 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:

Project just starting up

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

Yes No (*proceed to Question 4*)

3. On an annual basis, the PMT will request that grantees provide the number of surveys distributed and the number of surveys completed. 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	0
Fiscal year-to-date total number	0

Number of surveys **completed**:

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

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

The program was just initiated during this period, with the main focus on filling the personnel position, planning details for implementation and beginning the outreach and education about the service to be offered.

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.**

N/A at this point.

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

There appears to be more awareness of the impact of trauma.

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	
Fiscal year-to-date total number	