

Family Justice Center Evaluation Toolkit

Developed through a partnership between the
Guilford County Family Justice Center and the
University of North Carolina at Greensboro

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Overview

This toolkit offers resources to support Family Justice Centers (FJCs) in collecting and organizing data to track the impact of FJCs on their communities. The tools provided in this toolkit were developed through a partnership between the Guilford County Family Justice Center in Greensboro and High Point, North Carolina, and the University of North Carolina at Greensboro (UNC Greensboro).

The Guilford County Family Justice Center opened on June 15, 2015, in Greensboro, and on October 23, 2018, in High Point. Prior to the opening of the Greensboro location, the FJC established a Data and Outcomes Committee, which began work to document the impact of the center through collecting baseline data before the center opened. Since that time, the Guilford County FJC has used a variety of data collection strategies, including a professional survey, the collection of annual organizational data from FJC partners, and an annual week-long census.

This Toolkit contains templates from the materials used in those data collection strategies that can be adapted by other FJCs who are interested in strengthening their evaluation procedures. FJCs should consider carefully the timing of the use of these resources within an overall plan for program evaluation. For example, the Guilford County FJC aims to use the following schedule for different data collection strategies throughout the year: (1) The partners' annual organizational data will be collected in February of each year, (2) The professional survey will be conducted around May or June of each year, and (3) The week-long census will be conducted annually in September. It is advisable for the evaluation schedule to be developed in consultation with partner organizations' leaders and frontline staff.

FJCs in other communities may adapt and modify the tools in this toolkit to fit their community, assuming they properly cite the original source of these materials as this toolkit. A suggested citation format is as follows:

- Murray, C. E., Johnson, C., Wyche, B., and the Guilford County Family Justice Center Data and Outcomes Committee (2018). *Family Justice Center Evaluation Toolkit*. Guilford County, NC.

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Professional Survey

Introduction: Each year, the Guilford County FJC distributes an anonymous, online survey to professionals who partner with the FJC. The purpose of the surveys is to learn about professionals' perceptions about the accessibility of services, the extent to which offenders are held accountable in the community, professionals' attitudes towards their work, including potential burnout, and the perceived effectiveness of the FJC model in the community.

Demographic data about the respondents also are collected to get more information about the partners serving the community. Additionally, there is a section for open-ended feedback, which invites professionals to discuss strengths and successes, as well as barriers to treatment or services for victims.

Below is a paper version of the survey, which also can be adapted for electronic distribution using secure survey-hosting software, such as Qualtrics, which is used by the Guilford County FJC through its partnership with the UNC Greensboro.

Please note: If the survey is to be used for research purposes, and not just for informing the programming of a local FJC, the study should be approved by an Institutional Review Board (IRB), and participants should be provided with an IRB-approved informed consent document prior to beginning the survey.

FJC Front-Line Professionals Survey

Instructions: The Family Justice Center (FJC) values our partnership with your agency. The FJC is designed to improve the accessibility and coordination of services to benefit victims of domestic violence, sexual assault, elder abuse, and child maltreatment in our community. In addition to improving outcomes for clients, we aim to provide direct benefits to enhance the work and collaborations of professionals who serve these clients. Therefore, approximately once each year, we invite all direct service providers working in agencies that partner with the FJC to complete a survey to learn about your perceptions of your work.

Your participation in this survey is completely voluntary, and it should take about 15 minutes to complete. Please note that you are invited to complete this survey whether or not you actually provide or will provide services in the FJC building. This survey is being conducted anonymously, so please do not share any identifying information on this form. We appreciate your time and input in responding to the following questions!

1. How many years have you been working in your current job?

- a) 0-1 years
- b) 2-5 years
- c) 6-10 years
- d) 11-15 years
- e) 16-20 years
- f) 21+ years

2. For how many years total have you been working in any job related to domestic violence, sexual assault, elder abuse, and/or child maltreatment?

- a) 0-1 years
- b) 2-5 years
- c) 6-10 years
- d) 11-15 years
- e) 16-20 years
- f) 21+ years

3. What is your gender?

- a) Female
- b) Male
- c) Other (Please specify): _____

4. What is your age in years?

5. Which of the client populations do you serve regularly in your work? Please check all that apply.

- Victims of domestic violence
- Victims of sexual assault
- Victims of elder abuse
- Victims of child maltreatment (including children who witness parental domestic violence)
- Perpetrators of domestic violence
- Perpetrators of sexual assault
- Perpetrators of elder abuse
- Perpetrators of child maltreatment

6. Which of the following categories best describes the nature of your current job?

- Victim advocate
- Mental health professional
- Healthcare professional
- Law enforcement
- Attorney
- Court official
- Social services
- Other (Please specify): _____

7. In which location within [area served] do you primarily work? ***[NOTE: This question is only for FJCs operating out of more than one location.]***

- a) [Location 1]
- b) [Location 2]
- c) Both [Locations 1 and 2] about equally
- d) Other (Please specify): _____

8. Within the past year, how frequently have you provided services in the FJC building? Please select the response below that most closely approximates your work in the FJC building during the past year:

- a) Daily

- b) A couple times a week
 - c) Once a week
 - d) A couple times a month
 - e) Once a month
 - f) A few times throughout the year
 - g) I have not worked directly in the FJC building at all during the past year.
 - h) Other (Please specify.)
-

For questions 9-28, please follow these instructions. Please rate the following statements based on your experiences within the past month using the following scale:

1 = Strongly disagree; 2 = Disagree; 3 = Neither disagree nor agree; 4 = Agree; 5 = Strongly agree; N/A = Not applicable or "I don't know"

	1 = Strongly Disagree (1)	2 = Disagree (2)	3 = Neither disagree nor agree (3)	4 = Agree (4)	5 = Strongly agree (5)	N/A: Not applicable or "I don't know" (6)
9. I feel like I make a positive difference in my community through the work I do.						
10. I believe that the work I do contributes to efforts in our community to prevent future violence.						
11. I feel confident in my ability to work with other community partners to respond to violence in our community.						
12. I believe the organizations that work to address domestic violence in our community are effective in meeting the needs of victims.						
13. In our community, offenders of domestic violence are effectively held accountable for the abuse they perpetrated.						
14. I believe the organizations that work to address sexual assault in our community are effective in meeting the needs of victims.						
15. In our community, offenders of sexual assault are effectively held accountable for the abuse they perpetrated.						

16. I believe the organizations that work to address elder abuse in our community are effective in meeting the needs of victims.						
17. In our community, offenders of elder abuse are effectively held accountable for the abuse they perpetrated.						
18. I believe the organizations that work to address child maltreatment in our community are effective in meeting the needs of victims.						
19. In our community, offenders of child maltreatment are effectively held accountable for the abuse they perpetrated.						
20. My work energizes me.						
21. I have been feeling burned out by my work lately.						
22. When I leave work at the end of the day, I feel exhausted and overwhelmed.						
23. I find myself thinking about the clients I serve often during my leisure time.						
24. My organization coordinates our services well with other local organizations with which we collaborate.						
25. I communicate often with professionals in other local organizations working to address domestic violence, sexual violence, elder abuse, and/or child maltreatment.						
26. In our community, it is easy to coordinate services for victims of violence.						
27. In our community, a lot of victims of violence are not able to access the services they need to stay safe.						
28. I believe that the Family Justice Center model works in [our service area].						

29. Please provide an example of a “success story” that you experienced in the past month with a client that you served. We are seeking examples of cases in which the victim’s needs were able to be met. Please do not disclose any confidential information

about the client here—we are seeking general examples and do not need to learn about the specific details of the case.

30. Within the past month, what have been the biggest barriers that affect the clients that you serve? By barriers, we mean clients' experiences in which they faced challenges in accessing the services they needed or otherwise faced barriers to achieving safety. Again, please do not disclose any confidential information about the client here—we are seeking general examples and do not need to learn about the specific details of the case.

31. Please provide any additional input that you would like to share in the space below. In particular, we welcome your suggestions for improving the FJC and for strengthening the partnerships among the agencies involved in the FJC.

Thank you again for taking the time to complete this survey! We value your input and look forward our continued partnership.

Partners' Annual Organizational Data

Introduction: In order to track the scope of family violence in the community over time, the Guilford County FJC collects annual data from our partner organizations. Data are requested from each organization to determine the number of services they provide to the community. These different data sources are important because victims and perpetrators often access resources at different locations within the community, and therefore tracking data from the FJC alone would not provide a complete picture of the scope of violence and abuse in the community. Of course, partners' organizational data only reflect the abuse that is reported to any of the involved organizations, and it is always important to note in any reports on these data that reported violence is only a portion of the violence that is actually occurring in the whole community.

Below, this toolkit includes a template email message that can be used to request annual organizational data from partner agencies. The specific data requested from each agency varies, and the chart below the email message template includes sample data requests for different types of organizations based on the data that are tracked through the Guilford County FJC. When emailing specific agencies, the FJC Data and Outcomes Committee provides a fill-in-the-blank response format for partner agencies to complete, but also allows partners to provide additional data or data in a different format if appropriate.

This section of the toolkit contains a sample email requesting annual data from a partner organization, as well as a table with sample data requests that may be made for different types of partners.

Sample Annual Data Request Email

Subject: Data request for the [TIME FRAME] for the Family Justice Center annual report

Hello [Contact Person(s) Name(s)],

I'm writing on behalf of the Data and Evaluation Committee of the Family Justice Center. Over the last few years, the FJC has compiled annual reports to establish the scope of intimate partner violence, sexual assault, elder abuse, and child maltreatment in our community. I've attached a copy of the most recent report for your records.

We are currently working to compile our next FJC annual data report. In addition to including information about clients served at the FJC, we would like to update as many of the year-long statistics that we were able to include in the previous reports, with the update reflecting new information about the [year of data requested] calendar year.

Our goal is to make these requests as easy as possible on all partners from whom we're requesting data. To that end, below, I've copied and pasted the pieces from the most recent annual report and added blanks for the data we'd like to ask you to fill in from your organization for the [year of data requested] calendar year. (Note: You can see the full statement from last year's report in the attached annual report).

[NOTE THE BELOW PORTION WILL VARY BY PARTNER ORGANIZATION – SEE VARIOUS SAMPLES IN THE CHART BELOW BELOW.]

**** [How many clients were served by your organization in this county in calendar year for data requested?]**

- In the ____ calendar year, [name of organization] served _____ clients impacted by domestic violence.

In addition, if you have been tracking how many of these clients have been seen through the FJC, we would appreciate if you could share that information as well.

Please let me know if you have any questions about this request. If possible, we would appreciate receiving this information from you by [preliminary deadline for data request]. However, if you need additional time, just let me know.

Thank you in advance for your help with this request!

Sincerely,

Sample Annual Data to Request from Different Types of Partner Organizations

Type of Partner Organization	Sample Annual Data Request
Clerk of Court	<p><i>How many domestic violence protective orders were filed during [year of data requested]?</i></p> <ul style="list-style-type: none"> According to the Clerk of Court Office, there were _____ protective order cases filed with the [location] office during [year of data requested]. <p><i>What types of domestic violence, sexual assault, elder abuse, and child maltreatment cases were heard in court in [year of data requested]?</i></p> <ul style="list-style-type: none"> The [partner agency] reports that there were a total of _____ criminal charges filed in the county during [year of data requested] for assault on a female and assault by strangulation. <p><i>What types of domestic violence, sexual assault, elder abuse, and child maltreatment cases were heard in court in [year of data requested]?</i></p> <ul style="list-style-type: none"> The [court official partner] reports that there were a total of _____ criminal charges filed in [FJC County location] during [year of data requested] for assault on a female and assault by strangulation.
Law Enforcement	<p><i>How many domestic violence calls did local law enforcement agencies respond to in [year of data requested]?</i></p> <ul style="list-style-type: none"> According to the [local partner police department], based on the 911 call nature codes, domestic violence-related calls were defined as those with a nature of “domestic dispute,” “family disorder,” or “family disorder—[police department] only.” There were _____ of these calls in [year of data requested]. When additional calls for “child endangerment” and “rape/sexual assault,” are included the total number of calls was _____. In addition, there were _____ calls that were marked with the “assault/rape” nature code, although many of these calls were not sexual assaults or domestic-violence related. <p><i>How many domestic violence calls to local law enforcement agencies resulted in charges being filed in [year of data requested]?</i></p> <ul style="list-style-type: none"> The [local partner police department] reports that, of the _____ domestic violence-related 911 calls in [year of data requested], _____ arrest charges were brought forward.
Sexual Assault Nurse Examiner	<p><i>How many patients were examined by Nurse Examiners in the [partner hospital/examination program] during [year of data requested]?</i></p> <ul style="list-style-type: none"> _____ reports that they collected evidence from _____ sexual assault patients in [year of data requested].
Domestic Violence Service Agency	<p><i>How many calls were received by the [partner domestic violence and sexual assault crisis line equivalent] in [year of data requested]?</i></p> <ul style="list-style-type: none"> [Partner crisis line provider] reports that their crisis line received _____ calls in [year of data requested], of which _____ were related to domestic violence and _____ were related to sexual assault. <p><i>How many victims were seen by [partner organization victim advocates] in [year of data requested]?</i></p>

	<ul style="list-style-type: none"> [Partner organization] provided domestic violence advocacy services to _____ clients. In addition, _____ clients received advocacy services related primarily to sexual assault. <p>How many victims of domestic violence and their children were housed in [partner organization offering shelter services] [number] shelters in [year of data requested]?</p> <ul style="list-style-type: none"> [Partner organization] reports that a total of _____ clients resided in their two shelters during [year of data requested]. They provided _____ shelter nights in [City 2] during that year.
Child Protective Services	<p>How many Child Protective Services (CPS) reports were received by the [County Department of Health and Human Services Equivalent partner] in [year of data requested]? What were the outcomes for these reports?</p> <ul style="list-style-type: none"> Child Protective Services reports that they received _____ CPS reports from January 1, [year of data requested] to December 31, [year of data requested]. The categories of these reports for [year of data requested] were as follows: <ul style="list-style-type: none"> Abuse = _____ Neglect = _____ Abuse and Neglect = _____ Dependency = _____ Additional Information (i.e., a report provides additional information on a report that has already been received) = _____ Courtesy Assists (i.e., when another county or state requests that CPS see a child or caregiver for an open report in their jurisdiction when the individual is believed to be in this county) = _____ Screened Out = _____ Reports on Open Investigations = _____ The outcomes of these reports in [year of data requested] were as follows: <ul style="list-style-type: none"> No Case Decision/Not Closed = _____ Assist Completed = _____ Incident Opened in Error = _____ Unsubstantiated = _____ Abuse Substantiated = _____ Neglect Substantiated = _____ Abuse and Neglect Substantiated = _____ Dependency Substantiated = _____ Services Needed = _____ Services Recommended = _____ Services Not Recommended = _____ Services Provided; CPS No Longer Involved = _____ Not Accepted = _____ Error/Incomplete = _____ A total of _____ petitions were filed in [year of data requested]. There were a total of _____ children in the custody of [Partner County DHHS equivalent] on December 31, [year of data requested]. Of those children, _____ entered foster care in [year of data requested].
Adult Protective Services	<p>How many Adult Protective Services reports were received in [year of data requested]? What were the outcomes for these reports?</p>

	<ul style="list-style-type: none"> • Adult Protective Services reports that, during [year of data requested], they received a total of _____ [APS] referrals, of which _____ were accepted and _____ were not accepted. Of the referrals that were accepted, _____ were reports of abuse, _____ were reports of neglect, and _____ were reports of exploitation. During [year of data requested], _____ [APS] reports were substantiated, and _____ were unsubstantiated.
Mental Health Agency	<p><i>How many clients were served by the [partner mental health organization] in [year of data requested]?</i></p> <ul style="list-style-type: none"> • The [partner mental health organization/program], received a total of _____ referrals from the FJC during [year of data requested]. In addition, the [partner organization/program] served a total of _____ children in the year [year of data requested].
FJC-Specific Data	<p><i>How many people were served via community outreach by the FJC in [year of data requested]?</i></p> <ul style="list-style-type: none"> • FJC staff provided community outreach and education to _____ agencies and organizations, reaching a total of _____ people. <p><i>How many victims of abuse were served by the FJC in [year of data requested]?</i></p> <ul style="list-style-type: none"> • In the FJC's [year of data requested] year, _____ primary and secondary victims of abuse were served. • Victims of primary abuse served in [year of data requested]: _____ • Victims of secondary abuse served in [year of data requested]: _____
Child Advocacy Center	<p><i>How many Child Advocacy Center interviews were conducted in [year of data requested]?</i></p> <ul style="list-style-type: none"> • The Child Advocacy Center reports that they conducted _____ forensic interviews during [year of data requested].
Legal Support	<p><i>How many domestic violence cases were served by [Partner legal organization] during the [year of data requested] calendar year?</i></p> <ul style="list-style-type: none"> • In [year of data requested], [Partner Legal organization] opened a total of _____ domestic violence related cases and closed _____. Of those cases opened, _____ were from [FJC County location]. There were _____ referrals from the FJC. Every referral did not result in an open case for various reasons. The most frequent were _____.
Sheriff's Office	<p><i>How many charges were processed in the following areas during the [year of data requested] year by the [Sheriff's Office]?</i></p> <ul style="list-style-type: none"> • Child abuse, non-assaultive: _____ • Child neglect, non-assaultive: _____ • Domestic incidents: _____ • Sex offenses (total): _____ <p><i>How many charges were processed for the following types of sex offenses in the [year of data requested] year?</i></p> <ul style="list-style-type: none"> • Child molestations: _____ • Crimes against nature/sodomy: _____ • Indecent exposure: _____ • Statutory under age: _____ • Forcible rape: _____

- All other: _____

How many law incident records with arrests for various domestic violence, sexual assault, child maltreatment, and elder abuse incidents occurred during the [year of data requested] calendar year (these include arrests only):

- Child abuse, non-assaultive: _____
- Child neglect, non-assaultive: _____
- Domestic incidents: _____
- Sex offenses (total): _____

How many law incident records with arrests for different sex offenses occurred during the [year of data requested] calendar year (these include arrests only):

- Child molestations: _____
- Crimes against nature/sodomy: _____
- Indecent exposure: _____
- Statutory under age: _____
- Forcible rape: _____
- All other: _____

How many protective orders were served by the [Sheriff's Department] in [year of data requested]?

- The [Sheriff's Department] reports that, during [year of data requested], they **received** _____ domestic violence protective orders, of which _____ were **served**.

Annual Week-Long Census

Introduction: The Guilford County FJC conducts a week-long census at least once each year. The purpose of the census is to gain a more in-depth look at the nature of services provided and victims served by the FJC and its partner organizations than is able to be provided by the annual data. By limiting the census to one week, the burden of collecting additional data on partners is minimized.

However, the one-week timeframe allows for data to be captured that may not otherwise be recorded. For example, during the census weeks done by the Guilford County FJC, we are able to track the number of minutes that staff in certain partner organizations actually spend with clients, which is useful information but would be too cumbersome to ask partners to track all the time.

It is important to carefully select the week in which the census will be completed. Although any week may vary widely from other weeks, it is important to avoid selecting a week in which the FJC or its partners determine there are factors that may influence the number of people seeking services in that week. For example, it is best to avoid conducting the census around the start or the school year and around holidays, as well as during awareness months, such as October for Domestic Violence Awareness Month.

Before the census is conducted, all partner agencies should be given plenty of advance notices of the dates of the census. In addition, it is useful to provide a draft of the census form for each organization to allow leaders and staff to review and suggest any changes before the actual census week. In this way, partner organizations' staff are aware ahead of time as to what they will be asked to record during the census week.

In this section of the toolkit, we provide sample week-long census forms that can be adapted to use with different types of partner organizations.

Police Department

Family Justice Center Week-Long Census
Dates of Census: _____

Law Enforcement Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Total Number of 911 Calls in the Week (Related to domestic violence, sexual assault, elder abuse, or child maltreatment): _____

Total Number/Type of Incident in the Week (Related to domestic violence, sexual assault, elder abuse, or child maltreatment):

<u>Type</u>	<u>Total Number</u>	<u>Total Number Resulting in Charges</u>
Domestic Violence	_____	_____
Sexual Assault	_____	_____
Elder Abuse	_____	_____
Child Maltreatment	_____	_____

Total Number of Victims that Accepted or Denied Services in the Week:

Accepted: _____

Denied: _____

Optional Data Collection Form:

Name/ID Number of Victim (Can be numerical, initials, or real or code name)	Date and Time of Initial Police Report	Type of incident: domestic violence, sexual assault, elder abuse, or child-maltreatment	Did the incident result in charges? (Yes/No)	Date of Initial Follow-up	If victim was able to be contacted, not if she/he accepted or denied services or other resources? (Accept/Deny)

Sheriff's Office

Family Justice Center Week-Long Census
Dates of Census: _____

Sheriff's Office Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Total Number of 911 Calls in the Week (Related to domestic violence, sexual assault, elder abuse, or child maltreatment): _____

Total Number/Type of Incident in the Week (Related to domestic violence, sexual assault, elder abuse, or child maltreatment):

<u>Type</u>	<u>Total Number</u>	<u>Total Number Resulting in Charges</u>
Domestic Violence	_____	_____
Sexual Assault	_____	_____
Elder Abuse	_____	_____
Child Maltreatment	_____	_____

Total Number of Victims that Accepted or Denied Services in the Week:

Accepted: _____

Denied: _____

Average Length of Time Taken to Serve Protective Orders in the Week: _____

Optional Data Collection Form:

Name/ID Number of Victim (Can be numerical, initials, or real or code name)	Date	Type of incident: domestic violence, sexual assault, elder abuse, or child-maltreatment	Did the incident result in charges? (Yes/No)	Date of Initial Follow-up	If victim was able to be contacted, not if she/he accepted or denied services or other resources? (Accept/Deny)	If completing protective order service- indicate the length of time taken to serve perpetrator	Additional Comments/Notes

Child Protective Services

Family Justice Center Week-Long Census
Dates of Census: _____

Child Protective Services Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Total calls to [partner] intake line during the data collection week: _____

Of total calls, number cases accepted: _____

Of total calls, number screened out: _____

Number of reports domestic violence related: _____

Number of reports involving sexual abuse: _____

Adult Protective Services

Family Justice Center Week-Long Census
Dates of Census: _____

Adult Protective Services Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Total calls to APS intake line during the data collection week: _____

Of total calls, number accepted: _____

Of total calls, number screened out: _____

Number of reports domestic violence related: _____

Number of reports involving sexual abuse: _____

Optional Data Collection Form:

Name/ID Number of Victim (Can be numerical, initials, or real or code name)	Type of Contact (In Person, Call to Intake Line, etc.)	If contact type is a phone call, indicate call type	If investigating abuse - note if abuse was substantiated	Additional Comments/Notes

Domestic Violence Advocacy Agency

Family Justice Center Week-Long Census
Dates of Census: _____

Domestic Violence Advocacy Agency Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Total Number of Calls to the Crisis Line: _____

Number of New Clients Served in the Week: _____

Number of Returning Clients Served in the Week: _____

Total Number of Services Provided in the Week:

<u>Service</u>	<u>Total Number</u>
Advocacy	_____
Protective Order Assistance	_____
Shelter	_____
Crisis Counseling	_____
Court Accompaniment	_____

Average Amount of Time Spent Assisting Victims in the Week: _____

Optional Data Collection Form

Name/ID Number of Victim (Can be numerical, initials, or real or code name)	Date	New Client or Returning	Service(s) Provided (ex. Advocacy, Protective Order Assistance, Shelter, Crisis Counseling, Court Accompaniment (Civil or Criminal))	Amount of Time Staff Spent Assisting Victim (In Minutes)	Location of Service and Additional Comments (FJC, Court, [Partner Location 1], [Partner Location 2])

Mental Health Partner

Family Justice Center Week-Long Census
Dates of Census: _____

Mental Health Partner Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Number of New Clients Served in the Week: _____

Number of Returning Clients Served in the Week: _____

Average Amount of Time Spent Assisting Victims in the Week: _____

Clerk of Court

Family Justice Center Week-Long Census
Dates of Census: _____

Clerk of the Court Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Total Number of Victims Served in the Week: _____

Total Number of Ex Parte Protective Orders Filed: _____

Granted: _____

Denied: _____

Total Number of Return Protective Orders on the Docket: _____

Average Amount of Time Spent Assisting Victims in the Week: _____

Optional Data Collection Form

Name/ID Number of Victim (Can be numerical, initials, or real or code name)	Date	Was the Client Referred to FSP?	Ex Parte Orders Granted or Denied	Amount of Time Staff Spent Assisting Victim (In Minutes)	Additional Comments/Notes

Legal Partner

Family Justice Center Week-Long Census
Dates of Census: _____

Legal Partner Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

of Referrals Received during the week: _____

Total Number of Victims Served in the Week (phone and in-person):

Protective Order Court Assistance Provided

of cases for victim consultation only: _____

of cases represented in court: _____

Optional Data Collection Form

Name/ID Number of Victim (Can be numerical, initials, or real or code name)	Date of Initial Contact	Referral Source	Addition Comments/Notes

District Court

Family Justice Center Week-Long Census
Dates of Census: _____

District Court Partner Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Number of Open DV Files in the Week: _____

Number of Total Cases for each Victim Witness Assistant in the Week: _____

Number of DV Related Cases on the Calendar in the Week: _____

Number of Clients Showing up for Court in the Week: _____

Number of Victims Where Pictures Were Taken of Injuries in the Week: _____

Number of Total Calls to Victims in the Week: _____

Number of Total Letters Sent in the Week: _____

Number of Total In-person Contacts in the Week: _____

Number of Calls Requesting Charges to be Dropped in the Week: _____

Number of Calls Requesting Information in the Week: _____

Number of Calls Following up on Victim in the Week: _____

Superior Court

Family Justice Center Week-Long Census
Dates of Census: _____

Superior Court Partner Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Number of Open DV Files in the Week: _____

Number of Total Cases for each Victim Witness Assistant in the Week: _____

Number of DV Related Warrants (Adult) in the Week: _____

Number of DV Related Warrants (Children) in the Week: _____

Number of DV Related Cases on the Calendar in the Week: _____

Number of Clients Showing up for Court in the Week: _____

Number of Victims Where Pictures Were Taken of Injuries in the Week: _____

Number of Total Calls to Victims in the Week: _____

Number of Total Letters Sent in the Week: _____

Number of Victim Impact Statements Returned in the Week: _____

Number of Victims Applied for Victim Compensation in the Week: _____

Number of Close Case Letters Sent in the Week: _____

Number of Total In-person Contacts in the Week: _____

Number of Calls Requesting Charges to be Dropped in the Week: _____

Number of Calls Requesting Information in the Week: _____

Number of Calls Following up on Victim in the Week: _____

Pretrial Court Services

Family Justice Center Week-Long Census
Dates of Census: _____

Pretrial Court Services Template

Name of Person(s) Completing this Form: _____

Weeklong Information:

Number of Cases on for 1st Appearances: _____

Number of DV Cases on for 1st Appearances: _____

Number of Sexual Assault Cases on for 1st Appearances: _____

Number of Total Attempted Calls to Victims: _____

Number of Victims Contacted: _____

Optional Data Collection Form

Name/ID Number of Victim (Can be numerical, initials, or real or code name)	Date	Case Type (DV Case for 1st Appearance, SA Case for 1st Appearance)	Addition Comments/Notes