

**DOMESTIC VIOLENCE PREVENTION INITIATIVE
REPORTING REQUIREMENTS AND PROGRAM MEASURES**

Reporting Requirements & Program Measures: The DVPI projects submit a progress report every six months on the program measures related to their priority area and only on those measures relevant to their scope of work. The program measures are:

10 Program Measures for Domestic Violence (DV) Prevention Programs

1	Number of community awareness or educational events held during the reporting period.
2	Number of school education events held during the reporting period (may include bullying prevention campaigns or events).
3	Percentage of DV-funded programs with written policies and procedures.
4	Percentage of DV-funded Programs with full-time DV Coordinator position collaborating on the project.
5	Percentage of DV funded organizations that have an active interdisciplinary DV Response Team (must include at minimum: 1) victim advocate; 2) medical personnel; 3) law enforcement representative.
6	Percentage of DV-funded programs providing case management services to victims (must include services to affected children).
7	Percentage of DV-funded programs with a formalized behavioral health referral process for victims of domestic violence.
8	Measure: Percentage of DV-funded organizations that are reporting DV GPRC screening data to IHS Headquarters.
9	Total number of adults who received DV-funded services during the reporting period.
10	Total number of children who received DV-funded services during the reporting period.

10 Program Measures for the Sexual Assault Community Developed Models (SACDM)

1	Number of community awareness or educational events held during the reporting period.
2	Number of school education events held during the reporting period (may include bullying prevention campaigns or events).
3	Percentage of SACDM programs with written policies and procedures to respond to victims of sexual assault.
4	Percentage of SACDM programs with a full-time victim advocate collaborating on the project.
5	Percentage of SACDM programs that have an active interdisciplinary Sexual Assault Response Team (SART). Must include at minimum: 1) Victim Advocate; 2) Sexual Assault Forensic Examiner/Sexual Assault Nurse Examiner {SAFE/SANE}; 3) law enforcement representative; and 4) Prosecutor.
6	Percentage of SACDM programs that provide case management services to victims (must include post-referral follow-up services).
7	Percentage of SACDM programs with a formalized sexual assault crisis counseling referral process for victims of sexual assault.
8	Management of SART activities and training. (Programs with a designated individual assigned to participate in SART activities.)

9	Total number of adult sexual assault victims who received SACDM services during the reporting period.
10	Total number of child sexual assault victims who received SACDM services during the reporting period.

16 Program Measures for SANE/SART

1	Percentage of SANE/SART programs with written mission statement and goals.
2	Percentage of facilities operating a 24/7 SANE/SART Program (must have 24/7 coverage by SANE trained staff).
3	Percentage of SANE/SART Programs with written sexual assault response policies and procedures:
4	Percentage of SANE/SART programs with a full-time victim advocate collaborating on the project.
5	Percentage of funded sites that have purchased Sexual Assault Forensic Examination (SAFE) equipment.
6	Percentage of SART Programs with a Memorandum of Agreement (MOA) with other SART participating agencies.
7	Percentage of SANE/SART programs with written domestic violence (DV) screening and victim safety planning policies and procedures.
8	Percentage of SANE/SART Programs engaged in provider education.
9	Percentage of SANE/SART programs that provide case management services to victims.
10	Percentage of SANE/SART programs with a formalized rape crisis counseling referral process for victims of sexual assault.
11	Percentage of completed and submitted Sexual Assault Forensic examination kits that were accepted for prosecutions.
12	Total number of medical staff who have received 40 hours of didactic and 24 hours of clinical SANE/SART training during the past year.
13	Total number of medical staff who have received local or national SANE/SART training focused on pediatric sexual assault during the past year.
14	Total number of adult sexual assault victims served by SANE/SART funded organizations.
15	Total number of child sexual assault victims served by SANE/SART funded organizations.
16	Total number of sexual assault forensic evidence kits prepared and submitted by site.