# VOCA Reporting Requirements



December 6, 2022

PRESENTED BY

Lori Jensen, Grants Specialist

Kansas Governor's Grants Program

www.grants.ks.gov

# As we get started...

- This webinar is being recorded.
- Please mute your microphone/turn off video.
- Have the VOCA Grant Reporting requirements document available for reference, either in print or on your computer.
- Closed captioning is available Click the CC button in the toolbar at the bottom to access
- Prepare to engage!
  - Consider closing your email or other programs that may distract you.
- We want this to be helpful for you! Please ask questions in the chat throughout <u>all</u> questions will be answered at the end of the webinar.
- Let us know in the chat if you are having technical issues or send an email to kggp@ks.gov.
- The link to the PowerPoint and the recorded training will be sent to the Subgrantee's primary contact and posted on <a href="www.grants.ks.gov">www.grants.ks.gov</a>.

Agenda

### **Introductions**

Managing Your Grant

Forms/Reports

The Grant Portal

Compliance

Q & A

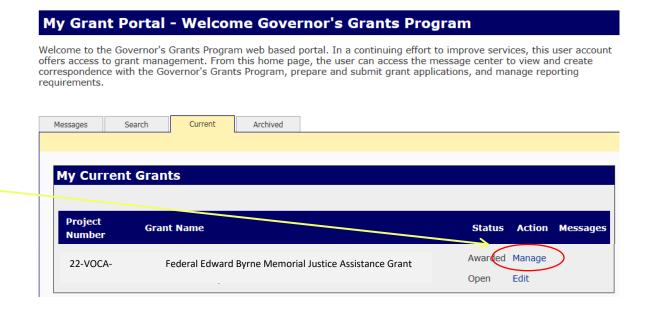
# Managing Your Grant

#### **Grant Assurances**

Due December 2, 2022

Initialed and signed copy must be returned to the KGGP office to <a href="mailto:kggp@ks.gov">kggp@ks.gov</a>

Upon receipt and approval of the Grant Assurances (and Civil Rights Form if a new subgrantee), the award will be updated on the Grant Portal from a "View" Action to a "Manage" Action



## Getting and Staying Organized



Due dates and reminders



Staff changes



Review all forms/reports



Data collection methods

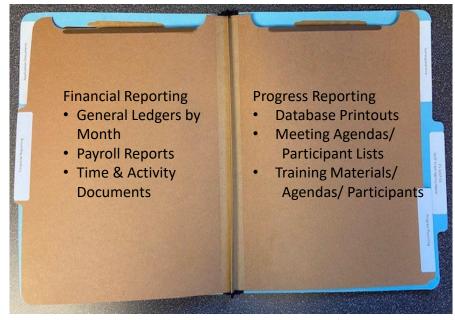
Activity Signed Time and **General Ledger** logs/times **Activity Records** worked on a case Receipts, Copies of checks purchase orders, **Travel logs** and payroll invoices records Managing **Database** Intake forms Case numbers **Supporting Documentation** printouts Evidence of Phone logs Survey results meetings and trainings Any other relevant support

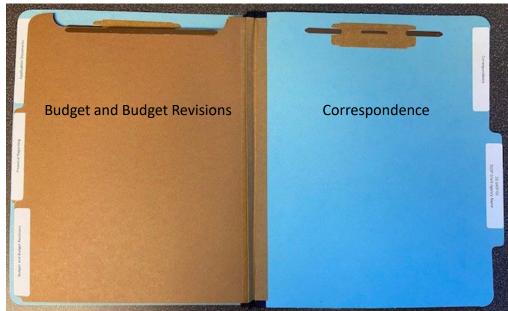
## Managing Grant Award and Documentation



### **Supporting Documentation Folder**







Kansas Governor's Grants Program

# Managing the Budget

- Manage by <u>line item</u>
- Do not wait to purchase large quantities of supplies or equipment

# Managing the Budget

- Submit revisions as you go
  - Don't forget justification letter!
- Submit revisions before the effective date of the change (if possible)
  - If not, then explain the delay and provide proposed effective date
  - No requests after 7/10/23
    - Only considered after 7/10/23 if Subgrantee can demonstrate request meets exception criteria

# Forms/Reports

# Reports/Forms List

#### \*\*\*Submit via the Grant Portal unless otherwise noted\*\*\*

- Grant Portal Budget Section- Due 12/9/22 (if the grant award is different from the original request).
- Highly Compensated Officers- Due 12/9/22
- Subgrant Award Report (2 Parts) Part 1 due December 9, 2022 via the Grant Portal;
   Part 2 due December 20, 2022 via the OVC PMT website <a href="www.ovcpmt.org">www.ovcpmt.org</a>; both Part 1 and Part 2 will be updated at the end of the grant period.
- Revised Grant Project Objectives- if grant award is different from the original request and if the subgrantee deems it necessary, the grant project objectives may be revised and uploaded as an attachment in the Grant Portal.
- Financial Status Report- Due within 10 calendar days following the end of each month.
- Grant Project Narrative Report- Due 10/10/23
- Projection of Final Expenditures- Due 7/10/23
- Equipment Inventory Form (off-line form)- Due within 30 days of the date of payment; submit to kggp@ks.gov.
- Grant Project Performance Measurement Tool (PMT)- Must be submitted via the OVC Performance Tools website within 10 calendar days following the end of each quarter.

#### KANSAS GOVERNOR'S GRANTS PROGRAM

LANDON STATE OFFICE BLD	G, ROOM 304 N, 900 SV	V JACKSON, TOPEKA, KS 66612
FIVE MOST	HIGHLY COMPENSATE Due December 9, 2022	ED OFFICERS
NAME OF SUBGRANTEE AND ADDRESS OF THE PRIPERFORMANCE FOR GRANT PROJECT (must include 2)		T PROJECT NUMBER
	3. SUBG	RANTEE UNIQUE ENTITY IDENTIFIER  (12 characters)
GRANT AWARD AMOUNT (federal funds)	5. PHONE NUMBER	6. CONGRESSIONAL DISTRICT(S) SERVED
7. NAME AND TITLE OF AUTHORIZED CERTIFYING OFF	FICIAL	
8. In the Subgrantee's preceding fiscal year, did the Subgra	antee receive	
<ul><li>(i) 80 percent or more of its annual gross revenues fron Transparency Act, as defined at 2 CFR 170.320 (and so</li></ul>		subcontracts) and Federal financial assistance subject to the
	Federal procurement contracts (and	subcontracts) and Federal financial assistance subject to the
	Yes	_
	No L	
<ol> <li>Does the public have access to information about the co Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)</li> </ol>		
	Yes	_
	No	
<ol> <li>IF the answer to question number 8 is "Yes" AND the a compensated data:</li> </ol>	nswer to question number 9 is "No," th	nen the Subgrantee must provide the following most highly
Name <sup>1</sup>		Total Compensation <sup>2</sup>
1 2.		
3.		
5.	<i>a.</i>	
<sup>1</sup> Provide the names of each of the five most highly comp	pensated executives for the Subgrante	ee's preceding completed fiscal year.
<sup>2</sup> "Total compensation" is defined as the cash and nonca the following (for more information see 17 CFR 229.402		ve during the Subgrantee's preceding fiscal year and includes
(i). Salary and bonus.		
	ock options, and stock appreciation ri with respect to the fiscal year in acco	ghts. Use the dollar amount recognized for financial stateme rdance with FAS 123R.
<sup>(iii).</sup> Earnings for servic reimbursement pla employees.	es under non-equity incentive plans. ns that do not discriminate in favor of	Does not include group life, health, hospitalization or medical executives, and are available generally to all salaried
(iv). Change in pension	value. This is the change in present ings on deferred compensation which	value of defined benefit and actuarial pension plans. is not tax-qualified.
Other compensatio		ther compensation (e.g., severance, termination payments, erquisites or property) for the executive exceeds \$10,000.
Approved by the Kansas Governor's Grants Pro	ogram:	Date:

# Highly Compensated Officers Report

Due no later than December 9, 2022 on the Grant Portal

# Monthly Financial Status Report (FSR)

#### Financial Status Report – Sample Grant December 1 – 31, 2022

Budget Category	Approved Budget (Total Project)	Period Expend. (Federal Funds)	Period Expend. (Non- Federal Funds)	To Date Expend. (Federal Funds)	To Date Expend. (Non- Federal Match Funds)	Obligations (Total Project)	Funds Remaining (Total Project)
A. Personnel Expenditures	32000	0	0	0	0	0	32000
B. Fringe Benefit Expenditures	9061	0	0	0	0	0	9061
C. Travel/Training Expenditures	2820	0	0	0	0	0	2820
D. Supplies and Communications Expenditures	4100	0	0	0	0	0	4100
E. Facility Cost Expenditures	0	0	0	0	0	0	0
F. Equipment Expenditures	1000	0	0	0	0	0	1000
G. Contractual Services Expenditures	0	0	0	0	0	0	0
H. Other Expenditures	0	0	0	0	0	0	0
I. Total Expenditures	48981	0	0	0	0	0	48981

- Due within 10 calendar days following the end of each month on the Grant Portal
- Report only cash outlays as Period Expenditures;
- Report any unpaid but accrued expenses in the Obligations column
- Final VOCA FSR due November 10, 2023

# **Financial Status Report Notes Section**

Budget Category	Approved Budget (Total Project)	Period Expend. (Federal Funds)	Period Expend. (Non- Federal Funds)	To Date Expend. (Federal Funds)	To Date Expend. (Non- Federal Match Funds)	Obligations (Total Project)	Funds Remaining (Total Project)
A. Personnel Expenditures	21303	1063	223	13666	3743	0	3894
B. Fringe Benefit Expenditures	1227	81	0	1043	0	0	184
C. Travel/Training Expenditures	0	0	0	0	0	0	0
D. Supplies and Communications Expenditures	0	0	0	0	0	0	0
E. Facility Cost Expenditures	0	0	0	0	0	0	0
F. Equipment Expenditures	0	0	0	0	0	0	0
G. Contractual Services Expenditures	0	0	0	0	0	0	0
H. Other Expenditures	0	0	0	0	0	0	0
. Total Expenditures	22530	1144	223	14709	3743	0	4078
otes:							
To Date Expenditures: I	Domestic Vic	lence Federa	ıl - \$13,824,	Sexual Assau	ılt Federal - \$88	5	
Approve Deny Send M	lessage Expo	ort CSV File E	Exit				
		Portal Pr	olicies I Help Cent	er I Site Survey			
		Portal Po	olicies   Help Cent	er   Site Survey			

#### KANSAS GOVERNOR'S GRANTS PROGRAM

LANDON STATE OFFICE BLDG, 900 SV	V JACKSON, ROOM 304 N, TO	PEKA, KS 66612
	CT NARRATIVE REPORT TOBER 10, 2023	
The information provided on this report is used	to review progress on the VC	OCA-funded grant project.
1. NAME AND ADDRESS OF SUBGRANTEE ORGANIZATION	2. GRANT PROJECT NUMBER	3. GRANT AMOUNT
	4. REPORTING PERIOD (MM/DD/	YYYY)
	FROM: 10/1/2022	TO: 9/30/2023
	5. PHONE NUMBER	6. DATE OF REPORT
7. NAME AND TITLE OF AUTHORIZED CERTIFYING OFFICIA	AL	•
A WORD DOCUMENT WITH THE NARRATIVE REPSOI ACCOMPANY THIS REPORT FORM.	NSES MAY BE UPLOADED IN	THE GRANT PORTAL TO
Describe how the goals and the objectives of the gran	t project were met.	
Describe any challenges that occurred during the gran	nt project period.	
10. Share a story and/or attach anectotal information (do funded with this grant project helped a crime victim achiev		ntiality) about how the services
Approved by Kansas Governor's Grants Program:		Date:

# Grant Project Narrative Report

Must be submitted via the Grant Portal October 10, 2023

#### KANSAS GOVERNOR'S GRANTS PROGRAM LANDON STATE OFFICE BLDG, ROOM 304 N, 900 SW JACKSON, TOPEKA, KS 66612

	LANDON STATE OFFICE BLDG, ROOM 304 N, 900 SW JACKSON, TOPEKA, KS 66612
	PROJECTION OF FINAL EXPENDITURES DUE JULY 10, 2023
	Name of Subgrantee Organization:  Grant Project Number:  Name of Individual Completing Form:
	Phone Number:
ĩ.	Grant Award Amount (Federal Portion):
2. 3. 4.	Expenditures Reported First Three Quarters: (Federal Portion)  Projected Fourth Quarter Expenditures: + (Federal Portion)  Total Expenditures (Federal Portion): =
5.	Funds Remaining (Federal Portion): (line 1 minus line 4)
qua fun act pra	case provide the most accurate information possible. The Subgrantee will not be held to these figures if actual fourth carter expenditures exceed projections, nor will the Subgrantee be penalized in subsequent years if projections reflect had remaining at the completion of the grant project period. However, major discrepancies between projected and trual 4th quarter expenditures will raise concerns regarding the Subgrantee's grant management and budgeting actices. If the Subgrantee has submitted a budget revision request prior to the July 10th deadline, the pending revision quest should be taken into consideration when completing this form.
Ent	tered by the Kansas Governor's Grants Program:  Date:

# Projection of Final Expenditures

Due July 10, 2023 on the Grant Portal.

#### KANSAS GOVERNOR'S GRANTS PROGRAM LANDON STATE OFFICE BLDG, ROOM 304 N, 900 SW JACKSON, TOPEKA, KS 66612

#### GRANT PROJECT SUBGRANT AWARD REPORT

	9, 2022
Name and Address of Subgrantee Organization	
(must include the full 9-digit zip code)	
Point of Contact Name:	Point of Contact Email:
Point of Contact Telephone:	Congressional District(s):
2. Type of Implementing Agency ('X' the one most appropriate category and	sub-category):
a. Criminal Justice, Government	
1. Law Enforcement 4.	Court
2. Prosecution 5.	Corrections
3. Juvenile justice 6.	Other government agency
b. Nonprofit Organization  1. Child abuse service organization  5.	Domestic & family violence and sexual assault org
2. Coalition 6.	Sexual assault services organization
Domestic & family violence organization 7.	Multiservice agency
4. Faith-based organization 8.	Organization by and/or for underserved victims of crime
c. Native American Tribe or Organization	(e.g. drunk driving, homicide, elder abuse)
d. Campus Organization	
1. Campus-based victim services 3.	Physical or mental health service program
2. Law enforcement 4.	[Other: description]
Purpose of VOCA Subgrant Award ('X' only one):	
a. Continue a VOCA-funded victim project funded in a previous yea	•
b. Expand or enhance an existing project NOT funded by VOCA in	
c. Start up new victim services project.	
d. Start up new Native American victim services project.	
e. Expand or enhance an existing Native American victim services p	project.
VOCA Award ( <u>federal</u> funds only):	Grant Project Number:
Grant Project Start Date: 10/1/2022	Grant Project End Date: 9/30/2023
5. Identify the VOCA grant funds (federal funds only) estimated to be used	
allocation between categories must correspond to the approved grant pro	ect budget.
a. Child Abuse: d. Undo	
	ect budget. erserved: DUI/DWI Crashes Assault
a. Child Abuse: d. Und Child Physical Abuse/Neglect	ect budget. erserved: DUI/DWI Crashes
a. Child Abuse: d. Under Child Physical Abuse/Neglect Child Sexual Abuse b. Domestic Violence:	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Elder Abuse  Robbery
a. Child Abuse: d. Und Child Physical Abuse/Neglect Child Sexual Abuse	ect budget. erserved: DUI/DWI Crashes Assault Adults Molested as Children Elder Abuse Robbery Survivors of Homicide
a. Child Abuse: d. Under Child Physical Abuse/Neglect Child Sexual Abuse b. Domestic Violence:	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Electric Abuse  Robbery  Survivors of Homicide  Hate Crime  Human Trafficking
a. Child Abuse: d. Under Child Physical Abuse/Neglect Child Sexual Abuse b. Domestic Violence:	ect budget.  prserved: DUI/DWI Crashes Assault Adults Molested as Children Elder Abuse Robbery Survivors of Homicide Hate Crime Human Trafficking Kidnapping
a. Child Abuse: d. Under Child Physical Abuse/Neglect Child Sexual Abuse b. Domestic Violence:	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Elider Abuse  Robbery  Survivors of Homicide  Hate Crime  Human Trafficking  Kidnapping  Mass Violence  Stalking/Harassment
a. Child Abuse: d. Under Child Physical Abuse/Neglect Child Sexual Abuse b. Domestic Violence:	ect budget.  preserved: DUI/DWI Crashes Assault Adults Molested as Children Elder Abuse Robbery Survivors of Homicide Hate Crime Human Trafficking Kidnapping Mass Violence Stalking/Harassment Teen Dating Violence
a. Child Abuse: d. Undi Child Physical Abuse/Neglect Child Sexual Abuse b. Domestic Violence: c. Adult Sexual Assault:	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Elider Abuse  Robbery  Survivors of Homicide  Hate Crime  Human Trafficking  Kidnapping  Mass Violence  Stalking/Harassment
a. Child Abuse: Child Physical Abuse/Neglect Child Sexual Abuse  b. Domestic Violence: c. Adult Sexual Assault:  Total must equal the amount in number four above.	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Elder Abuse  Robbery  Survivors of Homicide  Hate Crime  Human Trafficking  Kidnapping  Mass Violence  Stalking/Harassment  Teen Dating Violence  Other Violent Crimes*  Non-Violent Crimes**
a. Child Abuse: d. Undi Child Physical Abuse/Neglect Child Sexual Abuse b. Domestic Violence: c. Adult Sexual Assault:	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Elder Abuse  Robbery  Survivors of Homicide  Hate Crime  Human Trafficking  Kidnapping  Mass Violence  Stalking/Harassment  Teen Dating Violence  Other Violent Crimes*  Non-Violent Crimes**
a. Child Abuse: Child Physical Abuse/Neglect Child Sexual Abuse  b. Domestic Violence: c. Adult Sexual Assault:  Total must equal the amount in number four above.	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Elder Abuse  Robbery  Survivors of Homicide  Hate Crime  Human Trafficking  Kidnapping  Mass Violence  Stalking/Harassment  Teen Dating Violence  Other Violent Crimes*  Non-Violent Crimes**
a. Child Abuse: Child Physical Abuse/Neglect Child Sexual Abuse  b. Domestic Violence: c. Adult Sexual Assault:  Total must equal the amount in number four above.	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Elder Abuse  Robbery  Survivors of Homicide  Hate Crime  Human Trafficking  Kidnapping  Mass Violence  Stalking/Harassment  Teen Dating Violence  Other Violent Crimes**  Non-Violent Crimes**  Expenditures reported above:
a. Child Abuse: Child Physical Abuse/Neglect Child Sexual Abuse  b. Domestic Violence: c. Adult Sexual Assault:  Total must equal the amount in number four above. *Specify the Underserved "Other Violent Crimes" addressed through the other states.	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Elder Abuse  Robbery  Survivors of Homicide  Hate Crime  Human Trafficking  Kidnapping  Mass Violence  Stalking/Harassment  Teen Dating Violence  Other Violent Crimes**  Non-Violent Crimes**  Expenditures reported above:
a. Child Abuse: Child Physical Abuse/Neglect Child Sexual Abuse  b. Domestic Violence: c. Adult Sexual Assault:  Total must equal the amount in number four above. *Specify the Underserved "Other Violent Crimes" addressed through the other states.	ect budget.  rserved:  DUI/DWI Crashes  Assault  Adults Molested as Children  Elder Abuse  Robbery  Survivors of Homicide  Hate Crime  Human Trafficking  Kidnapping  Mass Violence  Stalking/Harassment  Teen Dating Violence  Other Violent Crimes**  Non-Violent Crimes**  Expenditures reported above:
a. Child Abuse: Child Physical Abuse/Neglect Child Sexual Abuse  b. Domestic Violence: c. Adult Sexual Assault:  Total must equal the amount in number four above.  *Specify the Underserved "Other Violent Crimes" addressed through the other was addressed through the other Specify the Underserved "Other Non-Violent Crimes" addressed through the other Specify the Underserved "Other Non-Violent Crimes" addressed through	ect budget.  preserved: DUI/DWI Crashes Assault Adults Molested as Children Elder Abuse Robbery Survivors of Homicide Hate Crime Human Trafficking Kidnapping Mass Violence Stalking/Harassment Teen Dating Violence Other Violent Crimes* Non-Violent Crimes* Non-Violent Crimes*  expenditures reported above:

# Subgrant Award Report

Due December 9,2022 on the Grant Portal.

## Performance Measures

- Performance Measurement Tool (PMT) is the federal collection point for grant project statistical data.
- Review measures now to ensure collection of all required data fields
- Subgrantees will access the website through: <a href="https://ojpsso.ojp.gov">https://ojpsso.ojp.gov</a>
- KGGP will provide first-time Subgrantees with log-in information at a later date
- There will not be automated Grant Portal reminders for this particular report - make sure these due dates are noted on your calendar
- Contact Lori Jensen, Grants Specialist, at lori.jensen@ks.gov or 785-291-3205 for technical assistance <u>before</u> contacting the PMT help desk

# Performance Measurement Report

https://ojpsso.ojp.gov



# PMT Definitions

Subgrant Award Report (SAR): This report collects information about the subgrantee organization, the activities to be implemented by the subgrantee, and the allocation of grant funds. Grant Portal (part 1) and PMT website (part 2).

**Subgrant Data Report:** This report collects information quarterly on victims served with Victims of Crime Act (VOCA) plus match funding, including demographics, types of victimization, and services provided.



Performance Measurement Tool ( PMT )

<u>Victim Assistance</u>

KS - Executive Office of the State of Kansas

JUSTICE FOR VICTIMS • JUSTICE FOR ALL

OVC PMT Home Administration Profile SAR Enter Data Reports Need Help? Logout

#### Victim Assistance

Performance measures, PMT user materials, recorded trainings, and data analysis reports are available at <a href="https://ovc.ojp.gov/funding/performance-measures">https://ovc.ojp.gov/funding/performance-measures</a>

For technical assistance, contact the OVC PMT Help Desk at <a href="mailto:ovcpmt@usdoj.gov">ovcpmt@usdoj.gov</a> or call toll-free 1-844-884-2503. The Office for Victims of Crime is a component of the Office of Justice Programs, U.S. Department of Justice.



### Performance Measures

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© iStock/Ivan-balvan (see reuse policy).

#### Overview &

OVC sets program goals and collects performance measures data that demonstrate grantees' achievements.

All OVC funding recipients are required to collect and report performance measures data that demonstrate the results of funded activities.

#### Where can I find sample performance measures? ${\mathscr S}$

OVC performance measures can be found in the solicitation, through a link or in the performance measures table in the solicitation's appendix. Solicitations are available on the <u>Current Funding Opportunities</u> webpage for the current fiscal year or the <u>Expired Funding Opportunities</u> webpage for previous fiscal years.

Uniform Grante Guidance and Logiclation

Where can I find my program's performance measures?

Victim Assistance and Compensation Grantee Performance Measures

#### Transforming Victim

Services Grantee
Performance Measures

Human Trafficking Grantee Performance Measures

Fellowship Grantee Performance Measures

How are performance

#### vicuin Hooistance and Compensation Grantee

#### **Performance Measures** §

All recipients and subrecipients of OVC formula funding are required to collect and report performance measures data that demonstrate how they are accomplishing the goals and objectives of the VOCA Victim Assistance and Victim Compensation formula grant programs.

The accuracy and timeliness of reporting data is extremely important. Data reported by grantees allows OVC to—

- demonstrate the value and specific benefits of the program to government agencies, the victim services field, the public, and other stakeholders;
- generate an annual report on the program to demonstrate outputs of grant funds;
   and
- emphasize progress made toward achievement of OVC's strategic and program goals.

Victim Assistance Performance Measures	+
Victim Compensation Performance Measures	+
Data Submission Process and Deadlines	+
Additional Information	+

Welcome
Announcements

VOCApedia
Laws & Policies

Training & Technical
Assistance

Victim Assistance and
Compensation Grantee
Performance Measures

Performance Reports

Subrecipient Monitoring

**VOCA FAQs** 

Additional Resources

2022 Crime Victims Fund Allocations

Awards Made by OVC



#### **Additional Information**

#### Performance Measure Dictionary and Terminology Resource

This resource provides definitions for terms used across OVC performance measures and includes terms related to demographics and types of victimizations, victim services, and victim compensation expense.

#### Center for Victim Research Victim Services Performance Measure Data Visualization Tool

Data collection and visualization tool for VOCA Victim Services performance measures.

#### <u>Victim Assistance-Subgrantee Data Tracking Template (Excel)</u>

This spreadsheet is a data collection tool for gathering individual-level data for the Victim Services question bank.

#### Victim Assistance Prorating Strategies for Subgrantees

This resource clarifies situations when subgrantee data might be prorated and offers options for prorating subgrantee data before entry into the PMT.

#### <u>Clarification for Victim Assistance Grantee PMT Reporting</u>

This document clarifies the types of financial data that Victim Assistance grantees provide in the SAR, expectations around updating financial data in the PMT system, and the PMT's role as a secondary data system.

VOCA Victim Assistance PMT Targeted Guidance

Review the <u>YouTube Terms of</u>
<u>Service</u> and the <u>Google</u>
Privacy Policy

# Statistical Report

- Report statistics and outcomes from the VOCA grant project.
- **Important:** Statistics must be specific to the VOCA project, inclusive of both federal funds and non-federal match.

#### OFFICE FOR VICTIMS OF CRIME VICTIM ASSISTANCE FORMULA GRANT PROGRAM PERFORMANCE MEASURES SUBGRANTEE DATA REPORT

#### I. POPULATION DEMOGRAPHICS

	is section should be completed each reporting period. urce of data: Activities conducted at the subgrantee level
1.	TOTAL number of individuals who received services during the reporting period.  INSTRUCTIONS: Count all individuals served by your organization with the use of VOCA plus match funds during the reporting period. This number should be an unduplicated count of people served during a single reporting period, regardless of the number of services they received or victimization types with which they presented. DO NOT count anonymous contacts here. They should be reported in question 2. If your organization only had anonymous contacts, enter zero (0).  Number
2.	TOTAL number of anonymous contacts received during the reporting period.  INSTRUCTIONS: COUNT all anonymous contacts received by your organization through a hotline, online chat, or other service where the individuality of each contact cannot be established. If your organization did not have any anonymous contats enter zero (0).  Number
3.	Of the number of individuals entered in question 1, how many were <b>NEW</b> individuals who received services from your agency for the first time during the reporting period.  INSTRUCTIONS: Report the number of NEW individuals served with the use of VOCA plus match funds for the first time during the reporting period. This number should be an unduplicated count of identified NEW clients served during a single reporting period, regardless of the number of services they received or victimization types with which they presented.  For the first reporting period of your subaward, ALL individuals should be counted as new.  Number
4.	If your organization cannot track new individuals, please check the box below indicating such.  We cannot track new individuals.

T Victimization	s (for ALL individuals identified in Q	uestions 1 and 2).
mit data in this catego ∍d.	egory, enter "NT" in that field to represent <b>Not Track</b> ory due to the need to update its data collection syste	
uals who d services by ation type FIONS:	Victimization Type	A. Number of individuals received services based presenting victimization the reporting period
rea services basea	Adult Physical Assault (includes Aggravated and Simple Assault)	Number
resenting	Adult Sexual Assault	Number
on type during the period.	Adults Sexually Abused/Assaulted as Children	Number
uai ma i be counted	Arson	Number
nan one	Bullying (Verbal, Cyber, or Physical)	Number
on type.	Burglary	Number
ual MAY NOT be	Child Physical Abuse or Neglect	Number
nore than once	Child Pornography	Number
same victimization	Child Sexual Abuse/Assault	Number
	Domestic and/or Family Violence	Number
endix B for	DUI/DWI Incidents	Number
of each	Elder Abuse or Neglect	Number
on type.	Hate Crime: Racial/Religious/Gender/ Sexual Orientation/Other	Number
	(explanation required)	Please explain:
	Human Trafficking: Labor	Number
	Human Trafficking: Sex	Number
	Identity Theft/Fraud/Financial Crime	Number
	Kidnapping (noncustodial)	Number
	Kidnapping (custodial)	Number
	Mass Violence (Domestic/International)	Number
	Other Vehicular Victimization (e.g., Hit and Run)	Number
	Robbery	Number
	Stalking/Harassment	Number
	Survivors of Homicide Victims	Number
	Teen Dating Victimization	Number
	Terrorism (Domestic/International)	Number
	Other	Number
	If other places explain:	

## **Direct Service Categories**

Total number of individuals who received services by service type AND number of times each service was provided.

- A. Information & Referral
- B. Personal Advocacy/Accompaniment
- C. Emotional Support or Safety Services
- D. Shelter/Housing Services
- E. Criminal/Civil Justice System Assistance

Report the number of individuals who receive each category of service. No **ONE** category can be more than the total of Questions 1 and 2. When adding the categories (A+B+C+D+E), the total should be equal to or greater than the total number served in Questions 1 and 2.

# Direct Service subcategories

- Information & Referral A1 A4
- Personal Advocacy/Accompaniment B1- B10
- Emotional Support or Safety Services C1-C7
- Shelter/Housing Services D1-D3
- Criminal/Civil Justice System Assistance E1- E11

Report the number of times each subcategory service is provided. When adding the subcategory occurrences (A1+A2+A3+A4), the total should be equal to or greater than the number of people who received services in that category.

KANSAS GOVERNOR'S GRANTS PROGRAM LANDON STATE OFFICE BLDG, ROOM 304 N, 900 SW JACKSON, TOPEKA, KS 66612

	YEAR-END SUBGRANT	AWARD REPORT	
	Due November 1	10, 2023	
1.	Name and Address of Subgrantee Organization	-	
	( <u>must</u> include the full 9-digit zip code)	-	
	Point of Contact Name:	Point of Contact Title:	
	Point of Contact Telephone:	Point of Contact Email:	
2.	VOCA Grant Actual Expenditures (federal funds only):		
	Grant Project Number:		
	Grant Project Start Date: 10/1/2022	Grant Project End Date:	9/30/2023
b	Child Séxual Abuse  Domestic Violence:  Adult Sexual Assault:	must correspond to the Final F	
	The total must equal the amount in number <b>two</b> above.		
	*Specify the Underserved "Other Violent Crimes" addressed through the	e expenditures reported above	E
	**Specify the Underserved "Other Non-Violent Crimes" addressed throu	igh the expenditures reported :	above:
App	proved by the Kansas Governor's Grants Program:		Date:

#### YEAR-END SUBGRANT AWARD REPORT

Coinciding with the Final Financial Status Report due date of November 10, 2023, the Year-End Subgrant Award Report must reconcile to actual expenditures

Subgrantee will upload the Year-End Subgrant Award Report to the Grant Portal; upon KGGP approval, the KGGP will give Subgrantee access to revise the Subgrant Award record in the PMT website

SAR - PART2	!		
7. Service Area	a (s):		
	Select counties (by sta	te)	
	Other counties served outs	<u>'</u>	
	Description		
8 Subgrant ms	atch (financial support from	other sources)	
	. Value of in-kind match:	0	
	B. Cash match:	0	
	C. Total match:	FF 044 00	first reliable to
	o. rotal materi.	55,014.00	(auto-calculated)
	D. Match waiver :		
9. USE OF VO	CA AND MATCH FUNDS:		
			gory that best identifies the types of services or activities that will be provided by the VOCA-funded project, as
		e services actually provided by the VOCA-f	funded project. Do not report services offered by another agency. Check all the apply.
_	MATION & REFERRAL		
_	ormation about the criminal		
	ferral to other victim service	, how to obtain notifications, etc.	
_		· -	al, faith-based organizations, address confidentiality programs, etc.)
		r, (····	
B.PERS0	ONAL ADVOCACY/ACCO	MPANIMENT	
☐ Vict	tim advocacy/accompanime	ent to emergency medical care	
☐ Vic	tim advocacy/accompanime	ent to medical forensic exam	
Lav	v enforcement interview ad	vocacy/accompaniment	
Indi	ividual advocacy (e.g., assi	stance in applying for public benefits, return	n of personal property or effects)
_		sic exam or interview, or medical evidence	
_		special visas, continued presence application	on, and other immigration relief)
_		editor, landlord, or academic institution	
_	•	ssistance (includes coordination of services	s)
_		ludes coordination of services)	
∟ Inte	erpreter services		
C.EMOT	IONAL SUPPORT OR SAF	FETY SERVICES	
_		includes safety planning etc.)	

SAR - PART1 (GRANTEE REQUIRED)

Hotline/crisis line counseling

### YEAR-END SUBGRANT AWARD REPORT

Due November 30, 2023, the Subgrant Award Report must be updated in the OVC Performance Measurement Tool website, <a href="https://ojpsso.ojp.gov">https://ojpsso.ojp.gov</a>, to reconcile to actual expenditures and quarterly Performance Reports

Subgrantee will update Part 2 of the Subgrant Award Report record in the PMT; the KGGP will review and certify

# Additional Reporting Requirements

- ► The following reports/forms may be required for your VOCA award:
- Equipment Inventory Form
- Authorization for Electronic Deposit

#### KANSAS GOVERNOR'S GRANTS PROGRAM LANDON STATE OFFICE BLDG, ROOM 304 N, 900 SW JACKSON, TOPEKA, KS 66612

#### EQUIPMENT INVENTORY FORM DUE WITHIN 30 DAYS OF PAYMENT DATE

Subgrantees are required to fill out this form if equipment is purchased with any grant funds. Any equipment purchase must be approved as part of the grant award. The definition of equipment is assets with a useful life of one year or more and a cost of \$5,000 or more. The Subgrantee shall follow its agency written policies and procedures for purchasing equipment, such as purchasing approval, needs assessment, soliciting bids, etc. This form must be submitted within 30 days of payment by email to <a href="https://example.com/kgp@ks.gov">kgpp@ks.gov</a>. A copy also should be retained in the Subgrantee's grant file.

Name of Subgrantee Organization:	
Grant Project Number:	
Name and Phone Number of Individual Completing Form:	
Description of Equipment:	
Quantity Purchased:	
Serial (or other identification) Number:	
Source of the Equipment:	
Identification of Who Holds the Title:	
Acquisition Date: Paid Date: Paid Date:	
Location of Equipment:	
New/Used (circle one) Equipment on Date of Purchase. If Used, Condition of Equipment:	
Total Purchase Cost of Equipment: \$	
Cost Charged to Grant Project: \$ Grant Project Percentage of <u>Total Cost</u> :	%
Federal Funds: \$ Federal Portion of Cost Charged to <u>Grant Project;</u> Non-Federal Match: \$ Non-Federal Match Portion of Cost Charged to Grant Project:	% %
Non-Federal Match: \$ Non-Federal Match Portion of Cost Charged to <u>Grant Project;</u>	- %
EXAMPLE: Total Purchase Cost of Equipment: \$5,598	
Cost Charged to Grant Project: \$3,750 Grant Project Percentage of <u>Total Cost</u> :	67%
Federal Funds: \$3,000 Federal Portion of Cost Charged to Grant Project:	80%
Non-Federal Match: \$750 Non-Federal Match Portion of Cost Charged to Grant Project:	20%
The Subgrantee agrees that equipment purchased through this grant project will continue to be used for the purpose it	
was purchased for as long as needed, whether or not the grant project continues to be supported by this grant program.	
Further, the Subgrantee assures that services provided which utilize the equipment purchased by this grant project will	
continue to be reported to the Kansas Governor's Grants Program annually for as long as the equipment is used.	
Entered by the Kansas Governor's Grants Program:   Date:	

# Equipment Inventory Form

- Report any equipment purchased with grant funds that cost \$5,000 or more per unit
- Reconcile to the approved
   VOCA grant project budget.
- Must submit within 30 days of payment date.

# **Property and Equipment**





**INVENTORY** 

**DISPOSAL OF EQUIPMENT** 

# The Grant Portal

## **Grant Portal**

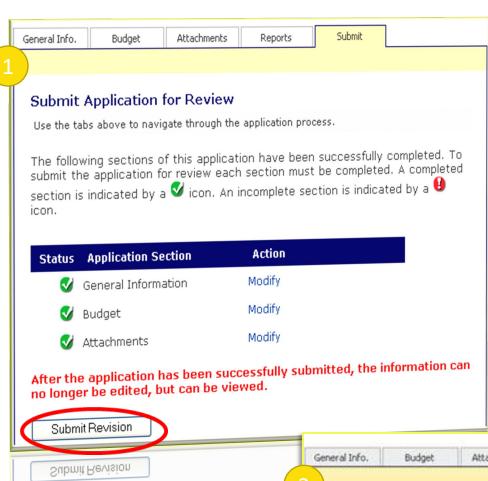


- ► Check the appendices for instructions
- ► Appendix A- Budget revision request
- ► Appendix B- Financial Status Report
- ► Appendix C- Submitting an offline report

## **Budget Revision Requests**

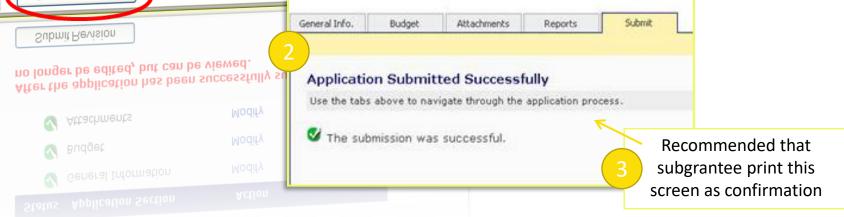
Filename: 23-VOCA-01 Budget

BUDGET	_				
CATEGORY	LINE ITEM	FEDERAL	MATCH	DESCRIPTION	NOTES
PERSONNEL:	Shelter Advocate	\$31,980	) n/a	Full-time, 40 hrs/wk; employees receive a 5% raise on January 1 <sup>st</sup> : a (\$15.00/hour x 1,040 hours) + (\$15.75 x 1,040 hours)	
	Victim Advocate	\$19,188	\$4,797	Full-time, salaried, 75% of time on project; employees receive a 5% raise on January 1 <sup>st</sup> : (\$31,200 x .5 year) + (\$32,760 x .5 year) x .75 of time = 23,985; 20% match provided by county commission	
FRINGE BENEFITS:					
TRAVEL/TRAINING:	Conferences/Workshops	s \$800		Two [specify advocacy training events]: (200 miles x \$.50/mile x 2 trips) + (\$90/night x 2 nights x 2 trips) + (\$40/day meals x 3 days x 2 trips)	
TOTAL:		\$51,968	\$4,797	,	
Application /	Award-Apprvd / Rev3.28.1	.17-Pndng			



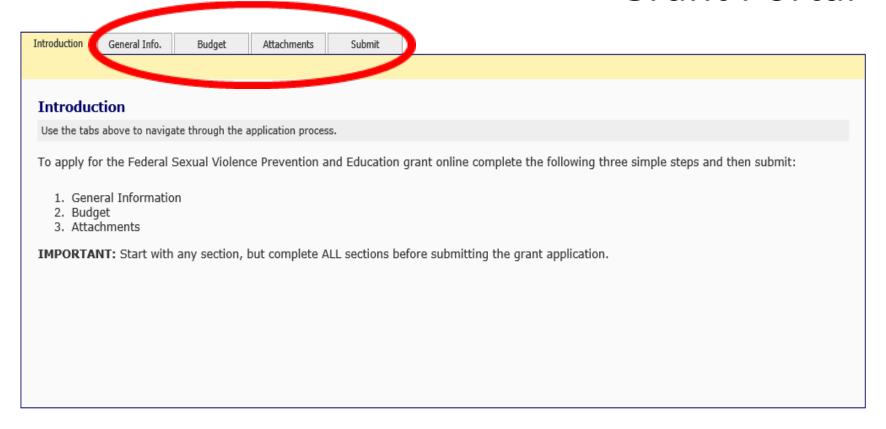
## **Budget Revision**

Don't forget!
Click the "Submit Revision" button



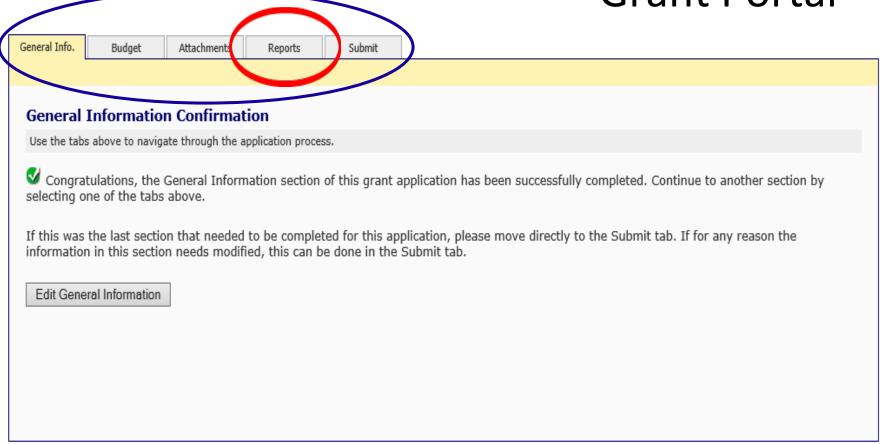
### **Application**

### **Grant Portal**



Any edits/revisions made to the General Information, Budget, and/or Attachments tabs require the Subgrantee to go to the Submit tab, click on 'Submit Revision,' and receive a confirmation message. The KGGP will not see those edits until revision is properly submitted.

### **Grant Portal**



When submitting reports in the Grant Portal, the Reports tab should be considered 'self-contained' – you do not need to go the Submit tab to submit the report.

#### Reports: Select a Report

Online Reports

Report	Period	Due Date	Status	Date Submitted	Action
December 2013 FSR	December 1 - 31, 2013	01/21/2014	Approved	2015-02-26 09:13:17	Revise
November 2013 FSR	November 1 - 30, 2013	12/20/2013	Approved	2015-02-26 09:08:58	Revise
October 2013 FSR	October 1 - 31, 2013	11/20/2013	Approved	2013-12-30 08:53:13	Revise
September 2013 FSR	September 1 - 30, 2013	10/21/2013	Approved	2014-01-07 14:05:38	Revise
August 2013 FSR	August 1 - 31, 2013	09/20/2013	Approved	2013-11-01 15:25:45	Revise
July 2013 FSR	July 1 - 31, 2013	08/20/2013	Approved	2013-11-01 12:40:04	Revise
June 2013 FSR	June 1 - 30, 2013	07/22/2013	Approved	2013-07-29 13:34:13	Revise
May 2013 FSR	May 1 - 31, 2013	06/20/2013	Approved	2013-06-24 15:00:17	Revise
April 2013 FSR	April 1 - 30, 2013	05/20/2013	Approved	2013-06-24 14:55:51	Revise
March 2013 FSR	March 1 - 31, 2013	04/22/2013	Approved	2013-06-24 14:53:30	Revise
February 2013 FSR	February 1 - 28, 2013	03/20/2013	Approved	2013-04-08 13:44:20	Revise
January 2013 FSR	January 1 - 31, 2013	02/20/2013	Approved	2013-04-08 13:36:40	Revise

#### Offline Reports

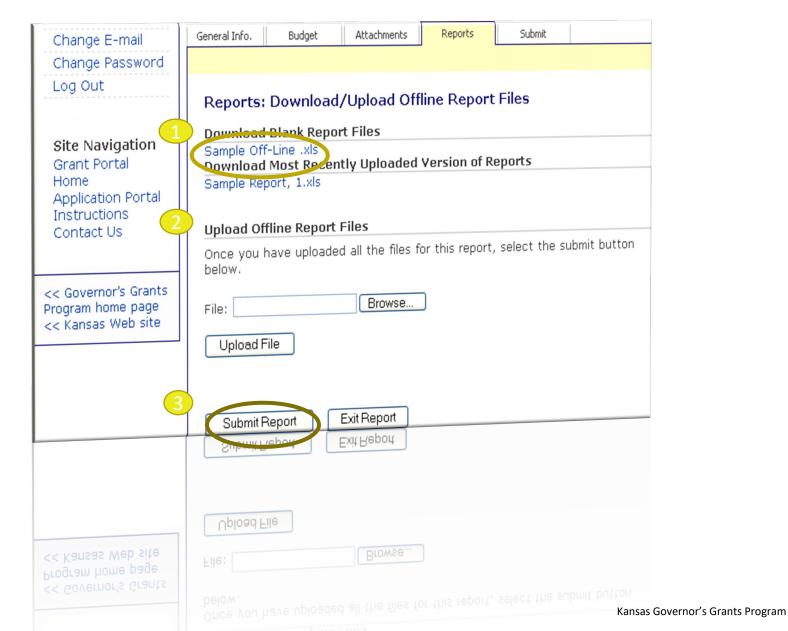
Report	Period	Due Date	Status	Date Submitted	Action
4th Qtr Narrative	Oct. 1 - Dec. 31, 2013	01/21/2014	Approved	2014-01-07 10:05:39	Upload/Download
Projection of Final Expenditures	Oct. 1 - Dec. 31, 2013	10/21/2013	Approved	2014-01-07 11:04:25	Upload/Download
3rd Qtr Narrative	July 1 - Sept. 30, 2013	10/21/2013	Approved	2013-10-04 10:14:17	Upload/Download

# Grant Portal Reports

Verify submission through the 'Status' and date/time stamp.

May revise reports with "Action" of Revise or Upload/Download.

# **Submitting Offline Reports**



# **Uploading Offline Reports**

Rev1\_Qtr1\_23VOCA.xls Rev2\_23VOCA\_Qtr1.xls

Change E-mail	General Info. Budget Attachments Submit	
Change Password Log Out  Site Navigation Grant Portal Home Application Portal Instructions Contact Us  << Governor's Grants Program home page << Kansas Web site	Reports: Download/Upload Offline Report Files  Download Blank Report Files Sample Off-Line .xls Download Most Recently Uploaded Version of Reports Sample Report, 1.xls  Upload Offline Report Files Once you have uploaded all the files for this report, select the submit button below.  File:  Browse  Upload File	
	Submit Report Exit Report  Snpwit Bebout Exit Bebout	rnor's Grants Pr

# Compliance

# Compliance Reviews



Analyst will contact you to schedule.



Review Compliance Report and checklist.



Prepare your answers to questions ahead of time.



Analyst will notify you what documentation will be reviewed.



Complete follow-up requirements by the due date.



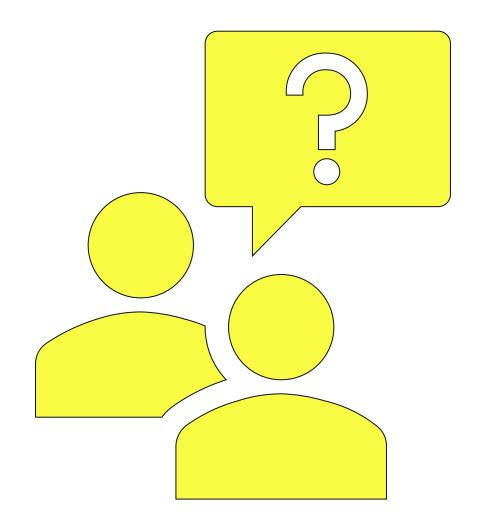
#### KANSAS GOVERNOR'S GRANTS PROGRAM GRANT PROJECT COMPLIANCE REPORT CHECKLIST

Please have the following information ready at the time of the site visit. If any of the information is in electronic format or is posted on a website, please forward to the Analyst prior to the review. Not all of the items may apply to the particular grant project. If the subgrantee is having a desk review, please submit all applicable documents. Contact the Analyst prior to the review if there are any questions about the information.

	1.	Grant file for related grant(s) to be reviewed				
	3.	Subgrantee's policies and procedures for agency, including financial/accounting, purchasing,				
		monitoring/evaluation, etc.				
		Grant Portal access policy, if applicable.				
	4.	Subgrantee's licensing or accreditation(s)				
	5.	Confidentiality policy, if changed from previous compliance review				
	6.	NONPROFIT ORGANIZATIONS ONLY				
		Board minutes for last three meetings				
		Articles of Incorporation				
		Bylaws, if changed from previous compliance review - MAKE A COPY				
		KCSDV accreditation documentation if domestic violence or sexual assault agency				
	7.	FACILITY				
		Any inspections of the facility				
	11.	MONITORING & EVALUATION STATUS				
		Information regarding process for compilation of statistical data and supporting backup documentation for all data reported on the grant, i.e. database records, queried reports, intake/discharge forms, phone logs, activity				
		logs, etc.				
	12.	AUDIT & IRS FORM 990				
		Copies of any other compliance or audit reports that other funders provided; if the subgrantee program is				
		under the umbrella of a larger organization, provide copies of findings/reports applicable to the program -				
		MAKE A COPY				
	13.	FINANCIAL				
		Backup documentation for all expenses charged to the grant, including non-federal match expenditures if				
		applicable, i.e. receipts, invoices, time and activity records, payroll information such as copies of payroll registers, etc.				
	14.	PROGRAM INCOME				
	17.	Program income procedure, if applicable				
		Forfeiture procedure, if applicable				
ш	16.	PERSONNEL				
	10.	Subgrantee's personnel policies and procedures regarding fringe benefits, overtime, vacation, holidays, travel,				
		staff evaluations, nondiscrimination policies/complaints and how handled, etc.				
П		Job descriptions for all grant funded positions				
		Applications/resumes for grant funded positions				
П		List of all grant funded staff, job titles, start/end dates in positions, and number of hours worked per week –				
		MAKE A COPY				
	19.	FACILITY COSTS				
		Lease agreement for facility if paid with grant funds				
	20.	EQUIPMENT				
		Lease agreements for equipment if paid with grant funds				
		Usage log for equipment				
	21.	CONTRACTUAL SERVICES				

## Compliance Review Checklist

# Q & A



## KGGP Website

Visit the KGGP website at

www.grants.ks.gov

for information on grant management.

- Grant Opportunities
- Resources Managing a Grant Award
- Resources Civil Rights Information
- Kansas Academy for Victim Assistance (KAVA)



### SAVE THE DATES

25TH ANNUAL CRIME VICTIMS' RIGHTS CONFERENCE MAY 3 - 4, 2023

PRE-CONFERENCE INSTITUTE MAY 2, 2023

**HYATT REGENCY - WICHITA, KANSAS** 

Survivor Voices: Elevate. Engage. Effect Change.

www.grants.ks.gov

## Thank you for attending the webinar!

### **Contact Information**

This webinar is just one opportunity to get your questions answered!

For questions regarding the agency's VOCA award, contact the KGGP office.

Kansas Governor's Grants Program

### kggp@ks.gov

Voice: 785-291-3205

Fax: 785-291-3204

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