

Automated Victims' Information Database (AVID)

Victim Services User's Guide

2014



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Overview

The Montana Board of Crime Control (MBCC) created the Automated Victims' Information Database (AVID) to meet federal reporting requirements for the STOP Violence Against Women (VAWA) Act, the Sexual Assault Services Program (SASP), and the Victims of Crime (VOCA) Act formula grants. Additionally, programs receiving MBCC Misdemeanor Probation – Domestic Violence (MP) state grant funds must use AVID to track statistical data. MBCC also collaborated with the Department of Health and Human Services (DPHHS) Child and Family Services Division (CFSD) to ensure the database allows users to enter information required for the Family Violence Prevention and Services (FVPSA) Act grant.

The database is intended for subgrantees of MBCC and CFSD to report information required by the federal government. When feasible, additional fields have been included to assist programs in collecting information that will assist with local grant management and planning. The database is not intended to serve as a case management system.

AVID is a web-based database that allows for real-time entry of services provided to victims, types of victimization, and limited demographic information on victims and offenders. Additionally, local law enforcement agencies, courts, prosecutors, probation and parole, and batterer's intervention programs can utilize AVID to track federally required information about offenders.

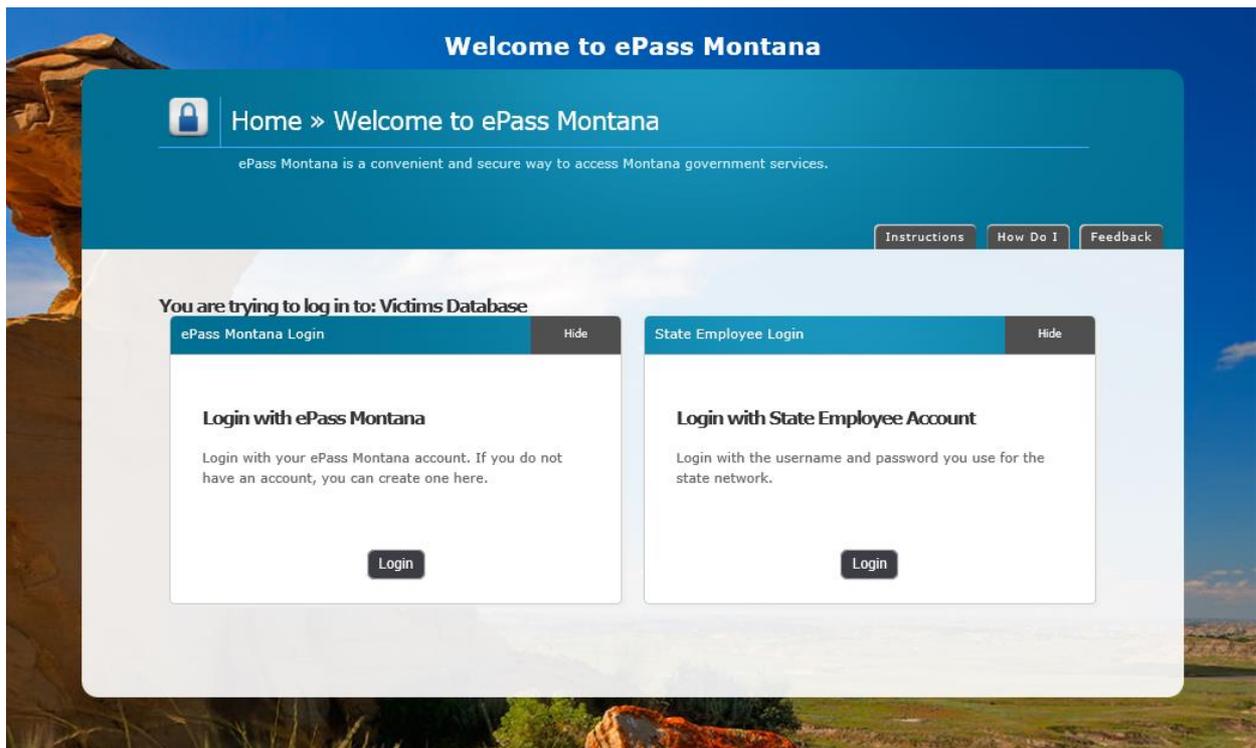
Unlike the previous data collection system, users are encouraged to enter information on a daily basis, when feasible. Since this is a real-time system, as soon as the information is saved, it will be available for reports. At a minimum, programs are required to have all information entered by the end of the quarter and available for MBCC staff no later than January 5, April 5, July 5, and October 5.

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ePass Account Setup

Open your web browser and go to: <https://app.mt.gov/epass/Authn/selectIDP.html>

The following screen will appear:



ePass Montana

First time users need to create an ePass account prior to accessing AVID. ePass is a state of Montana web service. The Montana Board of Crime Control has no control over this service. Usernames and passwords are not available so it is important that users keep track of these. If a user forgets his/her username or password, a new ePass account must be created.

Click on the "Create an ePass account" link below the "New Customer" heading and the following screen will appear:

Home » Create ePass Montana Account

ePass Montana provides access to all authorized eGovernment services using one username and password.

[Instructions](#) [How Do I](#) [Feedback](#)

Important - About your username and password: Username must be at least 6 characters long, password must be at least 8 characters long, password must use both letters and numbers, password must be different than your username, password is case sensitive.

[Cancel](#) [Save Changes](#)

Personal Information

*First Name:

*Last Name:

Daytime Phone:

*Primary Email:

*Verify Primary Email:

Alternate Email:

ePass Montana ID Details

*Username:

*Password:

*Verify Password:

*Password Hint:

Security Info

For your protection, these questions will help us verify your identity in the future.

*1. Security Question:

*2. Security Question:

*3. Security Question:

Registered User Information

If you have a Registered User account, please provide your Registered User login information. What is a Registered User account?

Registered User Login:

Registered User Password:

[Cancel](#) [Save Changes](#)

Create an ePass Account

Fields with an “*” indicate required fields. Users must enter their first name and last name under the “Personal Information”. Under the “Contact Information”, the phone and email fields are optional.

Users will create a username, password, and password hint to complete the account creation process. Usernames must be at least six (6) characters long. Passwords must be at least eight (8) characters long, contain both letters and numbers, and be different than the username. Passwords are case sensitive. Be sure to keep the username and password in a secure location. MBCC does not have access to the username and/or password. If users lose or forget the username and/or password, a new account will have to be created.

After entering all information, click the “Continue” button. The following screen will appear:



AVID Welcome

Click on the “Victims Database” link to add the service to your ePass account. Users will be taken to the following screen:



ePass Verification

An email providing a link to the system (including the authorization token) will be sent to the user's email account. The Authorization Token can be entered into the ePass Verification screen, or the user can click on the link in the email to access the system. **This Authorization Token should not be shared with others; it is unique to the user.**

The email will contain the following message:

You have been authorized to access the Montana Board of Crime Control Victim's Database system. To complete the authorization process, you must click this link.

<http://app.mt.gov/cgi-bin/avid/sso.cgi?TOKEN=>

If you have trouble with this link, you may also enter your Authorization Token manually:

In order to access the system, you will be asked to log in to ePass or create a new ePass account.

Thank you for using Victim's Database.

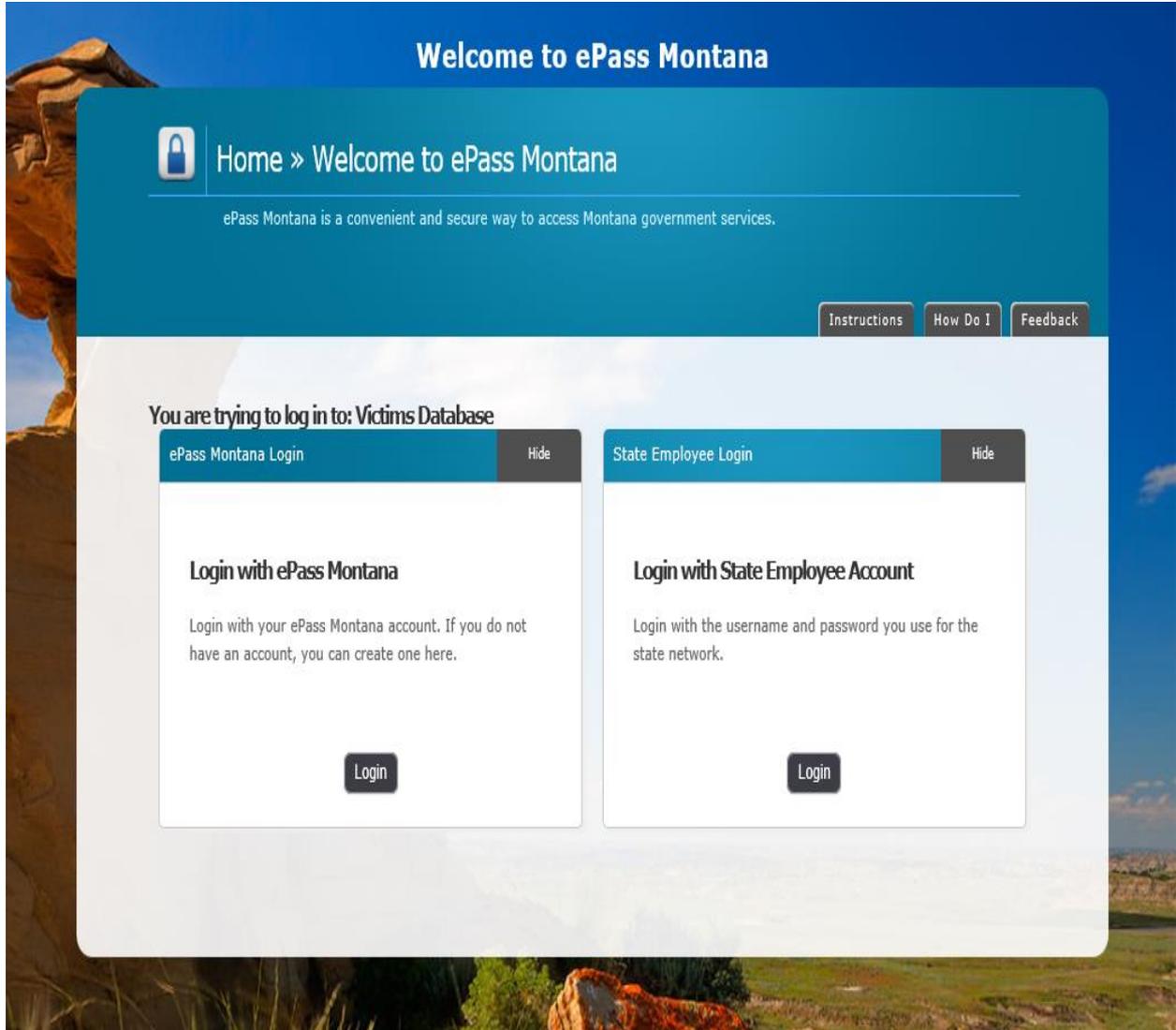
This message has been sent from the Conference Registration Automated Email Information System. Please do not reply.

This completes the ePass Account creation. All future access to the system should be completed by entering the username and password under the "Existing Customer" section.

AVID Login

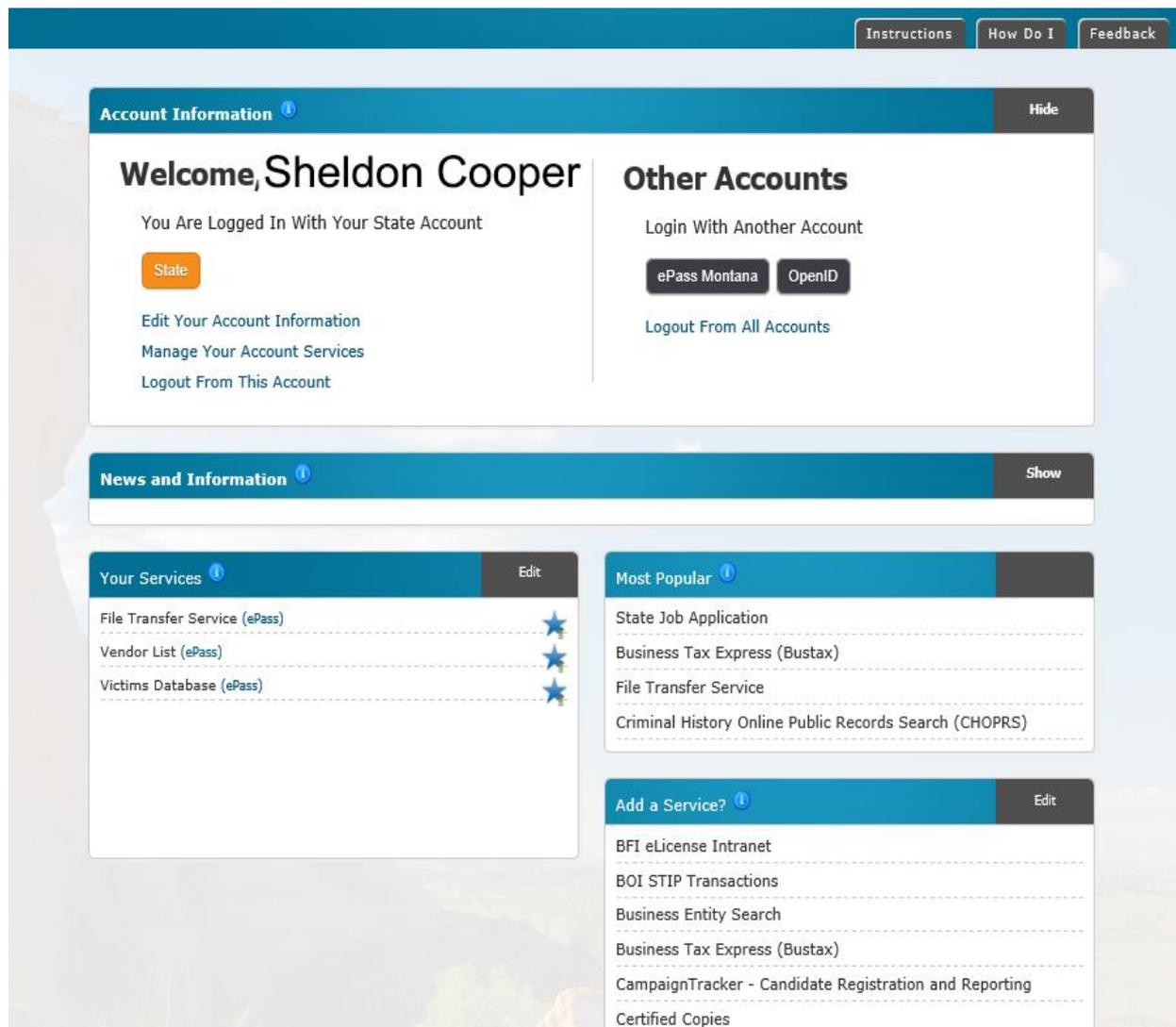
Open your web browser and go to: <https://app.mt.gov/epass/Authn/selectIDP.html>

The following screen will appear:



Existing Customer Login

Enter the Username and Password that was created when the ePass Account was setup. Then click on the "Login" button. This completes the login process. Users will be taken to the Main Menu.



ePass Services

Click on the "Victims Database" link; users will be taken to the Main Menu of AVID.

Program Administration

MBCC is responsible for adding programs to the AVID database. Once a program has been added, MBCC will enter the Project Director as an "Administrative" user. Administrators will have access to all functions for that program. These functions include: add/edit employee/volunteer; entering employee/volunteer hours; entering employee/volunteer trainings attended and/or conducted; reports; crisis line; and data entry. Each area is described in further detail below.

Log in to AVID and the Main Menu will appear:

Victim's Database

Main Menu

You are logged in as **Sheldon Cooper** [Not you?](#)

Admin/Menu Pages

[Program Administration and Reporting](#)

Data Entry Pages

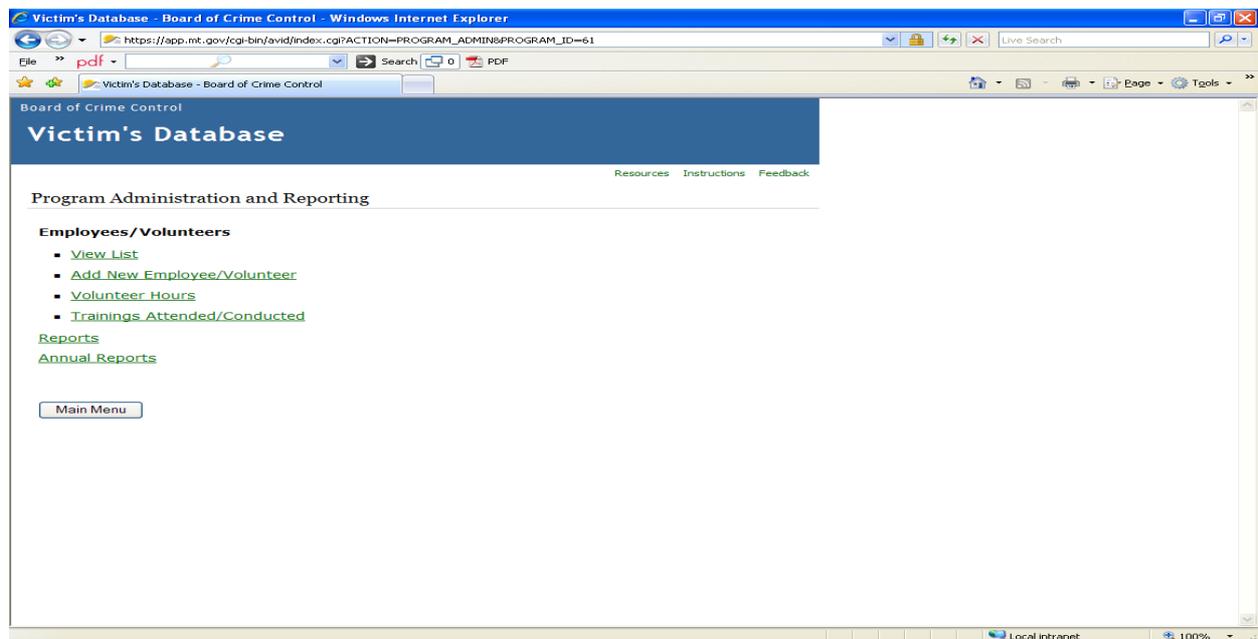
[Crisis Line Calls](#)

Victim Services

▪ [Enter Services](#)

Program Administration Main Menu

Click on the “Program Administration and Reporting” link to view the following:



Program Administration and Reporting

Under the Employees/Volunteers heading, a complete list of employees/volunteers is produced by clicking on the “View List” link. The list is broken out in two segments: administrators who have access to all components in AVID for their program and users who have limited access rights. The list includes the user’s name, email address, if the employee/volunteer is active, when the employee/volunteer information was last updated, and if the employee/volunteer is federated. A “Y” in the active column indicates the user is active; an “N” indicates the user is not active. A “Y” in the federated column indicates the user has signed in to AVID; an “N” indicates the user has not signed in to AVID and an “N/A” indicates the user does not have access to AVID.

Some programs use the AVID database to track volunteer hours but do not want those volunteers to have access to AVID. This is discussed further in the “Add New Employee/Volunteer” section. To update information on a user, click on the “edit” link to the left of the user name.

Add New Employee/Volunteer

Click on the “Add New Employee/Volunteer” link and the following screen will appear:

The screenshot shows a web browser window titled "Victim's Database - Board of Crime Control - Windows Internet Explorer". The address bar shows the URL: https://app.mt.gov/cgi-bin/avid/index.cgi?ACTION=USER_ADD&PROGRAM_ID=61. The page content is as follows:

Employee Information

*First Name: *Last Name: Middle Initial:

Title: *Type: Volunteer Employee

Service/Hire Date: Deactivate Date:

Type of Service: *Email:

Availability:
 Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Hours Available: Value of Volunteer Hours: \$ /hour
Example: 10.50

***Access to Victim's Database**
 Yes No
Note: If the user is to have access, you must assign at least one role. Otherwise, no roles can be assigned.

Assigned Roles

- Add/Edit Employee or Volunteer
- Administrative
- Crisis Line
- Data Entry
- Edit Data Entry
- Enter Hours
- Enter Trainings
- Reports

The browser status bar at the bottom shows "Done", "Local intranet", and "100%".

Employee/Volunteer Access Rights

Field	Instructions
*Name	Enter the first and last name of the employee/volunteer; middle initial is optional.
Title	Enter the title of the employee/volunteer (i.e. Shelter Manager).
*Type	Select either volunteer or employee (this must be checked to accurately track employee vs. volunteer hours).
Service/Hire Date	Date the employee was hired or the volunteer signed up to provide services.
Deactivate Date	Leave blank when adding a new employee/volunteer; when the employee/volunteer resigns enter the date of resignation and this will “deactivate” the employee/volunteer so they are no longer able to access AVID.
Type of Service	Select the option that best fits the services the employee/volunteer will be providing.
*Email	Enter the employee’s/volunteer’s email address; AVID will automatically send an email to this address with the employee’s/volunteer’s authorization token to enable access to the system.
Availability	Check the day(s) the employee/volunteer is available to provide services.
Hours Available	Enter time (i.e. 10 – 4) the employee/volunteer is available to provide services.
Value of Volunteer Hours	Enter dollar amount value of volunteer hours for grant match purposes (i.e. Crisis Line Volunteer is valued at \$7.00/hour).
*Access to Victims’ Database	If an employee/volunteer does not need access to AVID, but program would like to track trainings, hours, etc. of this individual select “No.” Select “Yes” if the employee/volunteer will be entering data in AVID or need to access reports.
Assigned Roles	Check all options that the employee/volunteer will have access to (determined by Project Director or designee).

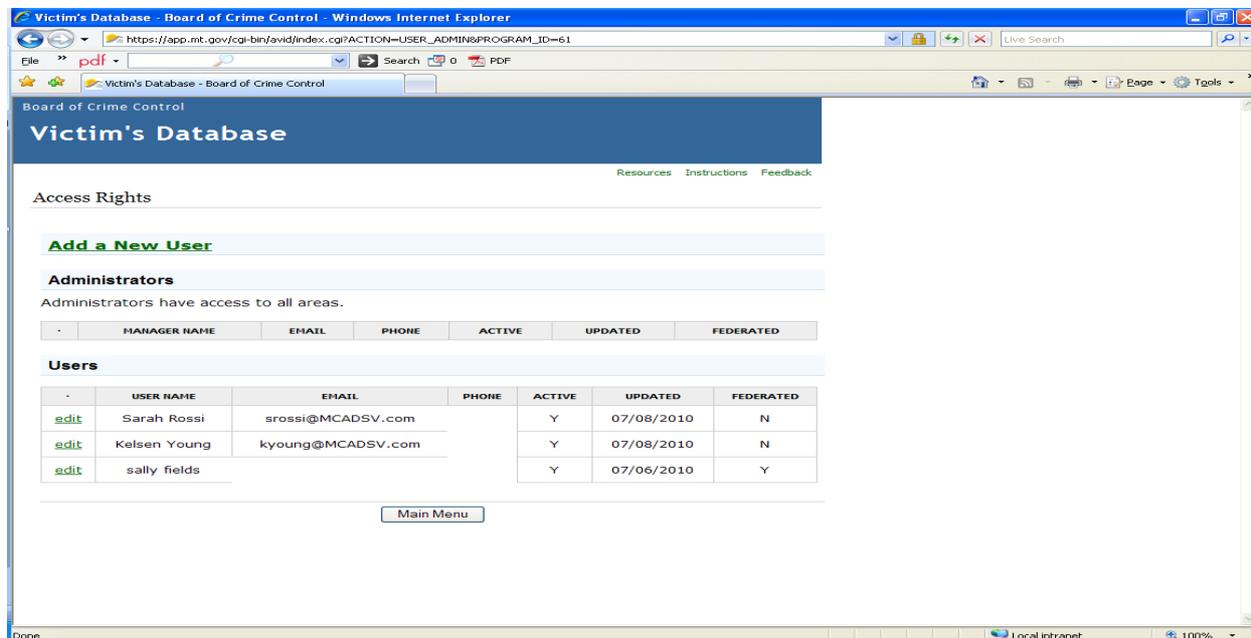
MBCC assigned each grant Project Director as the local “Administrator” for AVID. Project Directors are responsible for determining assigned roles for each employee/volunteer. By selecting “Administrative” when adding a new employee/volunteer, that individual will have access to all functions within the program and no other assigned role needs to be checked. To limit an employee’s/volunteer’s access, check the box or boxes that employee/volunteer will need to access.

Assigned Roles	Definition
Administrative	Access to all functions within the program.
Add/Edit Employee or Volunteer	User will have the ability to add or edit (including deactivating) all employees/volunteers.
Crisis Line	User will have ability to enter crisis line call data.
Data Entry	User will have ability to enter initial victim services data.
Edit Data Entry	User will have ability to update victim services data.
Enter Hours	User will have ability to enter hours worked by employee/volunteer.
Enter Trainings	User will have ability to enter trainings attended/conducted by employee/volunteer.
Reports	User will have access to all statistical reports for the program.

Once all information has been entered, click the “Submit” button. User is returned to the “Access Rights” page and a message will appear saying, “The new user has been created, and an email has been sent with instructions.”

Modify Employee/Volunteer

When an employee/volunteer resigns or if the employee/volunteer information needs to be modified, log in to AVID. From the Main Menu, click the “Program Administration and Reporting” link and then click the “View List” link. The following screen will appear:

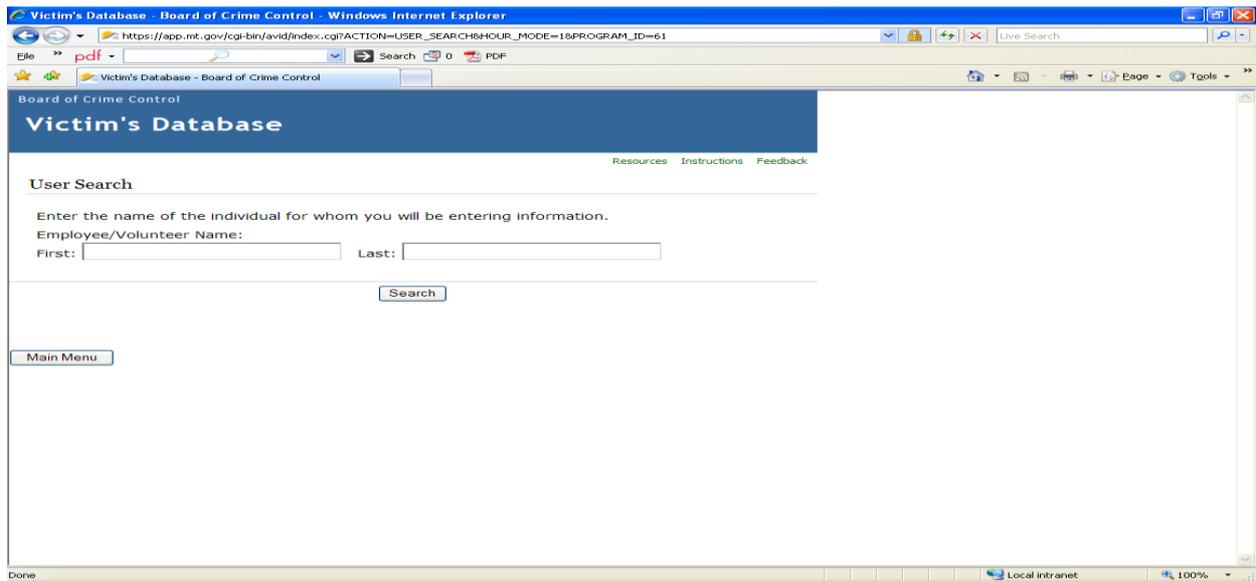


View Employee List

Find the user whose information needs to be modified and click the “edit” link next to their name. The user will be taken to the “Access Rights” screen, where the necessary information can be changed. If an employee/volunteer has resigned, enter the date of resignation in the “Deactivate Date” box, and click “Submit”. It is critical to enter a deactivate date when an employee or volunteer resigns from the program as this is the only way to ensure they no longer can access AVID. When adding a new employee/volunteer, an email with the authorization token is sent to the employee’s/volunteer’s email address. If the employee/volunteer is unable to locate the email and/or the authorization token prior to signing into AVID for the first time, access the employee’s/volunteer’s record (from the Main Menu, select “Program Administration and Reporting”, find the employee/volunteer using the “View List” option, and click “edit”). At the bottom of the page, click on the “Resend Email” button. The user will receive the original email with the authorization token.

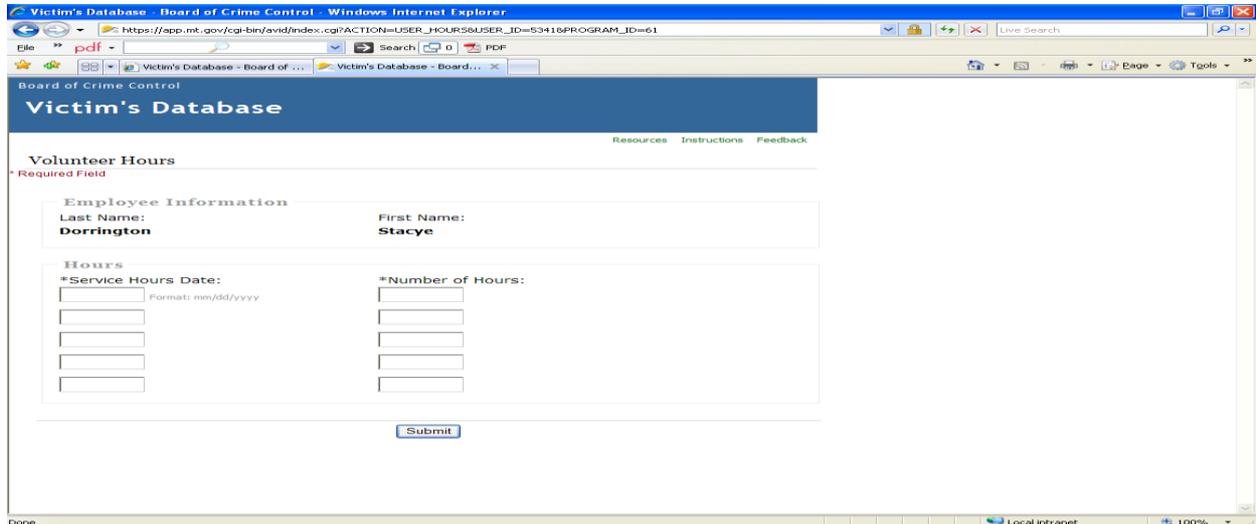
Employee/Volunteer Hours

AVID can be used to track hours worked by employees/volunteers. From the “Main Menu” page, click on “Program Administration and Reporting” and then click “Volunteer Hours” (even though this says “Volunteer Hours” it can also be used for employees) which will take the user to the following screen:



Employee/Volunteer Search

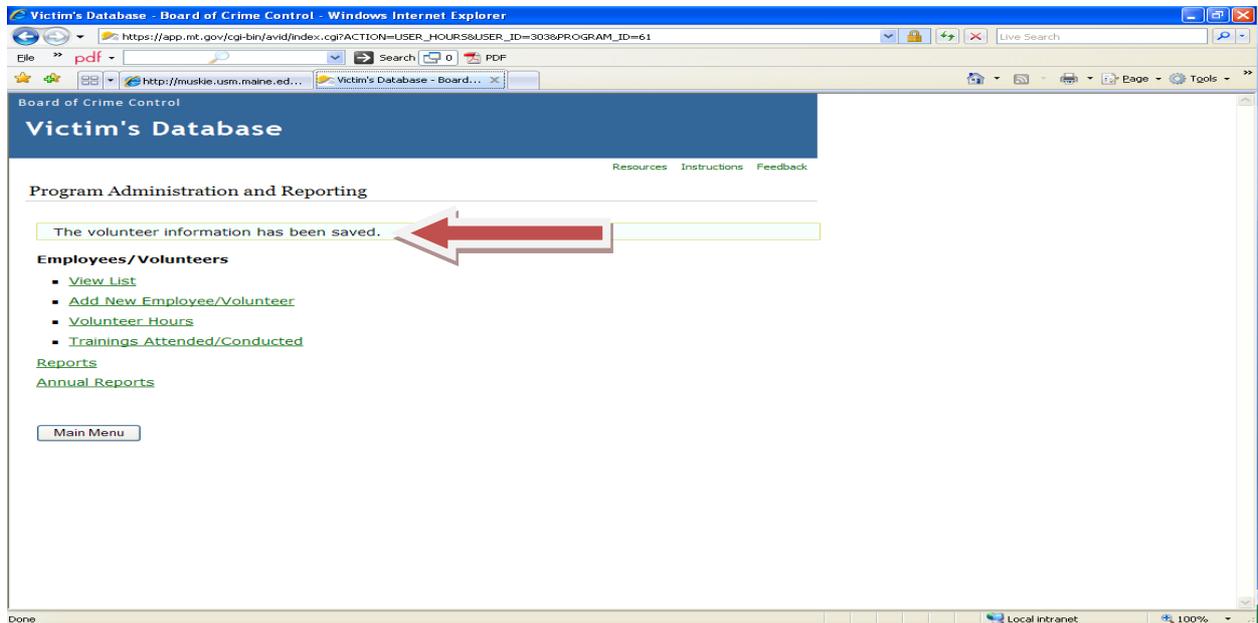
Users can conduct a search by entering the employee's/volunteer's first and/or last name and clicking the "Search" button. Please note that partial names can be used as this is a wild card search. For example, by entering "S" in the first name field, all users with an "S" in their first name will be displayed. A list of the employee's/volunteer's matching the search criteria will be returned. Find the employee/volunteer whose hours need to be updated and click on the "Enter Hours" link next to the name. The following screen will appear:



Employee/Volunteer Hours

Verify the correct employee/volunteer has been selected. Up to five dates with the number of hours worked may be entered at one time. Users are not allowed to enter one date with all hours worked for the month; a separate entry must be made for each day worked. For auditing purposes, especially for those programs that use volunteer hours as a match,

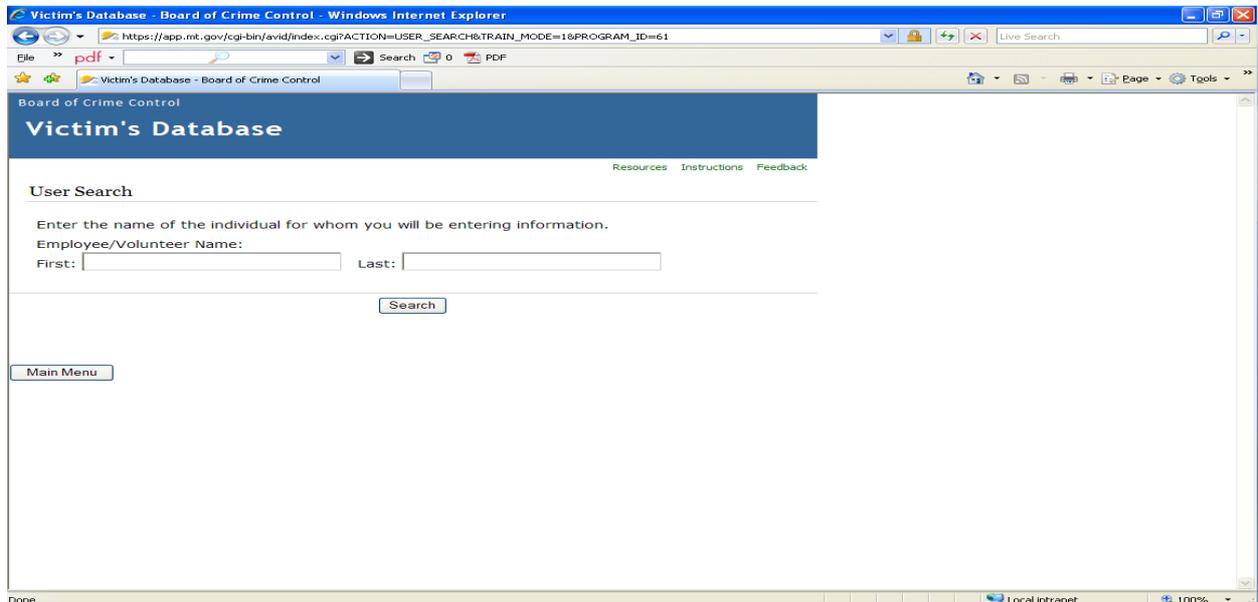
this information must be reflected as it would on a time sheet. After all information has been entered, click the “Submit” button. User will be returned to the “Program Administration and Reporting” page and a message indicating “The volunteer information has been saved.” will appear.



Employee/Volunteer Hours Saved

Trainings Attended/Conducted

AVID can be used to track trainings attended and/or conducted by employees/volunteers. Log in to AVID and click the “Program Administration and Reporting” link and then the “Trainings Attended/Conducted” link which will bring up the following screen:



Employee/Volunteer Search

Users can conduct a search by entering the employees'/volunteers' first and/or last name and clicking the "Search" button. Please note that partial names can be used as this is a wild card search. For example, by entering "S" in the first name field, all users with an "S" in their first name will be displayed. A list of the employees'/volunteers' matching the search criteria will be returned. Find the employee/volunteer whose training records need to be updated and click on the "Enter Training" link to the right of their name. The following screen will appear:

The screenshot shows a web browser window titled "Victim's Database - Board of Crime Control - Windows Internet Explorer". The address bar contains the URL: https://app.mt.gov/cgi-bin/avid/index.cgi?ACTION=USER_TRAIN&USER_ID=53418&PROGRAM_ID=61. The page content includes the following form fields:

- *Title/Description:
- *Date:
- *Number of Hours:
- *Attended: Conducted Concluded
- Training Conducted**
 - Subject:
 - CCR Subject:
 - Trainee Professions:
 - Does this training target under-served populations? Yes No
 - Under-served Population:
 - Type**
 - Training
 - Community and Public Awareness Activities
 - Community Education Presentation
 - Number of Attendees by Age Group:**
 - Adults
 - College
 - High School
 - Middle School
 - Elementary School
 - Grant used to Fund Training? Yes No
 - Grant Number:

Employee/Volunteer Trainings

Verify the correct employee/volunteer has been selected. If the employee/volunteer attended training, complete the information listed under "Training Information" – Title/Description, date, and number of hours. Then select "Attended" followed by the "Submit" button at the bottom of the page. The user is returned to the Program Administration and Reporting page and a message indicating "The training information has been saved." will appear. Each time an employee/volunteer attends or conducts training, a new entry is required.

If the employee/volunteer conducts training, complete the information listed under "Training Information" – Title/Description, date, and number of hours. Select "Conducted" and then complete the information listed under the "Training Conducted" heading. An "*" indicates required fields; however, when conducting trainings, all information under the "Training Conducted" heading is required. Please note that for programs receiving STOP VAWA and SASP grant funds, this is mandatory information for the annual report.

Field	Description
Subject	Select the subject that best describes the training; only one subject can be selected – if multiple subjects were addressed in the training, complete a new entry for each subject (divide the number of hours by each subject).
CCR Subject	If Coordinated Community Response was the subject of the training, enter the CCR subject.
Trainee Profession	Click “Add a Profession” and a new box with a dropdown menu will appear. Select the type of profession of the attendee. If multiple trainee attendees were present at the training, click “Add a Profession” until each profession has been entered.
Under-served Population	If training targeted under-served populations, click “Yes” (if not, click “No”), and use the dropdown menu to indicate which under-served population was targeted.
Type	Select the type that best describes the training/presentation.
Number of Attendees	Enter the number of attendees participating in the training by age group.
Grant Number	If grant funds were used to conduct the training, click “Yes” (if not, click “No”), and select the grant number from the dropdown menu. The menu will only list those active MBCC and FVPSA grants. If users would like to use AVID to track additional training from other grant sources, contact MBCC and these grants can be entered in the database.

When all information has been entered, click the “Submit” button. User will be returned to the “Program Administration and Reporting” page and a message indicating “The training information has been saved.” will appear.

Crisis Line Calls

Log in to AVID and from the “Main Menu”, click on the “Crisis Line Calls” link. The following screen will appear:

Board of Crime Control

Victim's Database

[Resources](#) [Instructions](#) [Feedback](#)

Crisis Line Calls

* Required Field

*Call Type:

Add a Call Type

*Type of Victimization:

Add a Victimization Type

Caller County:

Lewis and Clark

County Crime Occurred in:

Lewis and Clark

Location:

Action Plan:

*Date/Time of Call:

Date: 03/18/2014 Time: 07:53:54

mm/dd/yyyy

hh:mm

Length of Call:

Number of Times Victim Called Today

Race:

Gender:

Age:

Caller:

- Professional
- Victim/Survivor-Primary
- Victim/Survivor-Secondary
- Other

Comments/Notes:

You have 500 characters remaining.

[Main Menu](#) or

Next Call

Finish

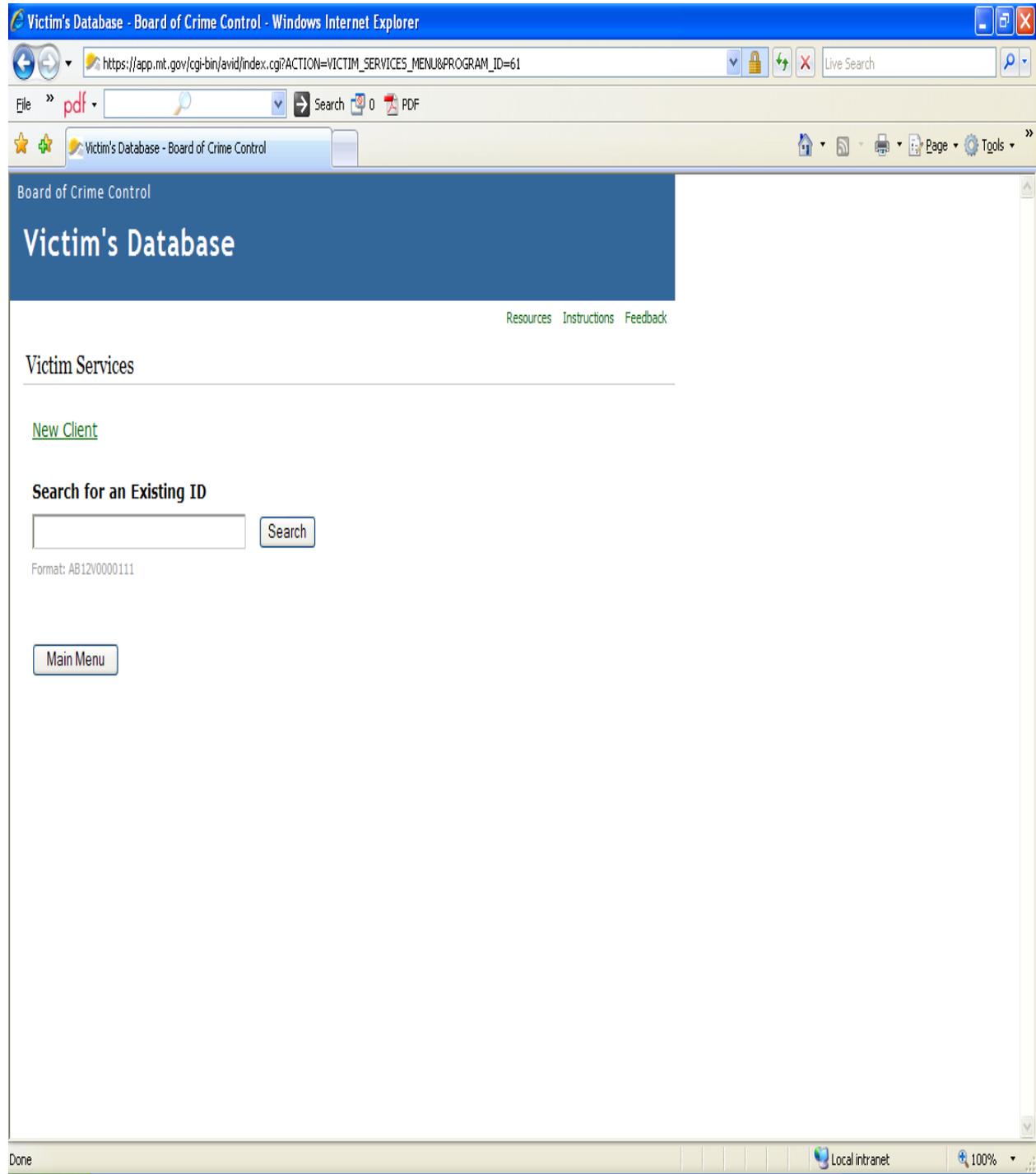
Crisis Line Calls Entry

Field	Description
*Call Type	To enter a call type, click the “Add a Call Type” button. Select a type from the dropdown menu. If multiple call types apply, click “Add a Call Type” for each additional type of call.
*Type of Victimization	Click the “Add a Victimization Type” button to enter the type of victimization. If more than one type of victimization occurred, click “Add a Victimization Type” for each additional type of victimization.
Caller County	This is defaulted to the county where the program is located. If the caller is from a different county, select the county which the caller is from using the dropdown menu. The menu has all 56 Montana counties along with “Out-of-State” and “Unknown”. If the user selects “Out-of-State”, a “Caller State” field will appear; all states are listed along with a “Relocated to Montana” option.
County Crime Occurred In	This is defaulted to the county where the program is located. If the crime occurred in a different county, select the county in which the victimization/crime occurred using the dropdown menu.
Location	Location where the victimization/crime occurred (i.e. city limits, county, etc.).
Action Plan	Indicate if caller sought services (if so, a new entry into victim services should be completed) or was referred elsewhere.
*Date/Time of Call	Date and Time of call are automatically populated with the date and time the data entry begins. If user is not entering the call at the time the call was received, this needs to be overtyped by the user. To distinguish between am and pm, use military time.
Length of Call	Length of time spent on the phone with the caller; select an option from the dropdown menu.
Number of Times	If the victim calls multiple times in one day, enter the number of times the victim called that day. For the date/time of the call, use the date and time from the first call of the day. Can be left blank if victim only called once that day.
Race	Enter the race of the victim, if known.
Gender	Enter the gender of the victim, if known.
Age	Enter the age group of the victim, if known.
Caller	Select the one option that best describes the caller.
Comments/Notes	Additional comments/notes in regards to the call; DO NOT enter victim demographic/personally identifying information as this can be accessed by MBCC staff.

Complete all information and then click the “Finish” button. User will be returned to the “Main Menu” and a message indicating “The Crisis Line Data has been saved.” will appear. To entering multiple crisis calls then click on the “Next Call” button and a message indicating “The Crisis Line Data has been saved.” will appear. When you have entered your last call, then click the “Finish” Button. To return to the main menu at any time click on the “Main Menu” link.

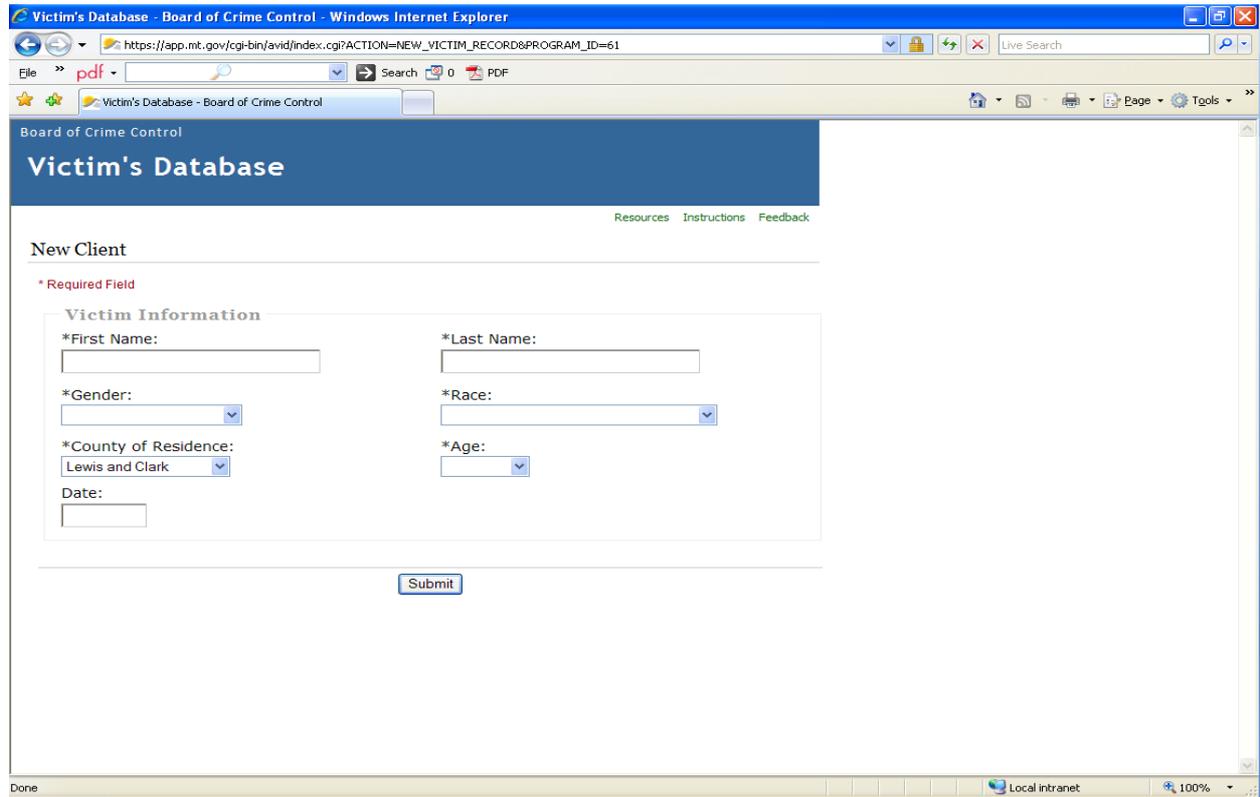
Victim Services – Add New Client

Log in to AVID and from the “Main Menu” click the “Enter Services” link below the “Victim Services” heading. The following screen will appear:



Victim Services

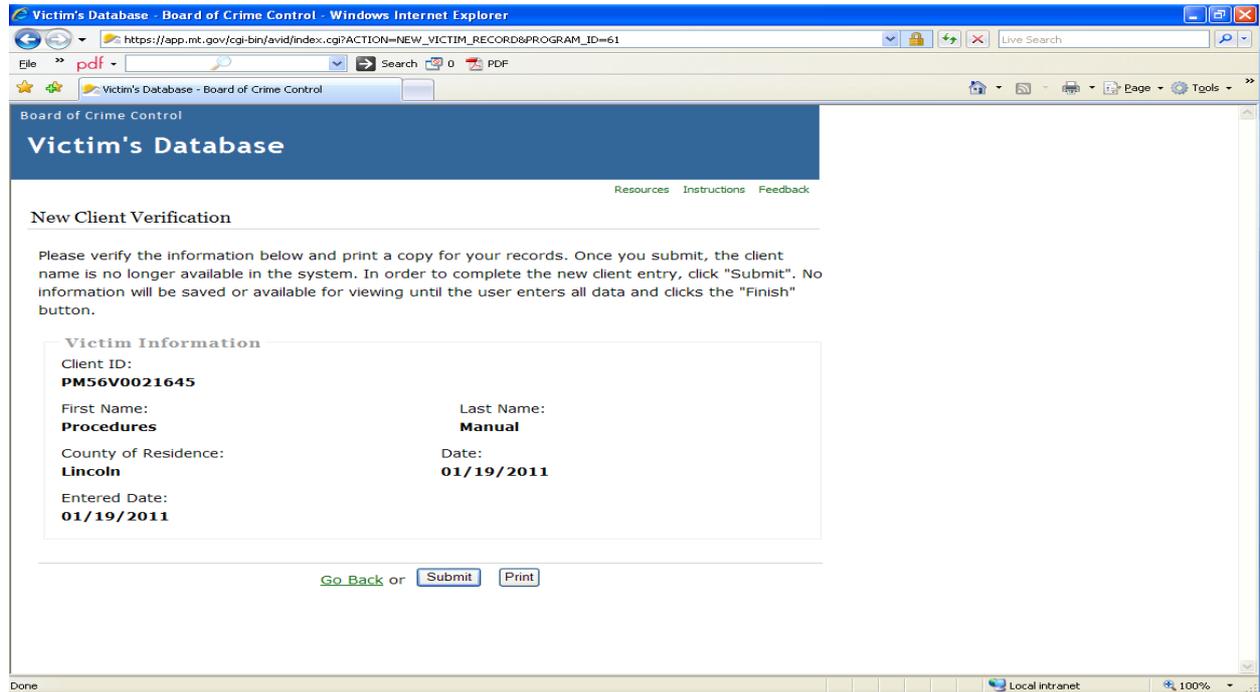
Click on the “New Client” link and the following screen will appear:



Assign Client ID

Field	Description
* Name	Enter the first and last name of the client seeking services. After submitting this information, AVID will assign a Client ID. The victims’ name will not be stored in AVID.
* Gender	Enter the gender of the victim.
* Race	Enter the race of the victim.
* County of Residence	This is defaulted to the county where the program is located. If the victim is from a different county, select the county which the victim is from using the dropdown menu. The menu has all 56 Montana counties along with “Out-of-State” and “Unknown”. If the user selects “Out-of-State”, a “State of Residence” field will appear; all states are listed along with a “Relocated to Montana” option.
* Age	Enter the age group of the victim.
Date	Users do not need to enter a date, however if this is left blank, the date will default to the date the data entry is completed. Be sure to enter a date if the initial date of services provided is different than the date data entry is occurring.

When all information is entered, click on the “Submit” button and the following screen will appear:



New Client Verification

Verify the information input is accurate and then click the “Print” button. The printout should be saved as part of the client’s record. The client’s name will not be available or stored in the system. Once the user submits the record, access to the client’s name will be lost. It is recommended that a spreadsheet be utilized by programs to track victims’ names to the client ID (see sample below). Each client for a program should only have one client ID, so if the client is re-victimized at a later date, users will need to be able to locate the original client ID for updating of the client information. If the Victim does not want to provide a First or Last Name, use the ? character to identify this situation.

A client ID is assigned at this time when the “SUBMIT” button is pressed. The assigned client ID will be used to create a victimization record.

First Name	Last Name	Client ID	Date of Birth	Type of Victimization	Date of Initial Service
Jane	Doe	JD25V0000028	2/15/1978	Sexual Assault	5/12/2010
John	Deere	JD25V0000072	3/26/1952	Assault	5/15/2010
Jennifer	Smith	JS28V0000089	7/6/1981	Partner/Family Member Assault	6/1/2010

Client ID Breakdown/Sample = JD25V0000028

- First two characters (JD) = victims initials from the first and last name that was input
- Third & Fourth characters (25) = victim’s county of residence (matches license plates); 57 indicates “Unknown” and a 58 indicates “Out-of-State”
- Remaining Characters = statewide sequential number

After clicking the "Submit" button the following screen will appear:

Victim's Database - Board of Crime Control - Windows Internet Explorer

https://app.mt.gov/cgi-bin/avid/index.cgi?ACTION=NEW_VICTIM_RECORD&PROGRAM_ID=61

File » pdf Search PDF

Victim's Database - Board of Crime Control

Victim Information

Client ID:
PM56V0021645

*Type: Primary Secondary Witness

*Primary Type of Victimization:

Advocate Name:

Underserved Populations

American Indian or Alaskan Native

Asian

Black or African American

Elderly

Have Disabilities

Have Limited English Proficiency

Have Mental Health Issues

Have Substance Abuse Issues

Hispanic or Latino

Homeless or Living in Poverty

Immigrants, Refugees or Asylum Seekers

Lesbian, Gay, Bisexual, Transgender or Intersex

Live in Rural Areas

Native Hawaiian or Other Pacific Islander

Round Trip Miles Traveled:

Who Traveled: Advocate Victim

Tribal Member Tribe:

County Crime Occurred:
Lewis and Clark

Location:

Drugs Involved

Alcohol Involved

Relationship to Offender:

Victim Referred By:

Time Spent w/Client:

Done Local intranet 100%

Victim Information

Throughout the rest of the victim services section of AVID, there are asterisks indicating required fields. Some of the fields are not marked with "*" because not all users are required to track that information. For programs receiving STOP VAWA, SASP and FVPSA grants, a notation will be made that these are required fields for those programs.

Field	Description
*Type	Select primary or secondary for victim. If providing services to a witness such as hearing or testimony preparation, select "witness".
*Primary Type of Victimization	Select the type that most appropriately describes the victimization (only one may be selected at this point, so if multiple victimizations have occurred, choose the most serious).
Underserved Populations	Check all that apply. If providing services to clients that "Have Disabilities", "Have Limited English Proficiency", "Immigrants, Refugees or Asylum Seekers", and/or "Live in Rural Areas", this is mandatory for STOP VAWA and SASP programs to report.
Round Trip Miles	Enter the number of miles traveled for services.
Who Traveled	Select advocate if the advocate traveled to the victim's location; select victim if the victim traveled to the advocate's location.
Tribal Member	If victim is a tribal member, check the box and then enter what tribe the victim is a member of using the dropdown menu.
County Crime Occurred	This is defaulted to the county where the program is located. If the crime occurred in a different county, select the county in which the victimization/crime occurred using the dropdown menu.
Location	Location where victimization/crime occurred (i.e. city limits, county, etc.).
Drugs/Alcohol	If victim was voluntarily using drugs and/or alcohol at the time of victimization, check these.
Relationship to Offender	Select the option that best describes the victims' relationship to the offender. This field is mandatory for STOP VAWA and SASP programs.
Victim Referred By	Select the option that best describes who referred the victim to the program/agency for services.
Time Spent w/Client	Length of time spent with the client at time of initial services.

Once all information is entered, click the "Continue" button. Remember, at this time, the information entered still has not been saved to the database. By pressing "Continue" you can go to the previous page without losing data and make changes. The following screen will appear:

Victim Services

* Required Field

Report Information

Additional Type of Victimization:

Initial Services: **Contact Date:** **Time Spent w/Client:**

Victim was Contacted and Declined Services
 Received all Services Requested
 Received some Services Requested
 Denied Services
 Why were services denied?

 Other (please specify):

Information/Referral:

Children

Report of Child Abuse/Neglect has been made to CPS

Victim Information Cont.

Field	Description
Additional Type of Victimization	If victim suffered multiple victimizations, click "Add a Victimization Type" and enter the additional type of victimization. Click the "Add a Victimization Type" for each type of victimization.
Initial Services	To enter services provided to the victim, click "Add Services". A box with a "1" will display next to a blank box with a dropdown menu. Select the type of service provided. If multiple occurrences of that service were provided, change the "1" to the number that represents how many times that service was provided initially . Click "Add Services" to enter each type of service provided. The Contact Date will default to the current day and can be changed if necessary. This is the date a client received a service.
Victim Contacted	If Victim/Witness programs review police reports and contact the victim to offer services and the victim declined services, check this box.
Received/Denied Services	Check only one of the options indicating if all or some services requested were received or if services were denied. If the victim only received some services requested or services were denied, enter the reason for denial utilizing the dropdown menu. If the reason is not in the menu, enter this in the "Other" box. STOP VAWA and SASP programs are required to enter this information.

Information/Referral	If victim received information/referrals to other services, click “Add an Info Referral” and select who they were referred to. If multiple information/referrals were provided, click the “Add an Info Referral” for each information/referral provided.
Children	If victim has children, click the “Add a Child” button and a box for age, race and gender of the child will appear. Click the button again to add additional children.
Report to CPS	If program contacted Child Protective Services to report child abuse/neglect, check this box.

When information is entered, click the “Continue” button and the following screen will appear:

Board of Crime Control
Victim's Database

Resources Instructions Feedback

Victim Services

* Required Field

Follow-up Information

Services:

Information/Referral:

Additional Round Trip Miles Traveled:

Who Traveled: Advocate Victim

Reported to Law Enforcement:
 Yes No

Police Report Number If No, why?

Prosecutor:

Orders

Protection Order Requested:
 Temporary Permanent

Protection Order Granted:
 Temporary Permanent

Protection Order Dissolved

No Contact Order Requested:
 Yes No

No Contact Order Granted:
 Yes No

Hope Card Requested:
 Yes No

Hope Card Granted:
 Yes No

Witness Information

Testimony Preparation Hearing Preparation

Shelter Information

Residential
 Non-Residential
 Transitional Housing

Entry Date:

Exit Date:

Re-entry Date:

Re-exit Date:

Number of Family Members:

For FVPSA Grants Only

Outcome Survey Completed	Yes to Resource Outcome	Yes to Safety Outcome
<input type="checkbox"/> Counseling	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Shelter	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Support Group	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Support Services & Advocacy	<input type="checkbox"/>	<input type="checkbox"/>

Victim Services Cont.

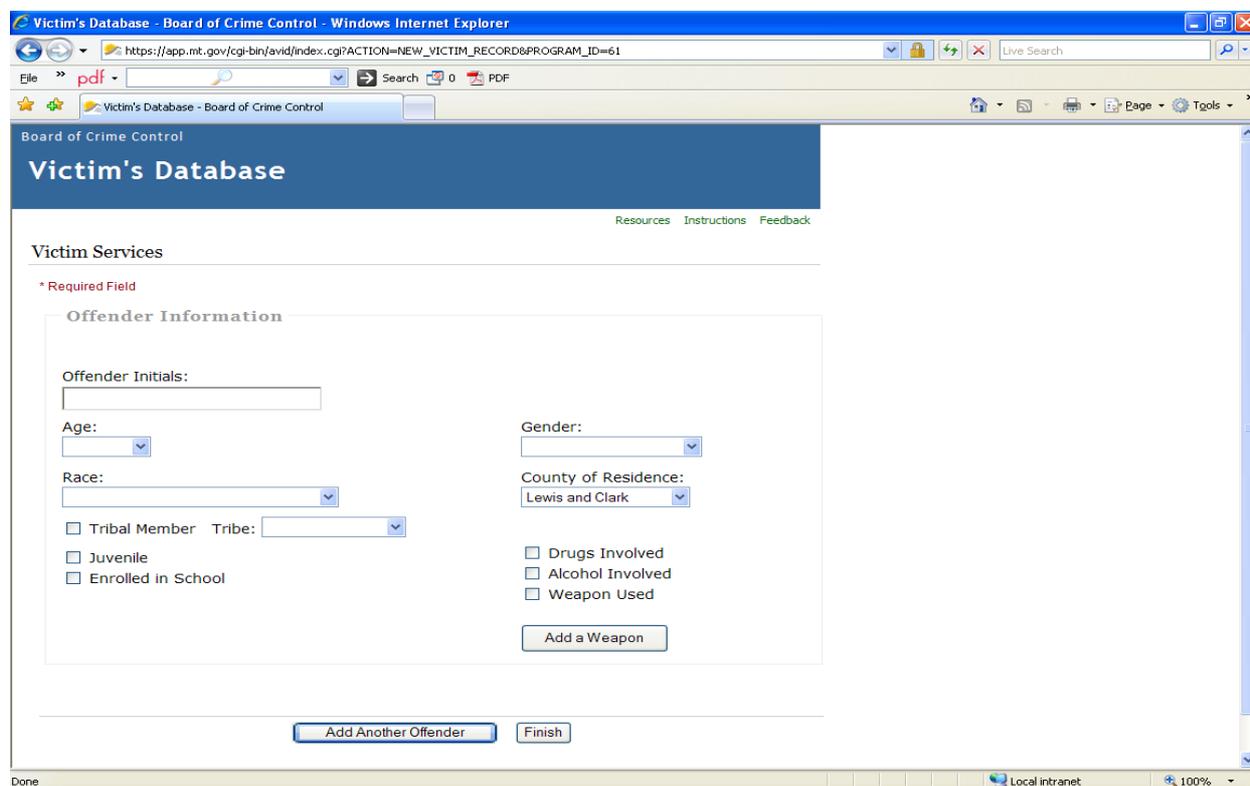
Victim Services Cont.

Field	Description
Services	To enter followup services provided to the victim, click "Add Services." Four boxes (Number, Type, Followup Contact Date, and Time Spent w/Client) will appear. A box with a "1" will display next to a blank box with a dropdown menu. Enter the type of service provided, date the service was provided and the amount of time spent with the client. If multiple occurrences of that service were provided, change the "1" to the number that represents how many times that service was provided. For each followup service provided, click "Add Services" and complete the information.
Information/Referral	If victim received followup information/referrals to other services, click "Add an Info Referral" and select who they were referred to. If multiple information/referrals were provided, click the "Add an Info Referral" for each information/referral provided.
Miles Traveled	Enter the number of miles traveled to provide followup services.
Who Traveled	Select advocate if the advocate traveled to the victims' location; select victim if the victim traveled to the advocates' location for followup services.
Reported to Law Enforcement	This is defaulted to "No". If victimization was reported to law enforcement, check "Yes". If not reported to law enforcement, use the dropdown menu to indicate the reason why.
Police Report Number	If victimization was reported to law enforcement and the police number is known, enter here.
Prosecutor	If victimization was reported to law enforcement and the county attorney is prosecuting, enter name of prosecuting attorney here.
Protection Orders	Indicate if a temporary or permanent protection order was requested and/or granted; if not granted at the time of entry, this can be updated later.
Protection Order Dissolved	If the protection order was dissolved, check the box and enter the date the order was dissolved.
No Contact Orders	Indicate if a no contact order was requested and/or granted; if not granted at the time of entry, this can be updated later.
Hope Card	Indicate if a hope card was requested and/or granted; if not granted at the time of entry, this can be updated later.
Witness Information	If working with a witness, indicate if assistance with testimony or hearing preparation was conducted.
Shelter Information	If victim is staying in the shelter, check if shelter is residential, non-residential (hotel, safe house), or transitional housing; enter the date the victim entered the shelter and the exit date. If victim is still in shelter at the time of entry, leave the exit date blank - this can be entered later. Enter the number of family members residing in shelter with the victim. If the victim re-enters the shelter, enter the re-entry date and re-exit date. These should only be used if the victim re-enters shelter for the same victimization; if a new victimization occurs that results in the victim seeking shelter services, a new victimization entry should be completed.

For FVPSA Grants Only	If program has a FVPSA grant, click “Add FVPSA” and three boxes will appear. In the first “Type” box, indicate if this was a child or adult. In the second “Type” box, select the activity and in the last box indicate the number of hours. If multiple activities were completed, click “Add FVPSA” to add each activity. Indicate which type of outcome survey was completed and if the victim responded “yes” to the resource outcome and/or the safety outcome survey. This information is mandatory for FVPSA grants.
Outcome Survey	Check the box next to each Outcome Survey completed by the victim. If the victim answers “Yes” to the resource and/or the safety outcome, check the box to the right of the type of survey completed. These are mandatory for FVPSA grants.

If the user accidentally checks a button under “Orders” and cannot remove this, scroll to the bottom of the page and click the “Reset” button. **This will clear all information entered on this page only.** Previous data entered on other pages will not be deleted.

When information is entered, click the “Continue” button and the following screen will appear:



Victim Services Cont

If information is known about the victim’s offender, that information can be entered here.

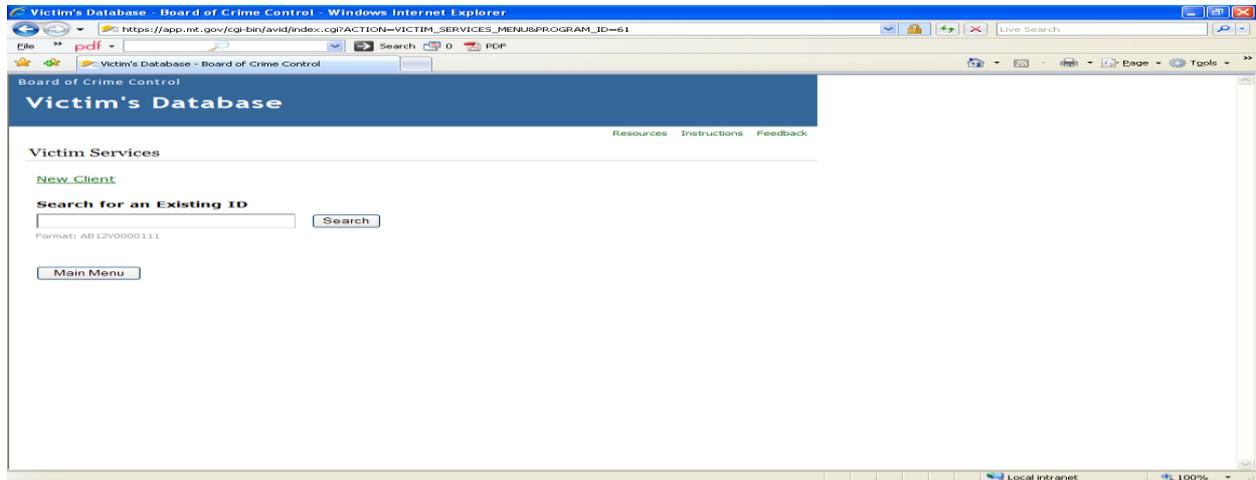
Field	Description
-------	-------------

Offender Initials	Enter the initials of the offender. Users can enter up to three initials.
Age/Gender/Race	Enter the age group, gender and race of the offender, if known.
County of Residence	This is defaulted to the county where the program is located. If the offender is from a different county, select the county which the offender is from using the dropdown menu. The menu has all 56 Montana counties along with "Out-of-State" and "Unknown". If the user selects "Out-of-State", a "State of Residence" field will appear; all states are listed along with a "Relocated to Montana" option.
Tribal Member	If offender is a tribal member, check the box, and then enter what tribe the offender is a member of using the dropdown menu.
Juvenile/Enrolled in School	If offender is a juvenile, check the "Juvenile" box; if offender is enrolled in school, check the "Enrolled in School" box.
Drugs/Alcohol	If offender was using drugs and/or alcohol at the time of victimization, check these.
Weapon Used	If offender used a weapon during the victimization, check the "Weapon Used" box, and use the dropdown menu to select the type(s) of weapon used. Alcohol and Date Rape Drugs are options under weapon.

If multiple offenders were involved in the victimization, click the "Add Another Offender" box and repeat the steps above. If only one offender was involved, the victim services information is now complete and the user should click the "Finish" button. User will be returned to the main victim services page where a message indicating "The Victimization Data has been saved" will appear. This is the final step to completing the victim record and when all data is finally saved.

Victim Services – Edit Existing Client

Log in to AVID and from the “Main Menu;” click the “Enter Services” link under Victim Services. The following screen will appear:



Search for Existing Client

In the “Search for an Existing ID” box, enter the client ID (or partial) for the victim whose information will be updated and click “Search.” A list of client ID’s (specific to the program) matching the search criteria will be provided. The screen will look like this:

Board of Crime Control			
Victim's Database			
		Resources Instructions Feedback	
Victim Services - Existing Client			
CLIENT ID	VICTIMIZATION TYPE	LAST UPDATED	ACTION
?J05V0001587	(no victimizations)	09/24/2013	<input type="button" value="New Victimization"/>
?S05V0001599	Arson	10/24/2013	<input type="button" value="Edit"/> <input type="button" value="Followup Information"/>
B?05V0001588	(no victimizations)	09/24/2013	<input type="button" value="New Victimization"/>
C?05V0001598	Unauthorized use of Motor Vehicle	10/23/2013	<input type="button" value="Edit"/> <input type="button" value="Followup Information"/>
T?05V0001586	(no victimizations)	09/24/2013	<input type="button" value="New Victimization"/>

[Go Back](#) or

Existing Client

Find the client whose record needs to be updated. By selecting the “Edit” button on the right side of the page next to the client ID, a user can update the existing record for that victimization. To add followup services click “Followup Information”. Existing clients without an existing victimization, a “New Victimization” button will appear. This allows for an initial victimization record to be created for the client.

Clicking “New Victimization” will allow users to complete a new victimization entry for the client using the same client ID. The user will be guided through all of the necessary input screens by pressing continue. If you need to return to a previous change, press continue first, and then the browser back button; information will not be lost. If you don’t press continue the following warning message will appear. At the end of the process, you must press the “FINISH” button to process all data entry screens for this new victimization. The record will then be saved to the database.

Victim Services

* Required Field

Victim Information

Client ID:
C?05V0001598

*Type: Primary Secondary Witness

*Primary Type of Victimization:
 Unauthorized use of Motor Vehicle

*Date of Victimization
 10/20/2013
MM/DD/YYYY

Advocate Name:
 [Dropdown]

Underserved Populations

- American Indian or Alaskan Native
- Asian
- Black or African American
- Elderly
- Have Disabilities
- Have Limited English Proficiency
- Have Mental Health Issues
- Have Substance Abuse Issues
- Hispanic or Latino
- Homeless or Living in Poverty
- Immigrants, Refugees or Asylum Seekers
- Lesbian, Gay, Bisexual, Transgender or Intersex
- Live in Rural Areas
- Native Hawaiian or Other Pacific Islander

Round Trip Miles Traveled: [Text Box]

Who Traveled: Advocate Victim

Tribal Member Tribe: [Dropdown]

County Crime Occurred:
 Lewis and Clark

Location:
 [Dropdown]

Drugs Involved
 Alcohol Involved

Relationship to Offender:
 [Dropdown]

Victim Referred By:
 [Dropdown]

Time Spent w/Client:
 [Dropdown]

Windows Internet Explorer

i Are you sure you want to leave this page?

Message from webpage:
 Navigating away from this page will cause any changes to be lost.

➔ Leave this page

➔ Stay on this page

Continue

Clicking "Followup Information" will allow users to add, or edit a client's existing followup service. The user will be guided through all of the necessary input screens by pressing continue. If you need to return to a previous screen, press "Continue" first, and then the browser back button; information will not be lost. At the end of the process, you must press the "Finish" button to process all data entry screens for this new service to be saved.

Victim Services

* Required Field

Follow-up Information

Services:

Information/Referral:

Additional Round Trip Miles Traveled:

Who Traveled: Advocate Victim

Reported to Law Enforcement:

Yes No

Police Report Number

If No, why?

Prosecutor:

Orders

Protection Order Requested:

Temporary Permanent

Protection Order Granted:

Temporary Permanent

Protection Order Dissolved

No Contact Order Requested:

Yes No

No Contact Order Granted:

Yes No

Hope Card Requested:

Yes No

Hope Card Granted:

Yes No

Witness Information

Testimony Preparation Hearing Preparation

Shelter Information

Residential

Non-Residential

Transitional Housing

Entry Date:

MM/DD/YYYY

Exit Date:

MM/DD/YYYY

Re-entry Date:

MM/DD/YYYY

Re-exit Date:

MM/DD/YYYY

Number of Family Members:

For FVPSA Grants Only

Outcome Survey Completed

Counseling

Shelter

Support Group

Support Services & Advocacy

Yes to Resource Outcome

Yes to Safety Outcome

Victim's Database

Victim Services

* Required Field

Offender Information

Offender Initials:

Age:

 ▼

Gender:

 ▼

Race:

 ▼

County of Residence:

 ▼

Tribe: ▼

Juvenile

Enrolled in School

Drugs Involved

Alcohol Involved

Weapon Used

Add a Weapon

Add An Offender

Finish

[Update Existing Client](#)

The user has the ability to update all information contained on this page. When all information is complete, click the "Continue" button. The user will be returned to the main victim services page where a new entry can be started.

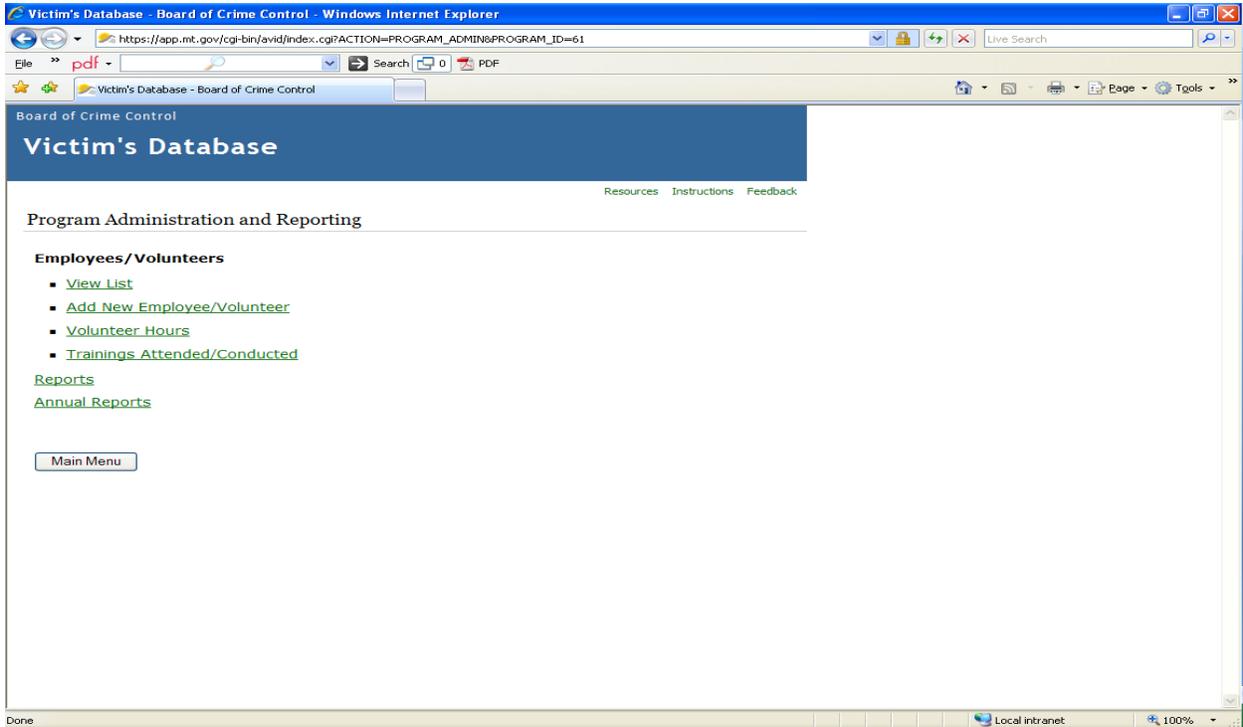
Followup services that have previously been entered will display on this page. To add additional services, click on "Add Services". If users type over the information already on the page, this will delete the previous services information. These are displayed to ensure that duplicate entries are not occurring. This applies to the "Information/Referrals" as well.

If information has already been entered for additional round trip miles traveled, add the new miles traveled to what is already displaying on the screen, and enter that number in the box.

If there is a change in status in regards to protection orders being requested/granted, no contact orders being requested/granted, or hope cards being requested/granted, users may update the information here.

Reports

Log in to AVID and from the “Main Menu” click on “Program Administration and Reporting”. The following page will appear. The “Reports” link is intended to provide access to all data entered for the user’s program; access to statistical information for other programs is not available. The “Annual Reports” link provides access to annual reports required for STOP VAWA, SASP, and FVPSA. Click on the “Reports” link.



Program Administration/Reporting Menu

The reports are segregated into the following sections: Employees/Volunteers; Trainings; Volunteer Hours; Crisis Line Calls; and Victim Services. Most reports require users to enter a date range or the employee/volunteers’ name. After completing this information, click “Submit Query” to display report results.

Employees/Volunteers

Report Name	Parameters	Information Provided
Detailed Employee/Volunteer Report	Employee/Volunteer Name	Report provides employee/volunteer’s last name, first name, title, type (employee or volunteer), hire date, type of service (board member, crisis line, etc.), email, availability (days), hours available, value of volunteer hours, and access level (administrator, data entry, etc.). The information contained in this report comes from data entered when setting up a new user.

Summary of Active Employees/Volunteers	N/A	Report provides a list of all active employee/volunteers' full name, title and type. It is recommended that this report be run at least annually to ensure that all volunteers and employees that are no longer with the agency, have been deactivated in AVID. If still listed as "Active", the individual still has access to AVID.
Summary of Inactivated Employees/Volunteers	N/A	Report provides a list of all inactive employees' and/or volunteers' full name, title, type and termination date.

Trainings

Report Name	Parameters	Information Provided
Detailed Employee/Volunteer Trainings Attended History	Employee/Volunteer Name	Report provides a list of all trainings attended by the selected employee/volunteer. Includes training title, date and number of hours.
Detailed Employee/Volunteer Trainings Conducted History	Employee/Volunteer Name	Report provides a list of all trainings conducted by the selected employee/volunteer. Includes title of training, date of training, number of hours, subject (including CCR subject if applicable), professions, underserved populations targeted, type (training, community activity, etc.), number of participants (adults, college, etc.), grant used and grant number.
Program Detailed Trainings Attended by all Volunteers/Employees	Date Range	Report provides a list of all trainings attended by all program employees/volunteers for the specified date range. Includes employee/volunteers' name, training title, date attended and number of hours.
Program Summary of Trainings Conducted by all Volunteers/Employees	Date Range	Report provides a summary list of all trainings conducted by all program employees/volunteers for the specified date range. Includes employee/volunteers' name, training title, date training was conducted, subject of the training and the type (training, community activity, etc.)

Program Detailed Trainings Conducted by all Volunteers/Employees	Date Range	Report provides all details in regards to trainings conducted by all program employees/volunteers for the specified date range. Includes employee/volunteers' name, training title, date training was conducted, number of hours of training, subject of training (including CCR subject if applicable), professions, type (training, community activity, etc.), underserved populations targeted, number of participants (adults, college, etc.), grant used and grant number. Report also provides total number of individuals trained.
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Volunteer Hours

Report Name	Parameters	Information Provided
Volunteer Hours Worked	Employee/Volunteer Name and Date Range	Report provides total number of hours worked by selected employee/volunteer during the specified date range.
Detailed Volunteer Hours Worked	Employee/Volunteer	Report provides a breakdown of all hours worked by selected employee/volunteer. List is separated by date and total hours for that date.
Program Summary of Volunteer Hours Worked	Date Range	Report provides total number of hours worked by all employees/volunteers during specified date range. Report will show total hours for volunteers and total hours for employees.

Crisis Line Calls

Report Name	Parameters	Information Provided
Summary Report	Date Range	Report provides a breakdown of calls within the specified date range broken out by call type, victimization type and caller, along with a total number of calls. Numbers under each of these categories may not match up as AVID allows for multiple call types and victimizations within a call and the caller designation is an optional field.

Crisis Line Query	Date Range/ Output Fields	User is required to enter a date range and then has the option of selecting the following output fields: Call Type; Victimization Type; Caller County; Crime County; Location; Action Plan; Length; and Caller. This report provides user the ability to drill down certain data. For example, if users want to analyze where the caller is located versus where the crime occurred, enter a date range, check the "Caller County" and the "Crime County" boxes; report will provide total numbers for each of these along with a detailed list of the date and time of the call, race and gender of the caller, and the number of times victim called today.
Detailed Report	Date Range	After entering a date range, the user is provided with a list of all calls during the specified date range. The list provides the victimization type, action plan, and length of call. Click on the "date" and this will provide all details from the call including the caller county, county the crime occurred in, location, action plan, date/time of call, length, caller type (professional, primary victim, etc.), victimization type, and call type.

Victim Services

Report Name	Parameters	Information Provided
Victimization Summary Report	Date Range	Report provides the total number of new primary victims, secondary victims and witnesses for specified date range. Report also provides a breakdown of the number of primary and secondary victimizations broken out by type. AVID allows multiple victimizations so the number of primary and secondary victimizations will not necessarily equal the total number of victims. Report includes a breakdown of the number of each underserved population, number of services and followup services (by type of service provided), number of information/referrals (by type), and a breakdown of who referred the victim to the program. Report also provides details in regards to if victims are a tribal member (and which tribe) and if the victim was utilizing drugs and/or alcohol at the time of the crime.
Victim Demographic Summary Report	Date Range	Report provides the total number of victims who received initial services during the specified date range broken down by age group, gender, and race.
Victim Underserved Populations Report	Date Range	Report provides the total number of victims from each underserved population's category for the specified date range.
Victim Child Summary Report	Date Range	Report provides the total number of children for the specified date range broken down by age, gender, and race. Report also provides the total number of reports of child abuse/neglect that have been made to CPS.

Services Summary Report	Date Range	Report provides totals for each of the following: received all services requested, received some services requested, denied services. A breakdown of the reason services were denied is also provided with totals for each reason. Report will also provide the total number of victims that were contacted and declined services.
Law Enforcement Summary	Date Range	Report provides information on the number of clients who reported the crime to law enforcement; did not report the crime to law enforcement; and if not reported, the reason why along with a total for each reason.
Protection Order Summary	Date Range	Report provides the totals for the number of protection orders requested and granted (separated by permanent vs. temporary), the number of no contact orders requested and granted, and the number of hope cards requested and granted.
Witness Summary	Date Range	Report provides a total number of hearing preparations and testimony preparations that were provided during the specified date range.
Shelter Summary	Date Range	Report provides total number of shelter residents, shelter non-residents, and transitional housing clients. The total number of family members is provided along with the number of shelter days. The report uses the shelter exit date minus the entry date to calculate shelter days, therefore if there is no exit date for a client, the shelter days will not appear on this report. When calculating statistics for the end of the quarter, users can enter an exit date for all clients still residing in shelter but must make sure to remove the date after report has been run.
FVPSA Shelter Summary	Date Range	Report provides the same information as the "Shelter Summary" report along with the information listed in the "For FVPSA Grants Only" section of the data entry screen. This includes if there was group or individual activities and counseling; if it was for an adult or child and the number of hours. Report also summarizes the number of outcome surveys completed, broken out by type, such as counseling and support group, along with if the victim said yes to the resource outcome and/or yes to the safety outcome.
FVPSA Shelter Detail	Date Range	Report is intended to provide information needed for the quarterly FVPSA reports. The first section provides the total number of residential versus non-residential clients broken out by gender. The next section provides the number of service contacts broken out by residential versus non-residential; and then the followup service contacts.
Shelter Clients with no Exit Date	N/A	This report provides a list of client ID's for all clients that have a shelter entry date, but no exit date. By clicking on the client ID, users can view all the details pertaining to the client. Use this report to verify that all entry dates have a corresponding exit date for clients that are no longer receiving shelter services.

Offender Summary	Date Range	Report provides the total number of offenders for each category in the age group, gender, and race; total number of offenders from each county of residence; total number of tribal offenders and the total number from each tribe; number of offenders using drugs; number of offenders using alcohol; number of offenders enrolled in school; number of juvenile offenders; number of offenses where a weapon was involved and the total number of each type of weapon used. The number of offenses where a weapon was used may not be the same total as the type of weapons since multiple weapons may be selected.
Victim Query	Client ID	User enters a Client ID (must be exact) and the report will provide all information entered for that client. To obtain the detailed information entered for the client for children, offenders, additional types of victimization, services, followup services, information/referral, and FVPSA, click the number in green in the box.
Advocate Query	Advocate Name/ Date Range	Report provides total number of primary victims, secondary victims, and witnesses served during specified date range by the advocate; the total number of initial services and followup services broken down by type of service; total number of each primary victimization and additional victimization types; and the initial and followup time spent with the client broken down by time range. This report is not based on who entered the client record so in order for the information to be available in this report, users must select the advocates name when entering the client data.
Service Type vs. Service County	Date Range	Report provides a breakdown of the number of victims who have received a service. The report is broken out by primary versus secondary victims. This report does not provide totals for the number of times a service was provided, just the total number of victims who have received a service during the specified date range.
Victim Services Query	Date Range/ Output Fields	User select what Date Type will be used for the date range. There are five options to choose (Service Date (Initial/Followup) -- this will include initial service date and any followup that happened in the date range), Followup Service Date, Victimization Date, Client Entry Date, and Client Entry and Victimization date. The user then has the option of selecting the following output fields: Victim County of Residence; Age; Gender; Race; Type (i.e. primary victim); Type of Victimization; Protection Orders; Underserved Populations; Miles Traveled; County Crime Occurred; Location; Relationship to Offender; Services Provided; and Information/Referral. This report provides user the ability to drill down certain data. For example, if users want to analyze how many primary victims of sexual assault received forensic exam services, the user would check "Primary Victim"; check "Type of Victimization" and then check "Sexual Assault"; and then check "Services Provided" and check "Forensic Exam". Report will only provide totals for clients that meet each criterion. <i>Additional query information on page 74.</i>

To view details for the annual reports, log in to AVID and from the “Main Menu” click on “Program Administration and Reporting” and click “Annual Reports”. There are two sections: Programs and Annual Reports.

Report Name	Parameters	Information Provided
Detailed Program Report	N/A	Report provides the name and address of the user’s program along with an overview of the grants that have been entered in AVID on behalf of the program.
Summary of Active Grants	N/A	Report provides the grant number and grant type for grants that are still active and listed in AVID.
Summary of Inactivated Grants	N/A	Report provides the grant number and grant type for grants that are not active and have been inactivated in AVID. The list is not intended to provide a historical overview of all grants for the program. The “Grant Termination Date” reflects the date that MBCC inactivated the grant in AVID and is not an official closeout date.
Active Users Email Addresses	N/A	Report provides a list of active users’ names and email addresses and is intended as a tool to build email distribution lists.
FVPSA Annual Report	Date Range	Report provides the total number of active volunteers and total volunteer hours; the number of shelter residents broken out by children, men and women and residential versus non-residential; race, gender and age totals; total number of shelter nights; services with shelter unavailable, which comes from selecting “Services Unavailable – Referred Elsewhere” from the services drop-down menu; and the total crisis line calls. Lastly, the report provides details in regards to individual versus group activities and information in regards to the outcome surveys.
VOCA Annual Report	Date Range	Report provides the total number of types of victimization and additional victimization types; the number of services and followup services provided; crisis line calls by type; and the number of information/referrals. Programs receiving VOCA funding are not required to provide this information to MBCC; however, this provides users with the ability to see details in regards to what is required on the federal report. Federal VOCA annual report categories are not the same as AVID. For example, OVC has a requirement to provide the total number of “Adult Sexual Assault” victims. This report will include totals for incest, sexual assault and sexual intercourse without consent for the total number of adult sexual assault victims.

STOP Annual Training Report	Date Range/Type	Report is designed based on Muskie and OVW requirements for annual reports that recipients of STOP VAWA and SASP are required to submit on an annual basis. Please note that SASP funds are for direct services only, and therefore the federal report does not include a training section even though there is an option to designate STOP or SASP for this report. Report provides total number of trainings, training professions, the subject of the trainings, underserved population and if CCR training was provided, which type – for example SART.
STOP Annual Victim Services Report	Date Range/Type	Report is designed based on Muskie and OVW requirements for annual reports that recipients of STOP VAWA and SASP are required to submit on an annual basis. Report provides the total number of primary and secondary victims broken out by primary victimization type and additional victimization type. Report then provides a breakdown of the number of clients that received all services, received some services or were denied services; if services were denied, a list of all types of reasons for denial is provided. Report provides a breakdown of race, gender and age and then the total number of each underserved population that services were provided to. OVW requires the relationship to offender for primary victims only – this report will exclude secondary victims and witnesses. Report also provides total number of initial and followup services along with the total number of personal advocacies from the crisis line. Total number of residential and non-residential shelter for the victim and the family members along with the total shelter nights. A summary of the crisis line calls distinguished by other, which includes the unknowns and professionals, versus victim/survivor is provided and the number of notifications/outreach which comes from the number of times a “Followup Unsolicited Letter”, “Followup Unsolicited Phone Call” and “Followup Unsolicited Visit” were provided. Finally, there is a breakdown of the protection orders by temporary versus permanent and requested versus granted.

Note: List includes STOP Annual Law Enforcement, Prosecution, Court, Probation and Parole, and Batterer Intervention Reports. These reports are intended for programs receiving STOP Violence Against Women (VAWA) Act funding under these categories and will produce no information for programs providing direct victim services.

Glossary

Term	Definition
Administrator	Individual authorized access to all AVID functions for their program.
Adult Molested as Child	Adult age 18 or older that was sexually abused as a child (see child sexual abuse definition).
Adult Group Treatment/Support	Coordination and provision of supportive group activities, which include self-help, peer and social support for adults.
Aggravated Assault	Unlawful, intentional causing of serious bodily injury with or without a deadly weapon, or unlawful, intentional attempting or threatening of serious bodily injury or death with a deadly or dangerous weapon.
Arrests	All arrests made by law enforcement, <u>except</u> dual arrests (for STOP VAWA, law enforcement only).
Arson	Any willful or malicious burning or attempt to burn, with or without intent to defraud, a dwelling, house, public building, motor vehicle or aircraft, or personal property of another.
Assault	An unlawful attack by one person on another, with or without a weapon, that inflicts, or attempts or threatens to inflict, physical injury.
Assault on Minor	An unlawful attack by one person on another, with or without a weapon, that inflicts, or attempts or threatens to inflict, physical injury and the victim is under 14 years of age and the offender is 18 years of age or older.
Assault with Weapon	Purposely or knowingly cause bodily injury to another with a weapon or reasonable apprehension of serious bodily injury in another by use of a weapon or what reasonably appears to be a weapon.
Assistance in Filing Compensation Claims	Making victims aware of the availability of crime victims' compensation, helping victims complete required forms, and gathering needed documentation. May also include followup contact with the victim compensation agency on behalf of the victim.
Batterer's Intervention	A program that batterers attend as part of the legal system response to an act of domestic violence.
Burglary	Knowingly enter or remain unlawfully in an occupied structure.
Calls for Assistance	All 911 and other calls made to law enforcement reporting on or requesting assistance.
Cases/Incidents Investigated	All cases in which evidence was collected and witnesses were interviewed relating to a sexual assault, domestic violence, dating violence, or stalking incident (for STOP VAWA, law enforcement only)
Child	A person under the age of 18 or otherwise defined by state law.
Child Group Treatment/Support	Coordination and provision of supportive group activities, which include self-help, peer and social support for children.

Child Physical Abuse	Non-accidental injury to a child by a parent or other adult that may include severe beatings, burns, strangulation, or human bites.
Child Sexual Abuse	Sexual offense against a child by a parent or other adult.
Child Witness to Domestic Violence	A child is a witness to domestic violence when an act defined as domestic violence is committed in the presence of or perceived by the child.
Civil Legal Advocacy/Court Accompaniment	Assisting a victim/survivor with civil legal issues, including preparing paperwork for protection orders; accompanying a victim/survivor to a protection order hearing, or other civil proceeding; and all other advocacy with the civil justice system. This also includes accompanying a victim/survivor to an administrative hearing, such as unemployment, Social Security, TANF, or food stamp hearing.
Civil Legal Advocacy	Civil legal services provided by an attorney and/or paralegal.
Community & Public Awareness Activities	Information forums where information is distributed and an exact count of audience cannot be obtained, such as press conferences, booths at health fairs, etc.
Community Education Presentation	Presentations of information or trainings to the community.
Counseling Services/Support Group	Individual or group counseling or support provided by a volunteer, peer, or professional.
Counselor	Professional counselors or peer counselors who provide emotional support, guidance, problem solving, etc. to victims/survivors.
Criminal Endangerment	Knowingly engage in conduct that creates a substantial risk of death or serious bodily injury to another.
Criminal Justice Support/Advocacy	Support, assistance, and advocacy provided to victims at any stage of the criminal justice process, including post-sentencing services and support; preparing victim impact statements; and accompanying a victim/survivor to a criminal court proceeding or law enforcement interview.
Criminal Mischief	Knowingly or purposely injure, damage, or destroy any property of another or public property without consent.
Criminal Trespass	Knowingly enter or remain unlawfully in an occupied structure or enter or remain unlawfully in or upon the premises of another.
Crisis/Hotline Call	Calls received on an agency line that relate to an individual or family in need of some kind of service.
Crisis Counseling	Crisis intervention, emotional support, and guidance and counseling provided by advocates, counselors, mental health professionals, or peers. Such counseling may occur at the scene of a crime or immediately after a crime or be provided on an ongoing basis.
Crisis Hotline Counseling	Operation of a 24-hour telephone service, 7 days a week, which provides counseling, guidance, emotional support, and information and referral.

Crisis Intervention	Process by which a person identifies, assesses, and intervenes with an individual in crisis so as to restore balance and reduce the effects of the crisis in her/his life.
Crime Victims' Compensation	Payment or reparations made to a crime victim.
Cruelty to Animals	Knowingly or negligently subject an animal to mistreatment or neglect.
Custodial Interference	Knowing that a person has no legal right to do so, a person takes, entices, or withholds from lawful custody any child, incompetent person, or other person entrusted by authority of law to the custody of another person or institution.
Danger Assessment	A tool used to determine the level of danger an abused person has of being killed by an intimate partner.
Dating Violence	Violence committed by a person who is or has been in a social relationship of a romantic or intimate nature with the victim.
Deferred Adjudication	A process in which adjudication of the case is deferred pending successful completion of certain terms. If a defendant successfully completes those terms, the case is then dismissed.
Disorderly Conduct	Knowingly disturb the peace.
Domestic Violence	Violent acts involving a current or former spouse or domestic partner. Applies to any pattern of coercive behavior that is used by one person to gain power and control over a current or former intimate partner or dating partner. This pattern of behavior may include physical or sexual violence, emotional and psychological intimidation, threats, verbal abuse, stalking, isolation, and economic control.
Driving Under the Influence	Drive or be in actual physical control of a vehicle while under the influence of alcohol, dangerous drug, or any other drug.
Dual Arrests	All responses by law enforcement in which both parties involved were arrested.
DUI/DWI Crash	Accident involving one or more motor vehicles in which at least one driver was under the influence of alcohol and/or drugs (DUI) or was legally intoxicated (DWI) at the time of the crash.
Elder Abuse	Abuse perpetrated by a caretaker on an elderly individual who depends on others for support and assistance.
Emergency Childcare	Providing care for children in emergency situations.
Emergency Financial Assistance	Cash outlays for such needs as transportation, food, clothing and emergency housing.
Emergency Legal Advocacy	Filing of temporary restraining orders, injunctions, and other protective orders, elder abuse petitions, and child abuse petitions. Does not include criminal prosecution or the employment of attorneys for such non-emergency purposes as custody disputes and civil suits.

Emergency Shelter	Victim/survivor is housed in a safe place that provides 24-hour access to living quarters for a limited amount of time. Emergency shelter can also be safe-homes (generally private homes allowing a victim/survivor who is in immediate danger to stay for a short period of time on an emergency basis) and hotel accommodations.
Employment Counseling	Provide guidance to victims/survivors on obtaining gainful employment.
Endangering Welfare of Children	Parent, guardian, or other person supervising the welfare of a child less than 18 years old, knowingly endangers the child's welfare by violating a duty of care, protection, or support.
Financial Counseling	Assist victims/survivors to make the best use of their financial assets and achieve specific economic objectives.
Financial Harm	Suffer financially as a direct result of a crime committed by another.
Follow-Up Contact	In-person contacts, telephone contacts, and written communications with victims to offer emotional support, provide empathetic listening, and check on a victims' progress.
Forensic Exam	A medical examination to collect and document evidence; evaluate, and treat STD's and pregnancy, and refer victims/survivors to followup or medical care or counseling. Does not include accompanying the victim/survivor to a hospital, clinic, or medical office.
Forensic Medical Evidence	All cases in which rape kits were processed.
Forgery	Knowingly defraud a person by altering a document or other object.
Group Treatment	Coordination and provision of supportive group activities, which include self-help, peer, and social support.
Harassment	Act of systematic and/or continued unwanted and annoying actions of one party or a group, including threats and demands.
Homicide	Purposely or knowingly cause the death of another.
Hospital/Clinic/Medical Response	Accompanying a victim/survivor to, or meeting a victim/survivor at a hospital, clinic, or medical office.
Human Trafficking	Purposely or knowingly recruit, entice, harbor, transport, provide, or obtain by any means another person, intending or knowing that the person will be subjected to involuntary servitude.
Identity Theft	A crime in which an imposter obtains key pieces of personal information, such as Social Security or driver's license numbers, to impersonate someone else.
Incest	Knowingly marry, cohabits with, has sexual intercourse with, or has sexual contact, with an ancestor, a descendant, a brother or sister of the whole or half blood, or any stepson or stepdaughter.
Incident Reports	All responses to a sexual assault, domestic violence, dating violence or stalking incident as reported on an incident report (for VAWA, law enforcement only).

Indecent Exposure	Knowingly or purposely expose genitals under circumstances in which the person knows the conduct is likely to cause affront or alarm in order to abuse, humiliate, harass, or degrade another; or arouse or gratify the person's own sexual response or desire or the sexual response or desire of any person.
Information and Referral (In-Person)	In-person contact with crime victim to identify available services and support
Information and Referral (Telephone)	Telephone contact with crime victim to identify available services and support.
In-Person Crisis Counseling	In-person Crisis intervention, emotional support, and guidance and counseling provided by advocates, counselors, mental health professionals, or peers. Such counseling may occur at the scene of a crime or immediately after a crime or be provided on an ongoing basis.
Intimidation	With the purpose to cause another to perform or to omit the performance of any act, communicate to another, under circumstances that reasonably tend to produce a fear that it will be carried out, a threat to perform without lawful authority any of the following: inflict physical harm on the person threatened or any other person; subject any person to physical confinement or restraint; or commit any felony.
Job Training	Provide victims/survivors with skills necessary to obtain gainful employment.
Judicial Monitoring	Cases reviewed by the court for compliance with conditions of probation or other court-ordered conditions, or for violations of those conditions.
Kidnapping	Knowingly or purposely and without lawful authority restrain another person by either secreting or holding the other person in a place of isolation or by using or threatening to use physical force.
Language Services	Provision of interpretation and/or translation.
Law Enforcement Accompaniment	Accompany victim/survivor to a meeting with law enforcement.
Legal Advocate	A staff person who assists a victim/survivor with civil or criminal legal issues including preparing paperwork for protection orders; accompanying a victim/survivor to a protection order hearing, administrative hearing, or other civil proceeding; and all other advocacy within the civil justice system. Does not include attorneys, paralegals, or governmental victim advocates (i.e. victim assistant/victim-witness coordinator) or non-governmental victim advocates.
Letter of No Trespass	Letter written by an advocate requesting an offender not trespass on victim/survivors' property.
Material Assistance	Providing materials to assist a victim/survivor.
Negligent Endangerment	Negligently engage in conduct that creates a substantial risk of death or serious bodily injury to another.
Negligent Homicide	Negligently cause the death of another human being.

Negligent Vehicular Assault	Negligently operate a vehicle while under the influence of alcohol, a dangerous drug, any other drug, or any combination of the three, and cause bodily injury to another.
No Victimization	Providing information to an individual that has not been a victim of a crime, for example, where an individual can drop off donations or when working with a witness.
Offender	A person who has been convicted, or accused, of committing a crime.
Parenting Interference	Before the entry of a court order determining parenting rights, takes, entices, or withholds a child from the other parent when the action manifests a purpose to substantially deprive that parent of parenting rights; or is one of two persons who has parenting authority of a child under a court order and takes, entices, or withholds the child from the other when the action manifests a purpose to substantially deprive the other parent of parenting rights.
Partner/Family Member Assault	Purposely or knowingly cause bodily injury to a partner or family member; negligently causes bodily injury to a partner or family member with a weapon; or purposely or knowingly cause reasonable apprehension of bodily injury in a partner or family member.
People with Disabilities	Victims/survivors with a significant limitation in activities of daily living; may include people who are vision-impaired, people who are hearing impaired, people with developmental disabilities, and people with diagnosed mental illness, if their activities are so limited.
People with Limited English Proficiency	Individuals who do not speak English as their primary language and who have limited ability to read, write, speak, or understand English.
Personal Advocacy	Assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance and intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurer programs, including workers' compensation, unemployment benefits, and public assistance; and accompanying the victim to the hospital.
Photos	Take pictures to document injuries from a crime.
Power and Control Wheel	Visually represent the tactics typically used by batterers.
Primary Victim	Person who is injured as a direct result of an act committed against them.
Privacy in Communications	Knowingly or purposely with the purpose to terrify, intimidate, threaten, harass, annoy, or offend, communicates with a person by electronic communication and uses obscene, lewd, or profane language, suggests a lewd or lascivious act, or threatens to inflict injury or physical harm to the person or property of the person.
Program Coordinator	Staff who coordinate specific aspects of the program, such as Training Coordinator, Victim Services Coordinator, and Legal Staff Coordinator.

Promoting Prostitution	Own, control, manage, supervise, reside in, or otherwise keep, alone or in association with others, a house of prostitution or a prostitution business; procure an individual for a house of prostitution or a place in a house of prostitution for an individual; encourage, induce, or otherwise purposely cause another to become or remain a prostitute; or solicit clients for another person who is a prostitute.
Restitution Report	A report recommending the amount of restitution a court should order.
Robbery	Taking or attempting to take anything of value from the care, custody, or control of a person or persons by force or threat of force or violence.
Rural	Any area or community, respectively, no part of which is within an area designated as a standard metropolitan statistical area by the Office of Management and Budget, consistent with the U.S. Census; or any area or community, respectively, that is within an area designated as a metropolitan statistical area or considered as a part of a metropolitan statistical area and is located in a rural census tract; or any incorporated place or census designated place with fewer than 2,500 inhabitants that is located outside an urbanized area.
Safety Plan	Guidelines for victims that if implemented, may reduce the odds of physical or emotional harm from an offender.
Secondary Victim	Individual who is indirectly affected by a crime.
Sexual Assault	Knowingly causing another person to engage in a sexual act by using force against that person or by threatening or placing that person in fear. Also includes engaging in a sexual act with another person after knowingly rendering that person unconscious, or administering to another person by force or threat of force, or without the knowledge or permission of that person, a drug, intoxicant, or other similar substance and thereby substantially impairing the ability of that person to appraise or control sexual conduct.
Sexual Intercourse w/out Consent	Knowingly have sexual intercourse without consent of the other person.
Shelter/Safe House	Short and long-term housing and related support services for victims and families following victimization.
Stalking	Any unwanted contact between two people that directly or indirectly, communicates a threat or places the victim in fear.
Strangulation	Intentional obstruction of the air passage.
Specialized Unit	A centralized or coordinated group, unit, or dedicated staff of police officers, prosecutors, probation officers, judges, or other court staff responsible for domestic violence cases.
Support Staff	Staff who are secretaries, administrative assistants, bookkeepers, accountants and/or receptionists.
Surreptitious Visual Observation	Purposely or knowingly hides, waits, or otherwise loiter in the vicinity of a private dwelling house, apartment, or other place of residence for the purpose of watching, gazing at, or looking upon any occupant in the residence in a surreptitious manner.

Survivor of homicide	Family member or loved one of a murder victim.
Tampering w/Witnesses & Informants	Believing that an official proceeding or investigation is pending or about to be instituted, a person purposely or knowingly attempts to induce or otherwise cause a witness or informant to testify or inform falsely; withhold any testimony, information, document, or thing; elude legal process summoning the witness or informant to testify or supply evidence; or not appear at any proceeding or investigation to which the witness or informant has been summoned.
Theft	Knowingly obtain or exert unauthorized control over property of the owner.
Therapy	Intensive professional, psychological, psychiatric, or other counseling-related treatment for individuals, couples, and family members to provide emotional support in crisis arising from the occurrence of crime. Includes the evaluation of mental health needs and the delivery of psychotherapy.
Training	Provide information that enables professionals to improve their response to victims/survivors as it relates to their role in the system.
Transitional Housing	Victim/survivor is housed either in an apartment or single-family unit. This housing often includes a case management component that would include a work plan for what the client will accomplish while staying at the facility. Victims/survivors and their children are offered an array of direct services that the victim service agency offers other clients, such as court advocacy and assistance in getting TANF, WIC, job training, child care, legal assistance, permanent housing, vouchers, support and educational groups, and other services.
Transportation	Provision of transportation, either directly or through bus passes, taxi fares, or other means of transportation.
Unauthorized Use of Motor Vehicle	Knowingly operate automobile, airplane, motorcycle, quadricycle, motorboat, or other motor-propelled vehicle of another without the owner's consent.
Underserved Population	Populations which are disadvantaged due to being under-resourced, not having sufficient service.
Unlawful Restraint	Knowingly or purposely and without lawful authority restrains another so as to interfere substantially with the other person's liberty.
Vehicular Homicide	Negligently cause the death of another human being.
Victim	A person who has suffered direct, or threatened, physical, emotional or pecuniary harm as a result of the commission of a crime.
Victim Advocate	A person who facilitates a victim/survivor in accessing needed resources or services. An advocate may also provide crisis intervention, safety planning, and support during medical exams.

Victim Assistant	A staff person, who provides victim assessment and coordination in support of case prosecution activities, assists with victim-witness statements, coordinates victim/survivor court appearances, and provides victim/survivors with court dates. The services provided are generally limited to the period and scope of court proceedings. Typically, this is a governmental employee of a law enforcement agency, prosecution office, or court.
Violation of No Contact Order	With knowledge of an order, purposely or knowingly violates a provision of a no contact order.
Violation of Order of Protection	With knowledge of an order, purposely or knowingly violates a provision of an order of protection.
Witness	Individual who sees occurrence of a crime; somebody who gives evidence after seeing or hearing a crime.
911 Phone	Emergency cell phone provided to victims/survivors.

Acronyms

Acronym	Definition
CFSD	Child & Family Services Division
DPHHS	Department of Health and Human Services
FVPSA	Family Violence Prevention and Services Act
MBCC	Montana Board of Crime Control
SASP	Sexual Assault Services Program
STOP	Services, Trainers, Officers, Prosecutors
VAWA	Violence Against Women Act
VOCA	Victims of Crime Act

AVID Menus

Type of Volunteer Service	Crisis Line Call Type	Reason for Denied Services
Board Member	Civil Legal Advocacy/Assistance	Conflict of Interest
Counselor	Criminal Justice Support/Advocacy	Did not meet Statutory Requirements
Crisis Line	Crisis Counseling	Hours of Operation
Direct Service	Crisis Intervention	Insufficient/Lack of Services for People w/Disabilities
Therapist	Followup Phone Call	Insufficient/Lack of Culturally Appropriate Services
Other	Information/Referral	Insufficient/Lack of Language Capacity (Including Sign Language)
	Legal Advocacy	Lack of Childcare
	Personal Advocacy	Lack of Transportation
		Program Reached Capacity
		Program Rules not Acceptable to Victim/Survivor
		Program Unable to Provide Services due to Limited Resources/Priority-Setting
		Services Inappropriate/Inadequate for Victims/Survivors w/Mental Health Issues
		Services Inappropriate/Inadequate for Victims/Survivors w/Substance Abuse Issues
		Services Not Appropriate for Victim/Survivor
		Services Not Available for Victims/Survivors Accompanied by Male Adolescents

Training Subject	Trainee Profession	Underserved Populations Training
Advocate Response	Attorneys/Law Students	American Indian or Alaskan Native
Child Witnesses	BIP Staff	Asian
Civil Court Procedures	Child Protective Services	Black or African American
Confidentiality	Corrections	Elderly
Coordinated Community Response	Courts	Have Disabilities
Criminal Court Procedures	Disability Organization Staff	Have Limited English Proficiency
Dating Violence	Educators	Have Mental Health Issues
Domestic Violence	Elder Organization Staff (Non-Governmental)	Have Substance Abuse Issues
Domestic Violence Statutes/Codes	Faith-Based	Hispanic or Latino
Firearms and Domestic Violence	Government Agency	Homeless or Living in Poverty
Identification & Arrest of Predominant Aggressor	Health Professionals	Immigrants, Refugees or Asylum Seekers
Immigration	Immigrant Organization	Lesbian, Gay, Bisexual, Transgender or Intersex
Judicial Response	Law Enforcement	Live in Rural Areas
Law Enforcement Response	Legal Services	Native Hawaiian or Other Pacific Islander
Pro-Arrest Policies	Mental Health	
Probation Response	Military	
Prosecution Response	Multidisciplinary	
Protection Orders	Private, Non-Profit Victim Services	
Response to Victims/Survivors who have been Incarcerated	Project Staff	
Response to Victims/Survivors who have been Trafficked	Prosecution	
Safety Planning	Public	

Sexual Assault	Public Victim Services	
Sexual Assault Forensic Examination	SANE/SAFE	
Sexual Assault Statutes Codes	Service Club	
Stalking	Sex Offender Treatment Providers	
Stalking Statutes/Codes	Social Service Organization Staff	
Supervised Visitation/Exchange	Substance Abuse Providers	
Tribal Jurisdiction & Public Law 280	Supervised Visitation/Exchange Center Staff	
Other	Translators/Interpreters	
	Tribal	
	Volunteers	
	Other	

Relationship to Offender	Victim Referred By	Information/Referral
Acquaintance	Adult Protective Services	CPS
Brother/Sister (includes step)	Child Protective Services	Domestic Violence Packet
Co-Worker	Court Personnel/Magistrate	Family Planning
Employee	Educator	Food Pantry
Employer	Employer	Goal Sheet
Father/Mother (includes step)	Faith Leader	Healthcare for Homeless
Former Significant Other	Former Victim	Homeless Services
Former Spouse	Friend/Family	Housing
Grandfather/Grandmother (includes step)	Health Care	Law Enforcement
Grandson/Granddaughter	Internet	Legal Services
Other Relative/In-Law	Law Enforcement	Prosecution
Peer	Legal Services	National Domestic Violence Hotline

Relationship Unknown	National Hotline	Other Service Provider
Significant Other/Partner (Dating)	Phone Book	Safety Plan
Significant Other/Partner (Live-in)	Program Advertisement	Therapist
Significant Others' Family Member	Prosecution	Victim Advocacy
Son/Daughter (includes step)	Self	Victim Impact Panel
Spouse (includes common law)	Shelter	Victims' Compensation
Stranger	Social Service Agency	
Other	State Hotline	
Other Relative/In-Law	Therapist	
	Victim/Witness	
	Other/Unknown	

Services	Type of Victimization
911 Phone	Adult Molested as Child
Adult Group Treatment/Support	Aggravated Assault
Batterer's Intervention	Arson
Child Group Treatment/Support	Assault
Civil Legal Advocacy	Assault on Minor
Civil Legal Advocacy/Court Accompaniment	Assault with Weapon
Counseling	Burglary
Crime Victims' Compensation	Child Incest
Criminal Justice Support/Advocacy	Child Physical Abuse
Crisis Intervention	Child Sexual Abuse
Danger Assessment	Child Witness to Domestic Violence
Emergency Childcare	Criminal Endangerment
Emergency Financial Assistance	Criminal Mischief

Employment Counseling	Criminal Trespass
Financial Counseling	Cruelty to Animals
Followup Letter	Custodial Interference
Followup Phone Call	Disorderly Conduct
Followup Visit	Domestic Violence
Followup Unsolicited Letter	Driving Under the Influence
Followup Unsolicited Phone Call	Elder Abuse
Followup Unsolicited Visit	Endangering Welfare of Children
Forensic Exam	Financial Harm
Hospital/Clinic/Other Medical	Forgery
In-Person Crisis Counseling	Harassment
Job Training	Homicide
Language Services	Human Trafficking
Law Enforcement Accompaniment	Incest
Letter of No Trespass	Indecent Exposure
Material Assistance	Intimidation
Personal Advocacy	Kidnapping
Power and Control Wheel	Negligent Endangerment
Photos	Negligent Homicide
Restitution Report	Negligent Vehicular Assault
Safety Planning	No Victimization
Shelter	Parenting Interference
Shelter – Hotel	Partner/Family Member Assault
Shelter – Safe Home	Privacy in Communications
Shelter Unavailable – Referred Elsewhere	Promoting Prostitution
Therapy	Robbery

Transitional Housing	Sexual Assault
Transportation	Sexual Intercourse w/out Consent
	Stalking
	Strangulation
	Surreptitious Visual Observation
	Tampering w/Witnesses & Informants
	Theft
	Theft of Identity
	Unauthorized Use of Motor Vehicle
	Unlawful Restraint
	Vehicular Homicide
	Violation of No Contact Order
	Violation of Order of Protection

Crisis Line Calls Form (Electronic Use)

- *Call Type:**
- Civil Legal Advocacy/Assistance
 - Criminal Justice Support/Advocacy
 - Crisis Counseling
 - Crisis Intervention
 - Follow-up Phone Call
 - Information/Referral
 - Legal Advocacy
 - Personal Advocacy

- Location:**
- City
 - County
 - Out-of-State
 - Reservation
 - Unknown

- Length of Call:**
- 0-5 Minutes
 - 5-30 Minutes
 - 30-59 Minutes
 - One Hour
 - Two Hours
 - Three Hours
 - Four Hours
 - More than Four Hours

- Race:**
- American Indian/Alaska Native
 - Asian
 - Black/African American
 - Hispanic/Latino
 - Native Hawaiian/Other Pacific Islander
 - White
 - Unknown/Other
 - Multi-racial

***Type of Victimization:**

Caller County:

County Crime Occurred:

- Action Plan:**
- Referred Elsewhere
 - Sought Services

***Date:**

*** Time of Call:** AM/PM

of Times Victim Called:

- Caller:**
- Professional
 - Victim/Survivor - Primary
 - Victim/Survivor - Secondary
 - Other

- Gender:**
- Female
 - Male
 - Unknown/Not Specified

- Age:**
- 0 – 12
 - 13 – 17
 - 18 – 24
 - 25 – 59
 - 60+
 - Unknown

Comments/Notes:

Crisis Line Calls Form (Hard-Copy Use)

- *Call Type:**
- Civil Legal Advocacy/Assistance
 - Criminal Justice Support/Advocacy
 - Crisis Counseling
 - Crisis Intervention
 - Follow-up Phone Call
 - Information/Referral
 - Legal Advocacy
 - Personal Advocacy

***Type of Victimization:** _____

Caller County: _____

County Crime Occurred: _____

- Action Plan:**
- Referred Elsewhere
 - Sought Services

- Location:**
- City
 - County
 - Out-of-State
 - Reservation
 - Unknown

*** Date:** _____

***Time of Call:** _____ AM/PM

of Times Called Today: _____

- Length of Call:**
- 0-5 Minutes
 - 5-30 Minutes
 - 30-59 Minutes
 - One Hour
 - Two Hours
 - Three Hours
 - Four Hours
 - More than Four Hours

- Caller:**
- Professional
 - Victim/Survivor - Primary
 - Victim/Survivor - Secondary
 - Other

- Race:**
- American Indian/Alaska Native
 - Asian
 - Black/African American
 - Hispanic/Latino
 - Native Hawaiian/Other Pacific Islander
 - White
 - Unknown/Other
 - Multi-racial

- Gender:**
- Female
 - Male
 - Unknown/Not Specified

- Age:**
- 0 – 12
 - 13 – 17
 - 18 – 24
 - 25 – 59
 - 60+
 - Unknown

Comments/Notes:

Client Intake Form (Electronic Use)

Advocate Name: _____ **Date:** _____ **Time:** _____ AM/PM

Victim Information

***First Name:** _____ ***Last Name:** _____ **Client ID:** _____

Address: _____ **City:** _____ **State/Zip:** _____

Phone Number: _____ **DOB:** _____

***Gender:** Female/Female Child Male/Male Child Unknown Youth IPV Victim

***Race:** American Indian/Alaska Native Asian
 Black/African American Hispanic/Latino White
 Native Hawaiian/Other Pacific Islander Unknown/Other Multi-racial

***County of Residence:** _____ ***Age:** 0-12 13-17 18-24
 25-59 60+ Unknown

***Type:** Primary Secondary Witness ***Primary Type of Victimization:**

Underserved: American Indian/Alaska Native Asian
 Black/African American Elderly
 Have Disabilities Have Limited English Proficiency
 Have Mental Health Issues Have Substance Abuse Issues
 Hispanic or Latino Homeless or Living in Poverty
 Immigrants/Refugees/
Asylum Seekers Lesbian/Gay/Bisexual/Transgender
or Intersex
 Live in Rural Areas Native Hawaiian/Other Pacific Islander

Round Trip Miles Traveled: _____ **Who Traveled:** Advocate Victim

Tribal Member: Assiniboine Blackfeet Cheyenne
 Chippewa Cree Crow
 Gros Ventre Kootenai Salish
 Shoshoni Sioux Other/Out-of-State

County Crime Occurred: _____ **Location:** City County
 Out-of-State Reservation
 Unknown

Drugs Involved: **Alcohol Involved:**

Relationship to Offender: _____

- | | | |
|--|---|---|
| <input type="checkbox"/> Acquaintance | <input type="checkbox"/> Brother/Sister (includes step) | <input type="checkbox"/> Co-Worker |
| <input type="checkbox"/> Employee | <input type="checkbox"/> Employer | <input type="checkbox"/> Father/Mother (includes step) |
| <input type="checkbox"/> Former Significant Other | | <input type="checkbox"/> Former Spouse |
| <input type="checkbox"/> Grandfather/Mother (includes step) | | <input type="checkbox"/> Peer |
| <input type="checkbox"/> Grandson/Daughter (includes step) | | <input type="checkbox"/> Stranger |
| <input type="checkbox"/> Relationship Unknown | | <input type="checkbox"/> Significant Other/Partner (Dating) |
| <input type="checkbox"/> Significant Other/Partner (Live-in) | | <input type="checkbox"/> Significant Others' Family Member |
| <input type="checkbox"/> Son/Daughter (includes step) | | <input type="checkbox"/> Spouse (includes Common-Law) |
| <input type="checkbox"/> Other | | <input type="checkbox"/> Other Relative/In-Law |

Victim Referred By:

- | | | |
|--|--|---|
| <input type="checkbox"/> Adult Protective Services | <input type="checkbox"/> Child Protective Services | <input type="checkbox"/> Court Personnel/Magistrate |
| <input type="checkbox"/> Educator | <input type="checkbox"/> Employer | <input type="checkbox"/> Faith Leader |
| <input type="checkbox"/> Former Victim | <input type="checkbox"/> Friend/Family | <input type="checkbox"/> Health Care |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Legal Services |
| <input type="checkbox"/> National Hotline | <input type="checkbox"/> Phone Book | <input type="checkbox"/> Program Advertisement |
| <input type="checkbox"/> Prosecution | <input type="checkbox"/> Self | <input type="checkbox"/> Shelter |
| <input type="checkbox"/> Social Service Agency | <input type="checkbox"/> State Hotline | <input type="checkbox"/> Therapist |
| <input type="checkbox"/> Victim/Witness | <input type="checkbox"/> Other/Unknown | |

Time Spent w/Client: From: to: **Additional Type(s) of Victimization:**

Services:

- | | | |
|--|--|---|
| <input type="checkbox"/> 911 Phone | <input type="checkbox"/> Adult Group Treatment/Support | <input type="checkbox"/> Batterer's Intervention |
| <input type="checkbox"/> Child Group Treatment/Support | | <input type="checkbox"/> Civil Legal Adv./Court Acc. |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Crime Victims' Compensation | |
| <input type="checkbox"/> Criminal Justice Support/Advocacy | | <input type="checkbox"/> Crisis Intervention |
| <input type="checkbox"/> Danger Assessment | <input type="checkbox"/> Emergency Childcare | <input type="checkbox"/> Emergency Financial Asst. |
| <input type="checkbox"/> Employment Counseling | <input type="checkbox"/> Financial Counseling | <input type="checkbox"/> Follow-up Letter |
| <input type="checkbox"/> Follow-up Phone Call | <input type="checkbox"/> Follow-up Visit | <input type="checkbox"/> Follow-up Unsolicited Letter |
| <input type="checkbox"/> Follow-up Unsolicited Phone Call | | <input type="checkbox"/> Follow-up Unsolicited Visit |
| <input type="checkbox"/> Forensic Exam | <input type="checkbox"/> Hospital/Clinic/Other | <input type="checkbox"/> In-Person Crisis Counseling |
| <input type="checkbox"/> Job Training | <input type="checkbox"/> Language Services | <input type="checkbox"/> Law Enforcement Acc. |
| <input type="checkbox"/> Letter of No Trespass | <input type="checkbox"/> Material Assistance | <input type="checkbox"/> Personal Advocacy |
| <input type="checkbox"/> Power & Control Wheel | <input type="checkbox"/> Photos | <input type="checkbox"/> Restitution Report |
| <input type="checkbox"/> Safety Planning | <input type="checkbox"/> Shelter | <input type="checkbox"/> Shelter – Hotel |
| <input type="checkbox"/> Shelter – Safe Home | <input type="checkbox"/> Shelter Unavailable | <input type="checkbox"/> Therapy |
| <input type="checkbox"/> Transitional Housing | <input type="checkbox"/> Transportation | |

Victim was Contacted and Declined Services

Received All Services Received Some Services Denied Services

Client Intake Form (Hard-Copy Use)

Advocate Name: _____ Date: _____ Time: _____ AM/PM

Victim Information

*First Name: _____ *Last Name: _____ Client ID: _____

Address: _____ City: _____ State/Zip: _____

Phone Number: _____ DOB: _____

*Gender: Female/Female Child Male/Male Child Unknown Youth IPV Victim

*Race: American Indian/Alaska Native Asian
 Black/African American Hispanic/Latino White
 Native Hawaiian/Other Pacific Islander Unknown/Other Multi-racial

*County of Residence: _____ *Age: 0-12 13-17 18-24
 25-59 60+ Unknown

*Type: Primary Secondary Witness *Primary Type of Victimization: _____

Underserved: American Indian/Alaska Native Asian
 Black/African American Elderly
 Have Disabilities Have Limited English Proficiency
 Have Mental Health Issues Have Substance Abuse Issues
 Hispanic or Latino Homeless or Living in Poverty
 Immigrants/Refugees/
Asylum Seekers Lesbian/Gay/Bisexual/Transgender
or Intersex
 Live in Rural Areas Native Hawaiian/Other Pacific Islander

Round Trip Miles Traveled: _____

Who Traveled: Advocate Victim

Tribal Member: Assiniboine Blackfeet Cheyenne
 Chippewa Cree Crow
 Gros Ventre Kootenai Salish
 Shoshoni Sioux Other/Out-of-State

County Crime Occurred: _____ Location: City County
 Out-of-State Reservation
 Unknown

Drugs Involved: Alcohol Involved:

Relationship to Offender:

- | | | |
|--|---|---|
| <input type="checkbox"/> Acquaintance | <input type="checkbox"/> Brother/Sister (includes step) | <input type="checkbox"/> Co-Worker |
| <input type="checkbox"/> Employee | <input type="checkbox"/> Employer | <input type="checkbox"/> Father/Mother (includes step) |
| <input type="checkbox"/> Former Significant Other | | <input type="checkbox"/> Former Spouse |
| <input type="checkbox"/> Grandfather/Mother (includes step) | | <input type="checkbox"/> Peer |
| <input type="checkbox"/> Grandson/Daughter (includes step) | | <input type="checkbox"/> Stranger |
| <input type="checkbox"/> Relationship Unknown | | <input type="checkbox"/> Significant Other/Partner (Dating) |
| <input type="checkbox"/> Significant Other/Partner (Live-in) | | <input type="checkbox"/> Significant Others' Family Member |
| <input type="checkbox"/> Son/Daughter (includes step) | | <input type="checkbox"/> Spouse (includes Common-Law) |
| <input type="checkbox"/> Other | | <input type="checkbox"/> Other Relative/In-Law |

Victim Referred By:

- | | | |
|--|--|---|
| <input type="checkbox"/> Adult Protective Services | <input type="checkbox"/> Child Protective Services | <input type="checkbox"/> Court Personnel/Magistrate |
| <input type="checkbox"/> Educator | <input type="checkbox"/> Employer | <input type="checkbox"/> Faith Leader |
| <input type="checkbox"/> Former Victim | <input type="checkbox"/> Friend/Family | <input type="checkbox"/> Health Care |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Legal Services |
| <input type="checkbox"/> National Hotline | <input type="checkbox"/> Phone Book | <input type="checkbox"/> Program Advertisement |
| <input type="checkbox"/> Prosecution | <input type="checkbox"/> Self | <input type="checkbox"/> Shelter |
| <input type="checkbox"/> Social Service Agency | <input type="checkbox"/> State Hotline | <input type="checkbox"/> Therapist |
| <input type="checkbox"/> Victim/Witness | <input type="checkbox"/> Other/Unknown | |

Time Spent w/Client: From: _____ to: _____

Additional Type(s) of Victimization: _____

Services:

- | | | |
|--|--|---|
| <input type="checkbox"/> 911 Phone | <input type="checkbox"/> Adult Group Treatment/Support | <input type="checkbox"/> Batterer's Intervention |
| <input type="checkbox"/> Child Group Treatment/Support | <input type="checkbox"/> Crime Victims' Compensation | <input type="checkbox"/> Civil Legal Adv./Court Acc. |
| <input type="checkbox"/> Counseling | | <input type="checkbox"/> Crisis Intervention |
| <input type="checkbox"/> Criminal Justice Support/Advocacy | | <input type="checkbox"/> Emergency Financial Asst. |
| <input type="checkbox"/> Danger Assessment | <input type="checkbox"/> Emergency Childcare | <input type="checkbox"/> Follow-up Letter |
| <input type="checkbox"/> Employment Counseling | <input type="checkbox"/> Financial Counseling | <input type="checkbox"/> Follow-up Unsolicited Letter |
| <input type="checkbox"/> Follow-up Phone Call | <input type="checkbox"/> Follow-up Visit | <input type="checkbox"/> Follow-up Unsolicited Visit |
| <input type="checkbox"/> Follow-up Unsolicited Phone Call | | <input type="checkbox"/> In-Person Crisis Counseling |
| <input type="checkbox"/> Forensic Exam | <input type="checkbox"/> Hospital/Clinic/Other | <input type="checkbox"/> Law Enforcement Acc. |
| <input type="checkbox"/> Job Training | <input type="checkbox"/> Language Services | <input type="checkbox"/> Personal Advocacy |
| <input type="checkbox"/> Letter of No Trespass | <input type="checkbox"/> Material Assistance | <input type="checkbox"/> Restitution Report |
| <input type="checkbox"/> Power & Control Wheel | <input type="checkbox"/> Photos | <input type="checkbox"/> Shelter – Hotel |
| <input type="checkbox"/> Safety Planning | <input type="checkbox"/> Shelter | <input type="checkbox"/> Therapy |
| <input type="checkbox"/> Shelter – Safe Home | <input type="checkbox"/> Shelter Unavailable | |
| <input type="checkbox"/> Transitional Housing | <input type="checkbox"/> Transportation | |

Victim was Contacted and Declined Services

Received All Services Received Some Services Denied Services

Reason for Denial of Services: _____

Information/Referral:

- | | | |
|--|---|--|
| <input type="checkbox"/> CPS | <input type="checkbox"/> Domestic Violence Packet | <input type="checkbox"/> Family Planning |
| <input type="checkbox"/> Food Pantry | <input type="checkbox"/> Goal Sheet | <input type="checkbox"/> Healthcare for Homeless |
| <input type="checkbox"/> Homeless Services | <input type="checkbox"/> Housing | <input type="checkbox"/> Law Enforcement |
| <input type="checkbox"/> Legal Services | <input type="checkbox"/> National DV Hotline | <input type="checkbox"/> Other Service Provider |
| <input type="checkbox"/> Prosecution | <input type="checkbox"/> Safety Plan | <input type="checkbox"/> Therapist |
| <input type="checkbox"/> Victim Advocacy | <input type="checkbox"/> Victim Impact Panel | <input type="checkbox"/> Victims' Compensation |

Number of Children Affected (Living in household at time of incident): _____

Age(s): _____ Race(s): _____ Gender(s): _____

Report of Child Abuse/Neglect has been made to CPS

Follow-up Contact Date: _____ **Services:** _____

F/Up Info/Referral Date: _____ **Info/Referral:** _____

Additional Round Trip Miles Traveled: _____ **Who Traveled:** Advocate Victim

Reported to Law Enforcement:

If No, Why:

<input type="checkbox"/> Chose Not To	<input type="checkbox"/> Fear	<input type="checkbox"/> Fear of Testifying
<input type="checkbox"/> Not Enough Evidence	<input type="checkbox"/> Self-Blame	<input type="checkbox"/> Shame/Embarrassment
<input type="checkbox"/> Statute of Limit Exp.	<input type="checkbox"/> Victim Intimidation	<input type="checkbox"/> Victim Not Interested
<input type="checkbox"/> Witness Intimidation	<input type="checkbox"/> Reason Unknown	<input type="checkbox"/> Other

Police Report Number: _____ **Prosecutor:** _____

Orders	Temporary	Permanent
Protection Order Requested	<input type="checkbox"/>	<input type="checkbox"/>
Protection Order Granted	<input type="checkbox"/>	<input type="checkbox"/>
No Contact Order Requested	<input type="checkbox"/>	<input type="checkbox"/>
No Contact Order Granted	<input type="checkbox"/>	<input type="checkbox"/>
Hope Card Requested	<input type="checkbox"/>	<input type="checkbox"/>
Hope Card Granted	<input type="checkbox"/>	<input type="checkbox"/>

Protection Order Dissolved Date: _____

Witness Information: Testimony Preparation Hearing Preparation

Shelter Information:

Residential Non-Residential Transitional Housing

Data Entry Scenarios

The following examples are provided to assist in entering data in AVID. Remember that AVID is the data collection tool for multiple federal grants and each grant has different requirements. When in doubt, please contact your grant specialist.

Example 1: A victim/survivor comes into your program looking for assistance as her spouse physically abused her. She has her two minor children with her; both witnessed the abuse. Your advocate provides a counseling session along with bus tickets. While in the counseling session, the children are provided with emergency childcare. The mother should be entered as a “primary” victim with domestic violence as the type of victimization. The children should be entered as “secondary” victims with child witness to domestic violence as the type of victimization. Each individual should receive their own client ID number since services were provided to all three.

Example 2: A stalking victim/survivor receives assistance from a grant funded attorney in obtaining a protection order against her former husband, but does not include her child on the protection order. She will be counted as a primary victim/survivor and receive a client ID, but her child will not be counted as a secondary victim, or receive a client ID, since the child did not receive a service.

Example 3: The grandmother of a dating violence victim/survivor calls your grant funded hotline to ask for help with how to deal with her adolescent granddaughter who was sexually assaulted on a first date. The grandmother will be counted as a secondary victim under “Crisis Line Calls”, since she received services; if the grandmother seeks additional services through your program, she would be entered in the “Victim Services” portion of AVID and receive a client ID. The granddaughter will not be counted as a primary victim/survivor, since she did not receive services.

Example 4: A victim/survivor comes into your program looking for help with a protection order. Her estranged intimate partner, who had a history of very controlling behavior with some physical abuse, came to her apartment and sexually assaulted her. You could report her under either domestic violence/dating violence or sexual assault, but you must choose only one as the primary type of victimization. In this instance, sexual assault may be more appropriate, because it was the sexual assault that prompted her to seek services.

Example 5: A domestic violence victim/survivor calls your program looking for assistance obtaining a protection order. You assist her with the paperwork and with the filing and service of the emergency protection order, and accompany her to the protection order hearing three weeks later. Since this victim/survivor received the services she requested that were provided under your grant, she should be counted as “Received all Services Requested”.

Example 6: A victim/survivor whose ex-husband has been charged with stalking comes into the prosecutor's office to get information about the criminal process. Your advocate explains the process to her, what she can expect, the different hearings that will take place, etc. She asks the advocate to attend the arraignment with her, but the advocate already is scheduled to be in another courtroom on the date. This victim/survivor received information from your advocate, but not the other service she requested that you normally provide under your grant. She should be counted as "Received some Services Requested" and the reason for denial would be "Program Unable to Provide Services due to Limited Resources/Priority-Setting".

Example 7: A woman is sexually assaulted by the person with whom she was living. A police officer who responded to the call has called your program's hotline on behalf of the victim asking if an advocate will accompany the victim to the hospital during her examination. There is no advocate available to do this, and it is a service your program is funded to do under your grant. You are unable to provide the requested service; therefore she should be counted as "Denied Services" and the reason for denial would be "Program Unable to Provide Services due to Limited Resources/Priority-Setting".

Example 8: A man calls your hotline seeking information about where to drop off donations for the program. Since he is not a victim/survivor, the "Call Type" would be listed as "Information/Referral" and the "Type of Victimization" would be listed as "No Victimization" with "Other" being the "Caller" type.

Victim Services Query

Board of Crime Control

Victim's Database

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Victim Services Query Input

Start Date	End Date	Date Type
<input type="text"/>	<input type="text"/>	<input type="text" value="Service Date (Initial/Followup)"/>
<input type="checkbox"/> Primary Victim	<input type="checkbox"/> Secondary Victim	<input type="checkbox"/> Witness
<input type="checkbox"/> Victim County of Residence		
<input type="checkbox"/> Age		
<input type="checkbox"/> Gender		
<input type="checkbox"/> Race		
<input type="checkbox"/> Type of Victimization		
<input type="checkbox"/> Protection Order Requested <input type="checkbox"/> Protection Order Granted		
<input type="checkbox"/> Underserved Populations		
<input type="checkbox"/> Miles Traveled		
<input type="checkbox"/> County Crime Occurred		
<input type="checkbox"/> Location		
<input type="checkbox"/> Relationship to Offender		
<input type="checkbox"/> Services Provided		
<input type="checkbox"/> Information Referral		
<input type="button" value="Submit Query"/>		

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Date Type Options:

Service Date (Initial/Followup): This should be used for quarterly and annual reporting to determine all service counts that were provided to victims in a given time period using the specified date range. This will also include any followup services provided in this quarter. It only looks at the service date and includes any followup services entered in the specified service date range.

Followup Service Date: This should be used if you want to know when and how many follow-up services are being provided to a victim for a given time period using the Start Date and End Date criteria. It will also identify all selected initial services provided to victims in the specified range.

Victimization Date: This should be used to determine how many victimizations all clients reported to the program and services provided during the selected date range.

Client Entry Date: This should be used to determine how many new clients were entered during a specific time period during the selected date range.

Client Entry and Victimization Date: This should be used to determine if you had a new client who was victimized and how many victimizations occurred during the selected date range.

Note: This query allows you to drill down to specific parameters by selecting more than one of the fourteen report selections. If you choose a service that has no entries, you will receive a count of zero. For example you select "Protection Order Granted, along with all age, all race, and primary victim". You will only get a count of victims that have data entered into all of those fields. You would have to have an entry in each selection to return ANY totals. So if you did not have any "Protection Order Granted", your counts would be zero in all areas.

Board of Crime Control
Victim's Database
Resources Instructions Feedback

Victim Services Query

Report Generated 04/17/2014 15:10:29
Date Range Type: Service Date (Initial or Followup)
Program: Jerry Test
Date Start: 01/01/2014
Date End: 04/17/2014

PRIMARY			
GENDER	PRIMARY	SECONDARY	WITNESS
TOTAL	TOTAL	TOTAL	TOTAL
VICTIM TYPE	TEMPORARY PROTECTION ORDER GRANTED		PERMANENT PROTECTION ORDER GRANTED
TOTAL	TOTAL		TOTAL
SERVICES PROVIDED	PRIMARY	SECONDARY	WITNESS
TOTAL	TOTAL	TOTAL	TOTAL
FOLLOW UP SERVICES PROVIDED	PRIMARY	SECONDARY	WITNESS
TOTAL	TOTAL	TOTAL	TOTAL

[Back to Reports](#)

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