

# **2015 VSAC Strategic Planning and Capacity Building Survey**

## **Report of Methodologies and Findings**

Conducted for  
**The Office of Victims' Services,  
Pennsylvania Commission on Crime and Delinquency**

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# Table of Contents

<b>INTRODUCTION .....</b>	<b>1</b>
<b>WEB SURVEY METHODOLOGY .....</b>	<b>1</b>
Institutional Review Board .....	1
Instrument Development.....	1
Survey Sample .....	1
Data Collection .....	2
Survey Response.....	2
Data Preparation .....	2
<b>PROFILE OF VICTIM SERVICE ORGANIZATIONS .....</b>	<b>3</b>
<b>STUDY LIMITATIONS .....</b>	<b>4</b>
<b>FINDINGS.....</b>	<b>5</b>
Agency Background Information .....	5
Service Areas .....	5
Service Offerings .....	7
Staffing and Volunteers .....	8
Paid Staff.....	8
Direct and Indirect Service Staff .....	12
Staff Salaries .....	15
Employee Benefits.....	19
Volunteers .....	20
Financial Information .....	24
Total Income .....	24
Sources of Income .....	25
Expenditures .....	26
Clients Served.....	27
Types of Clients Served.....	29
Language Access .....	33

## Table of Contents (Continued)

Technology Use and Needs .....	40
Client Management and Tracking.....	40
Computer Needs .....	43
Other Technological Needs .....	44
Office Network and Internet Access.....	46
Web Services .....	48
Strategic and Operational Planning .....	52
Strategic Planning .....	52
Succession Planning .....	53
Operational Planning .....	53
Public Relations and Marketing.....	55
Top Victim Service Organization Needs.....	56
<b>APPENDIX A –SURVEY INSTRUMENT .....</b>	<b>58</b>
<b>APPENDIX B – PRE-NOTIFICATION EMAIL TEXT .....</b>	<b>71</b>
<b>APPENDIX C – INVITATION EMAIL TEXT .....</b>	<b>72</b>
<b>APPENDIX D – REMINDER EMAIL TEXT .....</b>	<b>73</b>
<b>APPENDIX E – PA COUNTIES BY RURAL/URBAN/SUBURBAN DESIGNATION .....</b>	<b>74</b>
<b>APPENDIX F – PROPORTIONS OF CLIENTS REPORTED.....</b>	<b>75</b>
<b>APPENDIX G – TOP VSO NEEDS.....</b>	<b>76</b>

### List of Figures

Figure 1. Number of Counties Served, by VSO Type.....	6
Figure 2. Primary Service Offerings, by County Density of Victims Primarily Served .....	8
Figure 3. Number of Staff Reported by VSOs.....	9
Figure 4. Changes in Number of Paid Staff in the Last Five Years, by VSO Type .....	11
Figure 5. Mean Staff Change in Paid Personnel in Last Five Years, by Population Density of Primary Service Area.....	12
Figure 6. Paid Direct Versus Indirect Service Staff, by VSO Type .....	13
Figure 7. Mean Percent of Direct Service Workers Attaining Levels of Education, by VSO Type ..	14
Figure 8. Mean Percent of Direct Service Workers Attaining Levels of Education, by Population Density of Primary Service Area.....	15
Figure 9. Lowest and Highest Starting and Current Salaries for VSO Staff .....	16
Figure 10. Mean Starting and Current Salaries for VSO Staff .....	17

## Table of Contents (Continued)

Figure 11. Mean Starting and Current Salaries for VSO Staff, by VSO Type.....	18
Figure 12. Mean Starting and Current Salaries for VSO Staff, by Population Density of Primary Service Area .....	19
Figure 13. VSOs Offering Medical and Retirement Benefits to Employees, by VSO Type.....	20
Figure 14. Volunteer Utilization, by VSO Type.....	21
Figure 15. Reliance on Volunteers to Perform Program-Related Tasks, by Population Density of Primary Service Area .....	22
Figure 16. Utilization of Volunteers to Perform Direct and Indirect Services, by VSO Type.....	23
Figure 17. Mean Number of Volunteers, by Population Density of Primary Service Area .....	23
Figure 18. VSO Income in Most Recently Completed Fiscal Year.....	24
Figure 19. Mean Income during Most Recently Completed Fiscal Year, by Population Density of Primary Service Area .....	25
Figure 20. Sources of VSO Income, by VSO Type.....	26
Figure 21. VSO Expenditures, by VSO Type.....	27
Figure 22. Average Number of Unique Clients Served, by Population Density of Primary Service Area .....	28
Figure 23. Age of Victims Routinely Served, by VSO Type .....	30
Figure 24. Sex of Victims Routinely Served, by VSO Type.....	31
Figure 25. Race of Victims Routinely Served, by VSO Type.....	32
Figure 26. Race of Victims Routinely Served, by Population Density of Primary Service Area .....	32
Figure 27. Needs of Crime Victims in VSOs' Communities Not Currently or Adequately Met .....	35
Figure 28. Crime Victims in VSOs' Communities for which There Are Limited or No Resources Available .....	37
Figure 29. Barriers in VSOs' Communities for Crime Victims Seeking Services .....	39
Figure 30. Methods Used to Track Client Data and Outcomes, by VSO Type.....	41
Figure 31. Software Used for Client Management (Other than Microsoft Office), by VSO Type ....	42
Figure 32. Unfulfilled IT Needs, by VSO Type .....	45
Figure 33. Responsibility for IT Updates and Maintenance, by VSO Type.....	46
Figure 34. Presence of Office Computer Network, by Population Density of Primary Service Area .....	47
Figure 35. Satisfaction with Office Network, by VSO Type.....	47
Figure 36. VSOs with a Website, by Population Density of Primary Service Area.....	48
Figure 37. Responsibility for Web Design and Updates, by VSO Type .....	49
Figure 38. Satisfaction with Web Site, by VSO Type .....	50
Figure 39. Social Media Use, by VSO Type .....	51
Figure 40. Social Media Use, by Population Density of Primary Service Area.....	51
Figure 41. VSOs with a Strategic Plan Developed within the Last Five Years, by Population Density of Primary Service Area .....	52
Figure 42. VSOs Establishing Short-Term Objectives, Strategies, and Targets around Service Provision at Least Once a Year, by Population Density of Primary Service Area .....	54
Figure 43. Indication of Using Measures to Assess Short-Term Objectives, Strategies, and Targets, by VSO Type.....	55
Figure 44. VSOs with a Marketing Plan, by Population Density of Primary Service Area .....	56

## Table of Contents (Continued)

### List of Tables

Table 1. Web Survey Timeline .....	2
Table 2. Profile of Victim Service Organizations.....	3
Table 3. Population Density of Primary Service Area, by VSO Type .....	7
Table 4. Mean Number of Paid Staff, by VSO Type.....	10
Table 5. Mean Number of Paid Staff, by Population Density of Primary Service Area .....	10
Table 6. Mean Number of Paid Direct and Indirect Service Staff, by VSO Type .....	12
Table 7. Mean Number of Paid Direct and Indirect Service Staff, by Population Density of Primary Service Area .....	13
Table 8. Mean Number of Non-English-Speaking Direct Care Workers.....	33
Table 9. Languages offered by VSOs Offering Direct Services in Languages Other than English, by Population Density of Primary Service Area .....	34
Table 10. Barriers in VSOs' Communities for Crime Victims Seeking Services, by Population Density of Primary Service Area .....	36
Table 11. Crime Victims in VSOs' Communities for which There Are Limited or No Services Available, by Population Density of Primary Service Area.....	38
Table 12. Barriers in VSOs' Communities for Crime Victims Seeking Services, by Population Density of Primary Service Area.....	40
Table 13. Other Software / Electronic System or Product Used for Client Management .....	43
Table 14. Top VSO Needs, by VSO Type and Population Density of Primary Service Area .....	57

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## INTRODUCTION

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In June through September 2015, the Center for Survey Research (CSR) at Penn State Harrisburg conducted a Capacity Building Web Survey of Pennsylvania victim service organizations (VSOs) that receive funding from the Pennsylvania Commission on Crime and Delinquency (PCCD). The purpose of the web survey was to capture information about organizational capacity by updating information that had been collected in previous surveys and asking questions on some new topics that had not been explored in previous surveys. The survey was designed to help PCCD make funding and policy decisions.

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## WEB SURVEY METHODOLOGY

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### **Institutional Review Board**

The study protocol, survey instrument, and informed consent statements were submitted to Penn State University's Office for Research Protections for review in July 2015 and were subsequently determined to be non-research under Study #00002892.

### **Instrument Development**

CSR staff worked in consultation with staff from PCCD and the Victim Services Advisory Committee (VSAC) during June 2015 to develop and refine survey questions for use in data collection. The survey instrument gathered background information on the victim service agencies, data on staffing, financial information, the clients served by the agency, unmet need among victim populations, technology needs, volunteer utilization, strategic and operational planning, and public relations and marketing. See Appendix A for a copy of the survey instrument used during data collection.

### **Survey Sample**

The initial sample frame for the Capacity Building Web Survey included 172 Pennsylvania victim service organizations that receive at least some funding through the Pennsylvania Commission on Crime and Delinquency. The list was generated by PCCD in June 2015.

## Data Collection

A pre-notification email was sent to all of the VSO directors or victim/witness coordinators in the sample frame, followed by a personalized email invitation that was sent a few days later. Reminder emails were sent and phone follow-up calls were made to non-respondents to increase response rates. In addition, follow-up calls were made to certain VSOs to obtain clarification on responses given for some questions. See the following table for a detailed recruiting timeline and Appendices B through D for copies of the recruiting emails.

**Table 1. Web Survey Timeline**

Date	Recruiting Activity
<b>July 8, 2015</b>	Pre-notification email
<b>July 15, 2015</b>	Invitation email sent / survey launched
<b>July 23, 2015</b>	Email reminder #1
<b>July 30-31, 2015</b>	Phone call reminder #1
<b>August 10, 2015</b>	Phone call reminder #2
<b>August 14, 2015</b>	Email reminder #2
<b>September 8, 2015</b>	Survey closed
<b>September 14-16, 2015</b>	Data clarification calls made to selected respondents

A total of 132 surveys were completed between July 8 and September 8, 2015. An additional 15 organizations provided some data without completing the entire survey, resulting in data being provided by a total of 147 organizations.

## Survey Response

The response rate was 76.7%, as calculated by the number of completed surveys (132) divided by the final sample size (172). Altogether, 85.5% of organizations completed at least part of the survey.

## Data Preparation

All completed survey data were extracted into Statistical Package for the Social Sciences (SPSS) software. Data were verified for accuracy of variable coding, and verbatim text was edited for consistency in formatting before final review by the senior staff of the Center for Survey Research. Survey datasets were created in SPSS for Windows version 21.0.

## PROFILE OF VICTIM SERVICE ORGANIZATIONS

The following table displays a profile of the victim service organizations that participated in the web survey. These numbers reflect responses as reported by the VSOs.

**Table 2. Profile of Victim Service Organizations**

	Number	Percent
<b>Type of Agency</b>		
Community-based	85	57.8%
System-based	62	42.2%
<b>Type of Service Offering</b>		
Procedural/System-Based	58	39.5%
Domestic violence (DV) only	21	14.3%
Sexual assault (SA) only	6	4.1%
Dual (DV/SA)	15	10.2%
Comprehensive <sup>1</sup>	37	25.2%
Child Advocacy Center	8	5.4%
Other - Victim Population Specific (i.e. DUI or elder victims only)	2	1.4%
<b>Service Area<sup>2</sup></b>		
Serve rural counties only	57	38.8%
Serve suburban counties only	32	21.8%
Serve urban counties only	42	28.6%
Serve a mix of counties (rural, urban, and/or suburban)	13	8.8%
Serve all of Pennsylvania	3	2.0%
	<b>Mean</b>	<b>Range</b>
<b>Staffing</b>		
Total number of PAID full-time staff	9.5	0-99
Total number of PAID part-time staff	3.3	0-61
Total number of PAID full-time equivalent (FTE) staff	10.9	0.2-118.9
Total number of PAID direct service staff	9.1	0.5-100
Total number of PAID indirect service staff	3.7	0-60
<b>Financial Information</b>		
Total income <sup>3</sup> ( <i>n</i> = 111)	\$979,175	\$11,463 - \$9,564,000
<b>Clients</b>		
UNDULICATED number of clients served (233,083 total served)	2,045	63-15,640

<sup>1</sup> A comprehensive agency serves all forms of crime and violence.

<sup>2</sup> See Appendix E for definitions and map of counties in each service area.

<sup>3</sup> Total income from 111 organizations that reported their total income; due to 36 missing responses, there may be significant bias present in the reporting of means.



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## STUDY LIMITATIONS

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The research team acknowledges the following limitations for the administrative web survey:

Despite utilizing a rigorous email and phone follow-up strategy with all victim service organizations in the sample, CSR did not receive a completed survey from every organization. Because the answers from these non-responding organizations could be different from those that did participate, non-response bias exists. It should also be noted that during the phone follow-up phase of the project, many directors and victim-witness coordinators shared the difficulty in finding time to complete the survey. This suggests that lack of time was a significant barrier to completing the survey, and it is possible that we are missing valuable data from these overwhelmed agencies. However, generally speaking, higher response rates suggest a lower likelihood of non-response bias. Overall, 76.7% of all possible respondents completed the survey. In addition, 85.5% of respondents answered at least some of the web survey questions.

Finally, a few questions had a significant number of respondents that did not provide data or provided incomplete data (i.e., questions pertaining to income and number of clients served). The responses of those who did not provide data could vary significantly from those that did provide data, so results should be interpreted with caution. Such situations are noted in the report, where applicable.

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## FINDINGS

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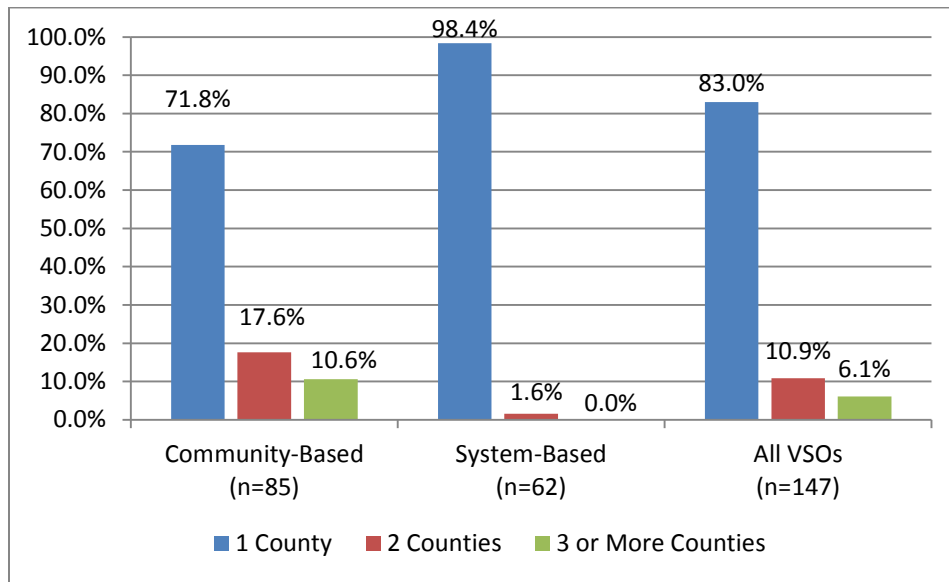
### **Agency Background Information**

A total of 147 victim service organizations (VSOs) participated in the Capacity Building Web Survey. About nine out of 10 (89.8%;  $n = 132$ ) completed the survey while the remainder (10.2%;  $n = 15$ ) provided some data, but did not complete the survey. Over half of responding organizations (57.8%;  $n = 85$ ), classified themselves as non-profit or community-based organizations, while 36.1% ( $n = 53$ ) indicated that they were district attorney-based and 6.1% ( $n = 9$ ) were probation office-based. Given the small sample size of probation office-based organizations, district attorney- and probation-based organizations will be reported together as system-based organizations throughout this report.

### **Service Areas**

Respondents were asked to indicate the Pennsylvania county or counties in which they primarily serve victims. Three of the VSOs (2.0%) reported that they primarily provide victim services throughout Pennsylvania. Only one VSO (0.7%) reported regularly serving victims that live outside of Pennsylvania. Most VSOs primarily provided services to victims in one county (83.0%;  $n = 122$ ). An additional 10.9% ( $n = 16$ ) provided services in two counties. Excluding those who serve victims in all counties, the average number of counties served was 1.24 for all VSOs, 1.41 for community-based VSOs, and 1.02 for system-based VSOs. The number of counties served ranged from one to nine among community-based VSOs and one to two among system-based VSOs. System-based organizations were more likely to report providing services in only one county (98.4%) than community-based organizations (71.8%). See the following figure for more information.

**Figure 1. Number of Counties Served, by VSO Type**



Respondents were also asked to indicate whether they primarily provide services to individuals in rural, urban, or suburban areas; they could select all that applied. About two-fifths (42.4%;  $n = 59$ ) said that they provide services to individuals primarily in rural areas. About one-fifth (20.1%;  $n = 28$ ) provide services primarily to urban areas, and the balance provide services to individuals in primarily suburban areas (18.7%;  $n = 26$ ) and a mix of rural, suburban, and urban areas (18.7%;  $n = 26$ ).

Organizations were also coded into primary service area categories (urban, rural, suburban, or mix of counties) based on the population density of the counties where they indicated that they primarily provide victim services. See Appendix E for a map of Pennsylvania counties by rural, suburban, and urban designation. Based on this re-coded designation, over one-third (38.8%;  $n = 57$ ) of participating VSOs primarily provide services in rural counties; 21.8% ( $n = 32$ ) provide services primarily in suburban counties; 28.6% ( $n = 42$ ) provide services in urban counties; and 10.9% ( $n = 16$ ) of participating VSOs provide services in a mix of counties (rural, urban, suburban).

System-based VSOs were more likely than community-based VSOs to service rural counties only (56.5% compared to 25.9%), whereas community-based VSOs were more likely to service urban counties (35.3% vs. 19.4%) or a mix of rural, suburban, and urban counties (18.8% vs. 0.0%, respectively), as shown in the following figure.

**Table 3. Population Density of Primary Service Area, by VSO Type**

	Community-Based VSOs (n = 85)	System-Based VSOs (n = 62)	All VSOs (n = 147)
<b>Rural counties only</b>	25.9%	56.5%	38.8%
<b>Suburban counties only</b>	20.0%	24.2%	21.8%
<b>Urban counties only</b>	35.3%	19.4%	28.6%
<b>Mix or rural, suburban, and urban counties</b>	18.8%	0.0%	10.9%

**For purposes of consistency, this report will focus on categorizing service area density by primary counties served, as indicated in the COUNT question of the survey.** The most significant difference between the two methods of service area description is for those who said that they provided services primarily in urban **counties** (28.6%) versus those who said that they provided services to individuals primarily in urban **areas** (20.1%). This might be explained by those who provide services in a county that is technically classified as urban based on county density, but may be considered to be suburban by those who service it (thus contributing to the increase in those who indicated that they service a mix of counties). Most VSOs who said that they provided services to a mix of rural, suburban, and urban areas also indicated that they only provided services in one county (92.3%).

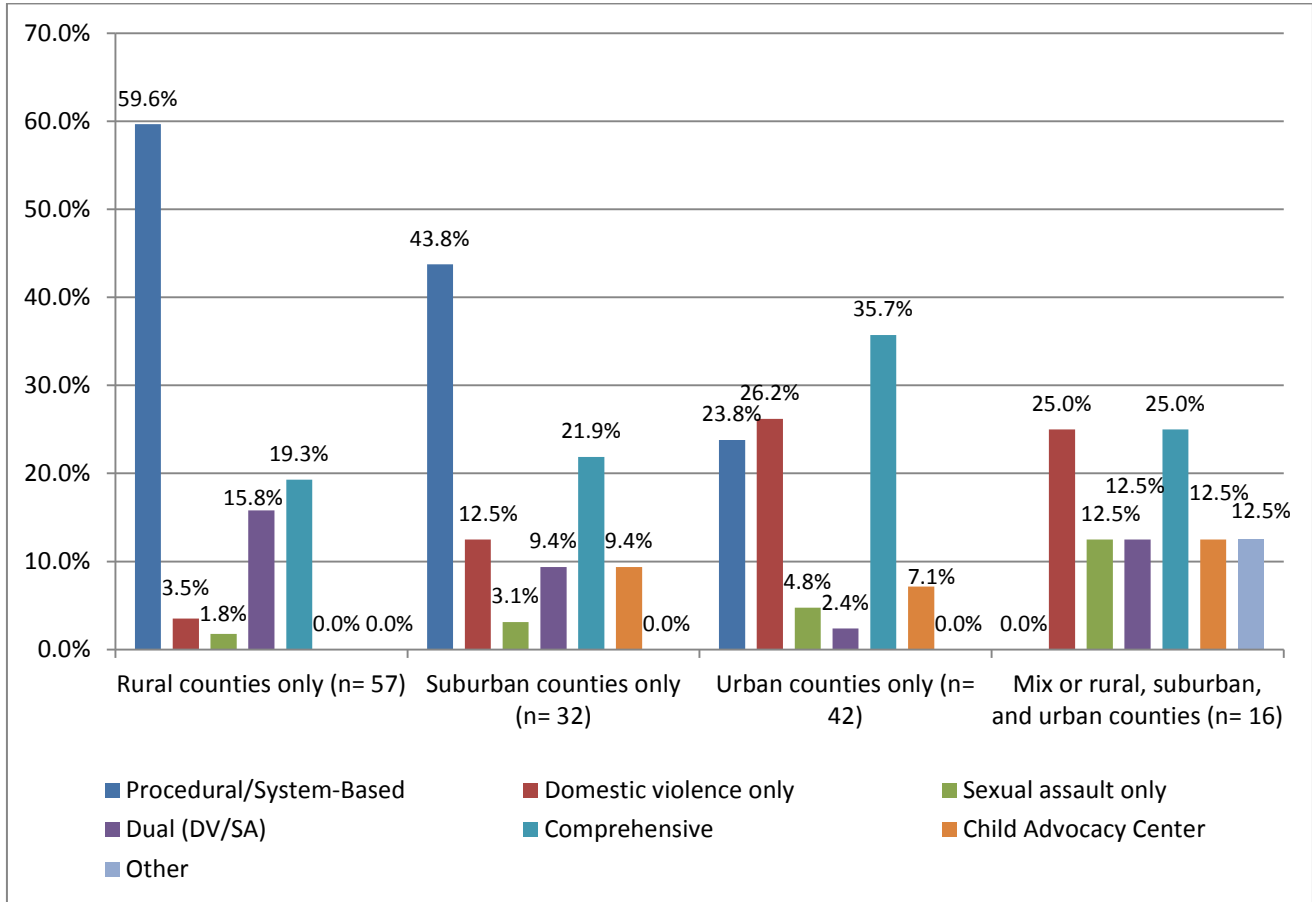
### **Service Offerings**

Two out of five community-based VSOs (40.0%; n = 34) reported providing comprehensive services, thereby serving victims of all forms of crime and violence. Comprehensive agencies represented 25.2% of all participating organizations. In addition, community-based VSOs reported primarily providing services in domestic violence only (24.7%), both domestic violence and sexual assault (Dual DV/SA, 16.5%), child advocacy (9.4%), sexual assault only (7.1%), and other areas (including elder victims' services and drunk/drugged driving victims, 2.4%).

The following figure shows the VSOs' service offerings by county density of victims primarily served. VSOs that provided services in urban counties only had a higher proportion of programs offering comprehensive services (35.7%) than those offering services only in rural counties (19.3%) suburban counties (19.3%), or a mix of counties (25.0%). VSOs that operated in rural counties were

more likely to have dual domestic violence/sexual assault service offerings (15.8%) than those operating in urban counties only (2.4%). This might suggest that the deficit of comprehensive service offerings found in rural counties might be partially addressed for domestic violence and sexual assault victims, but that larger deficits might exist among other victim groups.

**Figure 2. Primary Service Offerings, by County Density of Victims Primarily Served**



## Staffing and Volunteers

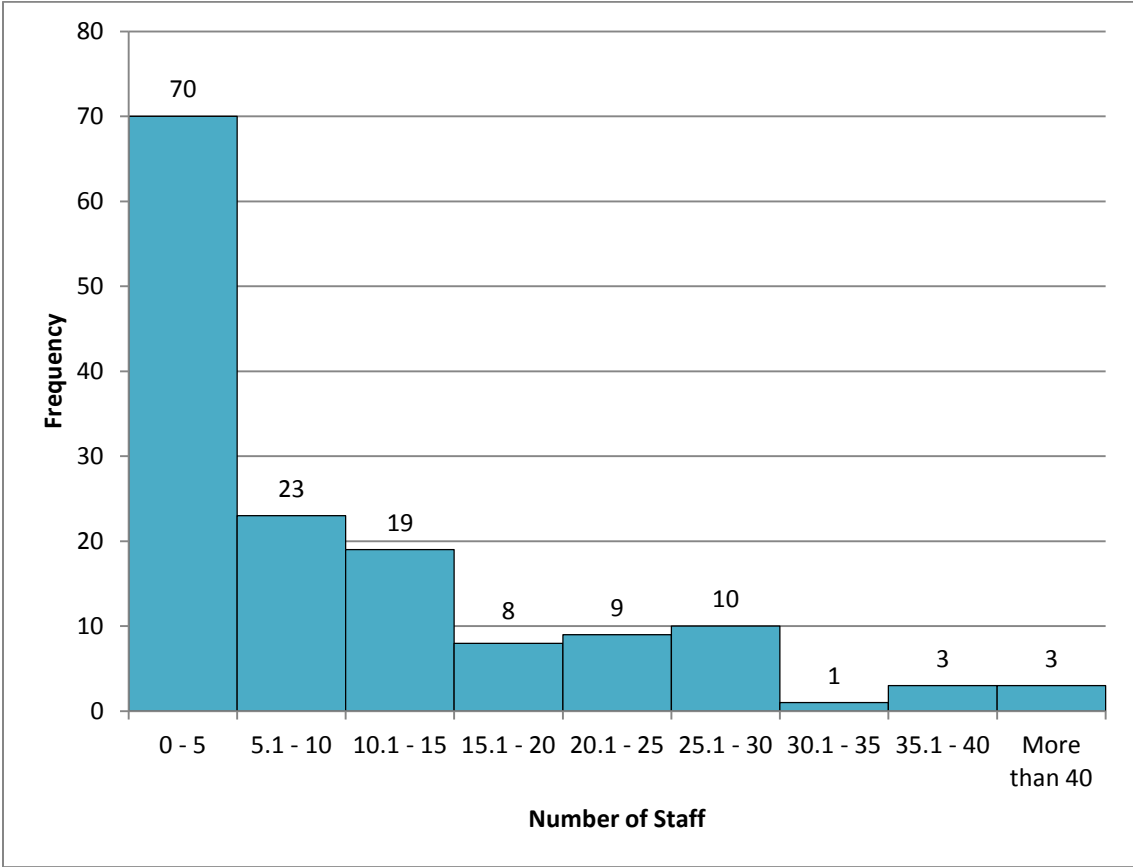
### Paid Staff

VSOs were asked a series of questions about their staffing. If an organization provided services beyond victims’ services (for example, a victim/witness office located within a larger district attorney’s office), they were asked to report only for staff that related to victims’ services. If the organization was part of a larger umbrella organization, they were asked to only report for their immediate office.

First, VSOs were asked to indicate how many paid full-time equivalent (FTE), paid full-time, and paid part-time staff they currently have at their agencies. They were asked to include both direct service and indirect service staff in their calculations. For part-time staff, 40 total hours worked equated to one FTE employee. For example, if an agency had two full-time staff and one part-time employee who worked 20 hours per week, then the agency had 2.5 FTE staff.

VSOs reported 10.9 FTE staff on average, 9.5 full-time staff, and 3.3 part-time staff. The number of paid FTE staff ranged from 0.2 to 118.9, the number of paid full-time staff ranged from 0 to 99, and the number of paid part-time staff ranged from 0 to 61. The following figure shows the distribution of the number of FTE staff reported by all VSOs.

**Figure 3. Number of Staff Reported by VSOs**



Generally, community-based VSOs had far more staff than system-based VSOs, with community-based VSOs reporting about six times more staff than system-based VSOs on average. The following table shows the mean number of staff reported by VSO type.

**Table 4. Mean Number of Paid Staff, by VSO Type**

	Community-Based (n= 84)	System-Based (n= 62)	All VSOs (n= 146)
<b>Paid FTE Staff</b>	16.9	2.8	10.9
<b>Paid Full-Time Staff</b>	14.7	2.5	9.5
<b>Paid Part-Time Staff</b>	5.4	0.5	3.3

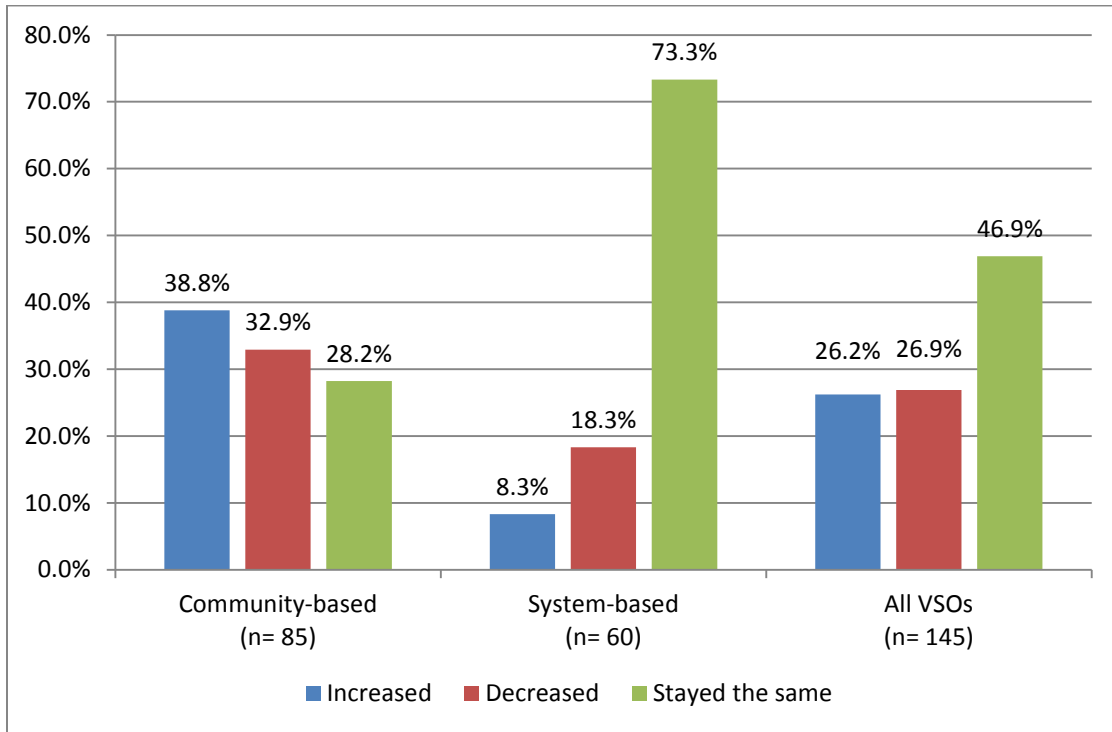
VSOs that provided services primarily in rural counties had about one-third as many paid staff as those providing services primarily in urban counties, and about one-half as many staff as those providing services in suburban counties, as shown in the following table.

**Table 5. Mean Number of Paid Staff, by Population Density of Primary Service Area**

	Rural Counties Only (n= 57)	Suburban Counties Only (n= 32)	Urban Counties Only (n= 41)	Mix of Counties (n= 16)
<b>Paid FTE Staff</b>	5.3	10.8	17.2	15.1
<b>Paid Full-Time Staff</b>	4.6	9.6	14.9	13.1
<b>Paid Part-Time Staff</b>	1.4	2.5	6.2	4.3

About half of VSOs (46.9%) indicated that their total number of paid staff has stayed the same during the last five years. The balance was evenly split, with 26.9% saying that their number of paid staff has decreased and 26.2% saying that it has increased. System-based VSOs were more stable in terms of staff sizes, with 73.3% saying that their staff sizes stayed the same. In contrast, only 28.2% of community-based VSOs had no change in their staff sizes. The following figure shows the percent of VSOs experiencing changes in staff sizes by VSO type.

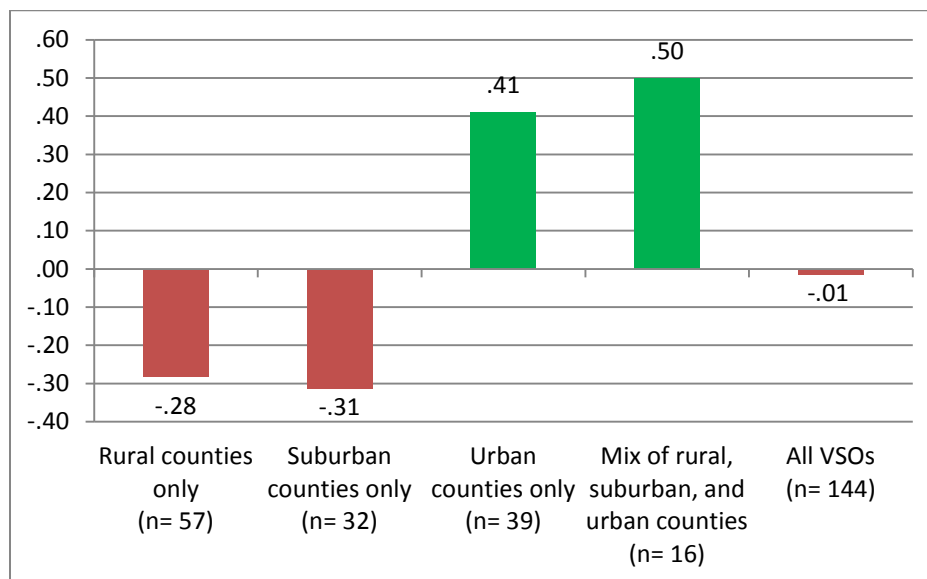
**Figure 4. Changes in Number of Paid Staff in the Last Five Years, by VSO Type**



Those who indicated that their number of staff members had changed in the past five years were asked to indicate the number by which their total paid staff has increased or decreased. Responses ranged from a decrease of 11 staff to an increase in 69 staff members. When considering these responses and the VSOs who said that they had no changes in the number of staff, the mean change for all VSOs was 0.5 net paid staff members in the last five years. However, one VSO indicated an increase of 69 paid staff in the last five years. When removing this outlier, the net change in paid staff members in the last five years was -0.01, essentially 0. The following analyses exclude the outlier. System-based VSOs experienced a net mean *decrease* of 0.1 staff members and community-based VSOs experienced a mean net *increase* of 0.1 staff members in the same timeframe. VSOs serving primarily rural and suburban counties-only fared less well than other VSOs, reporting mean *decreases* in paid staff of 0.3 personnel over the last five years. In comparison, VSOs serving urban counties-only benefited from an increase of 0.4 staff on average, and those serving a mix of counties saw an increase of 0.5 staff, as shown in the following figure.



**Figure 5. Mean Staff Change in Paid Personnel in Last Five Years, by Population Density of Primary Service Area**



**Direct and Indirect Service Staff**

VSOs were also asked to report how many of their paid full- and part-time staff were direct service staff and how many were indirect service staff. Direct service staff included positions such as advocates and counselors, and indirect service staff included positions such as prevention educators, volunteer coordinators, community outreach staff, and administrative staff. Respondents were asked to report these numbers without regard to how the staff were funded.

VSOs reported an average of 9.1 paid direct service staff and 3.7 paid indirect service staff. Direct service staff responses ranged from 0.5 to 100, and indirect service staff responses ranged from 0 to 60. Community-based VSOs had significantly more direct service and indirect service staff, as shown in the following table.

**Table 6. Mean Number of Paid Direct and Indirect Service Staff, by VSO Type**

	Community-Based (n= 84)	System-Based (n= 62)	All VSOs (n= 146)
<b>Paid Direct Service Staff</b>	13.9	2.6	9.1
<b>Paid Indirect Service Staff</b>	6.2	0.5	3.7

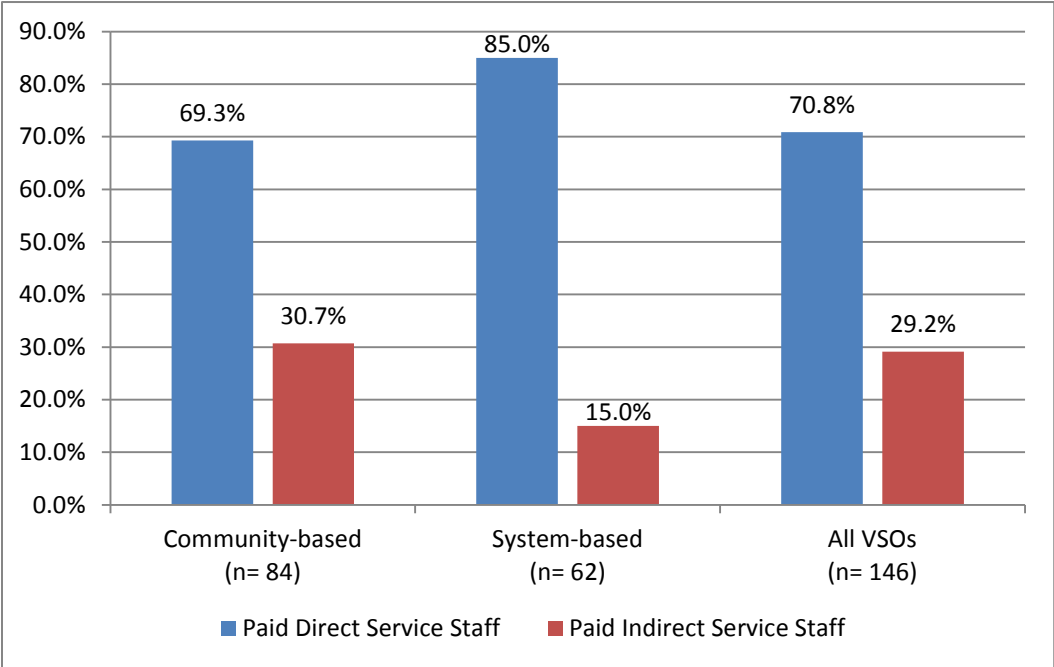
VSOs serving urban counties only had three times more direct service staff on average (14.5) than those serving rural counties only (4.5) and over four times more paid indirect service staff (6.5 vs. 1.5, respectively), as shown in the following table.

**Table 7. Mean Number of Paid Direct and Indirect Service Staff, by Population Density of Primary Service Area**

	Rural Counties Only (n= 57)	Suburban Counties Only (n= 32)	Urban Counties Only (n= 41)	Mix of Counties (n= 16)	All VSOs (n= 146)
<b>Paid Direct Service Staff</b>	4.5	8.8	14.5	12.0	9.1
<b>Paid Indirect Service Staff</b>	1.5	3.3	6.5	5.5	3.7

On average, VSOs reported that 70.8% of their staff were direct service staff. System-based VSOs had a slightly higher proportion of direct service staff (85.0% vs. 69.3% for indirect service staff). The following figure shows the proportions of paid direct and indirect service staff by VSO type. There were no significant differences by population density of primary service area.

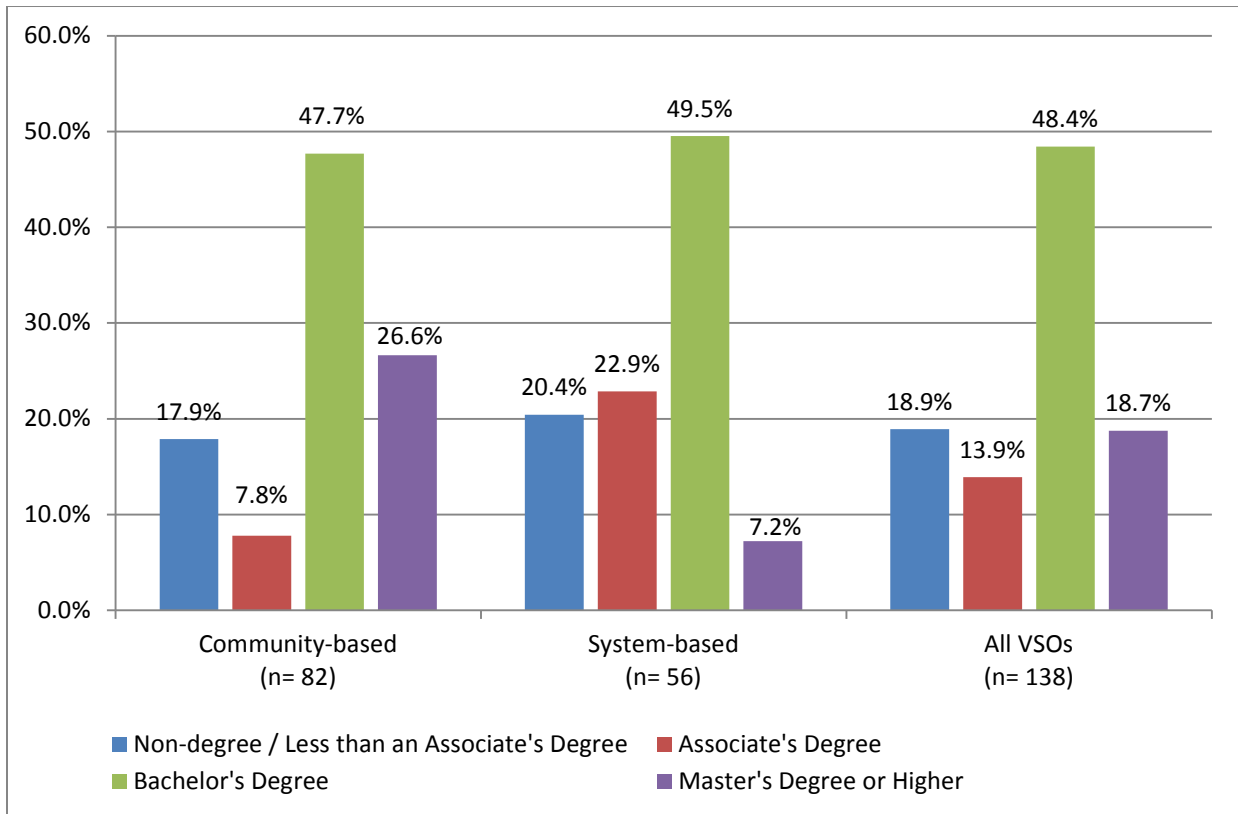
**Figure 6. Paid Direct Versus Indirect Service Staff, by VSO Type**



*Education of Direct Service Staff*

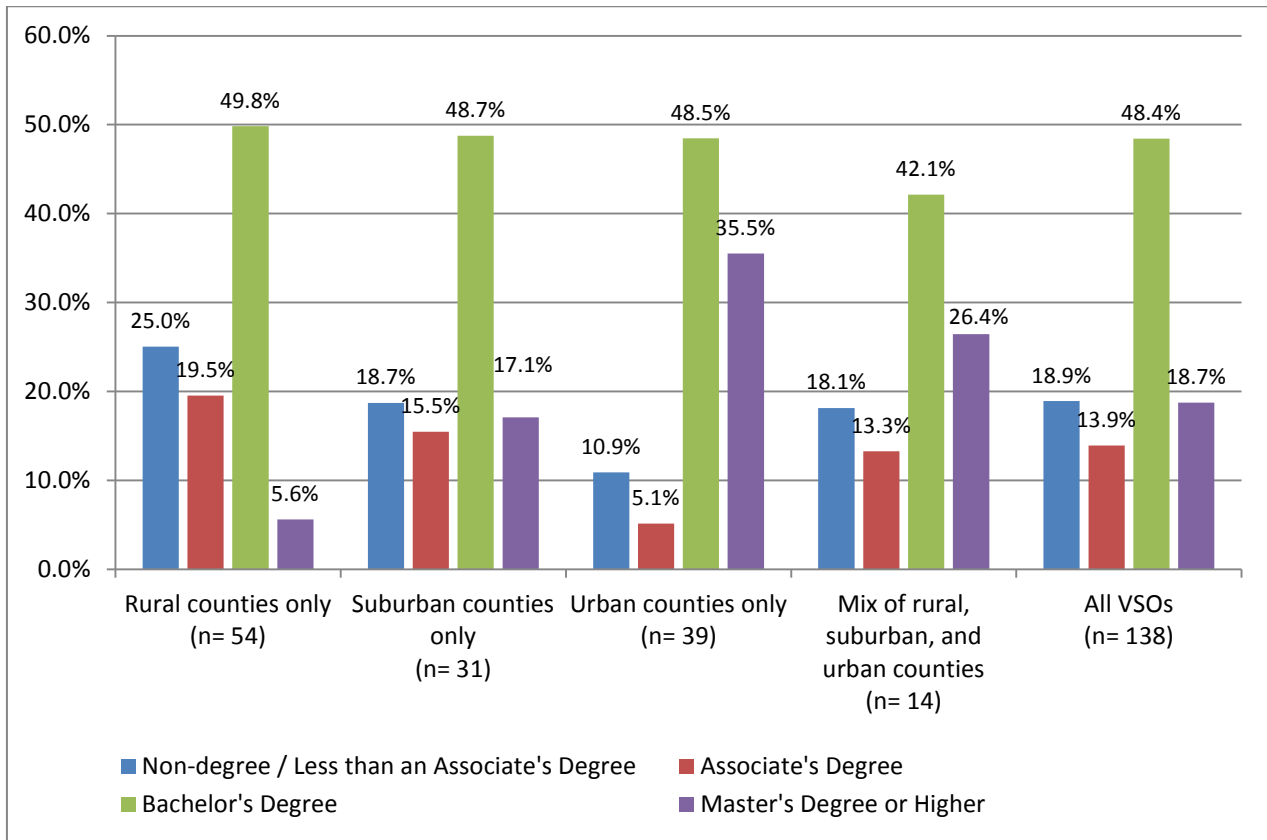
Respondents were asked to approximate the percentages of their direct service staff that had attained various levels of education. On average, VSOs said that about half of their direct service staff (48.4%) had a Bachelor's degree, and that was consistent by VSO type. However, community-based VSOs indicated that more than one-quarter of their direct service staff (26.6%) had a Master's degree or higher, compared to just 7.2% of system-based direct service workers, on average. The following figure shows the mean percentages of direct service workers that attained various levels of education, by VSO type.

**Figure 7. Mean Percent of Direct Service Workers Attaining Levels of Education, by VSO Type**



VSOs that served urban counties only had a higher proportion of direct service workers with Master's degrees (35.5%) than VSOs that served rural counties only (5.6%), as shown in the following figure.

**Figure 8. Mean Percent of Direct Service Workers Attaining Levels of Education, by Population Density of Primary Service Area**



VSOs also reported that only 8.5% of direct service staff have any type of professional license related to victims’ services. Two-thirds (66.0%;  $n = 97$ ) of VSOs had no direct service staff with any type of professional license. Community-based VSOs indicated that 13.7% of their direct service staff have such a license, while system-based staff said that only 0.9% of their direct service staff did.

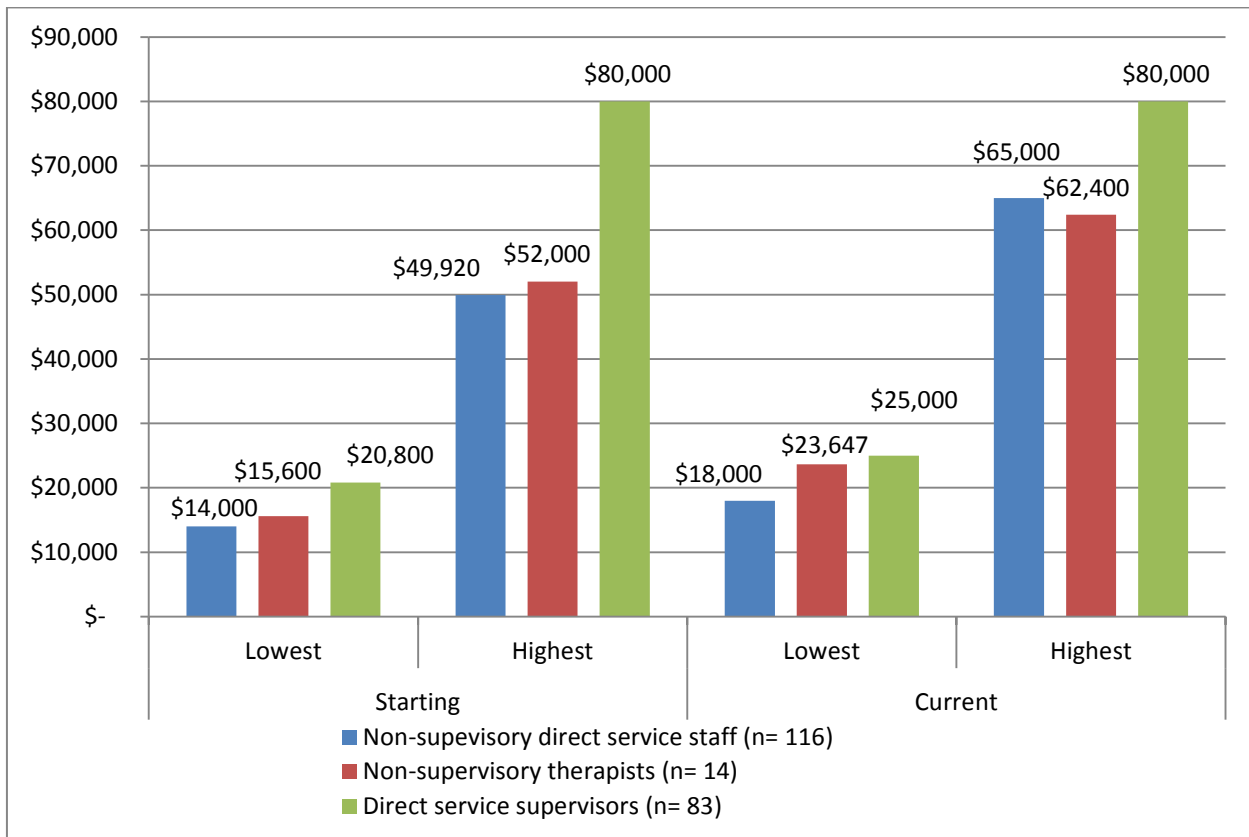
**Staff Salaries**

VSOs provided the average starting and current salaries for their staff, grouped by three categories:

- Non-supervisory, full-time direct service staff (i.e., counselors and advocates), excluding therapists and supervisor staff.
- Non-supervisory, full-time therapists
- Direct service supervisors

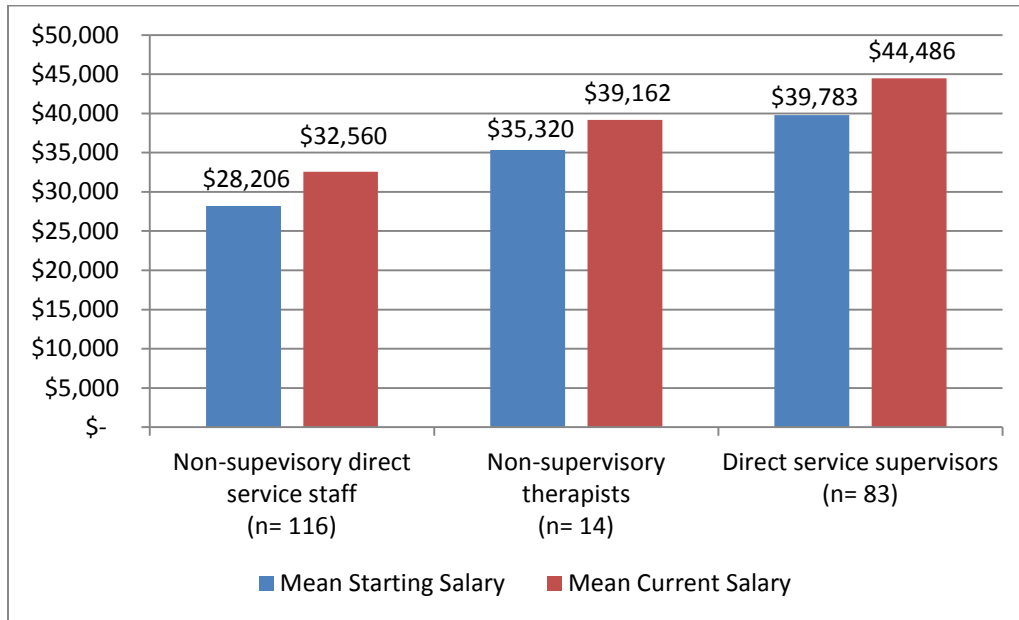
When salaries were provided by VSOs in hourly wage format, they were converted to an estimated annual range by multiplying by 40 hours per week and 52 weeks per year. Ranges for starting and current salaries varied considerably, even for the same position types. The following figure shows the minimum and maximum values provided for starting and current salaries for all position types. Of particular note is that current annual salaries for non-supervisory direct service staff ranged from \$18,000 to \$65,000.

**Figure 9. Lowest and Highest Starting and Current Salaries for VSO Staff**



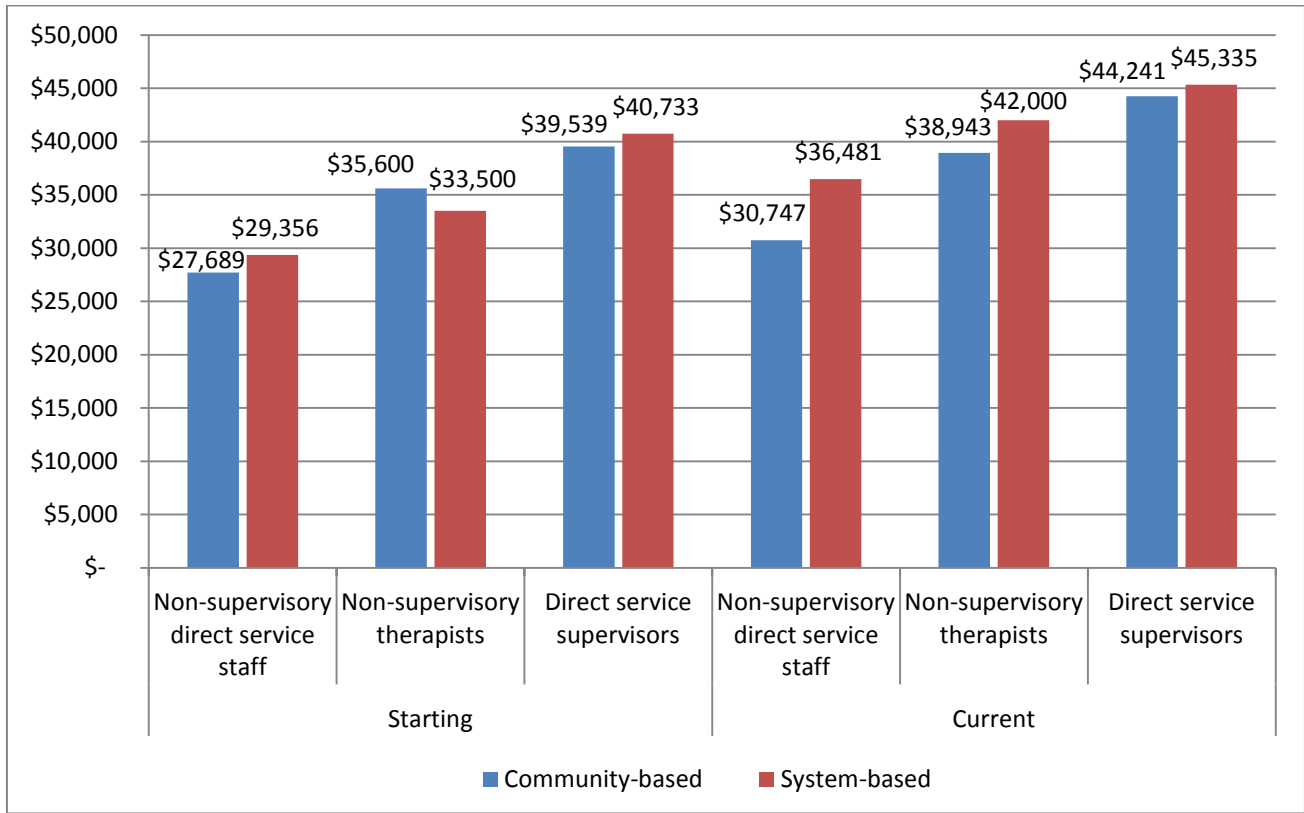
Generally, mean current salaries were about \$4,300 more than the mean starting salaries, ranging from a \$3,842 mean difference between starting and current salaries for non-supervisory, full-time therapists to a difference of \$4,703 for direct service supervisors. Non-supervisory therapists made about \$6,602 more on average than non-supervisory direct service staff, and direct service supervisors made \$5,324 more on average than non-supervisory therapists, as shown in the following figure. It should be noted that only 14 organizations provided salary information for non-supervisory therapist positions.

**Figure 10. Mean Starting and Current Salaries for VSO Staff**



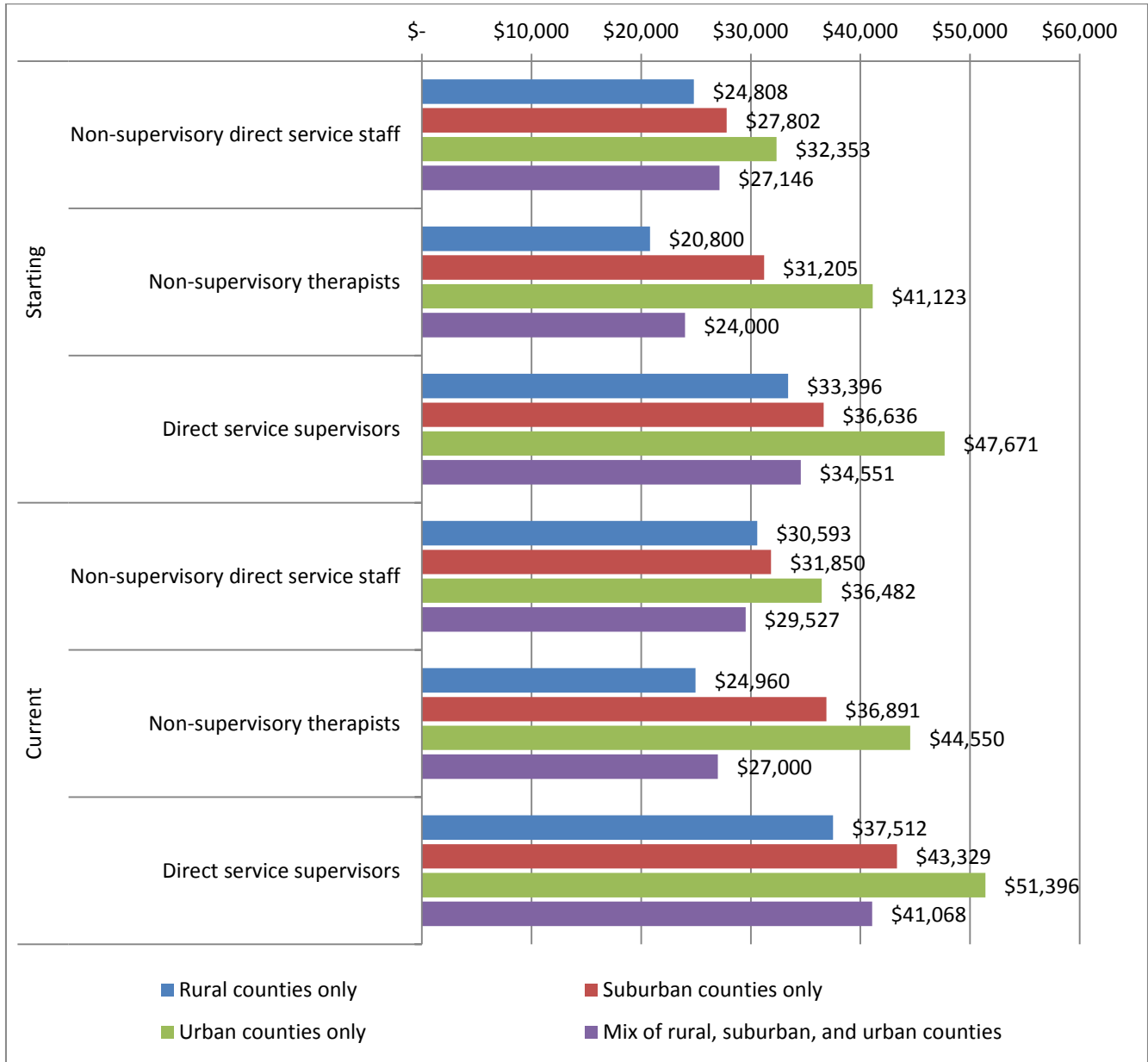
Starting salaries were similar for community-based and system-based VSOs; however, system-based VSOs’ current salaries tended to be higher than community-based VSOs’ salaries. For example, the average starting salaries for non-supervisory direct service staff for system-based VSOs (\$29,356) was \$1,667 greater than the average for community-based VSOs (\$27,689). In comparison, the average current salary for non-supervisory direct service staff was \$5,734 greater for system-based VSOs (\$36,481) than for community-based VSOs (\$30,747). These differences could suggest either that system-based VSOs have more success in increasing salaries or that system-based VSOs have lower turnover. It should be noted that both starting and current direct service supervisory salaries were only about \$1,000 greater for system-based VSOs than for community-based VSOs, as shown in the following figure.

**Figure 11. Mean Starting and Current Salaries for VSO Staff, by VSO Type**



There were significant differences in VSO staff salaries by population density of primary service area. Most notably, starting salaries for direct service supervisors were 42.7% higher on average at VSOs that served only urban counties (\$47,671;  $n = 42$ ) than at VSOs that only served rural counties (\$33,396;  $n = 20$ ). In addition, starting salaries for non-supervisory direct service staff were 30.4% higher on average at VSOs that served only urban counties (\$32,353;  $n = 36$ ) than at VSOs that only served rural counties (\$24,808;  $n = 36$ ). Although the difference for non-supervisory therapists looks to be significant in the following figure, it should be noted that only one VSO that served only rural counties provided salary information for non-supervisory therapists.

**Figure 12. Mean Starting and Current Salaries for VSO Staff, by Population Density of Primary Service Area**

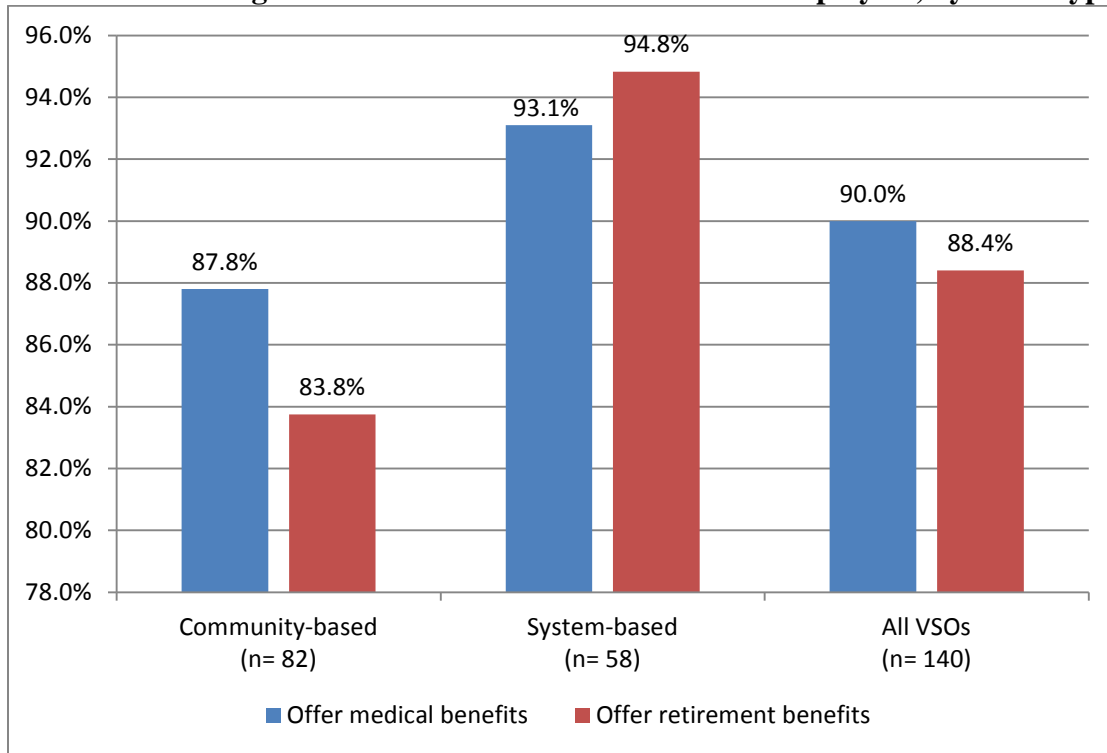


**Employee Benefits**

Most VSOs indicated that they offered medical benefits (90.0%) and retirement benefits (88.4%) to employees. System-based VSOs were slightly more likely to say that they offered retirement benefits than community-based VSOs (94.8% vs. 83.8%). There were no significant differences by population density of primary service area. The following figure shows the proportions of VSOs offering medical and retirement benefits by VSO type.



**Figure 13. VSOs Offering Medical and Retirement Benefits to Employees, by VSO Type**

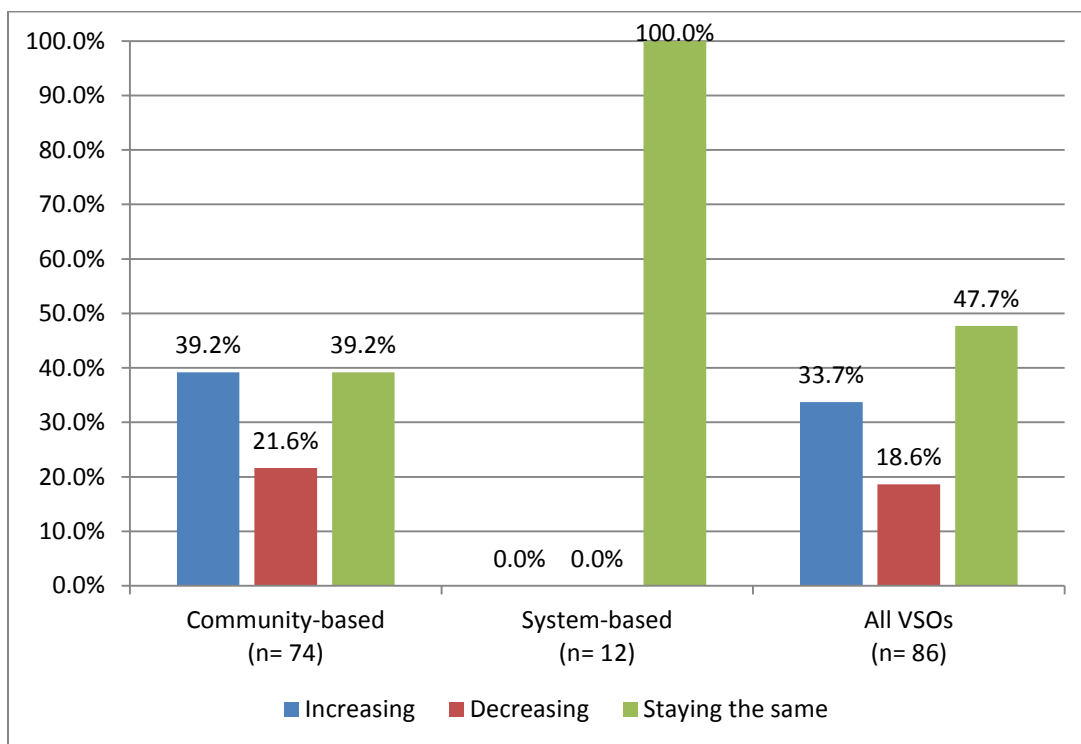


### **Volunteers**

Almost all community-based VSOs (98.7%;  $n = 76$ ) utilized volunteers in some form. In contrast, only 21.4% ( $n = 12$ ) of system-based VSOs utilized volunteers, resulting in a total of 66.2% of all VSOs that utilized volunteers. There were no significant differences by population density of primary service area.

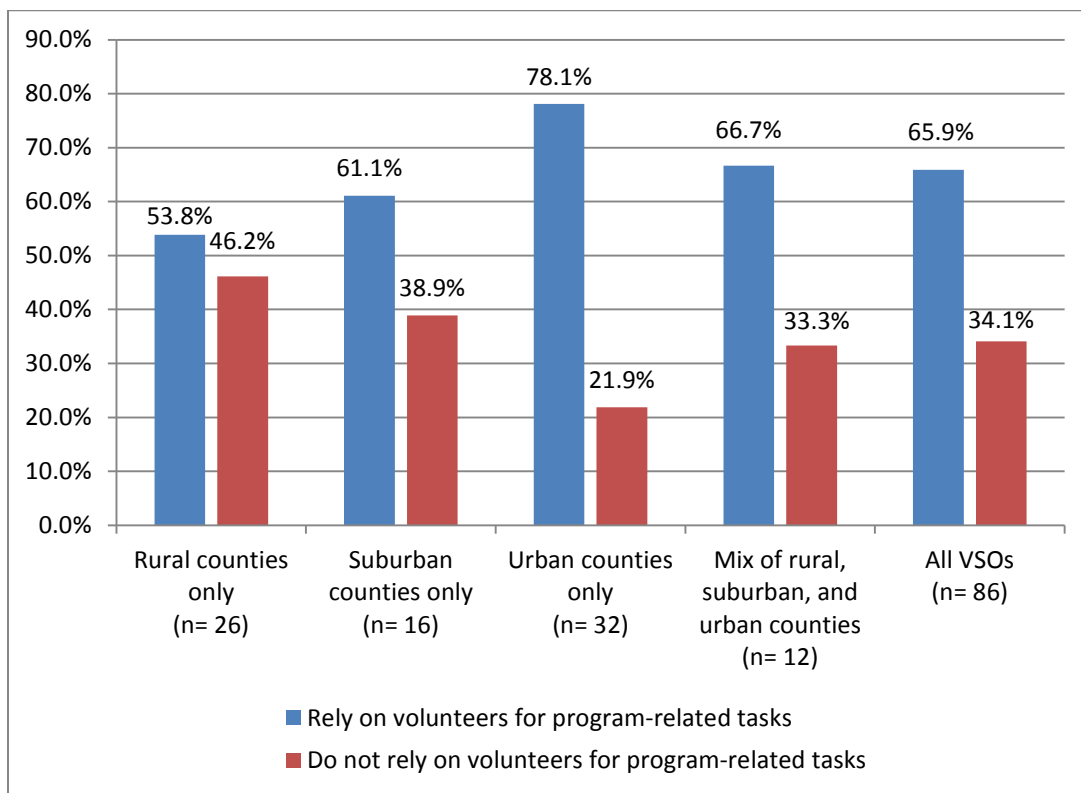
VSOs that utilized volunteers ( $n = 88$ ) were asked a series of follow-up questions about their volunteer utilization. All system-based VSOs (100.0%;  $n = 12$ ) said that they anticipate that the role of volunteers in their organizations will stay the same in the future. As shown in the following figure, community-based VSOs were much more divided, with 39.2% ( $n = 29$ ) reporting that they believe the role of volunteers will increase, 21.6% ( $n = 16$ ) saying that the role of volunteers will decrease, and 39.2% ( $n = 29$ ) saying that they believe the role will stay the same.

**Figure 14. Volunteer Utilization, by VSO Type**



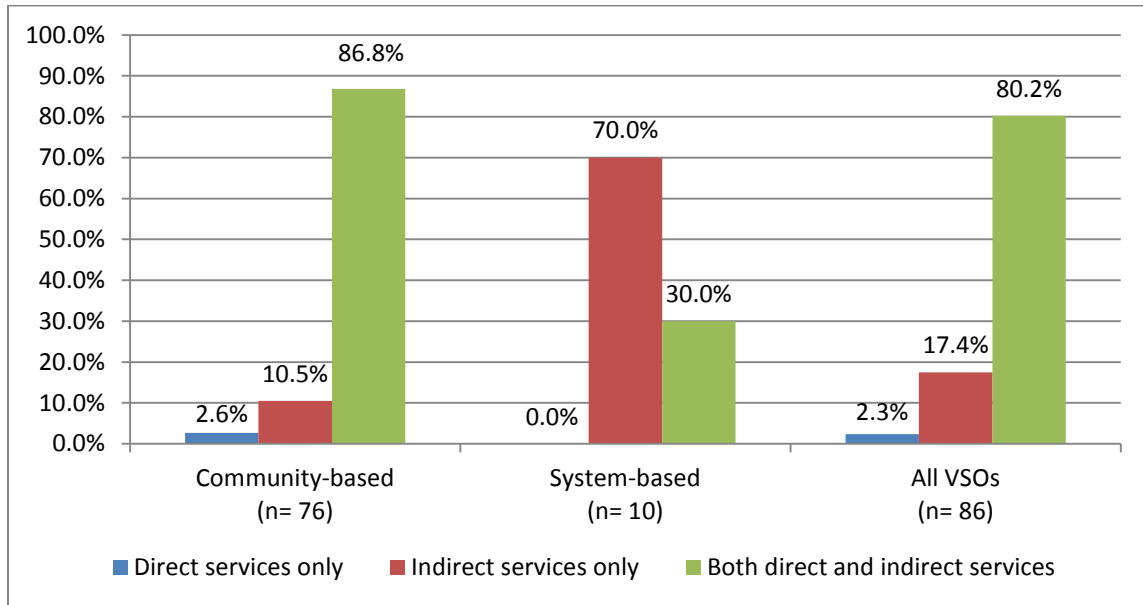
Nearly two-thirds (65.9%;  $n = 58$ ) of VSOs who utilize volunteers rely on volunteers to perform program-related tasks. Community-based VSOs were more likely than system-based VSOs to do so (69.7% vs. 41.7%). VSOs that operated primarily in urban counties only were more likely to rely on volunteers for program related tasks, with 78.1% saying that they did so. The following figure depicts the reliance of VSOs on volunteers to perform program-related tasks by population density of primary service area.

**Figure 15. Reliance on Volunteers to Perform Program-Related Tasks, by Population Density of Primary Service Area**



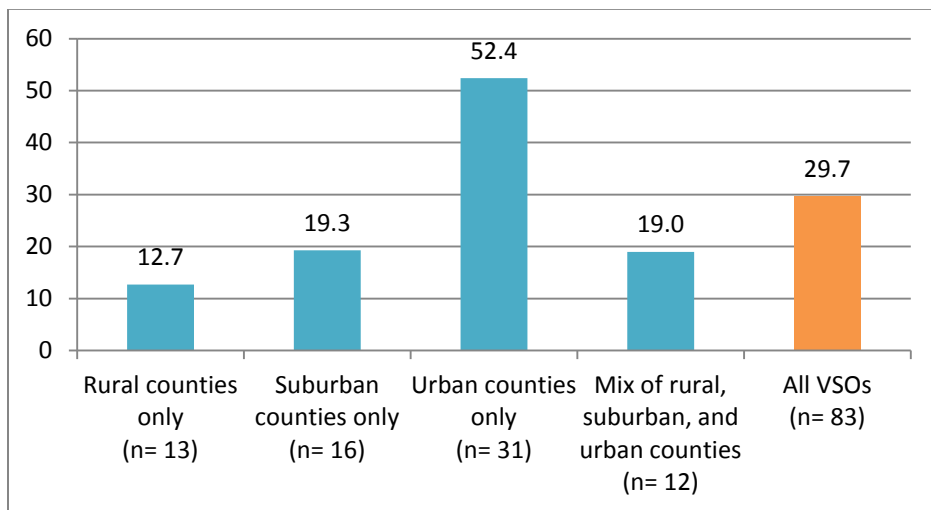
Community-based VSOs differed from system-based VSOs significantly in the types of tasks they assigned to volunteers. Most community-based VSOs (86.8%;  $n = 66$ ) relied on volunteers to provide both direct and indirect services. On the other hand, 70.0% ( $n = 7$ ) of system-based VSOs utilized volunteers for indirect services only. See the following figure for a breakout of tasks assigned to volunteers by VSO type. There were no significant differences by population density of primary service area.

**Figure 16. Utilization of Volunteers to Perform Direct and Indirect Services, by VSO Type**



In general, community-based VSOs relied on many more volunteers than system-based VSOs. Of the 12 system-based VSOs that utilized volunteers, they indicated utilizing a mean of just 1.6 volunteers per organization. In comparison, community-based VSOs reported utilizing an average of 33.6 volunteers per organization. VSOs that operated primarily in urban counties reported utilizing 52.4 volunteers versus just 19.0 volunteers utilized by VSOs that serve a variety of county types. See the following figure for more information.

**Figure 17. Mean Number of Volunteers, by Population Density of Primary Service Area**



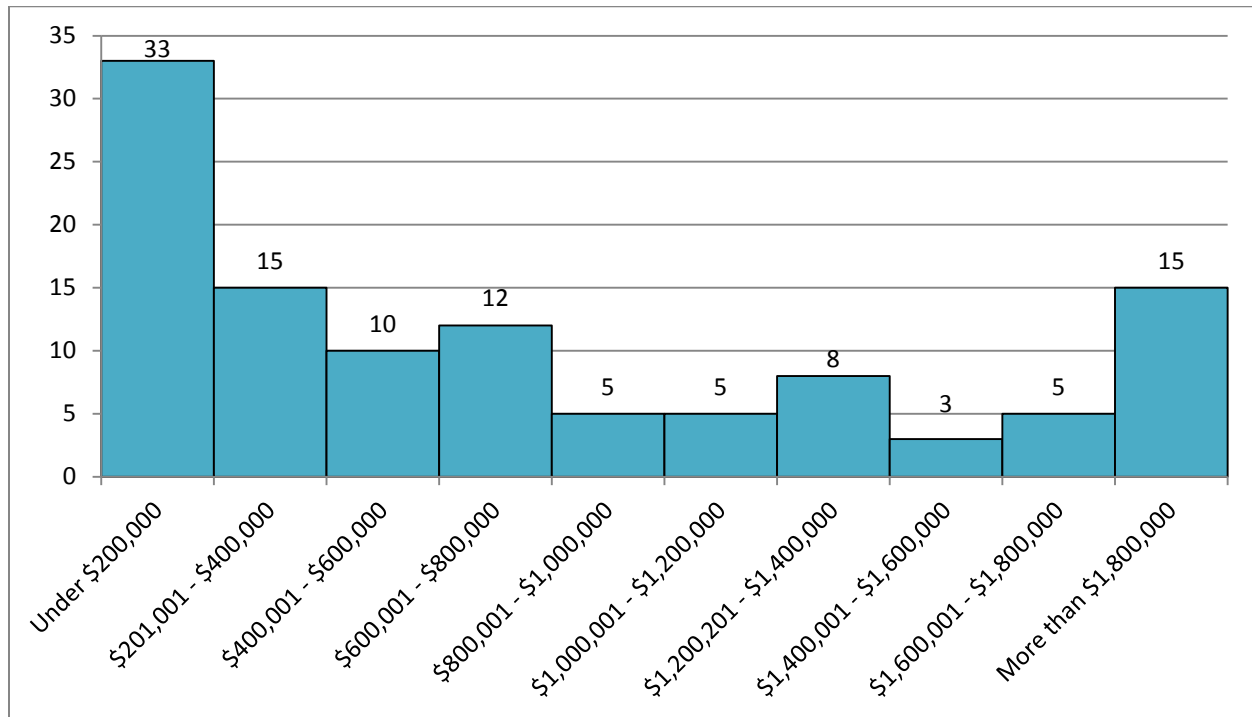
## Financial Information

Respondents were asked questions about their organization's income amounts and sources. VSOs were asked to consider only finances that relate to victims' services if their offices were part of a larger organization that provides services outside of the realm of victims' services.

### Total Income

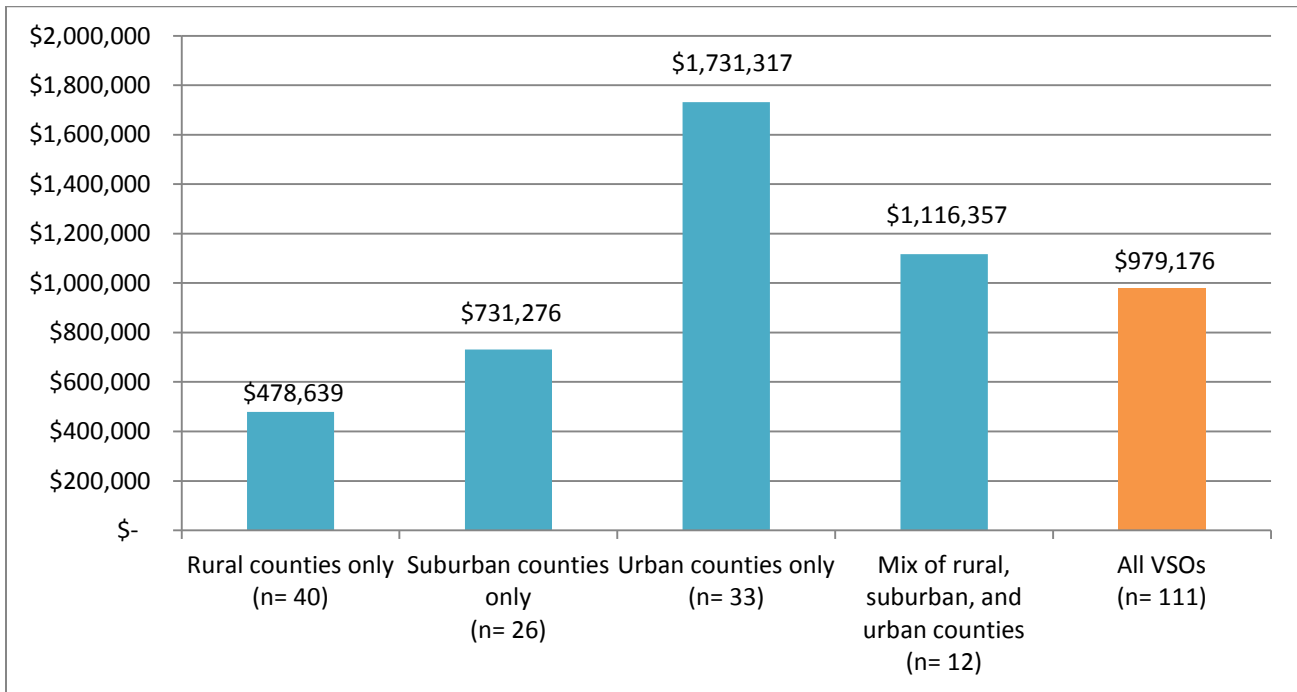
Income for VSOs varied considerably. For the most recently completed fiscal year, VSOs reported a mean annual income of \$979,176 ( $n = 111$ ). This ranged from a low of \$11,463 to a high of \$9,564,000. Responses deviated from the mean significantly, and it should be noted that 36 VSOs did not provide income information. The distribution of incomes reported by all VSOs is depicted in the following figure.

**Figure 18. VSO Income in Most Recently Completed Fiscal Year**



Community-based VSOs reported a mean of income of \$1,337,300, which was about ten times the mean income system-based VSOs reported of \$132,698. Mean incomes also varied significantly by population density of primary service area, as shown in the following figure.

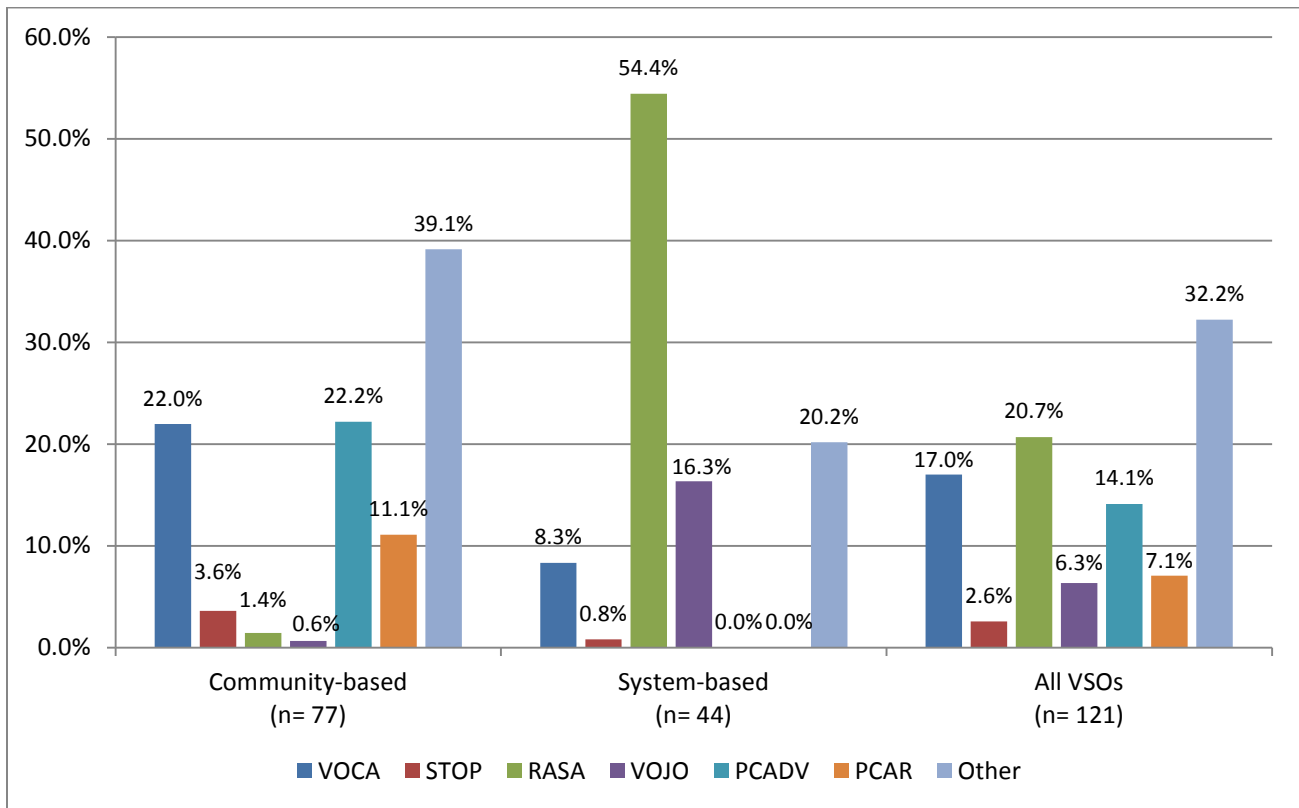
**Figure 19. Mean Income during Most Recently Completed Fiscal Year, by Population Density of Primary Service Area**



### Sources of Income

VSOs differed significantly by VSO type in terms of their sources of income. Of the 121 VSOs providing a response to this question, more than half (54.4%) of system-based VSOs' funding came from RASA, while 39.1% of community-based organizations' funding came from sources other than those listed in the survey, including sources such as foundation grants, donations, and county and federal governments. Only 20.2% of system-based VSOs' funding came from other sources. Community-based VSOs reported relying equally on both VOCA and PCADV funding, with VSOs indicating that they comprised 22.0% and 22.2% of their total funding, respectively. The following figure shows the proportion of funding sources VSOs reported by VSO type. There were no significant differences by population density of primary service area after accounting for VSO type.

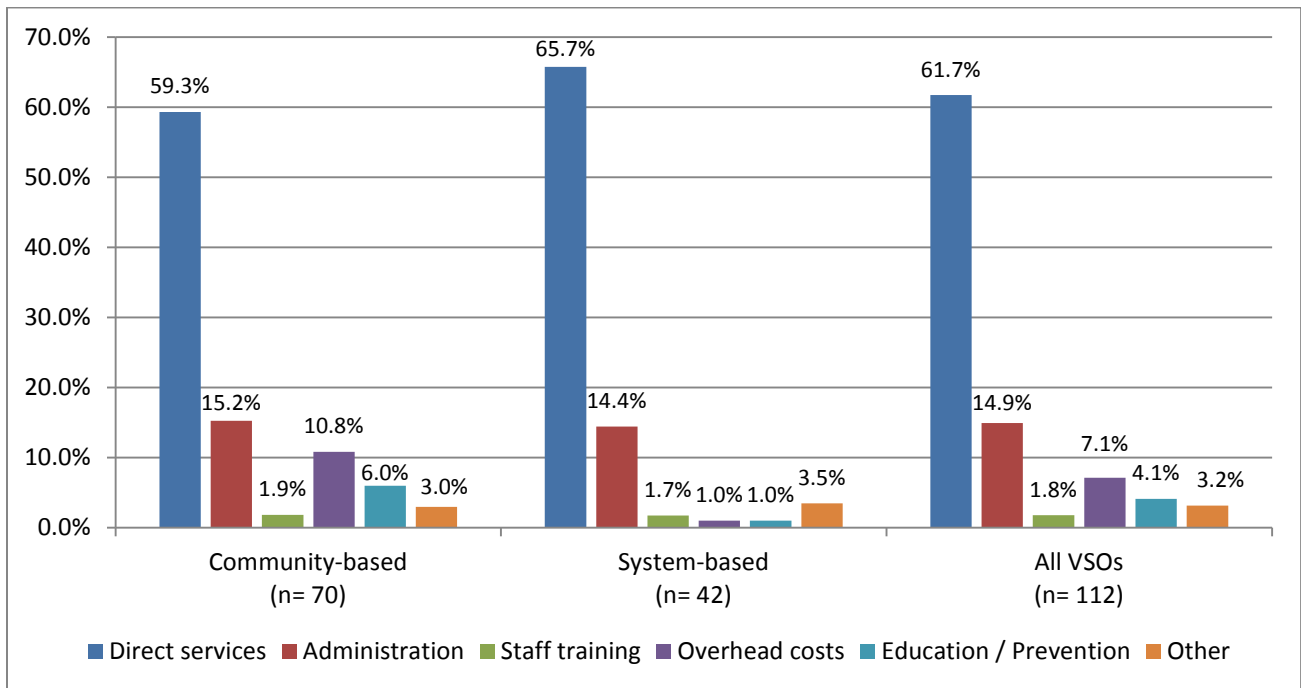
**Figure 20. Sources of VSO Income, by VSO Type**



**Expenditures**

Overall, 112 respondents reported their expenditures from the last fiscal year, and 61.7% of these expenditures went to direct services on average. An additional 14.9% went to administrative use. The only significant difference in expenditures by VSO type was related to overhead costs. Community-based VSOs reported that about 10.8% of their expenditures went toward covering overhead costs, as compared to just 1.0% of the expenditures reported by system-based VSOs. More detail is provided in the following figure. There were no significant differences by population density of primary service area.

**Figure 21. VSO Expenditures, by VSO Type**



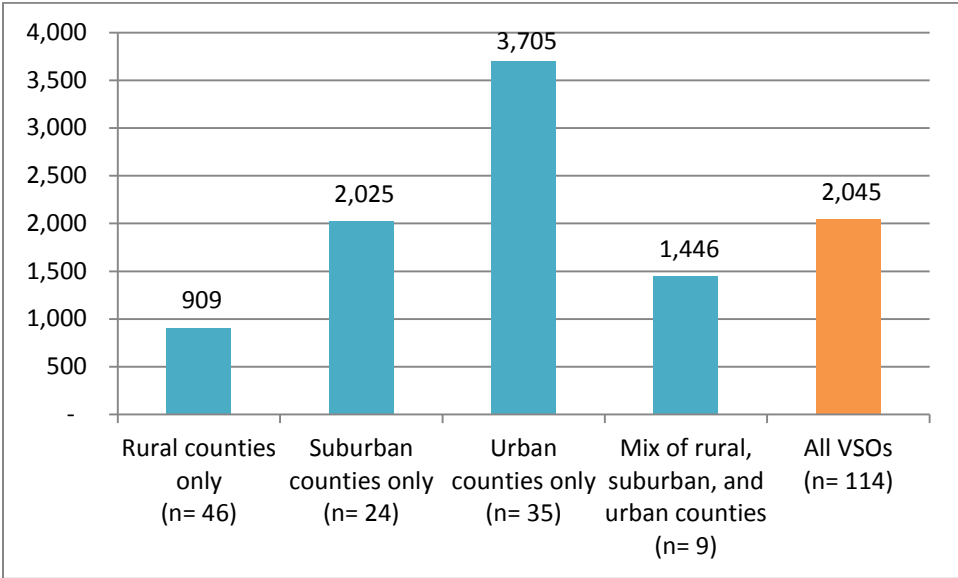
### Clients Served

Victim service organizations reported a total of 233,083 *unduplicated* clients served during the most recently completed fiscal year, including victims, witnesses, and significant others. This represented an average of 2,045 unique clients and a median of 1,221 unique clients served per agency, and a median full-time equivalent (FTE) staff to *unduplicated* client ratio of 187 to 1. The median ratio of full-time staff to unduplicated clients was 195 to 1. Community-based VSOs served 2,312 unique clients on average, compared to 1,690 unique clients served by system-based agencies. This translated to a median FTE staff to unduplicated client ratio of 512 to 1 for system-based organizations (ranging from 37 to 2,367 unduplicated clients served per FTE employee) and 109 to 1 for community-based organizations (ranging from eight to 902). The mean FTE staff to client ratio was 646 to 1 for system-based organizations and 162 to 1 for community-based organizations. Because of some outlying values, the median was a better measure of central tendency. The large difference in ratios between system-based and community-based organizations might be described by differences in the ways in which the two types of organizations count a client service.



Organizations that provided services primarily in urban counties served significantly more unique clients on average (3,705) than those operating in primarily rural counties (909) suburban counties (2,025) and a mix of counties (1,446), as shown in the following figure:

**Figure 22. Average Number of Unique Clients Served, by Population Density of Primary Service Area**



VSOs reported average incomes of \$714 per *unique* client served. Community-based organizations reported significantly more revenue dollars per unique client served (\$991) than system-based organizations (\$134). At least part of this difference can likely be attributed to the difference in services provided and the propensity of community-based VSOs to provide multiple services over longer durations of time. However, it should be noted that 54 VSOs did not provide either annual income, number of unique clients, or both. Actual numbers could vary significantly due to this missing data and the fact that those organizations that did answer one or both of the questions might have significantly different characteristics from those that answered both. The number of dollars per unique client served was calculated using data *only* from those organizations that answered both questions.

## **Types of Clients Served**

### *Internal Tracking*

Of those VSOs that provided information (Age  $n = 117$ ; Sex  $n = 113$ ; Race  $n = 114$ ), 47.0% indicated that they did not know the proportion of victims served by age, 44.2% did not know the proportion of victims served by sex, and 41.2% did not know the proportion of victims served by race. Overall, only 21.8% of VSOs provided a breakout of proportions of clients served by age, 19.7% provided this information sex, and 23.1% provided this information by race. Most system-based VSOs did not know the proportions of the ages (92.8%), sexes (91.5%), or races (84.3%) of clients served. As a result, overall means are weighted more heavily toward the community-based VSO means.

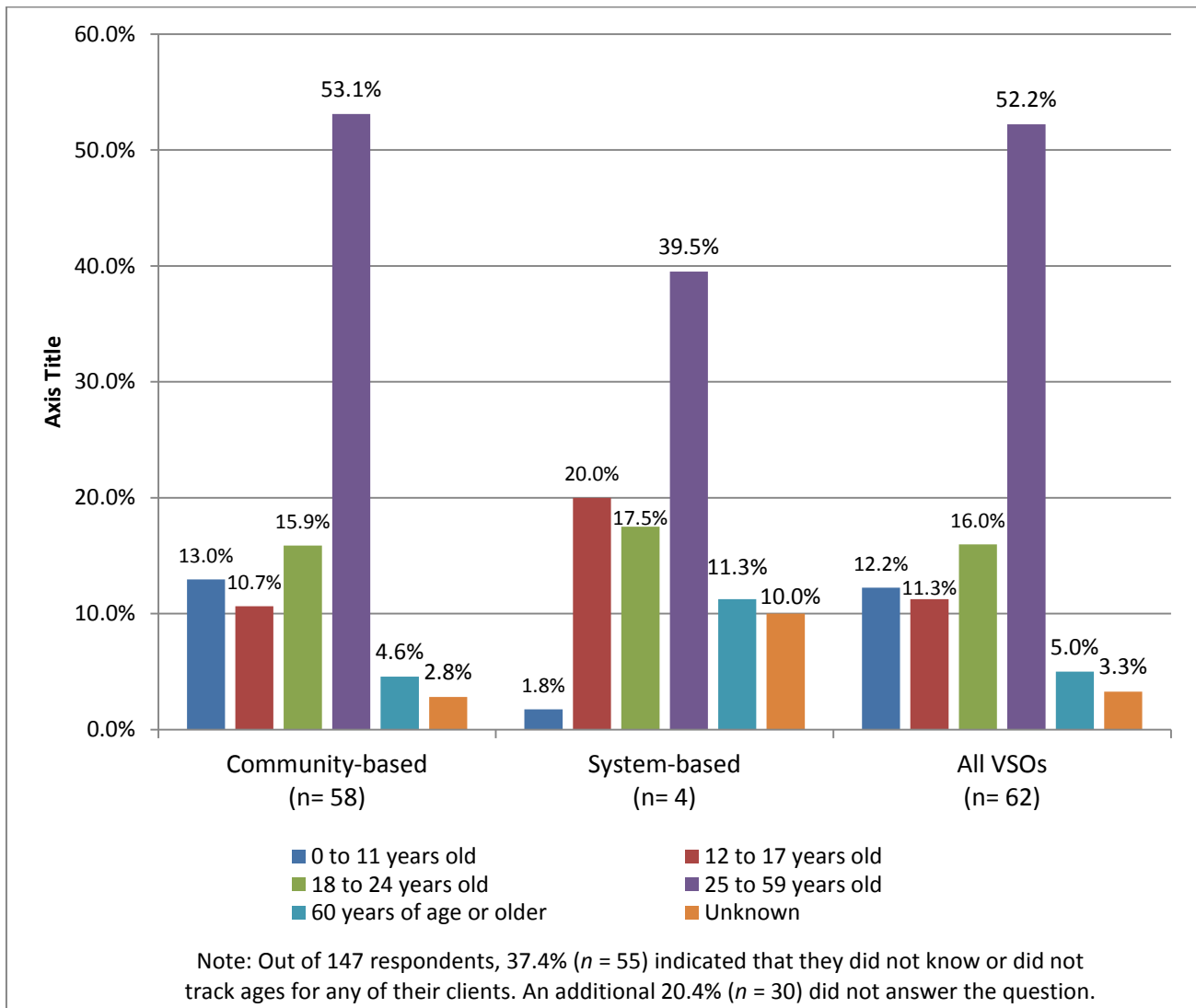
The populations most routinely served by victim service organizations in Pennsylvania tend to be between the ages of 25 and 59 (52.2%), female (77.6%) and white/non-Hispanic (62.7%). The following figures show the proportion of victims served by VSOs by agency type (community-based or system-based). The unknown percentages in the following figures are the unknown percentages for those who were able to answer the question. For example, an organization might have said that it did not know the age of 10% of its clients; that is represented by the Unknown category.

Organizations that did not collect or report data on a particular category are not included in the Unknown categories reported. See Appendix F for a complete table of proportions of clients reported (age, sex, and race) by VSO type and population density of primary service area.

### *Age*

About half of victims served (52.2%) were between the ages of 25 and 59. Community-based VSOs were more likely to serve children between the ages of 0 and 11. Due to small sample sizes, there were no significant differences by primary geography served. System-based VSOs were more likely to have a higher proportion of victims served between the ages of 12 and 17 (20.0%) than community-based VSOs (10.7%), while community-based VSOs were more likely to have a higher proportion of victims served between the ages of 25 and 59 (53.1% vs. 39.5%). Over one-third of VSOs (37.4%;  $n = 55$ ) indicated that they did not know or did not track ages for any of their clients. An additional 20.4% ( $n = 30$ ) did not provide any information.

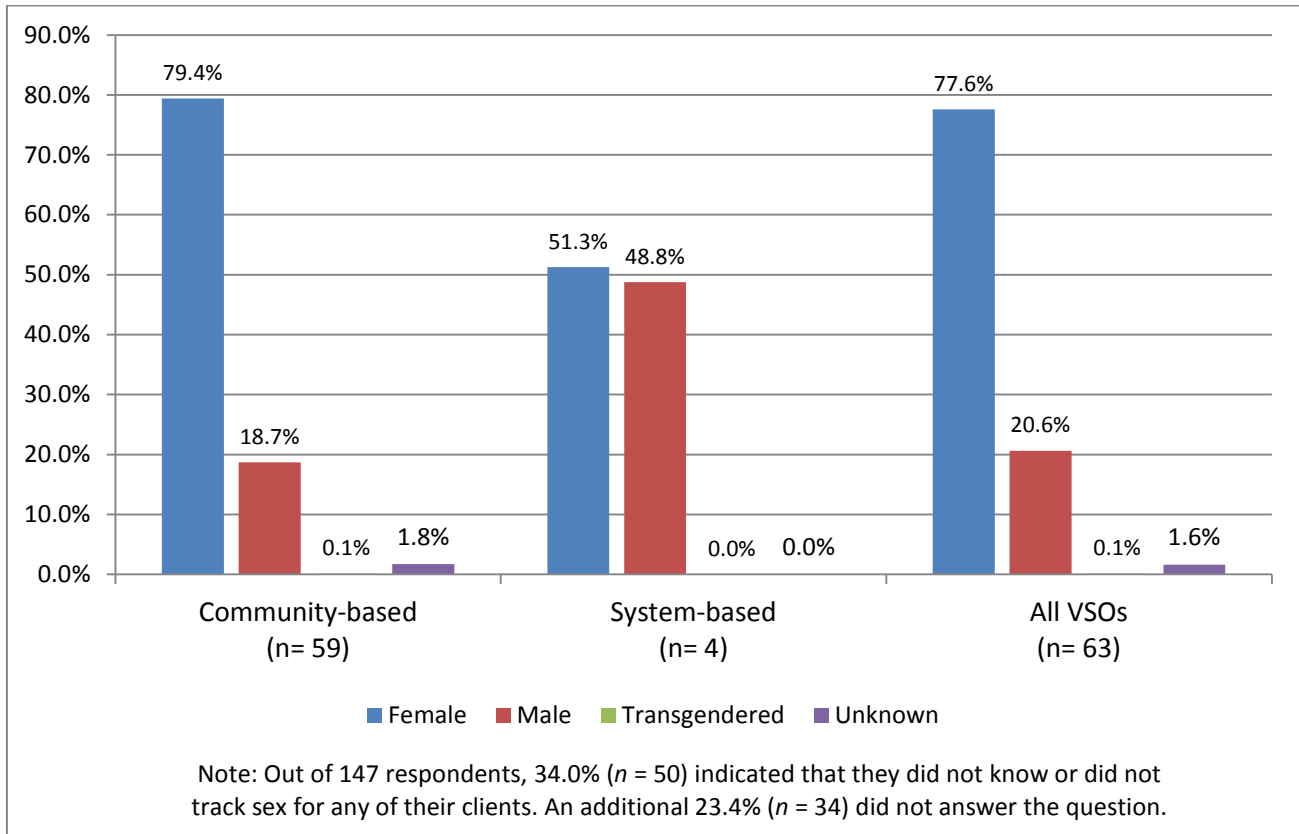
**Figure 23. Age of Victims Routinely Served, by VSO Type**



*Sex*

Over three-quarters of victims served (77.6%) were female. Community-based VSOs were more likely to serve female victims than system-based VSOs (79.4% vs. 51.3% of victims served, respectively). System-based VSOs served female and male victims about equally (51.3% vs. 48.8%). Again, due to small sample sizes, there were no significant differences by primary geography served. Over one-third of VSOs (34.0%; n = 50) indicated that they did not know or did not track the sexes of any of their clients. An additional 23.1% (n = 34) did not provide any information.

**Figure 24. Sex of Victims Routinely Served, by VSO Type**

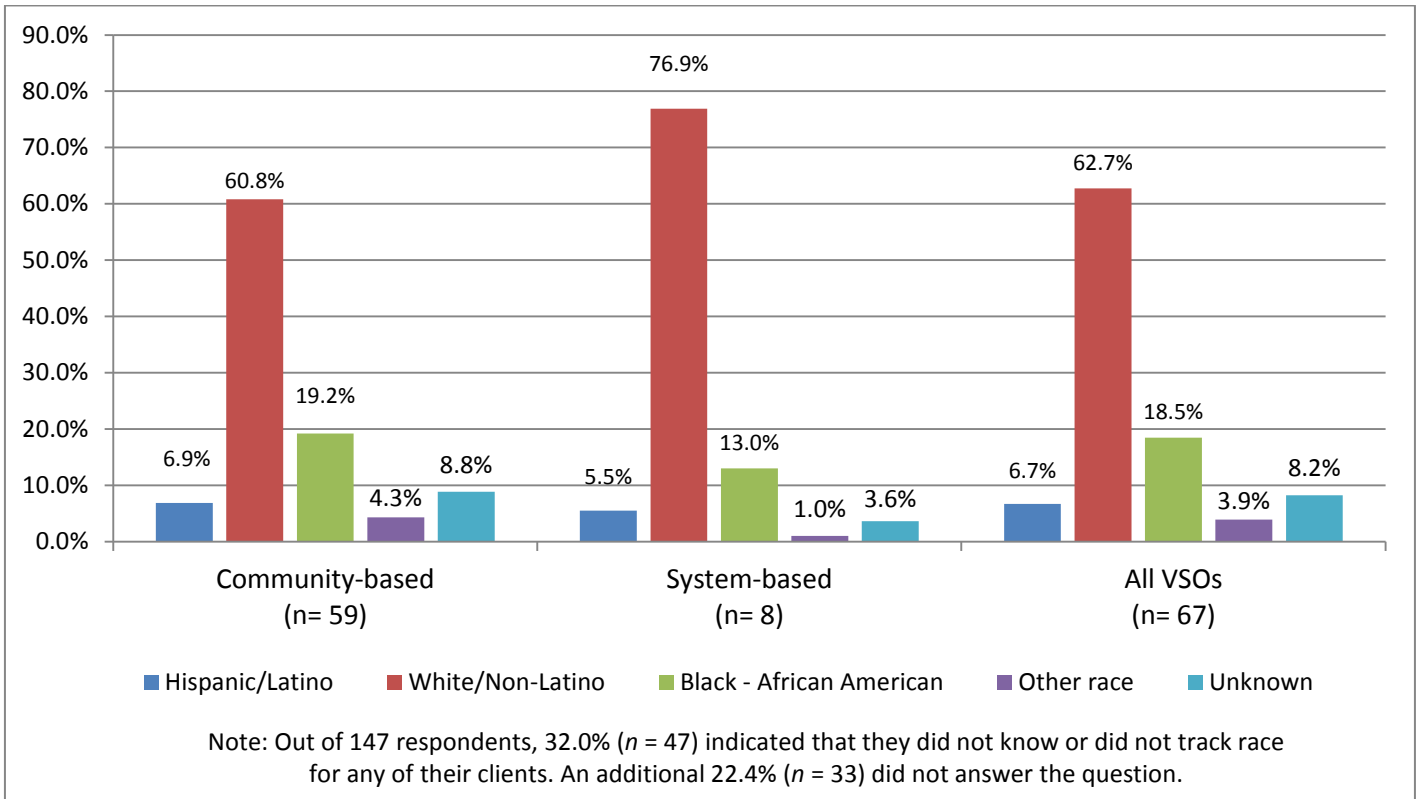


*Race/Ethnicity*

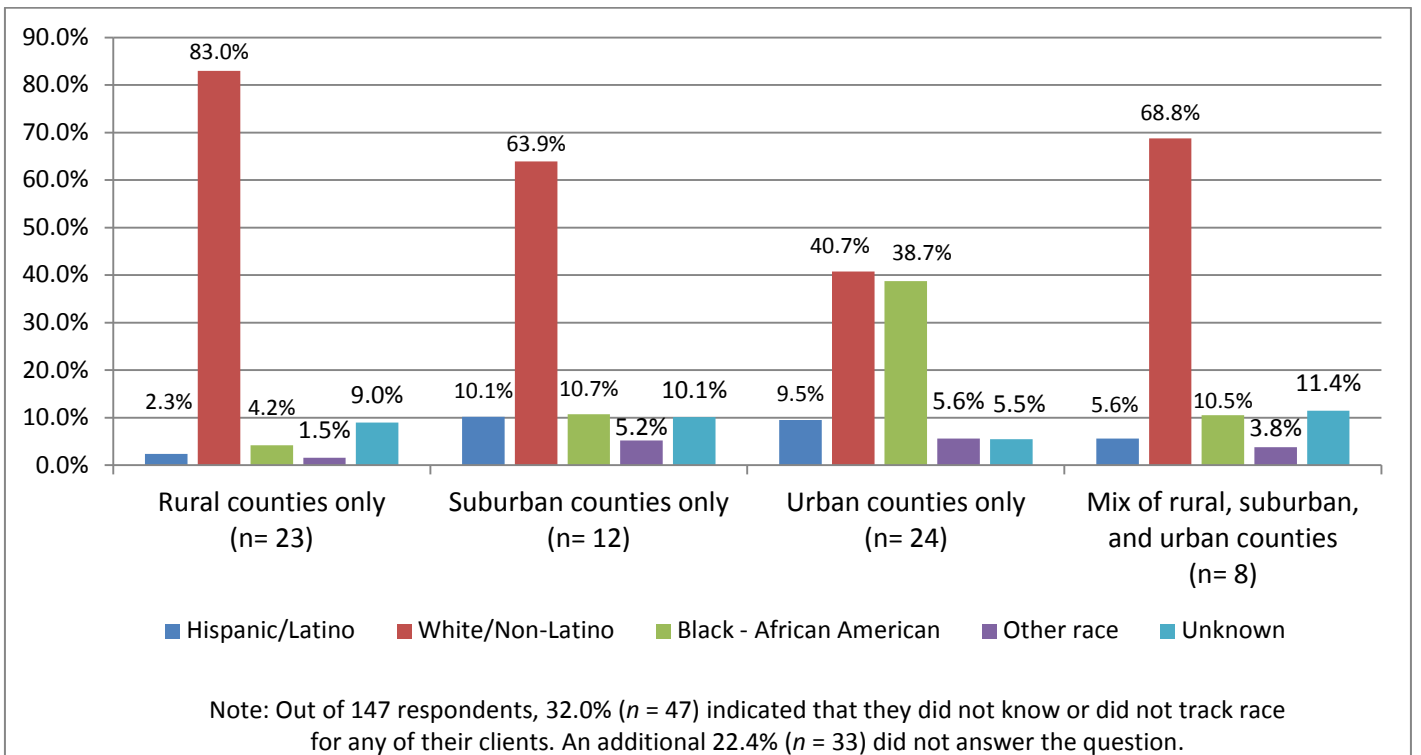
Almost two-thirds of victims served (62.7%) were white and non-Hispanic. System-based VSOs were more likely to provide services to white/non-Latino victims (76.9% of clients served) than community-based VSOs (60.8%). Likewise, victims served by VSOs primarily serving rural counties were much more likely to be white (83.0%) than those served by VSOs that routinely serve other county types. Over one-third (38.7%) of all victims served by VSOs operating primarily in urban counties were black/African American. This rate was more than three times greater than the rate of black/African American victims served in suburban counties (10.7%), a mix of counties (10.5%), and rural counties (4.2%). Slightly less than one-third of VSOs (32.0%; n = 47) indicated that they did not know or did not track the races of any of their clients. An additional 22.4% (n = 33) did not provide any information.

The following figures show the races of victims routinely served by VSOs, by VSO type and population density of primary service area.

**Figure 25. Race of Victims Routinely Served, by VSO Type**



**Figure 26. Race of Victims Routinely Served, by Population Density of Primary Service Area**



## Language Access

About one-third (36.6%;  $n = 48$ ) of victim service organizations employ direct care workers who provide direct services to victims in a language other than English. The overall mean of direct service workers providing services in languages other than English for all VSOs was 0.9, including organizations that had zero workers providing such services. Community-based VSOs had 1.4 non-English speaking direct service workers, compared to just 0.3 such workers on average per system-based VSO.

VSOs providing services only in urban counties had about two times more direct service workers providing direct services to victims in languages other than English on average than VSOs providing services in suburban counties or a mix of counties. The following table depicts the mean number of non-English speaking direct care workers per VSO by VSO type and population density of primary service area.

**Table 8. Mean Number of Non-English-Speaking Direct Care Workers**

	Mean
<b>All Victim Service Organizations (<math>n = 131</math>)</b>	<b>0.9</b>
<b>VSO Type</b>	
Community-Based VSOs ( $n = 76$ )	1.4
System-Based VSOs ( $n = 55$ )	0.3
<b>Population Density of Primary Service Area</b>	
Rural counties only ( $n = 52$ )	0.2
Suburban counties only ( $n = 27$ )	0.9
Urban counties only ( $n = 40$ )	1.9
Mix of county types ( $n = 12$ )	1.0

Nearly all VSOs who had direct care workers providing direct care services in languages other than English provided services in Spanish (95.8%). There were few differences among those operating only in suburban counties (100.0%;  $n = 10$ ), a mix of counties (100.0%;  $n = 6$ ), only in urban counties (96.3%;  $n = 26$ ), and rural counties (80.0%;  $n = 4$ ) in terms of having direct service workers that speak Spanish, of those who provide non-English direct services. In addition, 18.5% of VSOs that provide direct services in languages other than English and operate primarily in urban counties

provide services in Chinese. The following table shows the proportions of VSOs offering direct services in specific languages by county density of primary service area for those VSOs that indicated that they provide any direct services in languages other than English. It should be noted that it would appear that a large number of direct services were offered in Russian in VSOs serving rural counties; however, only five such VSOs offer direct services in languages other than English. The 20.0% statistic for Russian language offered by rural-serving VSOs represents only one VSO.

**Table 9. Languages offered by VSOs Offering Direct Services in Languages Other than English, by Population Density of Primary Service Area**

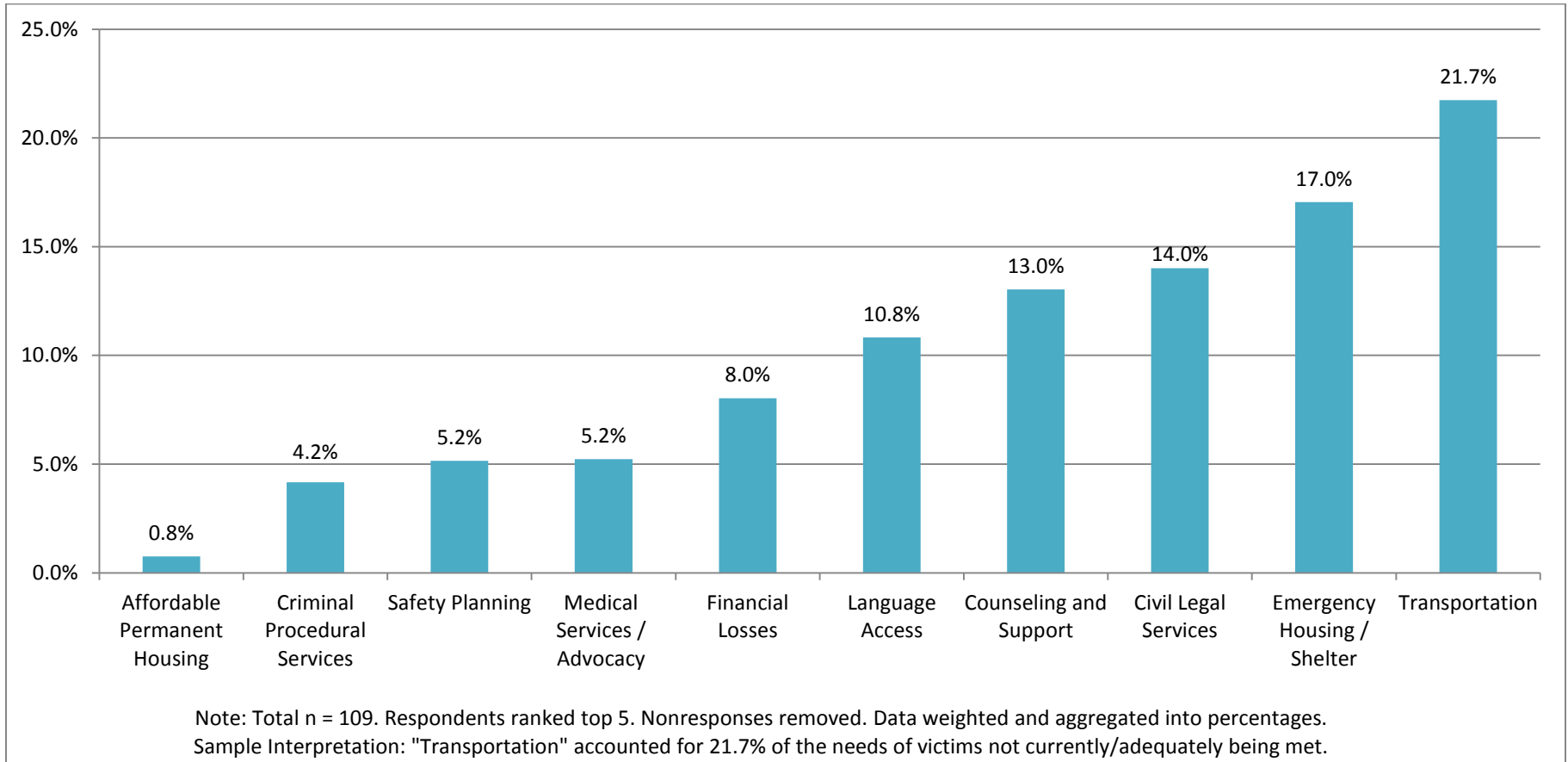
	Rural counties only (n= 5)	Suburban counties only (n= 10)	Urban counties only (n= 27)	Mix of rural, suburban, and urban counties (n= 6)	All VSOs (n= 48)
<b>Spanish</b>	80.0%	100.0%	96.3%	100.0%	95.8%
<b>Chinese</b>	0.0%	0.0%	18.5%	0.0%	10.4%
<b>Vietnamese</b>	0.0%	0.0%	3.7%	0.0%	2.1%
<b>Russian</b>	20.0%	0.0%	0.0%	0.0%	2.1%
<b>Korean</b>	0.0%	0.0%	3.7%	0.0%	2.1%
<b>Italian</b>	0.0%	0.0%	3.7%	0.0%	2.1%
<b>German</b>	0.0%	0.0%	0.0%	0.0%	0.0%

Other languages in which direct services are provided by VSOs included French ( $n = 4$ ), Romanian ( $n = 2$ ), American Sign Language ( $n = 1$ ), Arabic ( $n = 1$ ), and Teochew ( $n = 1$ ).

### Barriers and Underserved Groups

Victim service organizations were asked to indicate the top five needs of crime victims in their communities that are currently not being adequately met. The 387 responses given by 109 respondents were weighted based on the rankings provided; weighted responses were then aggregated into percentages. Over one-fifth (21.7%) of unmet need related to transportation. The other needs most-mentioned by VSOs were emergency housing and shelter (17.0% of all need), civil legal services (14.0%), counseling and support (13.0%), and language access (10.8%). The following figure depicts the weighted proportions of need indicated by VSOs.

**Figure 27. Needs of Crime Victims in VSOs' Communities Not Currently or Adequately Met**





The following table displays the top needs mentioned by VSOs grouped by population density of primary service area. There were no significant differences between community-based and system-based VSOs in terms of the needs mentioned.

**Table 10. Barriers in VSOs' Communities for Crime Victims Seeking Services, by Population Density of Primary Service Area**

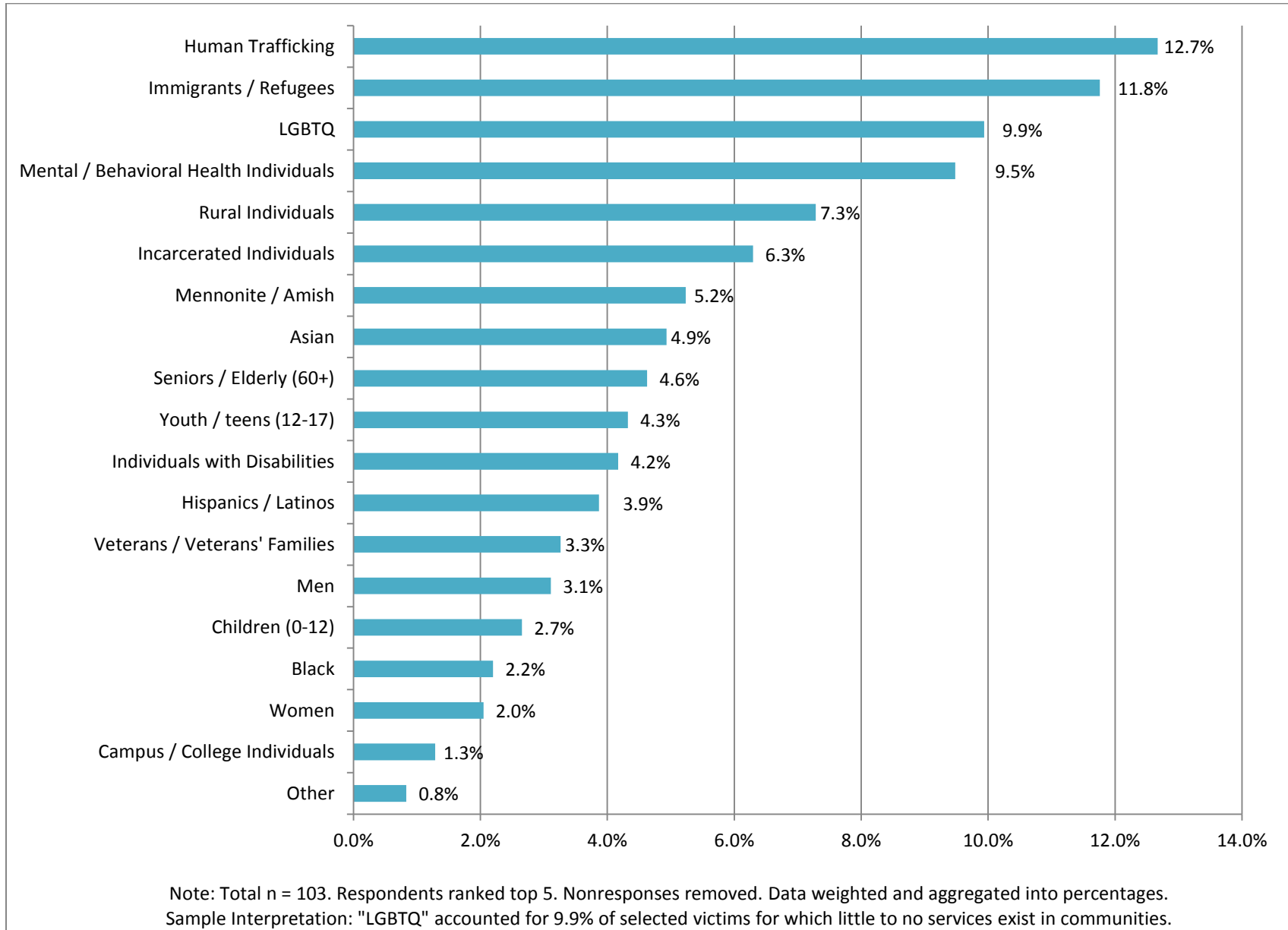
	Rural counties only (n = 42)	Suburban counties only (n = 21)	Urban counties only (n = 35)	Mix of rural, suburban, and urban counties (n = 11)
<b>Transportation</b>	27.7%	19.4%	14.3%	30.0%
<b>Emergency Housing / Shelter</b>	11.2%	16.7%	25.8%	9.2%
<b>Civil Legal Services</b>	17.6%	11.6%	12.0%	12.3%
<b>Counseling and Support</b>	11.2%	18.2%	12.0%	13.1%
<b>Language Access</b>	7.0%	10.5%	13.4%	16.9%
<b>Financial Losses</b>	9.5%	5.4%	8.9%	4.6%
<b>Medical Services / Advocacy</b>	7.2%	7.8%	1.6%	5.4%

Respondents were also asked to rank the top five crime victim groups in their communities for which there are limited or no services available. The 410 responses given by 103 respondents were weighted based on the rankings provided; weighted responses were then aggregated into percentages. The most-mentioned victim groups (by weighting) for which there are limited or no resources available were: victims of human trafficking (12.7% of all weighted responses); immigrants and refugees (11.8%); lesbian, gay, bisexual, transgender, and queer individuals (LGBTQ, 9.9%); and individuals with mental or behavioral health issues (9.5%). Other responses provided included:

- Children and young adults aging out of the CYF system (n = 1), and
- Shut-ins who are cut off from all communication due to illiteracy (n = 1).

One respondent selected “Other” but did not specify a response. The following figure shows all weighted victim groups mentioned across the five answers given by all respondents.

**Figure 28. Crime Victims in VSOs' Communities for which There Are Limited or No Resources Available**



There were no significant differences in ranking of crime victim groups most in need between community-based and system-based VSOs. The only significant difference found by population density of primary service area was that VSOs providing services to urban counties were less likely to indicate that individuals in rural areas in their community were underserved than those serving other types of counties, which is an expected result. The following table shows the top weighted responses given for specific crime victim groups in VSOs' communities for which there are limited or no services available by population density of primary service area.

**Table 11. Crime Victims in VSOs' Communities for which There Are Limited or No Services Available, by Population Density of Primary Service Area**

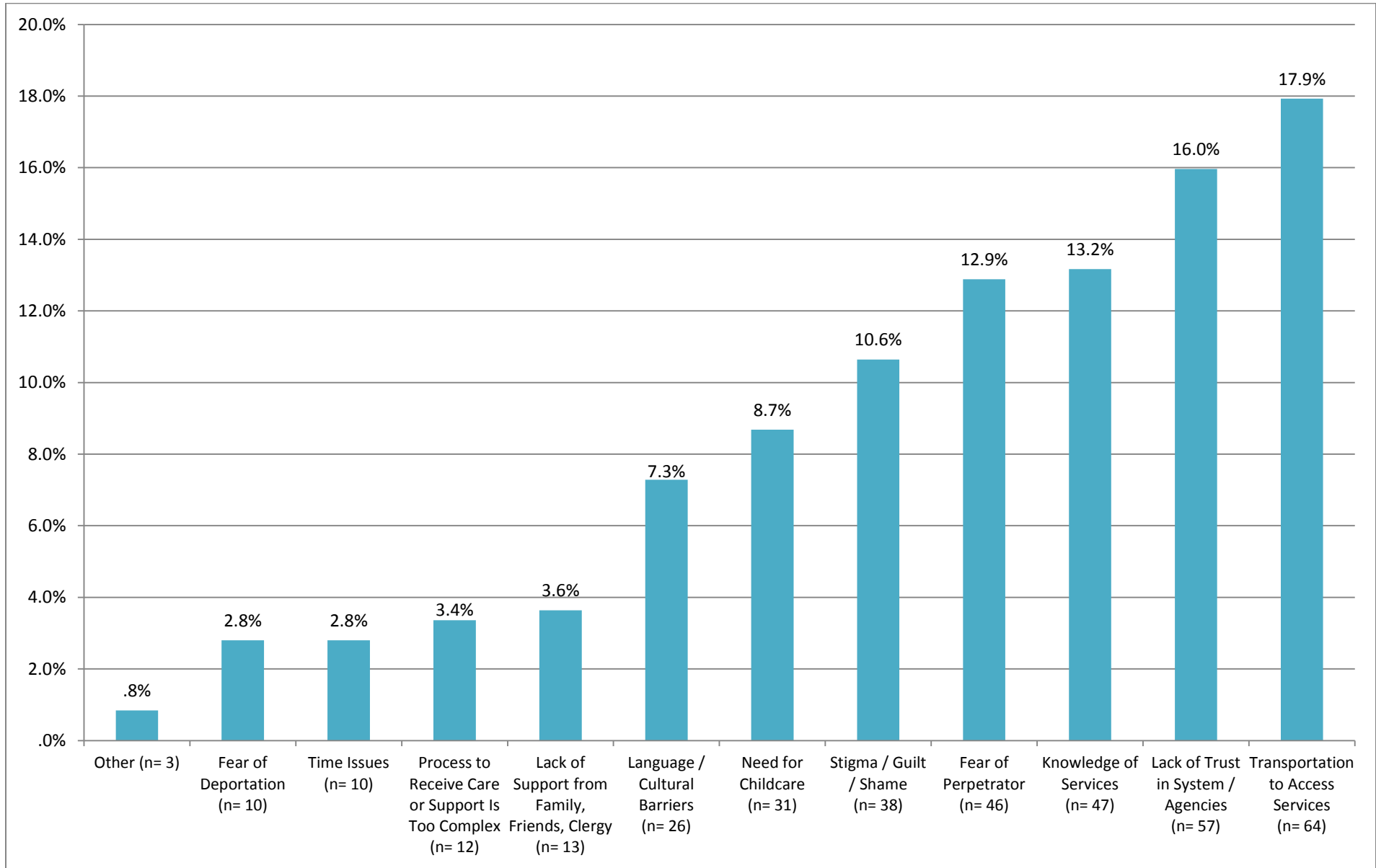
	Rural counties only ( <i>n</i> = 40)	Suburban counties only ( <i>n</i> = 21)	Urban counties only ( <i>n</i> = 32)	Mix of rural, suburban, and urban counties ( <i>n</i> = 10)
<b>Human Trafficking</b>	14.3%	9.7%	13.6%	9.7%
<b>Immigrants / Refugees</b>	11.7%	6.3%	14.1%	15.7%
<b>LGBTQ</b>	9.5%	8.9%	11.0%	10.4%
<b>Mental / Behavioral Health Individuals</b>	8.5%	11.2%	8.6%	12.7%
<b>Individuals in Rural Areas</b>	10.3%	5.2%	2.2%	16.4%
<b>Incarcerated Individuals</b>	6.0%	10.8%	4.5%	3.7%
<b>Mennonite / Amish</b>	6.8%	7.8%	3.3%	0.0%

Finally, respondents were asked to select the top three barriers in their communities for crime victims in seeking services to address their victimization. The most-mentioned barriers by all VSOs were:

1. Transportation to access services (17.9%; *n* = 64);
2. Lack of trust in system or agencies (16.0%; *n* = 57);
3. Knowledge of services (13.2%; *n* = 47);
4. Fear of perpetrator (12.9%; *n* = 46); and
5. Stigma, shame, or guilt (10.6%; *n* = 38).

The other response mentioned was “Lack of financial resources” (*n* = 3). The following figure shows all of the proportions of barriers mentioned across the three answers given for all respondents.

**Figure 29. Barriers in VSOs' Communities for Crime Victims Seeking Services**



There were no significant differences by population density of primary service area. The following table shows the top five responses given for the barriers in VSOs' communities for crime victims in seeking services to address their victimization, by population density of primary service area.

**Table 12. Barriers in VSOs' Communities for Crime Victims Seeking Services, by Population Density of Primary Service Area**

	Rural counties only (n = 53)	Suburban counties only (n = 27)	Urban counties only (n = 36)	Mix of rural, suburban, and urban counties (n = 12)
<b>Total Number of Responses Provided<sup>4</sup></b>	146	78	100	33
<i>Proportion of Responses Provided</i>				
<b>Transportation to Access Services</b>	21.9%	14.1%	14.0%	21.2%
<b>Lack of Trust in System / Agencies</b>	13.0%	15.4%	21.0%	15.2%
<b>Knowledge of Services</b>	13.7%	15.4%	10.0%	15.2%
<b>Fear of Perpetrator</b>	15.8%	12.8%	12.0%	3.0%
<b>Stigma / Guilt / Shame</b>	12.3%	12.8%	7.0%	9.1%

### Technology Use and Needs

VSOs were asked a variety of questions about their use of technology to provide and track victims' services, as well as questions about their specific technical needs. VSOs reported a variety of technological needs and experiences, discussed in the following sections.

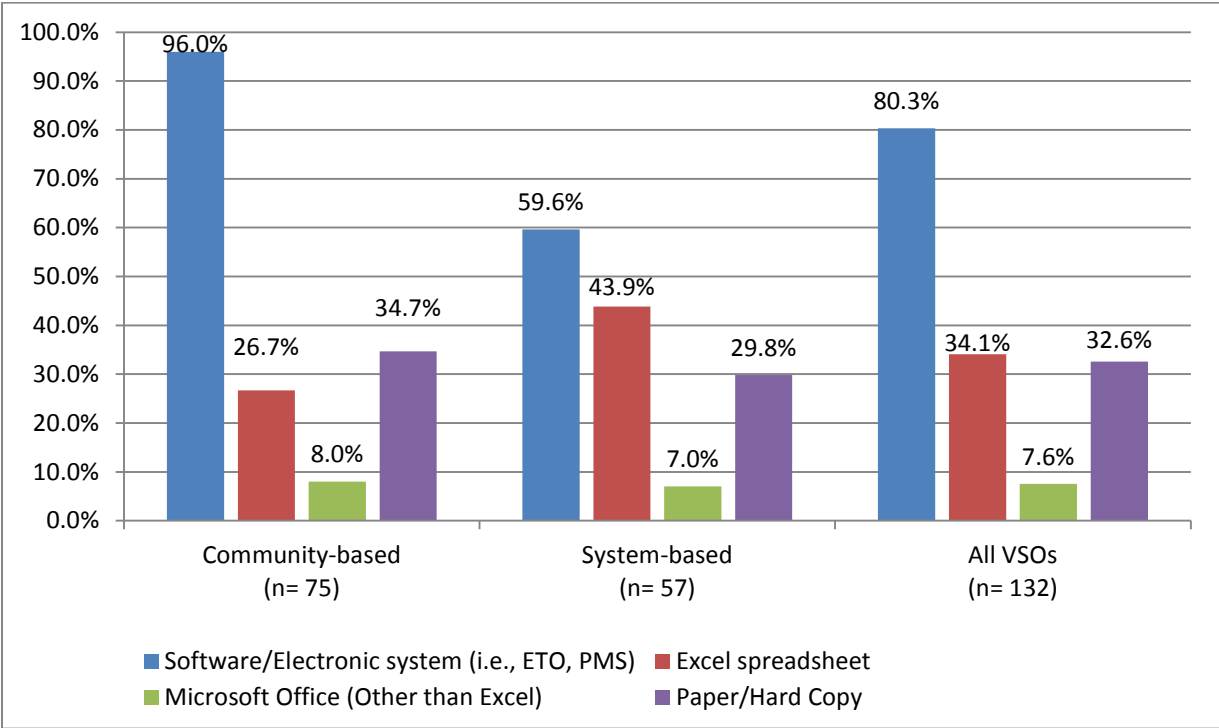
#### Client Management and Tracking

VSOs were asked to select all of the means by which they collect or track client data and outcomes. About four-fifths of respondents (80.3%; n = 106) indicated that they use some sort of software or electronic system, such as ETO or PMS, to track client data or outcomes. One-third also used spreadsheets (34.1%; n = 45) or paper/hard copies of documents (32.6%; n = 43) to track such data. Results were not significant by population density of primary service area.

<sup>4</sup> Respondents could select all that applied. A total of 128 VSOs responded to the question.

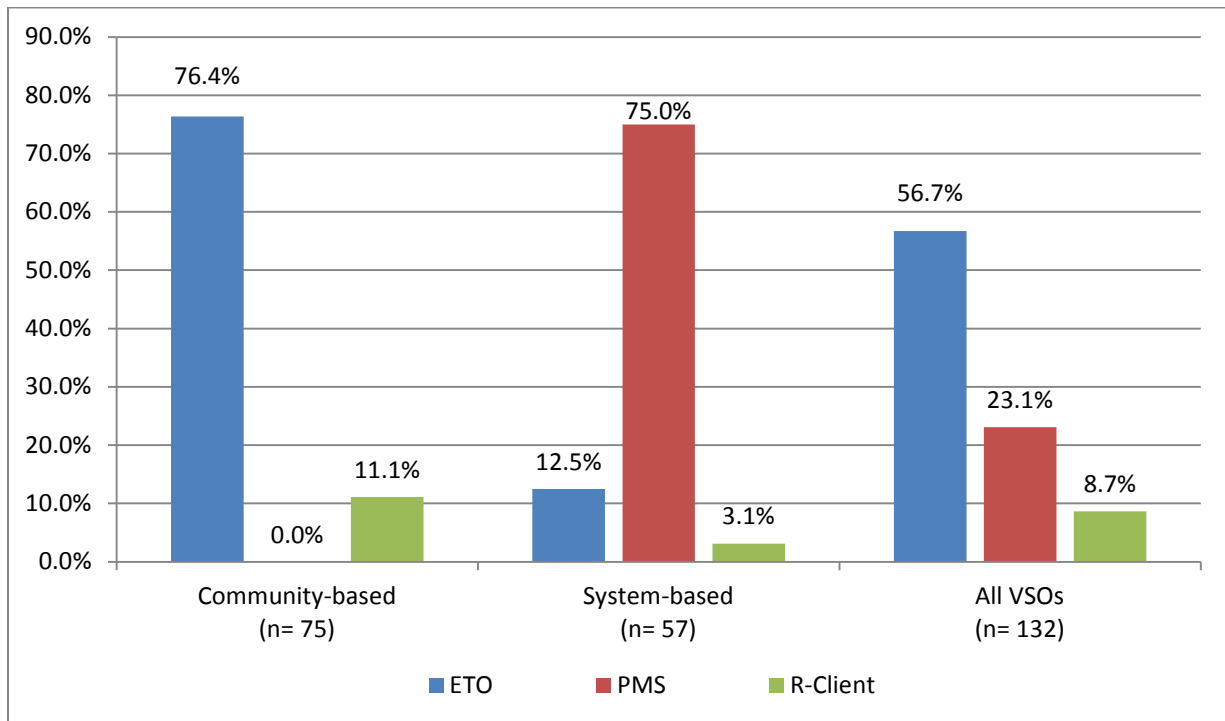
Community-based VSOs were much more likely to use a specific piece of software or electronic system other than Microsoft Office to track outcomes than system-based VSOs (96.0% vs. 59.6%, respectively). The following figure depicts the methods used by community-based and system-based VSOs to track client data and outcomes. Percentages represent the proportion of respondents selecting a particular method, and respondents could select multiple methods.

**Figure 30. Methods Used to Track Client Data and Outcomes, by VSO Type**



Respondents who said that they used software or an electronic system other than Microsoft Office ( $n = 106$ ) were asked to specify the software. About half of these VSOs (56.7%;  $n = 59$ ) indicated that they use ETO. About one-quarter of VSOs (23.1%;  $n = 24$ ) utilized PMS. All of these VSOs were system-based organizations, and they represented 75.0% of all system-based VSOs. Only 8.7% of VSOs reported using R-Client. Community-based VSOs were much more likely to report using ETO (76.4%;  $n = 55$ ) than system-based VSOs (12.5%;  $n = 4$ ), as shown in the following figure.

**Figure 31. Software Used for Client Management (Other than Microsoft Office), by VSO Type**



Differences in specific software utilized to track outcomes were not significantly different by population density of primary service area due to small sample sizes. About one-quarter of these VSOs (24.0%;  $n = 25$ ) reported using other software than what was provided in the list. The most frequently mentioned programs mentioned included:

- NCATrak ( $n = 6$ ),
- ClientTrack ( $n = 4$ ),
- Alice ( $n = 2$ ), and
- Software developed internally ( $n = 2$ )

The complete set of responses appears in the following table.

**Table 13. Other Software / Electronic System or Product Used for Client Management**

<b>Software / Product</b>	<b>Frequency</b>
<b>NCATrak</b>	6
<b>ClientTrack</b>	4
<b>Alice</b>	2
<b>Software Developed Internally</b>	2
<b>Credible</b>	1
<b>DA Case Management</b>	1
<b>Evidence-Based Therapeutic Tools</b>	1
<b>JCMS</b>	1
<b>MS-Dynamics CRM</b>	1
<b>Orange Leap</b>	1
<b>ORS</b>	1
<b>Prosecution Software</b>	1
<b>SPSS</b>	1
<b>SURVEY</b>	1
<b>UCM</b>	1

### **Computer Needs**

On average, VSOs reported having about 12.6 computers at their agency, including desktops, laptops, and tablet PCs. Responses ranged from one ( $n = 18$ ) to 156 ( $n = 1$ ). Community-based VSOs had more computers than system-based on VSOs on average (19.5 vs. 3.5), which is not surprising, given that the system-based VSOs tend to have smaller operations with fewer staff. VSOs that served primarily urban counties tended to have more computers (21.4) than those serving rural counties (6.1) even after accounting for VSO type.

Respondents were also asked how many of their computers were fewer than four years old. This number was then divided by the number of total computers to determine a percentage of computers that were fewer than four years old. On average, 52.8% of VSOs' computers were fewer than four years old, with no significant difference found by VSO type or population density of primary service area. Over one-fifth (20.6%) of VSOs said that none of the computers are fewer than four years old.

When asked how often organizations replace their computers, nearly three-quarters (73.4%;  $n = 94$ ) indicated that they do so when a computer does not work any longer (61.7%) or when new software does not run on a computer (11.7%). No VSOs replaced their computers every year or every other



year, although a few (7.0%;  $n = 9$ ) said that they replace their computers every third year. There were no significant differences by VSO type or population density of primary service area. Other responses provided included:

- When computers are donated or funding is available ( $n = 10$ )
- Every five to six years ( $n = 7$ )

### **Other Technological Needs**

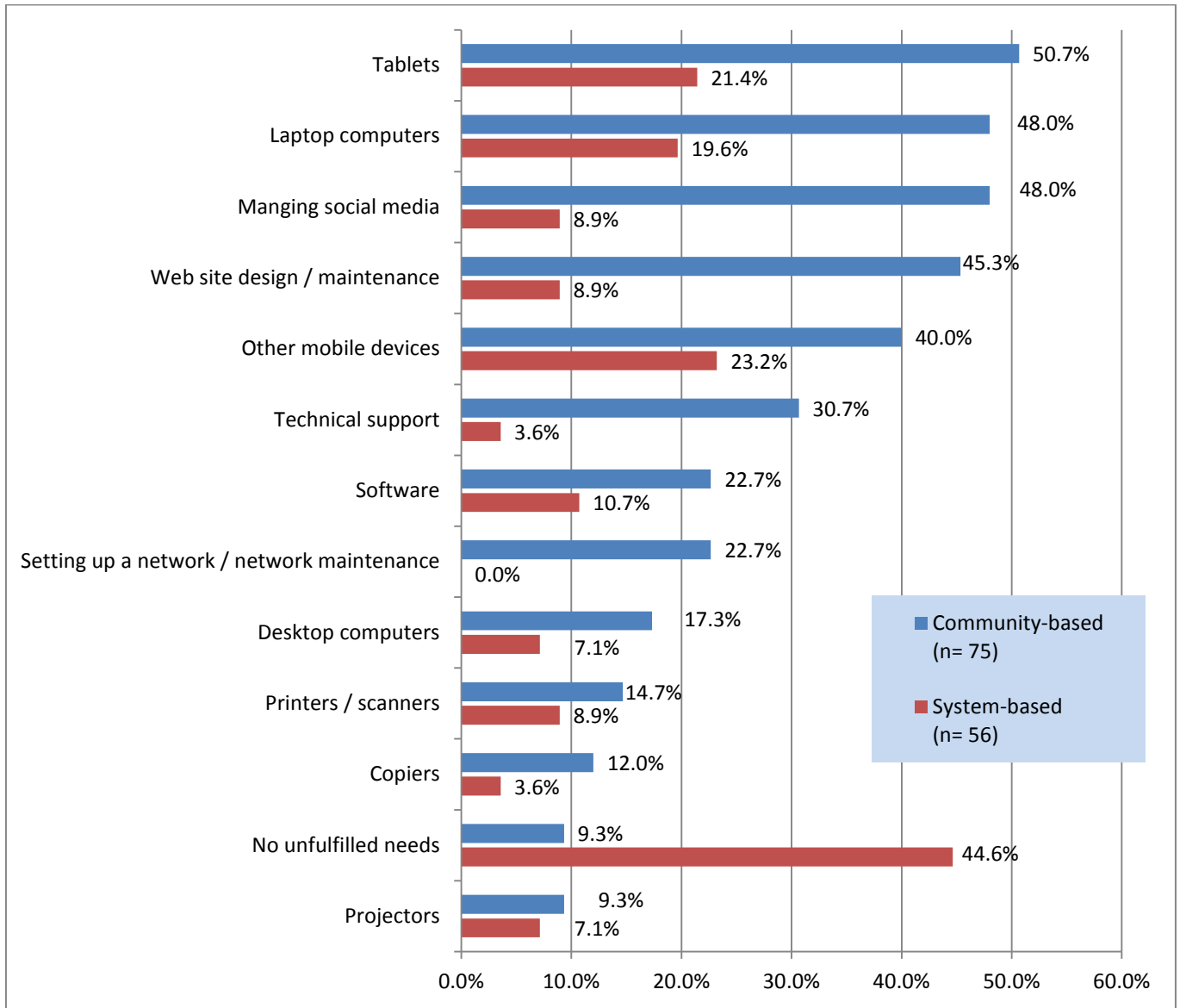
VSOs were given the opportunity to select all IT needs that their organizations have, but are currently unfulfilled. A total of 372 responses were given by 131 organizations. Nearly one-quarter of VSOs (24.4%;  $n = 32$ ) said that they do not have any unfulfilled needs. The remaining 99 organizations provided 340 responses, resulting in an average of 3.4 unique needs identified per VSO. Nearly half (44.6%) of system-based VSOs reported having no unfulfilled needs, possibly because they benefit from county-based technical staff; as a result, community-based VSOs reported more unique needs. In general, VSOs providing services in rural counties only reported fewer needs, but this is mostly accounted for by VSO type.

The most common needs identified by system-based VSOs were mobile devices (23.2%), tablets (21.4%), and laptop computers (19.6%). The most common needs identified by community-based VSOs were tablets (50.7%), laptop computers (48.0%), managing social media (48.0%), web site design and maintenance (45.3%), and mobile devices (40.0%). Other needs mentioned that were not part of the list were:

- Web sites being blocked by county IT ( $n = 1$ ),
- Learning management system ( $n = 1$ ), and
- Phone applications ( $n = 1$ ).

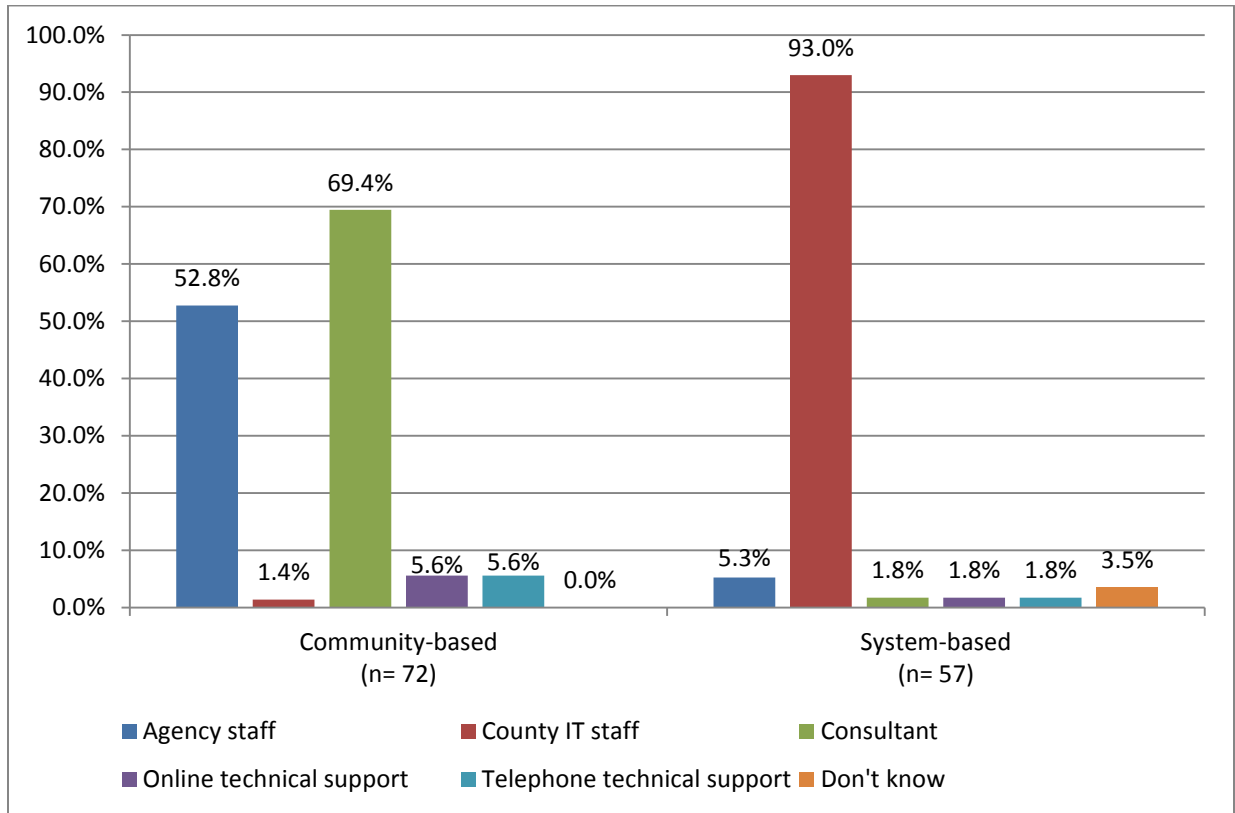
The following figure depicts all IT needs mentioned, by VSO type.

**Figure 32. Unfulfilled IT Needs, by VSO Type**



VSOs were also asked to select all of the entities who are responsible for updating and maintaining servers, computers, software, etc. Most system-based VSOs (93.0%) reported that county IT staff hold this responsibility. Community-based VSOs were more likely to say that consultants (69.4%) or agency staff (52.8%) are responsible for such updates and maintenance. Four community-based organizations mentioned that IT staff from their umbrella organization are responsible. The following figure shows who is responsible for IT updates and maintenance, by VSO type. Respondents could select all that applied.

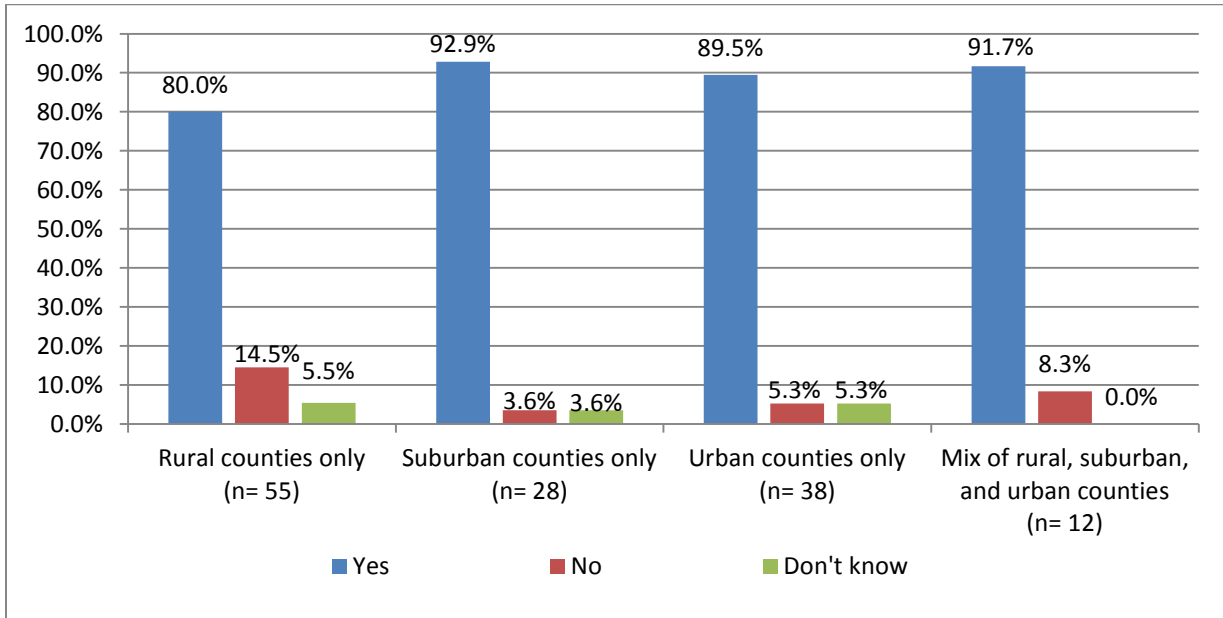
**Figure 33. Responsibility for IT Updates and Maintenance, by VSO Type**



**Office Network and Internet Access**

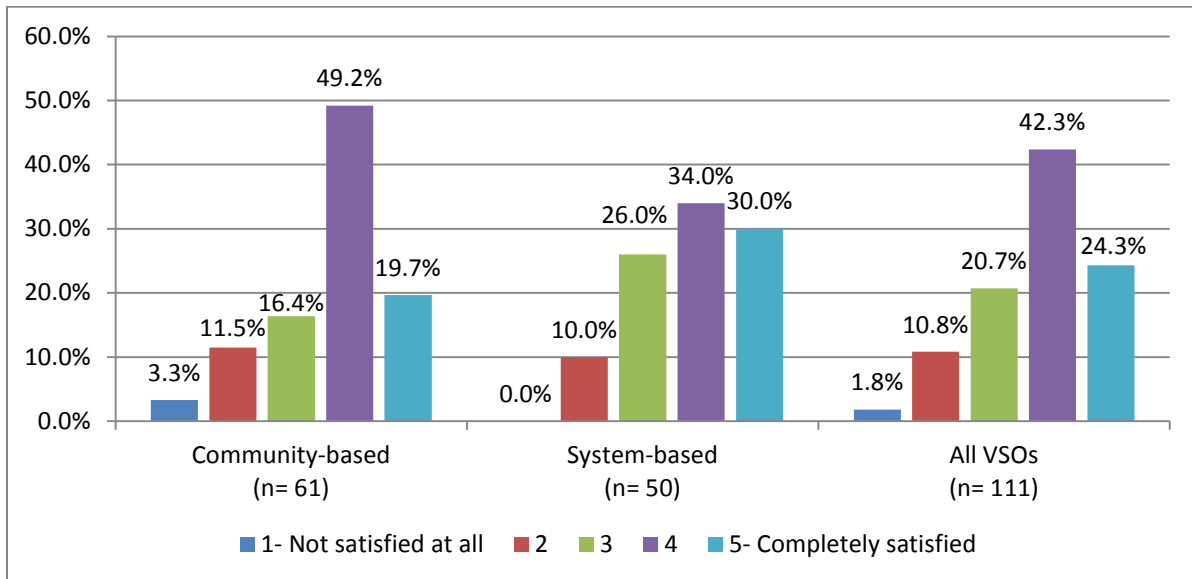
Most VSOs have a network for their office computers (86.5%;  $n = 115$ ). There were no significant differences by VSO type, although VSOs operating primarily in rural counties were slightly less likely to report having an office network (80.0%) than those operating primarily in suburban (92.9%), a mix of counties (91.7%). The following figure shows VSOs’ reporting of having a computer network by population density of primary service area.

**Figure 34. Presence of Office Computer Network, by Population Density of Primary Service Area**



VSOs were asked to report how satisfied they were with their office network on a scale from 1 through 5, where 1 represented “Not satisfied at all” and 5 represented “Completely satisfied.” On the five-point scale, respondents averaged a mean satisfaction score of 3.77, indicating moderate satisfaction. There were no significant differences in mean score by VSO type or population density of primary service area. The following figure shows the distribution of responses by VSO type.

**Figure 35. Satisfaction with Office Network, by VSO Type**

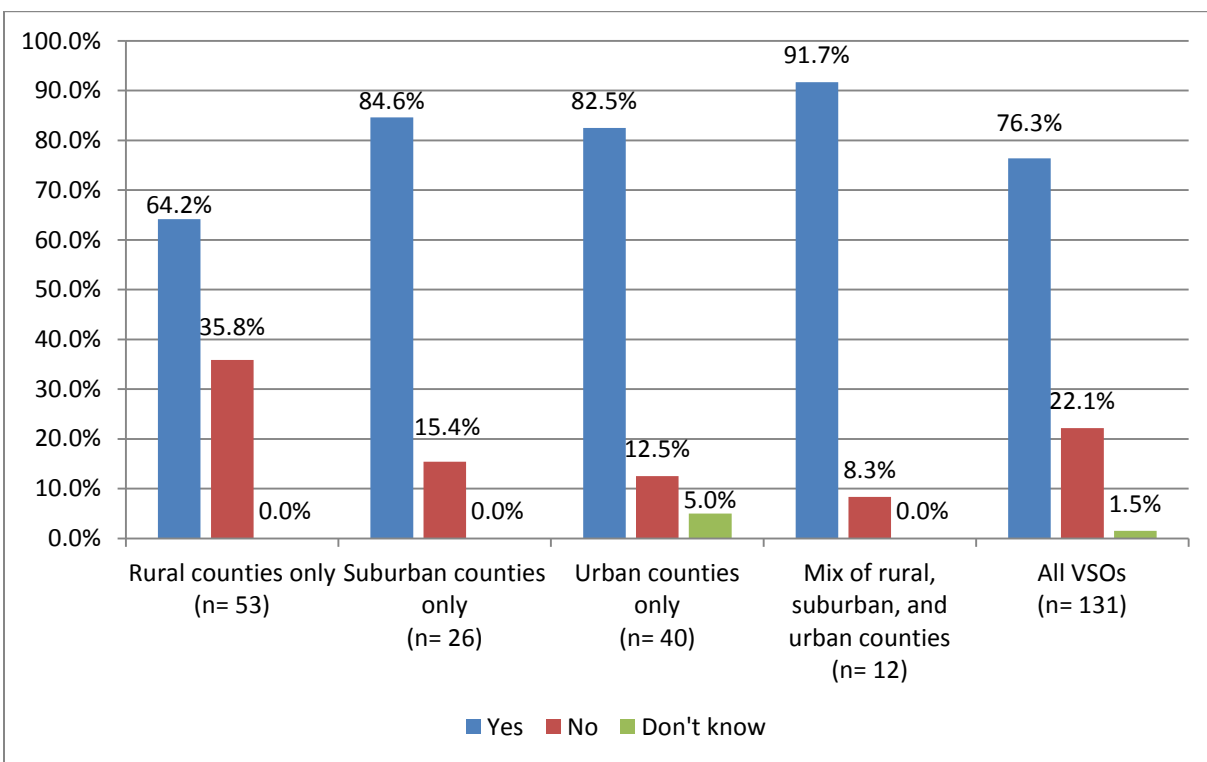


Most VSOs reported that they had high-speed internet (89.6%;  $n = 120$ ) and the balance said that they did not know what type of internet connection their office had (10.4%;  $n = 14$ ). In addition, nearly all VSOs (97.0%) can have multiple computers connected to the internet at the same time.

### Web Services

About three-quarters of VSOs (76.3%;  $n = 100$ ) reported that they have a website. Nearly all community-based VSOs (96.0%;  $n = 72$ ) reported having a website, as compared to just 50.0% of system-based VSOs ( $n = 28$ ). VSOs primarily serving rural counties only were less likely to report having a web site (64.2%;  $n = 34$ ) than those serving suburban (84.6%;  $n = 22$ ) or urban counties (82.5%;  $n = 33$ ), as shown in the following figure.

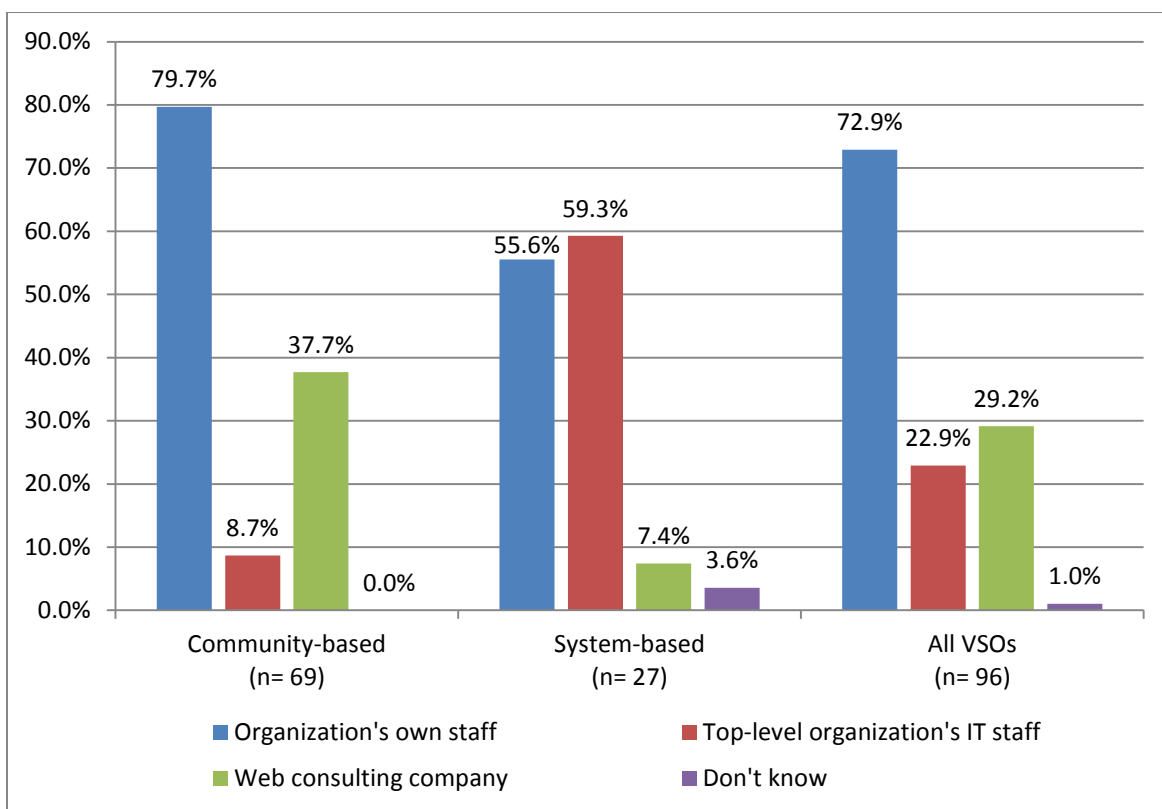
**Figure 36. VSOs with a Website, by Population Density of Primary Service Area**



Community-based VSOs were more likely than system-based VSOs to say that their organization’s own staff (79.7% vs. 55.6%, respectively) or a web consulting company (37.7% vs. 7.4%, respectively) were responsible for web design and updates. Unsurprisingly, system-based VSOs were much more likely to say that their top-level organization’s IT staff were responsible (59.3% vs.

8.7%, respectively), as shown in the following figure. There were no significant differences by population density of primary service area that were not explained by VSO type.

**Figure 37. Responsibility for Web Design and Updates, by VSO Type**

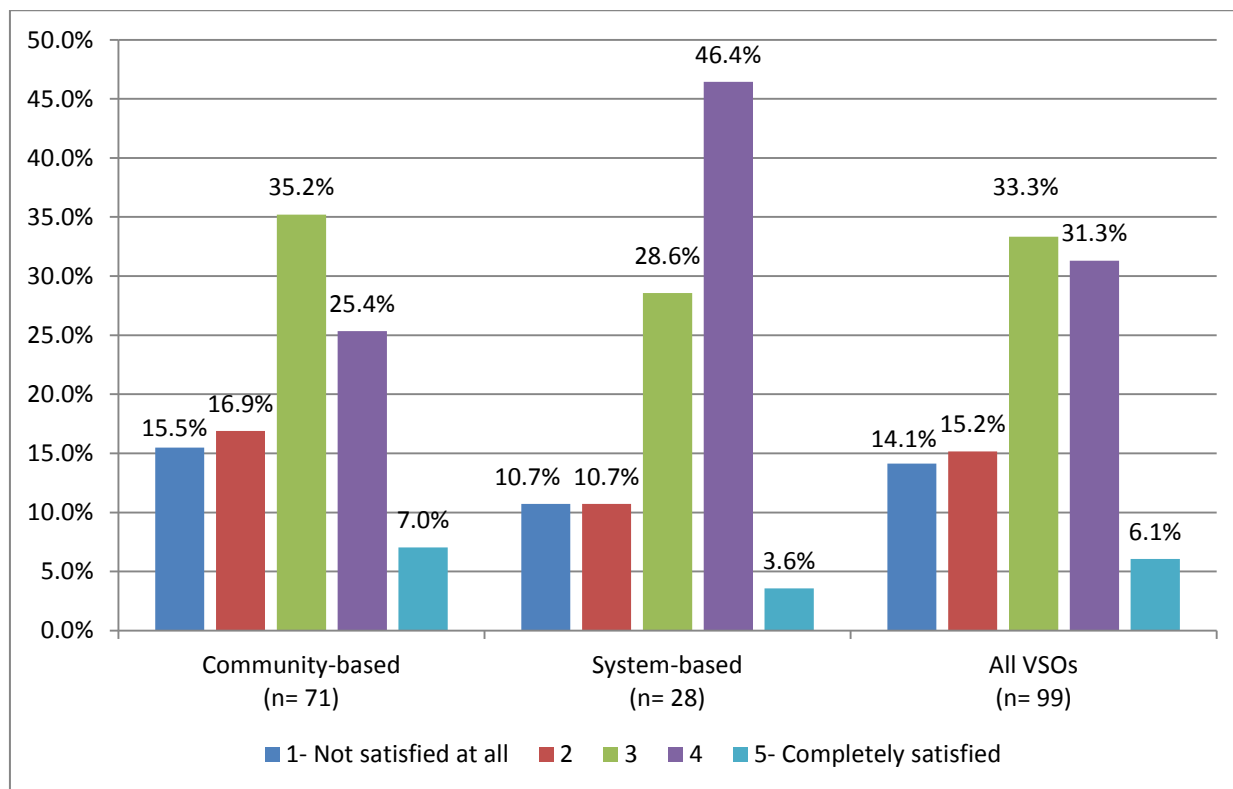


VSOs providing services primarily to rural counties were slightly less likely to use a web consulting company than urban counties (15.2% vs. 38.7%), but this was accounted for by differences in VSO type and the fact that system-based VSOs were less likely to use a web consulting company. Two VSOs indicated that a volunteer was responsible for web design and updates.

When asked how satisfied they were with their web site on a scale from 1 through 5, where 1 represented “Not satisfied at all” and 5 represented “Completed satisfied,” respondents averaged a mean satisfaction score of 3.0, indicating moderate satisfaction. Community-based VSOs were slightly less satisfied than system-based VSOs with their web sites (with average scores of 2.9 vs. 3.2 on a 5.0 scale). There were no significant differences by population density of primary service area.

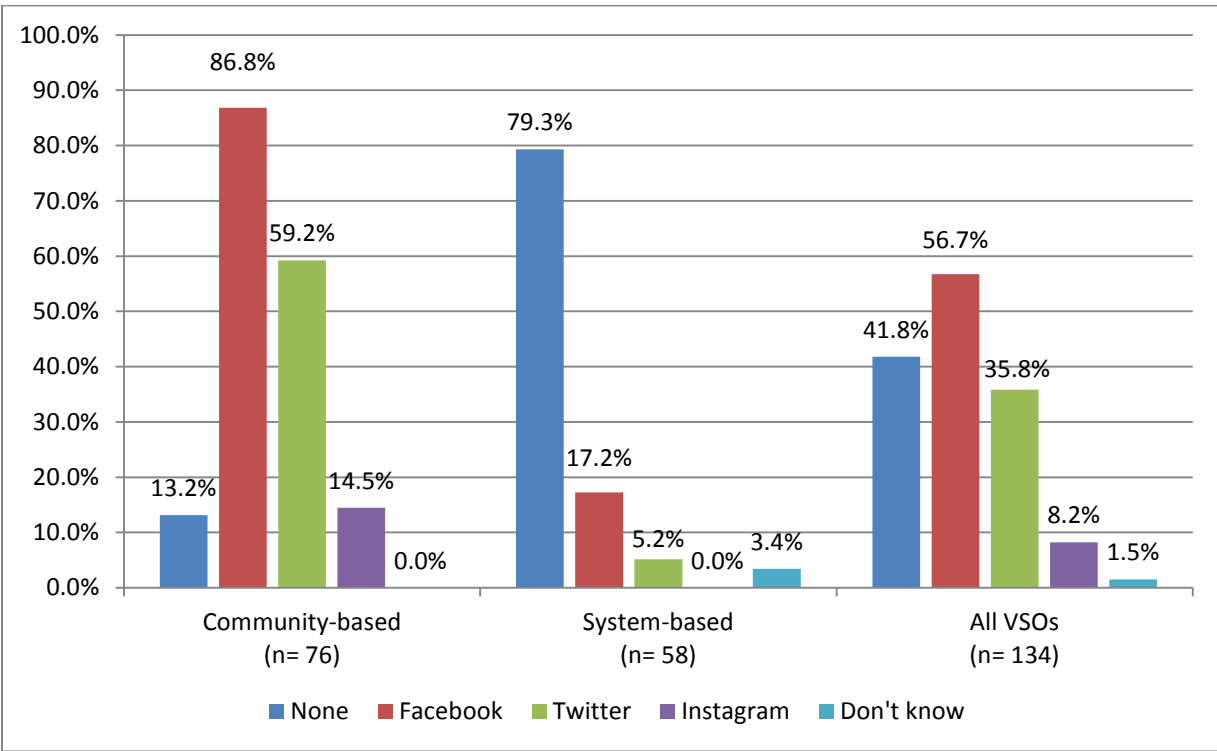
A slightly higher proportion of system-based VSOs responded with a web site satisfaction score of 4.0 or 5.0 as compared to community-based VSOs. The following figure shows the distribution of responses, by VSO type.

**Figure 38. Satisfaction with Web Site, by VSO Type**

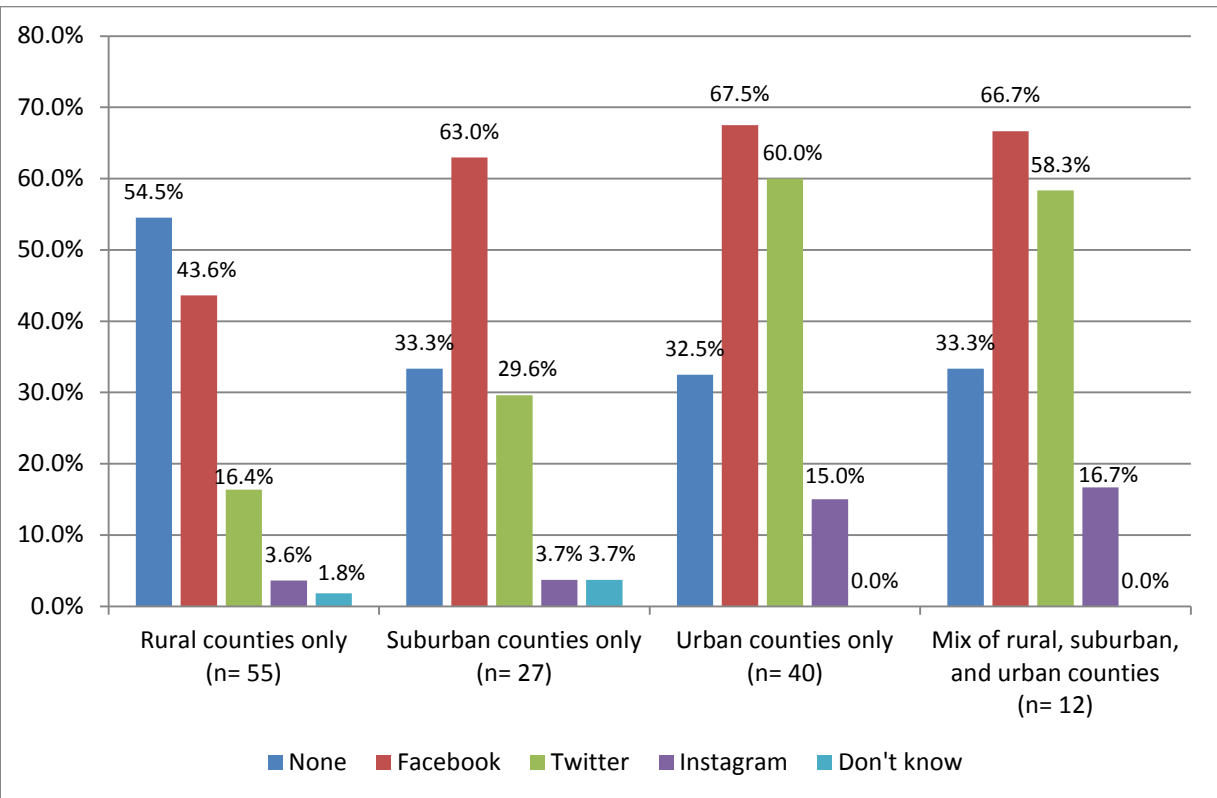


More than two out of five VSOs (41.8%;  $n = 56$ ) reported that they do not use any social media platforms. This is accounted for by the fact that 79.3% of system-based VSOs ( $n = 46$ ) do not use social media. In contrast, only 13.2% ( $n = 10$ ) of community-based VSOs reported that they do not use social media. The most-frequently used social media site was Facebook (86.8% of community-based VSOs vs. 17.2% of system-based VSOs). An additional 59.2% of community-based VSOs and 5.2% of system-based VSOs reported that they use Twitter. VSOs providing services in rural counties only were more likely to say that they did not use social media (54.5%) than other VSOs (32.9%). VSOs serving urban areas were also more likely to use Twitter (60.0%) than those serving rural counties only (16.4%) and suburban counties only (29.6%). The following figures show responses by VSO type and population density of primary service area.

**Figure 39. Social Media Use, by VSO Type**



**Figure 40. Social Media Use, by Population Density of Primary Service Area**





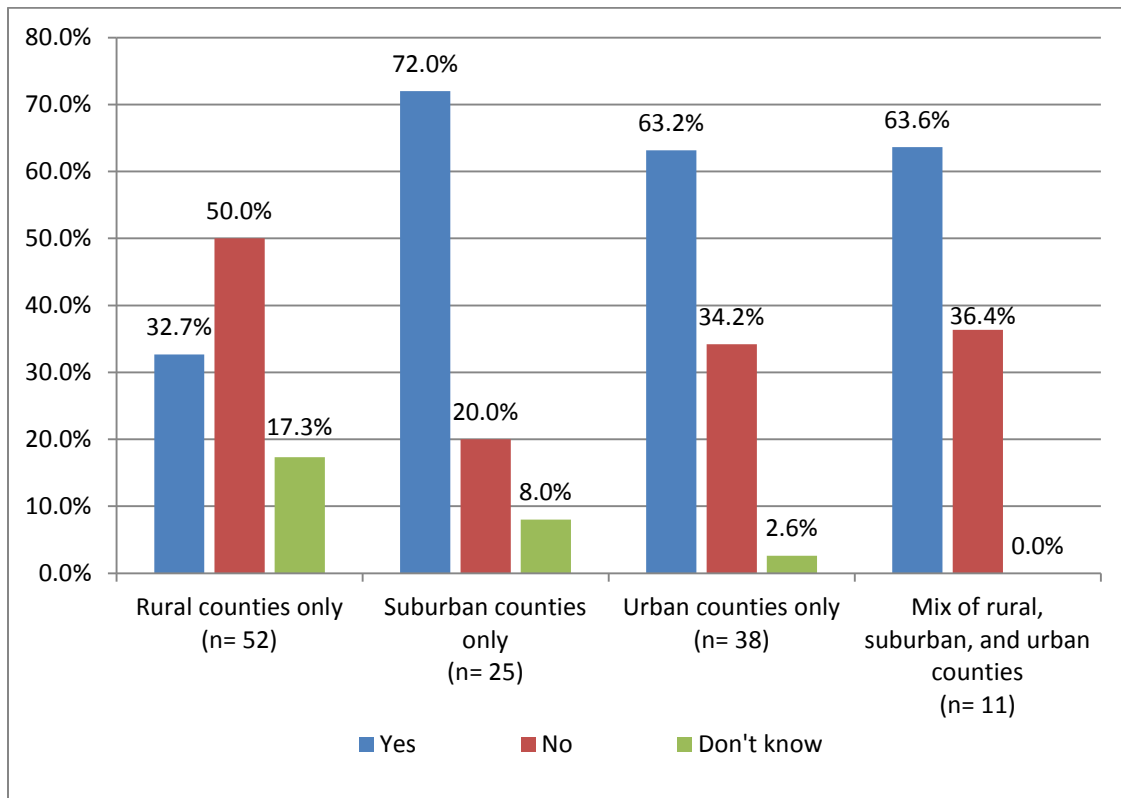
## Strategic and Operational Planning

### Strategic Planning

About half (52.4%) of VSOs surveyed indicated that their organization has a written strategic plan that was developed within the last five years. Community-based VSOs were more likely than system-based VSOs to say that they had a written strategic plan (65.3% vs. 33.3%, respectively). One-quarter (23.5%) of system-based VSOs did not know whether their organization had a strategic plan that was developed within the last five years.

VSOs providing services primarily in rural counties were much less likely than other VSOs to have developed a strategic plan. Half of VSOs providing services primarily in rural counties had not developed a strategic plan within the last five years, as shown in the following figure.

**Figure 41. VSOs with a Strategic Plan Developed within the Last Five Years, by Population Density of Primary Service Area**



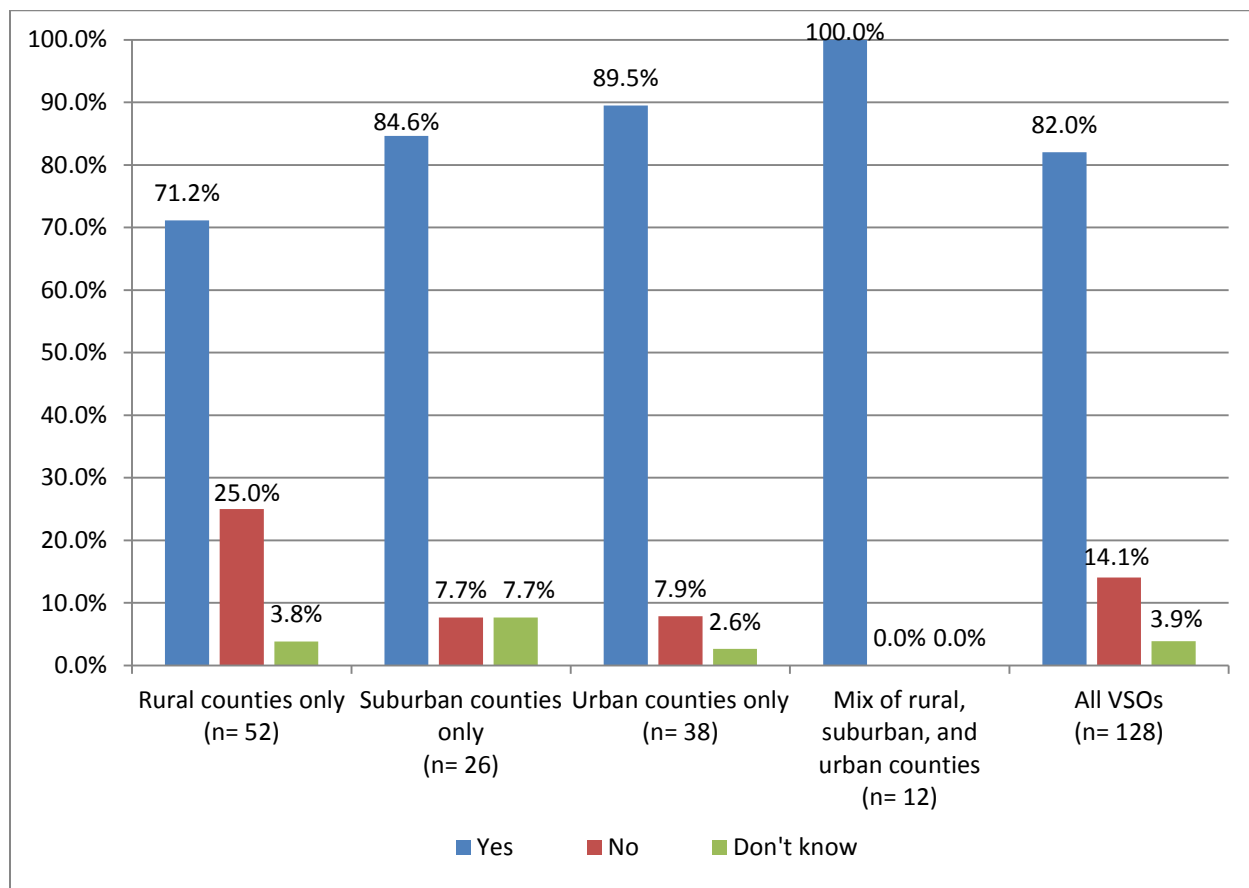
### **Succession Planning**

Over half of all VSOs (55.6%) indicated that they did not have a succession plan for identifying and developing internal personnel with the potential to fill key leadership positions in their organization to continue to assure that the organization fulfills its mission. Further, over one-third (38.1%) of VSOs do have a succession plan and the balance (6.3%) did not know. Community-based VSOs were much more likely than system-based VSOs to say that they did have a succession plan (51.4% vs. 19.2%) and VSOs operating primarily in rural counties were much less likely to say that they had a succession plan (17.0%) than those operating in suburban (48.0%), urban (58.3%) or a mix of counties (50.0%).

### **Operational Planning**

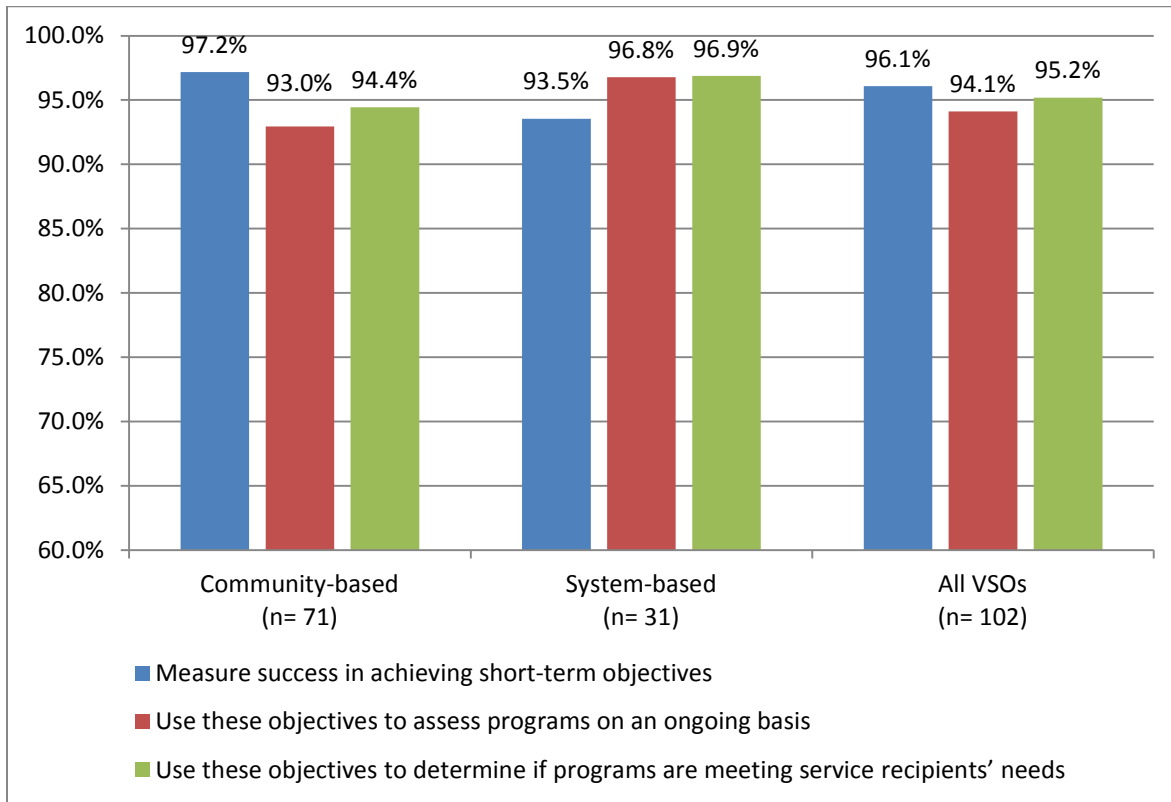
Generally, community-based VSOs were more engaged in operational planning. Nearly all community-based VSOs (97.3%;  $n = 73$ ) indicated that they track their short-term objectives, strategies, and targets around service provision at least once per year, as compared to just 60.4% ( $n = 32$ ) of system-based VSOs. Looking at VSOs by the population density of their primary service areas, the proportions reporting that they do this operational planning at least once per year ranged from 71.2% ( $n = 37$ ) of those operating primarily in rural counties to 100.0% ( $n = 12$ ) of those that operate in a mix of counties, as shown in the following figure.

**Figure 42. VSOs Establishing Short-Term Objectives, Strategies, and Targets around Service Provision at Least Once a Year, by Population Density of Primary Service Area**



Organizations that indicated that they established short-term objectives, strategies, and targets around service provision at least once a year ( $n = 105$ ) were asked a series of follow-up questions. Most VSOs indicated that they measure success in meeting these objectives, strategies, and targets (96.1%;  $n = 98$ ); use these objectives to assess programs on an ongoing basis (94.1%;  $n = 96$ ); and use the objectives to determine if programs are meeting service recipients' needs (95.2%;  $n = 99$ ). There were no significant differences by VSO type or population density of primary service area. The following figure shows the near-unanimous agreement with each of these questions, by VSO type.

**Figure 43. Indication of Using Measures to Assess Short-Term Objectives, Strategies, and Targets, by VSO Type**



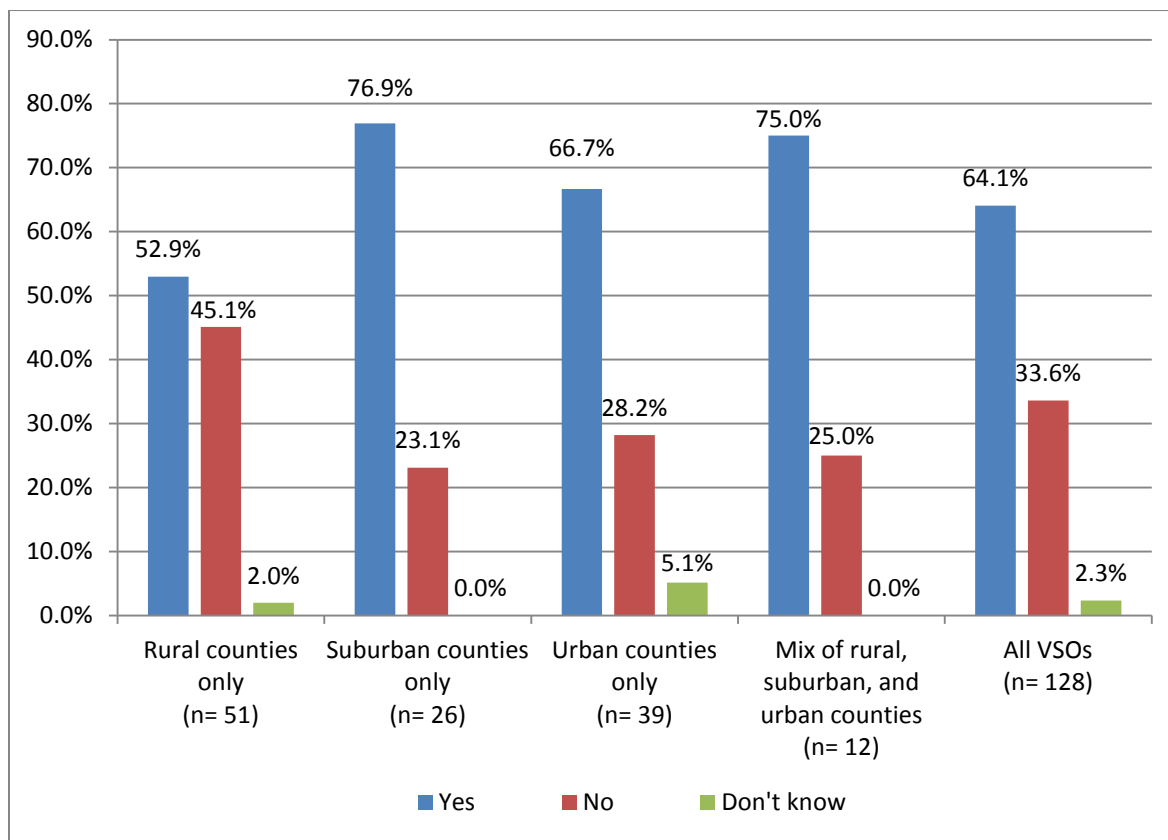
### Public Relations and Marketing

About two-thirds of VSOs surveyed (64.1%;  $n = 82$ ) indicated that they have developed a marketing plan, which was defined as a plan to advertise or promote victims' services, expand outreach efforts, or expand an organization's reach or get their name out into the communities they serve. Of those who indicated that they do not currently have a marketing plan, one-third (33.3%;  $n = 14$ ) have committed to implementing such a plan, resulting in a total of 75.0% of VSOs ( $n = 96$ ) that have either developed a marketing plan or committed to developing one. Almost all organizations that have developed a marketing plan have implemented at least part of the plan (96.3%;  $n = 78$ ), and there were no significant differences by VSO type or population density of primary service area.

Community-based VSOs were more likely than system-based VSOs to have indicated that they currently have a marketing plan (76.0%,  $n = 57$ ; vs. 47.2%,  $n = 25$ ). In addition, VSOs that primarily serve rural counties only were less likely to indicate that they currently have a marketing plan

(52.9%;  $n = 27$ ) than those serving other county types (71.4%;  $n = 77$ ), as depicted in the following figure.

**Figure 44. VSOs with a Marketing Plan, by Population Density of Primary Service Area**



Most VSOs used only their organizations’ staff members to execute their marketing plans (89.3%;  $n = 67$ ). A small portion (10.7%;  $n = 8$ ) used a combination of organizational staff and a marketing firm to execute the plans. No VSOs reporting exclusively using a marketing firm to execute their marketing plans.

### Top Victim Service Organization Needs

VSOs were asked to list the top three needs they would address if additional funding were available to their agencies. Respondents provided 328 responses representing a wide range of needs. Common needs mentioned included:

- Additional staff ( $n = 67$ ),
- The ability to pay staff members more and provide better benefits to improve staff morale and retention ( $n = 23$ ),
- Community education and outreach ( $n = 22$ ),
- Technology, software, and computer upgrades ( $n = 9$ ),
- Transportation ( $n = 9$ ),
- Office and facility updates ( $n = 9$ ), and
- Additional funding ( $n = 7$ ).

The following table shows the number of VSOs mentioning the top three most-common themes by VSO type and population density of primary service area.

**Table 14. Top VSO Needs, by VSO Type and Population Density of Primary Service Area**

	Additional Staff	Increased Salaries for Staff	Community Education / Outreach
<b>Total Responses</b>	<b>67</b>	<b>23</b>	<b>22</b>
<b>VSO Type</b>			
Community-Based	40	18	13
System-Based	27	5	9
<b>Population Density of Service Area</b>			
Rural Counties Only	28	7	12
Suburban Counties Only	15	6	3
Urban Counties Only	17	6	5
Mix of Counties	7	4	2

A complete list of responses provided can be found in Appendix G.

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## APPENDIX A –SURVEY INSTRUMENT

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Please read the following information about this survey and click the “Next” button at the bottom of your screen to participate.

### **Purpose of Survey**

The purpose of the VSAC Strategic Planning Survey is to collect information from victim service providers throughout Pennsylvania that receive funding from PCCD. This online survey is designed to gather information on a variety of topics to help PCCD make funding and policy decisions.

### **Topic and Length of Survey**

Completing the online survey takes approximately 30 - 40 minutes. The survey asks about your organization’s staffing, funding, services, clients, technology, and operational planning. Your survey answers will remain confidential. Only PCCD and the study team will have access to your data.

### **Who Should Complete the Survey?**

This survey data is being collected from all victim service providers statewide that receive funding from PCCD. The survey should be completed and submitted by executive directors or program directors of victim service agencies and by victim/witness coordinators. We understand that you may need to consult with others to obtain all of the administrative and technological information requested in the survey, but please ensure that the survey is completed and submitted by the executive director or program director or by the victim/witness coordinator.

### **Benefits of Participation**

The results of this survey will help us to better understand the needs of victim service agencies in Pennsylvania and provide valuable information to PCCD for use in future policy development and making funding decisions.

### **For More Information**

If you have any questions about this survey or the initiative, please contact Ms. Natalie Novotny-Goles at PCCD at [nnovotnygo@pa.gov](mailto:nnovotnygo@pa.gov) or 717-265-8735. If you experience any technical problems or have trouble completing the survey, you can contact Tim Servinsky at the Center for Survey Research at Penn State Harrisburg at [tservinsky@psu.edu](mailto:tservinsky@psu.edu) or 717-948-4312.

Throughout the survey, the terms “organization” and “agency” refer to either a stand-alone victim service agency or the specific office within a larger organization focused on providing services to crime victims. In other words, if your organization provides services beyond victims’ services (for example, a YWCA or a Victim/Witness Office located within a larger District Attorney’s Office), please consider only the parts of your organization that relate to victims’ services when answering the survey.

**Your participation is appreciated no later than Friday, August 21, 2015.**

Please click "Next" to continue.

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**CONTACT INFORMATION**

Please provide your contact information.

NAME. Your name:

TITLE. Your title:

AGENCY. Agency Name:

COUNT. Please indicate the county or counties in which your organization provides services:  
[*Select-all list of counties plus All Pennsylvania Counties, Outside of Pennsylvania, Other, and Don't know*]

[*Reporting note: Recode counties into urban, rural, suburban*]

GEO. Do you **primarily** provide services to individuals in rural, urban, or suburban areas? Select all that apply.

- Rural
- Suburban
- Urban
- Don't know

SERVICE. Which best describes your agency? [Non-profit/community based organization; DA-based; Probation office based; Don't know]

TYPE. Which type of service offering best describes your agency's primary focus?

- Procedural/System Based (i.e., Victim/Witness Office within District Attorney's Office)
- Domestic violence only
- Sexual assault only
- Dual (DV/SA)
- Comprehensive (A non-profit victim service agency in Pennsylvania that services victims of all forms of crime and violence, including sexual assault, domestic violence, aggravated and simple assault, homicide, child abuse, elder abuse, robbery, burglary, and DUIs)
- Child Advocacy Center
- Other: \_\_\_\_\_



--- SCREEN BREAK ---

**STAFFING**

Please answer the following questions about your organization's staffing.

If your organization provides services beyond victims' services (for example, a YWCA or a Victim/Witness office located within a larger District Attorney's Office), please consider only those employees who relate to victims' services.

If your office is part of a larger organization (for example, you operate one office as part of a statewide organization,) report only for your office.

First, please report your totals for paid full-time equivalent, full-time and part-time staff.

STAFF0. What is the total number of **PAID FTE (full-time equivalent)** employees at your agency that is dedicated to victims' services? This includes both direct service and indirect service staff.

For example, if your agency's work week consists of 40 hours and you have 2 full-time employees who work 40 hours per week and 2 part-time employees who each work 20 hours per week, you would calculate it this way:

2 full time employees X 40 hours = 80 hours

2 part-time employees working 20 hours/week = 40 hours

120 hours worked per week divided by 40 hours per week = 3 FTE employees.

STAFF1. What is the total number of **PAID FULL-TIME** staff at your agency? Include both direct service and indirect service staff.

STAFF2. What is the total number of **PAID PART-TIME** staff at your agency? Again, include both direct service and indirect service staff.

STAFF3. Now, thinking about both full- and part-time staff, what is the total number of **PAID DIRECT SERVICE** staff? Report for positions such as advocates and counselors, regardless of how the staff are funded.

STAFF4. Again, thinking about both full- and part-time staff, what is the total number of **PAID INDIRECT SERVICE** staff? Include positions such as prevention educators, volunteer coordinators, community outreach staff, and administrative staff, regardless of how the staff are funded. Exclude any staff who do NOT provide direct services to victims.

STAFF5. In the last five years, has your total number of paid staff increased, decreased, or stayed the same?

Increased

Decreased

Stayed the same

Don't know

*[Ask STAFF5a if STAFF5 = Increased or STAFF5b if STAFF5 = decreased]*

STAFF5a. By how many total paid personnel has your staff increased in the past five years?

STAFF5b. By how many total paid personnel has your staff decreased in the past five years?

STAFF6a. What is the average **STARTING** salary, excluding benefits, for all non-supervisory, full-time direct service staff at your agency, **excluding therapists and supervisory staff**? Include information for counselors and advocates.

STAFF6b. What is the average **CURRENT** salary, excluding benefits, for all non-supervisory, full-time direct service staff at your agency, **excluding therapists and supervisory staff**? Include information for counselors and advocates.

STAFF7a. What is the average **STARTING** salary, excluding benefits, for all non-supervisory, full-time **therapists** at your agency?

STAFF7b. What is the average **CURRENT** salary, excluding benefits, for all non-supervisory, full-time **therapists** at your agency?

STAFF8a. What is the average **STARTING** salary, excluding benefits, for all **direct service supervisors** at your agency?

STAFF8b. What is the average **CURRENT** salary, excluding benefits, for all **direct service supervisors** at your agency?

STAFF9a. Please indicate the approximate percentage of your **direct service** staff that have each of the following levels of education: Non-degree/less than an Associate's degree, Associate's degree, Bachelor's degree, Master's degree or higher?

STAFF9b. What approximate percentage of your **direct service** staff have any type of professional license related to victims' services (i.e., LSW/Licensed Social Worker, Licensed Therapist, etc.)?

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STAFF 10. Do you offer medical benefits to employees? Yes/No

STAFF 11. Do you offer retirement benefits to employees? Yes/No

**--- SCREEN BREAK ---**

## FINANCIAL INFORMATION

Please answer the following questions about your organization's finances.

If your organization provides services beyond victims' services (for example, a YWCA or a Victim/Witness office located within a larger District Attorney's Office), please consider only finances that relate to victims' services. If your office is part of a larger organization (for example, you operate one office as part of a statewide organization,) report only for your office.

FIN1. During your most recently completed fiscal year, what was your organization's total income?  
\$ \_\_\_\_\_

FIN2. During your most recently completed fiscal year, what percentage of your organization's income came from each of the following sources? (Total must equal 100%.)

\_\_\_% VOCA

\_\_\_% STOP

\_\_\_% RASA

\_\_\_% VOJO

\_\_\_% PCADV

\_\_\_% PCAR

\_\_\_% Other than the sources above, including United Way, foundations, county government, federal government, donations, or any other sources.

FIN3. During your most recently completed fiscal year, what percentage of your expenditures were spent on each of the following? (Total must equal 100%.)

\_\_\_% Direct services

\_\_\_% Administration

\_\_\_% Staff training

\_\_\_% Overhead costs (building maintenance, utilities, etc.)

\_\_\_% Education/Prevention

\_\_\_% Other

**--- SCREEN BREAK ---**

**CLIENTS SERVED**

Please answer the following questions about crime victims who receive services from your program or organization.

CLI1. For the most recently completed fiscal year, what was your total UNDUPLICATED number of clients served? Please answer for victims, witnesses, and significant others.

CLI2. Of this number, what APPROXIMATE percentages fall into the following categories? **If your organization does not track information pertaining to age, sex, or race/ethnicity, please enter “100” into the “Unknown” choice for that category.** (Total must equal 100% in each category.)

**Age**

- \_\_\_% 0 to 11 years old
- \_\_\_% 12 to 17 years old
- \_\_\_% 18 to 24 years old
- \_\_\_% 25 to 59 years old
- \_\_\_% 60 years of age or older
- \_\_\_% Unknown

**Race/Ethnicity**

- \_\_\_% Hispanic/Latino
- \_\_\_% White/Non-Latino
- \_\_\_% Black - African American
- \_\_\_% Asian
- \_\_\_% Native Hawaiian or Pacific Islander
- \_\_\_% American Indian or Native Alaskan
- \_\_\_% Other
- \_\_\_% Unknown

**Sex**

- \_\_\_% Female
- \_\_\_% Male
- \_\_\_% Transgendered
- \_\_\_% Unknown

CLI3. How many direct service workers are providing direct services to victims in languages other than English? Please enter 0 if none. \_\_\_\_\_

CLI3a. [Ask if CLI3 > 0]: Which languages? [Select all that apply.] Spanish, Chinese, Vietnamese, Russian, Korean, Italian, German, Other language, please specify: \_\_\_\_\_.

**--- SCREEN BREAK ---**

CLI4. Are there any needs of crime victims in your community that are NOT currently being adequately met? If so, please **RANK THE TOP FIVE** from the choices below: [Rotate, Rank 5]

- Civil legal services (Protection From Abuse (PFA) orders, custody, etc. for victim safety)
- Criminal procedural services (Court notifications, court accompaniment, emotional support/advocacy through the justice system, etc.)
- Counseling and support (Mental health services, counseling, therapy, support groups)
- Language access
- Emergency Housing/Shelter
- Transportation (assistance to attend court hearings and appointments related to victimization)
- Financial losses as a result of crime (medical, funeral, loss of earnings, etc.)
- Safety planning (addressing physical and emotional safety of victim)
- Medical Services/Advocacy (accompaniment to forensic rape exam, advocacy and support to victim in hospital setting as a result of violence, etc.)
- Other, please specify: \_\_\_\_\_

CLI5. From the list below, please **RANK THE TOP FIVE** crime victim groups in your community for which there are limited or no services available: *[Rotate, Rank 5]*

- LGBTQ
- Immigrants/Refugees
- Hispanics/Latinos
- Black/African-American
- Asian
- Individuals with disabilities (Cognitively or physical)
- Men
- Women
- Children (ages 0-12)
- Youth/teens (ages 12-17)
- Seniors/Elderly (60+ years old)
- Veterans or veterans' families
- Campus/college individuals
- Mennonite/Amish
- Individuals in rural areas
- Human Trafficking
- Individuals with Mental/Behavioral Health issues
- Incarcerated individuals
- Other, please specify: \_\_\_\_\_

CLI6. Please select the **TOP THREE** barriers in your community for crime victims in seeking services to address their victimization: *[Rotate; Select all, up to three]*

- Knowledge of Services Available
- Transportation to access services
- Need for Childcare to access services
- Language/cultural barriers
- Stigma/Guilt/Shame
- Fear of Perpetrator
- Lack of support from family, friends, clergy
- Fear of Deportation
- Lack of trust in the system/agencies that will respond
- Time Issues (E.G., Services not available at times victim is available)
- Process to receive care or support is too complex
- Other specific barriers to services, please specify: \_\_\_\_\_

--- SCREEN BREAK ---

**TECHNOLOGY**

The following section addresses your organization's technology use and needs.

TRACK1. How does your office collect or track client data and outcomes (positive changes for clients)? *Select all that apply.*

Software/Electronic system (i.e., ETO, PMS)

Excel spreadsheet

Microsoft Office (Other than Excel)

Paper/Hard Copy

Other, please specify: \_\_\_\_\_

*[If yes to TRACK1, else to next section]*

TRACK1a. Which software/electronic systems or product(s) do you use for client management and "outcomes" (positive changes for clients)? *Select all that apply.*

ETO

PMS

R-Client

Other, please specify: \_\_\_\_\_

TECH1. Approximately how many computers does your VSO (Victim Service Organization) have? Your number should include all desktops, laptops, and tablet PCs.

*[open-ended box with numbers only]*

TECH1a. How many of these computers are less than 4 years old? *[open-ended box with numbers only]*

TECH1b. How often does your organization replace your computers? Again, this includes desktops, laptops, and tablet PCs.

Every year

Every other year

Every third year

Every fourth year

When a computer does not work anymore

When new software does not run on a computer

Other: \_\_\_\_\_

Don't know

TECH1C. Please select any IT needs your organization has that are currently unfulfilled.

- Desktop computers
- Laptop computers
- Tablets
- Other mobile devices (i.e., smart phones)
- Copiers
- Printers/scanners
- Projector
- Software
- Web site design/maintenance
- Managing social media
- Setting up a network/network maintenance
- Technical support
- Other, please specify: \_\_\_\_\_

### Technical Support Services

TECH2. Who is responsible for updating and maintaining servers, computers, software, etc.? *Select all that apply.*

- Agency staff
- County IT staff
- Consultant
- Online technical support
- Telephone technical support
- Other, please specify: \_\_\_\_\_
- Don't know

--- SCREEN BREAK ---

Office Network

TECH3. Are the computers in your office connected to a network? This is not the same thing as having Internet access.

- Yes
- No
- Don't know

*If Yes to TECH3, else to TECH4a:*

TECH3a. On a scale of 1 to 5, where 1 is not satisfied at all and 5 is completely satisfied, how satisfied are you with your office network?

- 1 – Not satisfied at all
- 2
- 3
- 4
- 5 – Completely satisfied
- Don't know

TECH4a. What type of Internet connection is used at your office?

- High Speed (examples: cable/Comcast, DSL, FIOS)
- Dial-up modem
- No Internet connection
- Don't know

TECH4b. Can multiple computers within your office access the Internet at the same time?

- Yes
- No
- Don't know

**--- SCREEN BREAK ---**

Web Services

TECH5. Does your VSO have a website?

- Yes (*go to TECH5a*)
- No (*go to TECH6*)
- Don't know (*go to TECH6*)

TECH5a. Who is responsible for web design and updates? *Select all that apply.*

- Our own staff
- Top level organization's IT staff
- Web consulting company
- Other, please specify: \_\_\_\_\_
- Don't know

TECH5b. On a scale of 1 to 5, where 1 is not satisfied at all and 5 is completely satisfied, how satisfied are you with your web site?

- 1 – Not satisfied at all
- 2
- 3
- 4
- 5 – Completely satisfied
- Don't know

TECH6. What social media platforms does your agency currently use? *Select all that apply.*

- None/we do not use social media
- Facebook
- Twitter
- Instagram
- Other, please specify \_\_\_\_\_
- Don't know



--- SCREEN BREAK ---

**VOLUNTEERS**

VOL1. Does your organization use volunteers? Again, if your organization provides services beyond victims' services, please consider only volunteers that relate to your victims' services. If your office is part of a larger organization, report only for your office.

Yes (*Go to VOL2*)

No (*Go to next section*)

Don't know (*Go to next section*)

VOL2. Do you see the role of your volunteers increasing, decreasing, or staying the same in the future?

Increasing

Decreasing

Staying the same

Don't know

VOL3. Do you rely on volunteers to regularly perform certain program-related tasks?

Yes/No/DK

VOL4. Do you utilize volunteers in providing direct services, indirect services, or both?

Direct services only

Indirect services only

Both direct and indirect services

Don't know

VOL5. What is the total number of active volunteers your organization currently utilizes?

[*text box – numbers only*]

--- SCREEN BREAK ---

**STRATEGIC AND OPERATIONAL PLANNING**

STRAT1. Does your organization have a written strategic plan that was developed within the last five years?

Yes/No/DK

PLAN1. Does your organization have a succession plan? Succession planning is a process for identifying and developing internal personnel with the potential to fill key leadership positions in an organization to continue to assure that the organization fulfills its mission.

Yes/No/DK

PLAN2. Does your organization establish short-term objectives, strategies, and targets around service provision at least once a year?

Yes [*Go to PLAN2a*]

No [*Go to MARK1*]

Don't know [*Go to MARK1*]

PLAN2a. Does your organization measure its success in achieving these short-term objectives, strategies, and targets?

Yes/No/DK

PLAN2b. Does your organization use these objectives, strategies, and targets to assess your programs on an ongoing basis?

Yes/No/DK

PLAN2c. Does your organization use these objectives, strategies, and targets to determine if your programs are meeting your service recipients' needs?

Yes/No/DK

**--- SCREEN BREAK ---**

## **PUBLIC RELATIONS AND MARKETING**

MARK1. Has your organization developed a plan to advertise/promote victims' services, expand outreach efforts, or expand your reach/get your name out into the communities you serve?

Yes [*Go to MARK2a*]

No [*Go to MARK2b*]

Don't know [*Go to MARK2b*]

*[Show if MARK1=Yes]*

MARK2a. Has your organization implemented at least part of this plan?

Yes/No/DK [*Go to MARK3*]

*[Show if MARK2=No or Don't know]*

MARK2b. Has your organization committed to developing and implementing a plan to advertise/promote victims' services, expand outreach efforts, or expand your reach/get your name out into the communities you serve?

Yes/No/DK [*Go to End*]

*Show if MARK1=Yes, else to next section*

MARK3. Does your organization use a marketing firm or its staff to execute your plan?

Marketing firm only

Organization's staff only

A combination of staff and marketing firm

Don't know

**--- SCREEN BREAK ---**

OPEN1/2/3: What are the top three needs you would address if additional funding were available to your agency? *[open-ended text box]*

**--- SCREEN BREAK ---**

**Thank you**

Thank you for your participation! Please contact Ms. Natalie Novotny-Goles at PCCD at [nnovotnygo@pa.gov](mailto:nnovotnygo@pa.gov) or 717-265-8735 or Tim Servinsky at Penn State Harrisburg at [tservinsky@psu.edu](mailto:tservinsky@psu.edu) or 717-948-4312 if you have any questions about the survey.

Please click on “submit” to submit your responses. IT MAY TAKE UP TO A MINUTE TO SUBMIT YOUR RESPONSES. Do NOT close your browser until the assessment has redirected to PCCD’s Office of Victims’ Services webpage.

*[Automatic redirect of survey to PCCD’s Office of Victim’s Services webpage: <http://www.pccd.pa.gov/Victim-Services>]*

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## APPENDIX B – PRE-NOTIFICATION EMAIL TEXT

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TO: Victim Service Providers (list provided by PCCD)  
FROM: Penn State Center for Survey Research on behalf of PCCD's Statewide Victims' Services Advisory Committee (VSAC)  
SUBJECT: Your Participation in Our Survey is Critical!

In the next few days, you will receive an email from the Penn State Center for Survey Research inviting you to participate in an online survey designed to collect information from victim service providers throughout Pennsylvania that receive funding from PCCD.

We recognize that all of you are extremely busy with your daily responsibilities managing programs that serve victims of crime. The 30-40 minutes that you spend completing this survey will be an investment of your time that will benefit the entire field of victim services in Pennsylvania. The information that VSAC obtains from these surveys will assist us in formulating a strategy to more effectively deliver services to Pennsylvania's victims of crime. This is especially critical given the fact that Pennsylvania has received a significant increase in federal VOCA funding for victim services.

In order to assist you with gathering the necessary information to complete the survey, we are attaching a copy of the survey instrument. You do not have to do anything with the attached document—it is only for your reference in gathering information to complete the online survey.

If you have any questions about this survey or the initiative, please do not hesitate to contact Ms. Natalie Novotny-Goles of the PCCD Office of Victims' Services at (717) 265-8735 or via email at [nnovotnygo@pa.gov](mailto:nnovotnygo@pa.gov). Your feedback is extremely valuable to us. Thank you, in advance, for your participation.

**Timothy Servinsky, Jr.**  
Project Manager  
Center for Survey Research  
Penn State Harrisburg  
777 West Harrisburg Pike  
Middletown, PA 17057  
[717-948-4312](tel:717-948-4312) (p)  
[717-948-6306](tel:717-948-6306) (f)  
<http://csr.hbg.psu.edu>

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## APPENDIX C – INVITATION EMAIL TEXT

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TO: Victim Service Providers  
FROM: Penn State Center for Survey Research  
SUBJECT: VSAC Strategic Planning Initiative

Dear {FIRSTNAME},

You should have recently received an email about an important initiative underway designed to collect information from victim service providers throughout Pennsylvania that receive funding from PCCD. The Center for Survey Research at Penn State Harrisburg is assisting PCCD's Statewide Victims' Services Advisory Committee (VSAC) with this effort.

The information that you provide will assist VSAC in formulating a strategy to more effectively deliver services to Pennsylvania's victims of crime. **This is especially critical given the fact that Pennsylvania has received a significant increase in federal VOCA funding for victim services.**

We recognize that all of you are extremely busy with your daily responsibilities managing programs that serve victims of crime. The 30-40 minutes that you spend completing this survey will be an investment of your time that will benefit the entire field of victim services in Pennsylvania.

**The survey can be accessed at the following link:**  
**{SURVEYURL}**

Your response is appreciated no later than **Friday, August 14, 2015.**

If you have any questions about this survey or the initiative, please do not hesitate to contact Ms. Natalie Novotny-Goles of the PCCD Office of Victims' Services at (717) 265-8735 or via email at [nnovotnygo@pa.gov](mailto:nnovotnygo@pa.gov).

If you have any technical problems with the survey itself, please contact Tim Servinsky at the Center for Survey Research at Penn State Harrisburg at [tservinsky@psu.edu](mailto:tservinsky@psu.edu) or 717-948-4312.

Your feedback is extremely valuable to us. Thank you, in advance, for your participation.

**Timothy Servinsky, Jr.**  
Project Manager  
Center for Survey Research  
Penn State Harrisburg  
777 West Harrisburg Pike  
Middletown, PA 17057  
717-948-4312 (p)  
717-948-6306 (f)  
<http://csr.hbg.psu.edu>

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**APPENDIX D – REMINDER EMAIL TEXT**

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TO: Victim Service Providers (Survey Non-Respondents Only)  
FROM: Penn State Center for Survey Research  
SUBJECT: VSAC Strategic Planning Reminder

Dear {FIRSTNAME},

Recently, we sent you an email about an important initiative underway designed to collect information from victim service providers throughout Pennsylvania that receive funding from PCCD. As of today, we have not received your completed response.

**Your response is appreciated no later than Friday, August 14, 2015.**

The information that you provide will assist PCCD's Statewide Victims' Services Advisory Committee (VSAC) in formulating a strategy to more effectively deliver services to Pennsylvania's victims of crime. **This is especially critical given the fact that Pennsylvania has received a significant increase in federal VOCA funding for victim services.**

**The survey can be accessed at the following link:  
{SURVEYURL}**

We recognize that all of you are extremely busy with your daily responsibilities managing programs that serve victims of crime. The 30-40 minutes that you spend completing this survey will be an investment of your time that will benefit the entire field of victim services in Pennsylvania.

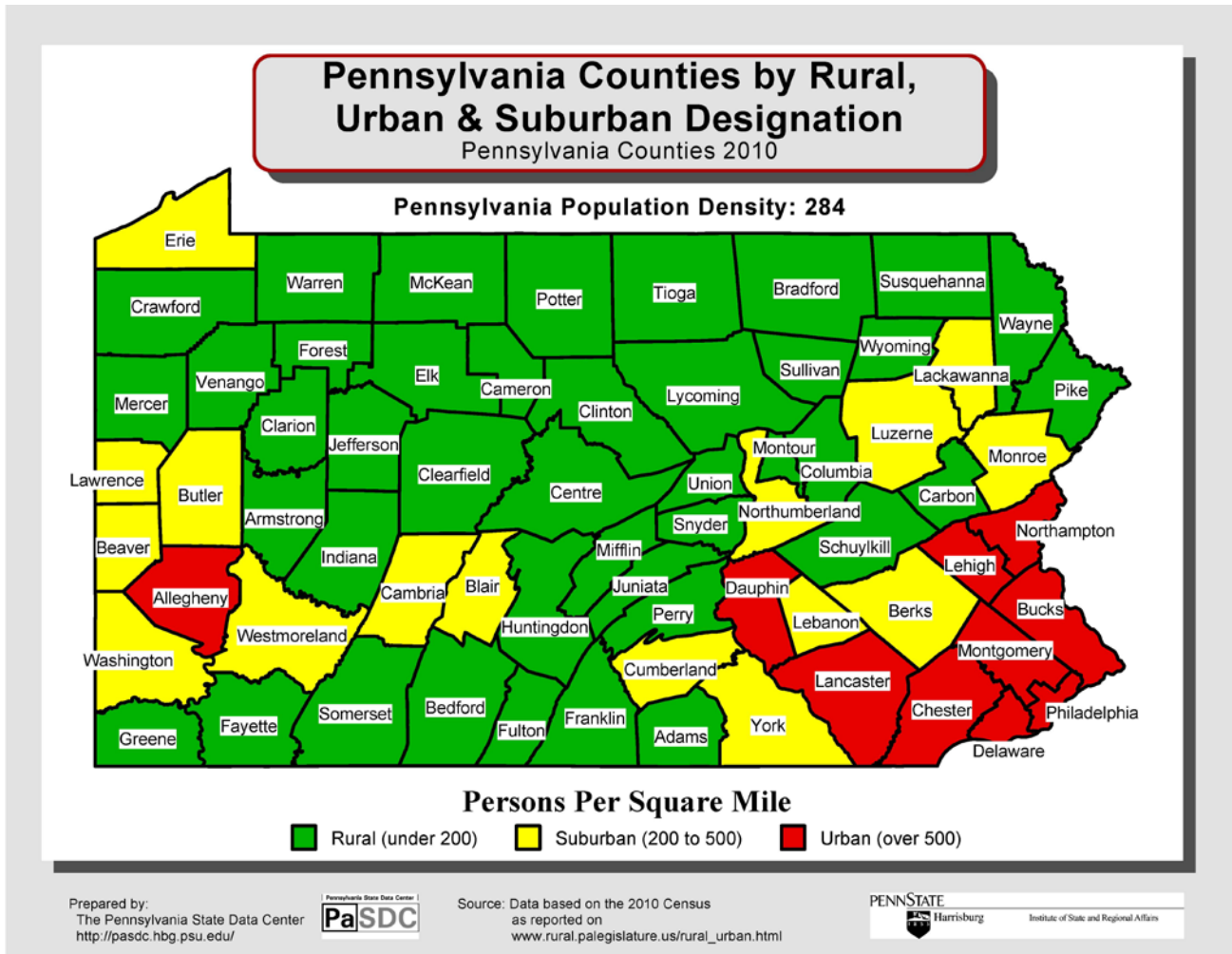
If you have any questions about this survey or the initiative, please do not hesitate to contact Ms. Natalie Novotny-Goles of the PCCD Office of Victims' Services at (717) 265-8735 or via email at [nnovotnygo@pa.gov](mailto:nnovotnygo@pa.gov).

If you have any technical problems with the survey itself, please contact Tim Servinsky at the Center for Survey Research at Penn State Harrisburg at [tservinsky@psu.edu](mailto:tservinsky@psu.edu) or 717-948-4312.

Your feedback is extremely valuable to us. Thank you, in advance, for your participation.

**Timothy Servinsky, Jr.**  
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**APPENDIX E – PA COUNTIES BY RURAL/URBAN/SUBURBAN DESIGNATION**



**APPENDIX F – PROPORTIONS OF CLIENTS REPORTED**

Proportions of Clients by Age								
	All VSOs (n= 62)	Community-based (n= 58)	System-based (n= 4)		Rural counties only (n= 18)	Suburban counties only (n= 12)	Urban counties only (n= 25)	Mix of rural, suburban, and urban counties (n= 7)
0 to 11 years old	12.2%	13.0%	1.8%		8.5%	19.7%	11.6%	11.6%
12 to 17 years old	11.3%	10.7%	20.0%		8.1%	16.3%	11.7%	9.3%
18 to 24 years old	16.0%	15.9%	17.5%		16.8%	14.1%	16.8%	14.2%
25 to 59 years old	52.2%	53.1%	39.5%		55.5%	42.4%	53.4%	56.3%
60 years of age or older	5.0%	4.6%	11.3%		6.1%	2.8%	5.4%	4.3%
Unknown	3.3%	2.8%	10.0%		5.0%	4.6%	1.2%	4.3%
Unknown Total	48.8%	15.9%	92.8%		62.8%	52.3%	35.0%	25.6%

Proportions of Clients by Sex								
	All VSOs (n= 63)	Community-based (n= 59)	System-based (n= 4)		Rural counties only (n= 19)	Suburban counties only (n= 12)	Urban counties only (n= 24)	Mix of rural, suburban, and urban counties (n= 8)
Female	77.6%	79.4%	51.3%		78.0%	82.8%	73.9%	80.0%
Male	20.6%	18.7%	48.8%		18.7%	17.2%	25.2%	16.5%
Transgendered	0.1%	0.1%	0.0%		0.1%	0.0%	0.2%	0.0%
Unknown	1.6%	1.8%	0.0%		3.2%	0.0%	0.6%	3.5%
Unknown Total	45.2%	12.2%	91.5%		58.2%	47.8%	35.5%	14.2%

Proportions of Clients by Race/Ethnicity								
	All VSOs (n= 67)	Community-based (n= 59)	System-based (n= 8)		Rural counties only (n= 23)	Suburban counties only (n= 12)	Urban counties only (n= 24)	Mix of rural, suburban, and urban counties (n= 8)
Hispanic/Latino	6.7%	6.9%	5.5%		2.3%	10.1%	9.5%	5.6%
White/Non-Latino	62.7%	60.8%	76.9%		83.0%	63.9%	40.7%	68.8%
Black - African American	18.5%	19.2%	13.0%		4.2%	10.7%	38.7%	10.5%
Other race	3.9%	4.3%	1.0%		1.5%	5.2%	5.6%	3.8%
Unknown	8.2%	8.8%	3.6%		9.0%	10.1%	5.5%	11.4%
Asian	1.2%	1.2%	1.0%		0.5%	0.7%	2.3%	0.8%
Native Hawaiian or Pacific Islander	0.2%	0.2%	0.0%		0.0%	0.1%	0.2%	0.4%
American Indian or Native Alaskan	0.2%	0.2%	0.0%		0.1%	0.2%	0.2%	0.6%
Other race	2.3%	2.7%	0.0%		0.9%	4.2%	2.9%	2.0%
Unknown	46.1%	17.3%	84.3%		53.5%	55.1%	37.0%	21.3%



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**APPENDIX G – TOP VSO NEEDS**

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<b>OPEN1: What are the top three needs you would address if additional funding were available to your agency? All mentions</b>		
	<b>Frequency</b>	<b>Percent</b>
<b>Additional staff</b>	67	20.4
<b>Increased salaries for staff</b>	23	7.0
<b>Community education/outreach</b>	22	6.7
<b>Technology/computer upgrades</b>	9	2.7
<b>Transportation</b>	9	2.7
<b>Training</b>	8	2.4
<b>Funding</b>	7	2.1
<b>Office space</b>	5	1.5
<b>Facility updates</b>	4	1.2
<b>Child care</b>	3	0.9
<b>Children's counselor/therapist</b>	3	0.9
<b>Civil legal representation</b>	2	0.6
<b>Direct service staff</b>	2	0.6
<b>Equipment</b>	2	0.6
<b>Expand services</b>	2	0.6
<b>Housing</b>	2	0.6
<b>Marketing</b>	2	0.6
<b>Office relocation</b>	2	0.6
<b>Tablets</b>	2	0.6
<b>Web design/website</b>	2	0.6
<b>Ability to reach more victims</b>	1	.3
<b>Ability to reach more victims with technology</b>	1	.3
<b>Accompaniment for child sexual abuse victims to medical exams</b>	1	.3
<b>Adding responsibilities that may include responding to certain types of crimes by going to scene</b>	1	0.3
<b>Additional attorneys to provide custody representation</b>	1	0.3
<b>Additional hardware</b>	1	0.3
<b>Additional mobile advocacy efforts</b>	1	0.3
<b>Additional staff, space, and equipment</b>	1	0.3
<b>Adequately staffing a 24 hour service for 3 counties</b>	1	0.3
<b>Advertising services within the community</b>	1	0.3
<b>Affordable housing</b>	1	0.3
<b>Affordable, safe, permanent housing</b>	1	0.3
<b>Agency vehicle</b>	1	0.3

Assistance with legal aid	1	0.3
Awareness/marketing	1	0.3
Be able to replace outdated items before they stop working	1	0.3
Benefits for staff	1	0.3
Better community education	1	0.3
Better technology usage	1	0.3
Bilingual staffing	1	0.3
Build a donor list to include individuals with the financial resources to support the agency via donations	1	0.3
By collaboration and cross-training to complete early outreach and seamless referral to victims of all crimes	1	0.3
Capital building needs	1	0.3
Case management system	1	0.3
Cellphone to reach out to victims after hours	1	0.3
Child/family advocacy	1	0.3
Children's services	1	0.3
Civil legal assistance for all crime victims	1	0.3
Client assistance - transportation, material assistance	1	0.3
Community outreach	1	0.3
Community VSO collaborations	1	0.3
Comprehensive center with housing-first approach	1	0.3
Copy machine	1	0.3
Counseling for victims	1	0.3
Counseling services/support groups for child sexual abuse victims available on-site	1	0.3
Data tracking system	1	0.3
Database capable of handling large numbers of clients	1	0.3
Dedicated intake staff	1	0.3
Develop brochures	1	0.3
Development of a CAC	1	0.3
Economic justice empowerment	1	0.3
Emergency fund for placing victims in need of emergency shelter	1	0.3
Emergency resources - housing	1	0.3
Enhance primary prevention	1	0.3
Enhance training for staff to include more evidence-based, trauma-focused therapies	1	0.3
Ensure competitive wages and benefits for all employees	1	0.3
Evaluation for my data	1	0.3
Expand center in current area and add sexual assault/rape medical center	1	0.3
Expand civil legal representation remedies for survivors/victims	1	0.3

<b>Expand outreach/promotion of our services</b>	1	0.3
<b>Expanded hours of operation</b>	1	0.3
<b>Expanding to underserved populations</b>	1	0.3
<b>Expansion of child abuse awareness and prevention education to the community</b>	1	0.3
<b>Expansion of on-site victim's services</b>	1	0.3
<b>Experienced mental health staff</b>	1	0.3
<b>Financial literacy/self-sufficiency programs</b>	1	0.3
<b>Free evidence-based educational materials</b>	1	0.3
<b>Funding for more staff with adequate pay</b>	1	0.3
<b>Funding for staff member to perform on-call direct service as needed</b>	1	0.3
<b>Funds to develop technology to improve service provision</b>	1	0.3
<b>Having a CLR program</b>	1	0.3
<b>Health insurance</b>	1	0.3
<b>Housing for victims</b>	1	0.3
<b>Housing needs for clients</b>	1	0.3
<b>Human trafficking services</b>	1	0.3
<b>Implementation of a coordinated community response to domestic violence</b>	1	0.3
<b>Improve outcomes measurements</b>	1	0.3
<b>Improve public awareness</b>	1	0.3
<b>Improve social media outreach</b>	1	0.3
<b>Improve staff retention</b>	1	0.3
<b>Increase outreach efforts</b>	1	0.3
<b>Information and referral</b>	1	0.3
<b>IT/social media/web management</b>	1	0.3
<b>Juvenile treatment</b>	1	0.3
<b>Legal</b>	1	0.3
<b>Legal advocacy for victims</b>	1	0.3
<b>Legal services</b>	1	0.3
<b>Less paperwork</b>	1	0.3
<b>Long-term strategic planning</b>	1	0.3
<b>Major repairs to buildings</b>	1	0.3
<b>Making victims services a priority within a local county entity</b>	1	0.3
<b>Marketing and PR</b>	1	0.3
<b>Marketing personnel</b>	1	0.3
<b>Marketing the agency services to increase awareness and access</b>	1	0.3
<b>Medical advocate</b>	1	0.3
<b>Meeting accessibility needs of victims to ensure awareness of and capability to engage in justice system</b>	1	0.3

<b>Money toward civil legal representation</b>	1	0.3
<b>More LGBT advocates</b>	1	0.3
<b>More privacy in the victim/witness office</b>	1	0.3
<b>Multi-language programs and materials</b>	1	0.3
<b>Network computer system</b>	1	0.3
<b>New building</b>	1	0.3
<b>New computer / laptop</b>	1	0.3
<b>New copier</b>	1	0.3
<b>Office accessibility</b>	1	0.3
<b>Online process to compile stats</b>	1	0.3
<b>Outreach with social media</b>	1	0.3
<b>Part-time Hispanic personnel</b>	1	0.3
<b>People-finding software</b>	1	0.3
<b>Prevention education</b>	1	0.3
<b>Professional consultant - development (part-time or contractual)</b>	1	0.3
<b>Program initiatives</b>	1	0.3
<b>Promotion of victims' services awareness</b>	1	0.3
<b>Provide therapeutic intervention</b>	1	0.3
<b>Public awareness funds</b>	1	0.3
<b>Public awareness of victims' rights/services/VSOs</b>	1	0.3
<b>Publicity</b>	1	0.3
<b>Reach more victims</b>	1	0.3
<b>Recruit board individuals with expertise in fundraising and fund development to join the board of directors</b>	1	0.3
<b>Reduce overtime</b>	1	0.3
<b>Reduce waiting lists for services</b>	1	0.3
<b>Reimburse transportation fees</b>	1	0.3
<b>Research and implementation of innovative housing solutions for survivors/victims</b>	1	0.3
<b>Resource development</b>	1	0.3
<b>Resources for families, i.e., transportation</b>	1	0.3
<b>Restitution issues</b>	1	0.3
<b>Security/technology upgrades</b>	1	0.3
<b>Self-empowerment education for victims</b>	1	0.3
<b>Services targeted for college campuses</b>	1	0.3
<b>Services to non-offending caregivers</b>	1	0.3
<b>Smart phones</b>	1	0.3
<b>Social media management</b>	1	0.3
<b>Specialized unit of law enforcement</b>	1	0.3
<b>Staff attorney</b>	1	0.3

Staff benefits	1	0.3
Staff for social media	1	0.3
Staff salaries and benefits	1	0.3
Staff training	1	0.3
Staffing (diverse, bilingual, positioned across the state)	1	0.3
Staffing (legal, prevention education, counseling)	1	0.3
Stop cuts in pay when grant money runs out	1	0.3
Succession planning	1	0.3
Supplies and advertising	1	0.3
Texting software	1	0.3
Therapist	1	0.3
Therapy dog	1	0.3
Tracking software	1	0.3
Training on and services to children with problematic sexualized behaviors	1	0.3
Transitional housing	1	0.3
Transportation - job training, daycare, job, etc.	1	0.3
Trauma informed/certified therapist	1	0.3
Trauma training	1	0.3
Update shelter kitchen	1	0.3
Upgrade printer/copier/fax machine	1	0.3
VCAP	1	0.3
Victim services	1	0.3
Volunteer management	1	0.3
Volunteer recruitment and training	1	0.3
Waiting area for victims/witnesses during trial	1	0.3
Web site and social media/marketing management	1	0.3
<b>Total</b>	<b>328</b>	<b>100</b>