



# 12 – Victim and Witness Services Questionnaire

(Single Award of \$25,000 or more)

**Recipient:**

**Award Number:**

**Reporting Period:**

**Completed By:**

**Date:**

## INSTRUCTIONS

The following pages outline the performance achievements for recipients of a single award of \$25,000 or more under the **JAG Victim and Witness Services Program Area**. The data collected from this form is used by OCJG members to report performance data BJA’s Performance Management Tool (PMT) system, as required by the state’s federal JAG award.

**FAILURE TO SUBMIT THE APPROPRIATE PERFORMANCE QUESTIONNAIRE(S) BY YOUR AGENCY’S REPORTING DEADLINE WILL RESULT IN THE WITHHOLDING OF FUNDS ON YOUR AWARD.**

Please contact the Office of Criminal Justice Grants at (850) 617-1250 for any questions pertaining to this report.

## PROGRAMS

1. Please complete the following table with the percentage of your program’s funding that comes from each funding source. Estimate the percentages, rounded to the nearest whole number, based on your program’s budget for the fiscal year.

**Calculation:** To calculate the amount for “This JAG award,” take the amount of this JAG award’s funding going toward the program, and divide it by the total amount of funding for the program. For example, if your program has a budget of \$50,000 for the year and \$15,000 of that comes from this JAG award, “This JAG award” equals 15,000/50,000, or 30 percent.

To calculate the amount for “All other sources,” divide the remaining funds by the total budget. In the above example, this would be 35,000/50,000, or 70 percent.

Funding Source	Percent of overall program funding
This JAG award	%
All other sources	%
<b>Total</b>	%

2. What is the name of this program/service?
3. What was the initiation year of this program/service, regardless of when it received JAG funding?



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4. Are you or a partner conducting an evaluation of this program?  
If Yes, please describe the purpose of the evaluation, current status of the evaluation (e.g., planning stage, completed), who is conducting the evaluation (e.g., internal research staff, external research partner), and evaluation results if applicable.
5. Did the program receive any assistance from a BJA-funded training and technical assistance (TTA) provider during the reporting period? A list of TTA providers can be found at <https://www.bjatrain.org>.  
If Yes, please provide the name of the TTA provider:  
If Yes, how satisfied were you with the services provided:
6. How many employees did your office have on staff as of the last day of the reporting period? Please count both full- and part-time employees. JAG-funded employees are those who receive any portion of their salary/pay from JAG funds, regardless of the amount.

Total Number of Staff	Total Number of JAG-Funded Staff
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7. During the reporting period, did your program have any partnerships with outside entities, groups, organizations, or programs? If no, skip to question 9.
8. How would you rate the following partners based on this statement: “This partner is actively involved in the program.” (Please rate your partners on a scale: N/A, 1-Strongly Disagree, 2-Disagree, 3-Neutral; 4-Agree, or 5-Strongly Agree.)
- State leadership (e.g., governor’s office)
  - Tribal leadership
  - Local leadership (e.g., mayor’s office)
  - Federal law enforcement agencies
  - State law enforcement agencies
  - Local law enforcement agencies
  - Victim services
  - Pretrial service organizations
  - U.S. Attorney’s Office
  - Prosecution



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Public defense  
Courts  
Community corrections (probation/parole)  
Corrections  
Health care providers  
Mental health care providers  
Substance use disorder treatment providers  
Child protective services  
Community-based service providers (e.g., housing, employment)  
Community groups (e.g., neighborhood watch, community center)  
Lived experience mentors  
Faith-based organizations  
Subject-matter experts  
Foundations/philanthropic organizations  
Researcher, evaluator, or statistical analysis center  
Training and technical assistance providers  
Tribal criminal justice agencies  
Businesses  
K-12 schools  
Public services (e.g., trash collection, public works)  
Other (describe):

9. Please describe the group of victims/witnesses the program serves, regardless of JAG funding (e.g., juveniles, adults, domestic violence, victims of violent crime, all victims).

10. Does your office focus on providing services to any of the following underserved groups, regardless of JAG funding? Check all that apply.

Non-English or limited English-proficient victims/witnesses

Ethnic/religious minority victims/witnesses

Youth exposed to violence victims/witnesses

LGBTQI victims/witnesses

Victims/witnesses with mobility or cognitive disabilities



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- Deaf and hard-of-hearing victims/witnesses
- Homeless victims/witnesses
- Runaway youth victims/witnesses
- Victims/witnesses of financial fraud/identity theft
- Victims/witnesses of hate crimes
- Victims/witnesses on tribal lands
- Victims/witnesses of human trafficking
- Victims/witnesses of mass violence or disasters
- Victims/witnesses of cybercrime (e.g., bullying, stalking, but excluding financial fraud/identity theft)
- Victims/witnesses in remote or not easily accessible geographic locations
- None of the above
- Other (describe):

11. How often did you provide each of the following services during the reporting period, regardless of JAG funding?

- Assistance in obtaining restitution
- Counseling (either group or one-on-one)
- Trauma-informed care
- Crisis intervention
- Emergency shelter/food
- Emotional/moral support
- Financial/in-kind support
- Employment services
- Housing/shelter advocacy
- Insurance claim assistance
- Legal assistance/case support
- Medical assistance
- Safety planning
- Transportation
- Witness protection



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Victim-offender dialogue meetings

Administration of a victim-assessment tool

Public outreach (e.g., billboards, newsletters, social media, brochures)

Other services (describe):

12. How often did your program/service conduct the following activities during the reporting period?

Tracked activity, progress, or performance using a database or spreadsheet

Conducted analysis to better understand a problem or program progress or to inform decision making in regard to your program/service

Other (describe):

13. For the following metrics tracked quarterly, please indicate if they increased, stayed the same, or decreased during the reporting period as compared with the previous 3-month quarter. Please only provide responses for measures that are tracked as part of this program. If a measure is not tracked, please select "N/A".

Violent Crime

Targeted Crime (e.g., drug crime, prostitution, violent crimes)

Recurring victimization

Number of participants who received direct services

Client satisfaction with services

Other (describe):

14. Do you use JAG funds to pay for a forensic examiner? (e.g., sexual assault nurse examiner)

If Yes, how many people received a forensic examination as part of your program during the reporting period?



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15. Please fill out the following table with the number of people who requested and/or received victim/witness services during the reporting period, regardless of JAG funding.

Measure	Number of cases
Number of people who requested services from your office during the reporting period	
Number of people who were provided services by your office during the reporting period	
Number of people who received referrals to other programs/organizations for additional services during the reporting period	



**This completes your “Over \$25K” questionnaire reporting requirements. Please ensure you have also completed the JAG General Performance Questionnaire.**