INSTRUCTIONS FOR ACCESSING THE FEDERAL VOCA ASSISTANCE REPORTING SYSTEM AND COMPLETING THE FEDERAL VOCA ASSISTATNCE SUBRANTEE QUARTERLY REPORT

As of the October – December 2015 quarter, VOCA Assistance subgrantees are required to complete a quarterly report in the federal reporting system (PMT), in addition to the report required by the state that is currently submitted in the COGMS system. Listed below is information about this new requirement, including instructions on how to access and complete the report.

WHO TO CONTACT IF YOU NEED HELP: If you have questions about how to complete the report or about how to access the system, you should contact your Office for Victims Programs (OVP) grant manager. If we are unable to help you, we will refer you to the PMT help desk; they can be reached by phone at 1-844-884-2503 and via email at ovcpmt@csrincorporated.com.

USER ACCOUNT: You must have a user account set up in the federal reporting system before you will be able to access your quarterly report. All VOCA subgrantees have been set up in the federal system and the project director listed on your grant should have received an email from the federal OVC PMT system with a link and instructions on how to set up a user account and password. Once the project director sets up a user account, additional users can be set up in the system. If you have not received information about how to set up a user account, please contact Debbie Kasyon at 303-239-5703 or <u>debbie.kasyon@state.co.us</u>. If she is unable to resolve the issue, you will be asked to contact the OVC PMT help desk at 1-844-884-2503 or <u>ovcpmt@csrincorporated.com</u>.

HELPFUL TIPS BEFORE YOU GET STARTED:

1. You will be timed out of the system 30 minutes after you stop saving data; click the save button often.

2. You do not have to complete your report all at once. Clicking the SAVE or SAVE & CONTINUE buttons within the report will save your work. When you log back in to the system you can continue from where you left off.

3. A copy of the federal reporting form, with instructions and an appendix with definitions, is available on our website at http://dcj.ovp.state.co.us. You will find it under Reporting Forms & then VOCA. It is titled VOCA Federal Subgrantee Report Sample. You cannot complete the federal report from our website; this is only a sample document with instructions.

4. You may now count an individual in more than one victimization category (Question 6A – Types of Victimizations), but you MAY NOT count them more than once within the same victimization type. For example, if an individual presents as a Domestic and/or Family Violence victim and an Adult Sexual Assault victim, you can now count that victim once for each type of victimization – domestic violence and sexual assault – but you would not count them twice in the domestic violence category.

5. You can now count the number of times you provide a service to a victim (Question 9). For example, if you provide "referral to other victim service programs" to an individual on three different occasions, you may count that service three times in the quarter/reporting period.

ACCESSING THE FEDERAL SYSTEM AND COMPLETING YOUR REPORT:

- 1. Log in to the federal reporting system at <u>https://www.ovcpmt.org</u>.
- 2. Enter your user name and password where indicated

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	Performance Mea	asurement Platform		
User Name (Jebbie.kasyon@state	e.co.us	Password	Login Forgot Password	
<u>Please not</u> will not wo how.	<u>e</u> : JavaScript must be enabl ork properly. If you need to e	led to use this site. If not, site enable JavaScript, click <u>here</u> to	navigation 5 find out	
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3. Click the OVC PMT button

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Keep this	*** Staying Logged-In *** Keep this window open for navigation to all of your assigned OJP applications!					
BJA	OVC	OJJDP	NIJ	-		
	Privacy FOIA					

Select your agency (there should be just one option for most agencies) Anttps://www.ovcpmt.org

Office of Justice Programs	
	Performance Measurement Tool (PMT)
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Select a profile:	
VICTIM ASSISTANCE	-
CO - CO. DIVISION OF CRIMINAL JUSTICE CO - Colorado Dept. of Public Safety, DCJ	
Logout	
For technical assistance, contact the OVC PMT Help Desk at <u>OVCPMT@csrincorporated.com</u> or cal The Office for Victims of Crime is a component of the Office of Justice Programs, U.S. Depa	II toll-free 1(844)884-2503. artment of Justice.
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5. At this screen you can review your Subgrant Award Report (SAR). This is information that has been entered for you by the state. You can **only** review the information. This is also the screen where you will access your quarterly report by clicking the Enter Data tab at the top of the screen.

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6. Once you click the Enter Data tab, you will select the quarter for which you are reporting.

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7. At the next screen, you will begin to enter your quarterly data. The first 4 questions are specific to how your agency is tracking individuals/clients.

OFFICE FOR VICTIMS OF CRIME	Performance Measurement Tool (PMT) <u>Victim Assistance</u> CO - Colorado Dept. of Public Safety, DCJ
/C.P.WT. Home Administration SAR Enter Data Reports Need Help? Longut	JUSTICE FOR VICTIMS • JUSTICE FOR ALL
eporting Period:10/01/2015 - 12/31/2015 Colorado Dept. of Public Safety, DCJ	
POPULATION DEMOGRAPHICS DIRECT SERVICES REVIEW	In question 1, you are being asked
This section is to be completed each reporting period. Source of data: Activities conducted at the subgrantee level.	individuals who received services during the reporting period (quarter) with VOCA and match funds, including new clients, ongoing
1. TOTAL number of individuals who received services during the reporting period. Require	clients and secondary victims.
 The total number includes individuals who may have been counted more than once during the reference of the second s	eporting period. Very few agencies will check the secondary box in question one. This for agencies that cannot track a
 No Is your agency able to identify "new" individuals who did not receive services from your agency during the service of the servi	the previous reporting period Unique count of
 No <u>Is your agency able to identify "new" individuals who did not receive services from your agency during t</u> Yes <u>No, Not Tracked (proceed to Question #6)</u> 	the previous reporting period individuals because of the nature of the services they provio (e.g. an anonymous
 No Is your agency able to identify "new" individuals who did not receive services from your agency during t Yes No, Not Tracked (proceed to Question #6) No, Other Reason (provide explanation, then proceed to Question #6) 	the previous reporting period individuals because of the nature of the services they provi (e.g. an anonymous hotline)

8. Question 2 is asking if your agency is able to identify individuals/clients as new or continuing **throughout the grant period**, not just for the quarter (reporting period). If you are able to track information this way, you will answer YES and then go directly to question 4.

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Select and	Vect another profile							
POPUI	LATION	DEMOGRAPHICS	DIRE	CT SERVICES	REVIEW			
This Sou	This section is to be completed each reporting period. Source of data: Activities conducted at the subgrantee level.							
1. <u>T</u>	1. TOTAL number of individuals who received services during the reporting period. Required							
	UT	ne total number i	ncludes in	dividuals who r	nay have be	en counted mor	e than once durir	Question 2 is asking if your agency
2. <u>Is</u>	s your ag O Ye	ency able to trac es (proceed to Q	k individu uestion #4	als on an annu I)	al basis by fe	ederal fiscal yea	<u>r?</u>	is able to identify individuals (clients) as either NEW or
	0 N	o						CONTINUING throughout the entire
3. <u>Is</u>	 Is your agency able to identify "new" individuals who did not receive services from your agency agenc							
	No, Not Tracked (proceed to Question #6) individuals in this manner.							
	No, Other Reason (provide explanation, then proceed to Question #6)							
4. <u>N</u>	4. Number of NEW individuals who received services from your agency for the first time during the reporting period. Required							
5. De	5. Demographics (for NEW individuals identified in Question 4)							

9. If you answer NO to question 2, you will go to Question 3, which is asking if your agency is able to track the number of NEW individuals/clients that received services **for the quarter/reporting period**. All agencies, with very few exceptions, are able to track the number of NEW individuals/clients during each quarter/reporting period. If you feel you need to answer NO to this question, please contact your grant manager at OVP to discuss.

1. TOTAL number of individuals who received services during the reporting period. Required	
The total number includes individuals who may have been counted more than once during the reporting part of the second	period.
 Yes (proceed to Question #4) No 	
 Is your agency able to identify "new" individuals who did not receive services from your agency during the previ Yes 	ious reporting period?
◎ No, Not Tracked (proceed to Question #6)	
No, Other Reason (provide explanation, then proceed to Question #6)	
4. <u>Number of NEW individuals who received services from your agency for the first time during the reporting period.</u>	Required

10. Question 4 is asking you to report the number of NEW individuals/clients who received services for the first time during the quarter/reporting period (see above screen shot). Please note that ALL individuals/clients are considered NEW for the October – December time period, not January – March as we have counted in the past. This change is related to new federal reporting requirements.

11. Question 5 asks you to report demographic information on all NEW individuals/clients served during the reporting period. Note that the demographic categories include a NOT REPORTED and a NOT TRACKED option. Per the federal Office for Victims of Crime (OVC), NOT REPORTED means that your agency collects this information but it was not provided or indicated by the person completing the intake form. NOT TRACKED means that your agency is unable to submit demographic information because you need to change your data collection system AND efforts are underway to track this information. Very few agencies will mark NOT REPORTED or NOT TRACKED.

CE/ETHNICITY (self-reported)	Number of New Individue-I-	
Population	Number of New Individuals	
merican Indian or Alaska Native	Required	Note that the numbers listed
Asian	Required	in each demographic
Black or African American	Required	category should equal the
lispanic or Latino	Required	reported in Question 4. For
lative Hawaiian or Other Pacific Islander	Required	the RACE category, you
White Non-Latino or Caucasian	Required	identify as more than one
Some Other Race	Required	race in the MULTIPLE RACES category
Aultiple Races	Required	
Not Reported	Required	
Not Tracked	Required	
Race/Ethnicity Total (auto-calculated after save)		
NDER IDENTITY (self-reported)		
Population	Number of New Individuals	

12. In question 6 enter the number of individuals (all victims, not just new clients) who received services by type of victimization. SOMETHING NEW: Agencies can count individuals in more than one victimization type/category, though you cannot count an individual more than once within the same victimization type. Also note that you can hover over an underlined item for a definition of crime type in this section.

	A. Number of individuals who received services based on Victimization Type	a presenting victimization during th Number of Individuals	ne reporting period.
	Adult Physical Assault (Includes Aggravated and Simple	Dominad	
	Adult Sexual Assault	Required	For guestion 6, enter the
	Adults Sexually Abused/Assaulted as Children	Required	number of individuals
	Arson	Required	(Identified in question 1) who received services based on
	Bullving (Verbal, Cyber or Physical)	Required	EACH presenting victimization
an	Burglary	Required	quarter/reporting period.
over an	Child Physical Abuse or Neglect	Required	You MAY count an individual
fined for a	Child Pornography	Required	in more than one victimization
tion or	Child Sexual Abuse/Assault	Required	count them more than once
ction	Domestic and/or Family Violence	Required	within the same victimization
_	DUI/DWI Incidents	Required	question 6B to indicate the
	Elder Abuse or Neglect	Required	number of individuals who presented with more than one
	Hate Crime: Racial/Religious/Gender/ Sexual		type of victimization.
	Orientation/Other (Explanation Required)		This is a different way of
	Ficase explain	Required	counting than has been done in the past!
	Human Trafficking: Sex	Required	in the part.
	Identity Theft/Fraud/Financial Crime	Required	
	Kidnapping (non-custodial)	Required	
	Kidnapping (custodial)	Required	
	Mass Violence (Domestic/International)	Required	
	Other Vehicular Victimization (e.g., Hit and Run)	Required	
	Robbery	Required	
	Stalking/Harassment	Required	
	Survivors of Homicide Victims	Required	
	Teen Dating Victimization	Required	
	Terrorism (Domestic/International)	Required	
	Violation of a Court (Protective) Order	Required	
	Other (Provide number and description)		
	If other, please explain:		
	You have 5000 characters left. (Maximum characters: 6000)		
	B. Of the individuals who received services, how many pr	esented with more than one type of	victimization during the reporting period?
	Enter Number:	Required	
	C. Special classification of individuals (Self-reported)	Number of Individuals	
	Deaf/Hard of Hearing	Required	
	Homeless	Required	
	Immigrants/Refugees/Asylum Seekers	Required	
	LGBTQ	Required	
	Veterans	Required	
	Victims with Disabilities: Cognitive/ Physical /Mental	Required	
	Victims with Limited English Proficiency	Required	
	Other		
	If other, please explain:		
	You have 5000 characters left. (Maximum characters: 5000)		
	Sa	ve & Continue Exit Data Entry	

13. Question 7 asks you to report the number of individuals you assisted with victim compensation.

In question 8, you need to indicate which types of services you provided to your clients. Once you click a specific service type (such as information and referral), that service category will open up and you will be asked to indicate the number of individuals who received services in that category overall (this number cannot exceed the number of victims served as reported in question 1) and then indicate the number of times you provided each individual service in each subcategory. For example, if you provided "information about the criminal justice process" to an individual client on three different occasions during the reporting period, you may count that service three times. This means the numbers reported in the subcategories under each service type CAN exceed the number of individuals served.

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Reporting Period: Colorado Dept. of Public Safet	/, DCJ		
POPULATION DEMOGRAPHICS DIRECT SERVICES	REVIEW		
Complete this section each reporting period.			
 Number of individuals assisted with a victim competent of the types of services provided by your orgation of the types of services provided by your orgation of the types of services provided by your orgation of the types of services and the types of services are competent of the types of the types of services are competent of the types of types of the types of types of the types of the types of t	ensation application during the reporting period: Whatever you check here will determine which service categories open up for you to provide specific numbers s by service type AND number of times eac services in this category cess tain notifications, etc. resources (includes legal, medical, faith- rograms, etc.)	od. 4 The number of individuals served for each service type cannot exceed the number of victims served in Question 1. Ch service was provided during 45 8 12 17 8	In the subcategories for each service type, you can count multiple contacts. For example, if you provided "information about the criminal justice process" to an individual on 8 different occasions, you may count that service 8 times in A.1. The numbers reported in the subcategories CAN exceed the number of victims served.

14. Once you have entered all of the services that were provided during the quarter/reporting period, click the REVIEW button at the top of the screen to review your report.

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OVC PMT Home Administration SAR Enter Data Reports Need Help? Logout	
Reporting Period:10/01/2015 - 12/31/2015 Colorado Dept. of Public Safety, DCJ Your data has been saved.	
POPULATION DEMOGRAPHICS DIRECT SERVICES REVIEW	
7. Number of individuals assisted with a victim compensation application during the reporting period.	Required
 Select the types of services provided by your organization during the reporting period: A. Information & Referral 	
B. Personal Advocacy/ Accompaniment	
C. Emotional Support or Safety Services	
D. Shelter/ Housing Services	
E. Criminal/ Civil Justice System Assistance	
9. Total number of individuals who received services by service type AND number of times each service was	provided during the reporting period
Save & Continue Exit Data Entry	

15. If you see any sections that say REQUIRED, you will need to click on that section to complete it before submitting your report.

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C PMT Home	Administration SAR	Enter Data	Reports	Need Help?	Logout		
						Go Back to	Data Entry Form
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POPULATIO	N DEMOGRAPHICS						
1. TOTAL nu services durir	mber of individuals who receing the reporting period.	ved				_	Require
		T b p	The total numbe been counted m beriod.	r includes individ ore than once du	uals who may have ing the reporting		
2. Is your age annual basis	ency able to track individuals by federal fiscal year?	onan Y	es (proceed to	Question #4)			
		٨	lo				Require
3. Is your age who did not r	ency able to identify "new" inc receive services from your age	dividuals Y ency	/es				

16. Once you have entered data in all of the sections and your report is ready to be submitted, you will see this screen. Mark the box to indicate data entry is complete and click the SAVE button. You will be able to create a PDF of your report by clicking on the REPORTS tab at the top of the screen.

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OVC PMT Home	Administration	SAR	Enter Data	Reports	Need Help?	Logout					
							Go Back to Data Entry Form				
REVIEW											
Mark data entry as complete. The record will be locked for further data entry.											
Additional Comments											
You have 500 characters left. (Maximum characters: 500)											
*Once data entry is complete for a reporting period, you can view performance data reports here.											
For technical assistance, contact the OVC PMT Help Desk at <u>OVCPMT@csrincorporated.com</u> 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.											
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17. Your Office for Victims Programs (OVP) grant manager will review your quarterly report before approving it in the federal system. If changes are needed, you will be notified by OVP staff.