

# INFONET USER'S MANUAL

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WASHINGTON STATE'S  
CRIME VICTIM SERVICES  
DATABASE SYSTEM

# TABLE OF CONTENTS

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<b>TABLE OF CONTENTS .....</b>	<b>I</b>
<b>1. INFONET OVERVIEW .....</b>	<b>1-1</b>
GETTING STARTED: USER SET UP FORM .....	1-2
ADMINISTRATIVE USERS VS. NON-ADMINISTRATIVE USERS .....	1-2
CONFIRMATION E-MAIL .....	1-3
LOGGING INTO INFONET .....	1-3
<i>What if I Forget My Password?</i> .....	1-5
INFONET BASICS .....	1-6
INTERFACES .....	1-9
<i>Sexual Assault Interface</i> .....	1-10
<i>Domestic Violence Interface</i> .....	1-11
<i>Victims of Crime Interface</i> .....	1-12
<i>Victim Witness Assistance Units Interface</i> .....	1-13
<b>2. ADMINISTRATIVE INTERFACE .....</b>	<b>2-1</b>
AGENCY INFORMATION .....	2-2
STAFF INFORMATION .....	2-4
<i>Deleting Accidental Duplicates</i> .....	2-6
<i>Adding and removing staff names</i> .....	2-7
<i>Staff Allocation</i> .....	2-8
<i>Staff Training</i> .....	2-9
FUNDING FOR STAFF .....	2-10
CONTRACT/GRANT INFORMATION .....	2-11
<i>Hiding and Showing Information</i> .....	2-14
USER ADMINISTRATION .....	2-15
<i>Setting Up A New User Account</i> .....	2-15
<i>Why did my screen just blink?</i> .....	2-16
<i>Changing a User Password or Other Information</i> .....	2-16
<i>Deleting A User Account</i> .....	2-16
MANAGE CLIENT RECORDS .....	2-18
<i>Editing a Client ID number</i> .....	2-20
<i>Deleting Clients and Cases</i> .....	2-22
<i>Important Warning About Deleting Clients and Cases</i> .....	2-22
<b>3. CLIENTS AND CASES .....</b>	<b>3-1</b>
CLIENTS .....	3-1
CASES .....	3-3
REQUIRED DATA .....	3-4
UNSPECIFIED, NOT REPORTED, AND NOT APPLICABLE .....	3-6
<b>4. CLIENT INTAKES .....</b>	<b>4-1</b>
SEXUAL ASSAULT CLIENT INTAKES .....	4-2

DOMESTIC VIOLENCE CLIENT INTAKES .....	4-3
VICTIMS OF CRIME CLIENT INTAKES .....	4-4
VICTIM WITNESS ASSISTANCE UNIT CLIENT INTAKES.....	4-5
DEMOGRAPHICS .....	4-6
<i>Required Data</i> .....	4-6
<i>Error Message: Required Field</i> .....	4-9
<i>Optional Data</i> .....	4-10
<i>Closing a Case</i> .....	4-13
<i>Reopening a Closed Case</i> .....	4-13
INCOME .....	4-14
REFERRALS .....	4-16
OFFENDERS .....	4-18
OTHER ISSUES REPORTED: SEXUAL ASSAULT INTERFACE.....	4-22
OTHER ISSUES: DOMESTIC VIOLENCE INTERFACE.....	4-24
SERVED.....	4-25
SECONDARY VICTIMS .....	4-26
CHILDREN AND YOUTH.....	4-30
SEARCHING FOR AN EXISTING CLIENT OR CASE .....	4-34
OPENING AN EXISTING CASE.....	4-35
STARTING A NEW CASE FOR AN EXISTING CLIENT .....	4-36
<b>5. MEDICAL AND CRIMINAL JUSTICE SYSTEM .....</b>	<b>5-1</b>
MEDICAL .....	5-2
POLICE.....	5-4
PROSECUTION.....	5-6
PROTECTION ORDERS.....	5-10
<b>6. DIRECT CLIENT SERVICES.....</b>	<b>6-1</b>
DOMESTIC VIOLENCE DIRECT CLIENT SERVICES .....	6-2
ENTERING EMERGENCY DV SHELTER STAYS .....	6-6
<i>Individuals with Multiple Shelter Stays</i> .....	6-12
<i>Children In Shelter</i> .....	6-13
SEXUAL ASSAULT – CSAPS AND SPECIALIZED SERVICES .....	6-18
SEXUAL ASSAULT – NATIVE AMERICAN AND MARGINALIZED SERVICES .....	6-20
VICTIMS OF CRIME DIRECT SERVICES .....	6-22
VICTIM WITNESS ASSISTANCE UNITS DIRECT SERVICES .....	6-24
<b>7. ADDITIONAL SERVICES.....</b>	<b>7-1</b>
HOTLINE CALLS/INFORMATION & REFERRAL SERVICES .....	7-2
<i>Domestic Violence Hotline Section</i> .....	7-2
<i>Entering Batches of Hotline Calls</i> .....	7-6
<i>Unmet Requests for Emergency DV Shelter, and Batched Hotline Calls</i> .....	7-7
<i>Sexual Assault Crisis Intervention/Information and Referral</i> .....	7-9
<i>Victims of Crime: Hotline Calls/Information &amp; Referral Services</i> .....	7-13
<i>Victim Witness Assistance Units: Hotline Calls</i> .....	7-18
STOP GRANT COORDINATED COMMUNITY RESPONSE.....	7-22
STOP GRANT PRESENTATIONS, PUBLICATIONS, AND TRAININGS .....	7-24
<i>Presentations</i> .....	7-24
<i>STOP Funded Trainings—Attendees</i> .....	7-26
<i>STOP Funded Trainings – Topic Areas</i> .....	7-27

<i>Publications</i> .....	7-28
SEXUAL ASSAULT PREVENTION ACTIVITIES .....	7-30
<i>Building Skills</i> .....	7-30
<i>Community Development</i> .....	7-33
SYSTEMS COORDINATION .....	7-35
COMMUNITY ORGANIZING AND RESPONDING .....	7-38
<i>Activity and Participant Information</i> .....	7-38
<i>Year end report</i> .....	7-41
SASP NARRATIVE .....	7-42
DSHS SHELTER COMMUNITY EDUCATION .....	7-43
VICTIMS OF CRIME OUTREACH AND AWARENESS .....	7-45
DSHS SHELTER END OF YEAR REPORT .....	7-47
<i>Time Period For Reporting</i> .....	7-47
<i>Outcomes Data</i> .....	7-48
<i>Volunteer Information</i> .....	7-50
<i>Narrative questions</i> .....	7-52
STOP GRANT NARRATIVE QUESTIONS .....	7-54
VICTIM WITNESS NARRATIVE .....	7-55
<b>8. REPORTS</b> .....	<b>8-1</b>
ENTERING THE BASIC REPORTS INTERFACE .....	8-1
<i>Page Contains Both Secure and Nonsecure Items</i> .....	8-2
NAVIGATING THE REPORTS SCREEN .....	8-3
TYPES OF REPORTS .....	8-4
<i>Client Intake Summary</i> .....	8-4
<i>Client Service Summary</i> .....	8-5
<i>Clients Currently in Domestic violence Shelter Report</i> .....	8-6
<i>Crime Victim Service Center Report:</i> .....	8-7
<i>DSHS End of year Report:</i> .....	8-8
<i>DSHS Shelter Report:</i> .....	8-9
<i>DVLA Report:</i> .....	8-10
<i>Hotline Summary Report</i> .....	8-11
<i>Individual Domestic violence Shelter Entries report</i> .....	8-12
<i>Secondary Victims and Services summary</i> .....	8-13
<i>Sexual Assault Community organizing and Responding report</i> .....	8-14
<i>Sexual Assault Community organizing and Responding YEAR END report</i> .....	8-15
<i>Sexual Assault Community Responding Report:</i> .....	8-16
<i>Sexual Assault Demographics Report</i> .....	8-17
<i>Sexual Assault Field Report</i> .....	8-18
<i>Sexual Assault Prevention Summary</i> .....	8-19
<i>Sexual Assault Service Summary</i> .....	8-20
<i>Sexual Assault System Coordination Report</i> .....	8-21
<i>STOP Grant Report</i> .....	8-22
PARAMETER REPORTS .....	8-24
• <i>Case Breakdown</i> .....	8-24
• <i>Rollup for Clients</i> .....	8-24
• <i>Services for Clients</i> .....	8-24
• <i>Service Details Report</i> .....	8-24
REPORT FORMAT .....	8-26
REPORT TIME PERIOD: .....	8-27



VIEWING YOUR REPORT .....	8-27
<i>Reports in Adobe</i> .....	8-28
<i>Reports in HTML</i> .....	8-30
<i>Reports in Word</i> .....	8-31
<i>Reports</i> .....	8-33
ANATOMY OF A REPORT: A FEW USEFUL FEATURES .....	8-36
ADMINISTRATIVE LEVEL REPORTS.....	8-37
<i>Staff Report</i> .....	8-38
<i>Staff Training Report</i> .....	8-38
<i>Staff Services Report</i> .....	8-39
<i>Custom Reports</i> .....	8-41
FREQUENTLY ASKED QUESTIONS ABOUT REPORTS .....	8-42
<b>9. TROUBLESHOOTING .....</b>	<b>9-1</b>
CONTACT INFORMATION.....	9-1
<i>Technology, System Use and Navigation Questions:</i> .....	9-1
PROGRAM AND POLICY QUESTIONS.....	9-1
I CAN'T LOG INTO INFO.NET .....	9-2
FINDING THE INFO.NET WEBSITE .....	9-2
FORTRESS NOT FOUND .....	9-3
COMMON LOG-IN MISTAKES .....	9-4
<i>Selecting your Agency Name</i> .....	9-4
<i>Selecting the correct program type</i> .....	9-4
<i>Enter your User ID and password in the correct order</i> .....	9-4
<i>Enter your password in the correct case</i> .....	9-4
TOO MUCH SCROLLING?.....	9-5
PREVENTING RUNTIME ERRORS .....	9-7
<b>10. INDEX.....</b>	<b>10-1</b>
<b>11. SERVICE DEFINITIONS .....</b>	<b>11-1</b>
SEXUAL ASSAULT CORE SERVICES.....	11-2
<i>INFORMATION AND REFERRAL</i> .....	11-3
<i>CRISIS INTERVENTION</i> .....	11-4
<i>GENERAL ADVOCACY</i> .....	11-5
<i>MEDICAL ADVOCACY</i> .....	11-6
<i>LEGAL ADVOCACY</i> .....	11-7
<i>SYSTEM COORDINATION</i> .....	11-8
<i>PREVENTION: SOCIAL CHANGE</i> .....	11-9
<i>PREVENTION: INFORMATION AND AWARENESS</i> .....	11-10
<i>PREVENTION: BUILDING SKILLS</i> .....	11-11
SEXUAL ASSAULT SPECIALIZED SERVICES.....	11-12
<i>SUPPORT GROUP</i> .....	11-13
<i>THERAPY</i> .....	11-14
<i>Social Work for Medical Evaluations of Children &amp; Vulnerable Adults</i> .....	11-15
SEXUAL ASSAULT SERVICES FOR NATIVE AMERICAN/MARGINALIZED COMMUNITIES .....	11-16
<i>Community Responding</i> .....	11-17
<i>Community Organizing</i> .....	11-18
<i>Therapy</i> .....	11-19
DOMESTIC VIOLENCE SERVICE DEFINITIONS .....	11-20
<i>Advocacy Based Counseling</i> .....	11-20

<i>Child Care</i> .....	11-20
<i>Crime Victim Compensation (CVC) Assistance</i> .....	11-20
<i>Crisis Counseling/Intervention</i> .....	11-20
<i>Emergency Domestic Violence Shelter: DV Shelter Home</i> .....	11-21
<i>Emergency Domestic Violence Shelter: Domestic Violence Safe Home</i> .....	11-21
<i>Emergency Domestic Violence Shelter: Hotel/Motel</i> .....	11-21
<i>Emergency Financial Assistance</i> .....	11-21
<i>Employment Assistance</i> .....	11-21
<i>Housing Assistance</i> .....	11-21
<i>Legal Advocacy</i> .....	11-22
<i>Medical Advocacy</i> .....	11-22
<i>Other</i> .....	11-22
<i>Support Group</i> .....	11-22
<i>TANF/Welfare Advocacy</i> .....	11-22
<i>Transportation Assistance</i> .....	11-22
<b>VICTIMS OF CRIME SERVICE STANDARDS AND DEFINITIONS</b> .....	11-23
<i>Crime Victim Service Center</i> .....	11-30
<i>Community Organizing</i> .....	11-32
<i>Community Outreach</i> .....	11-33
<i>Community Responding</i> .....	11-34
<i>Crisis Intervention</i> .....	11-35
<i>Emergency Financial Assistance</i> .....	11-36
<i>Advocacy</i> .....	11-37
<i>Information and Referral</i> .....	11-38
<i>Outreach and Awareness</i> .....	11-39
<i>Legal Advocacy</i> .....	11-40
<i>Medical Advocacy</i> .....	11-41
<i>Support Group</i> .....	11-42
<i>Therapy</i> .....	11-43
<i>System Coordination</i> .....	11-44
<i>Prevention</i> .....	11-45
<b>12. SAMPLE FORMS</b> .....	<b>1</b>
EXAMPLE CLIENT INTAKE FORM.....	12-2
EXAMPLE SERVICE SUMMARY FORM.....	12-7
BATCH HOTLINE CALL FORM EXAMPLE #1.....	12-8

# 1. INFONET OVERVIEW

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InfoNet is a data collection and reporting system for crime victim service providers in Washington State. InfoNet is designed to ease data collection, improve the quality and quantity of victim service data available in Washington State, and provide an integrated means of data collection for victim services providers in Washington State. The system incorporates Internet capabilities to generate reports from a central database.

A database system is at the heart of InfoNet. It allows program sites to report three types of data: 1) client demographic and services data; 2) data on program activities, such as presentations and community events; and, 3) administrative information.

The database facilitates data entry for local programs by using drop down menus, check boxes, and automatic totals calculation wherever possible. The database is designed to ensure program sites can easily comply with all Federal, state and local data reporting guidelines. The InfoNet database tracks clients until a case is closed, or until the program no longer has contact with the client. Finally, the database can be customized by local agencies to collect other data they may find useful for their particular planning and development needs.

Security for this information network is important. Therefore, the network includes three types of security. First, any information that could identify a client will remain at the local program site. Second, the InfoNet servers are password protected. Finally, the InfoNet servers are protected by a firewall. These three types of security provide a secure system that presents less risk than most program sites currently undertake in storing client-level hard copy data.

InfoNet is a web application. A web application is a program accessed with a web browser over the Internet. Web applications are convenient and popular because they allow programs to be used by a variety of different users without any of those users having to install or update each user's software.

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## GETTING STARTED: USER SET UP FORM

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To get started, each agency must first set up at least one InfoNet User account. To set up an account, simply e-mail the information from the form to the InfoNet State Administrator indicated. **\*NEW:** Agencies may also give their information to their agency administrative user, who can set up their account. Administrative users, please see the “User Administration” section for more details. InfoNet Users may

**PLEASE PRINT CLEARLY.** Confirmation of your account will be sent via e-mail to the e-mail address listed below. You may set up additional Users for your agency at any time by contacting Mary Baldwin at mary.baldwin@commerce.wa.gov.

Agency: \_\_\_\_\_

User ID: \_\_\_\_\_

Password: \_\_\_\_\_

**This User ID will be used by more than one staff member:**    ☐ Yes    ☐ No

Even if this User ID is being used for more than one person at your agency, please specify a contact name and e-mail address for the use of this account.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

This User will need access to the following interfaces (check as many as apply):

- ☐ Domestic Violence
- ☐ Sexual Assault
- ☐ Victims of Crime
- ☐ Victim Witness Assistance Units
- ☐ Administrative Utility

select their own User ID and Password.

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## ADMINISTRATIVE USERS VS. NON-ADMINISTRATIVE USERS

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There are two levels of entry into InfoNet. The first is what is called an **agency administrator**. This is a person who is familiar with staff and funding for the program/agency that is using InfoNet. Agency administrators have access to the Administrative Utility, where information may be added such as new staff or volunteers, removal of terminated staff or volunteers, adding information about staff trainings, new contracts and grants, staff salary allocation, and other administrative information. **New:** Agency administrators may now set up new password accounts and remove old password accounts for Agency Users using the User Administration section, and via the Manage Client Records section, may also change client ID numbers or delete duplicate cases or client intakes. To create a new Agency Administrator

account, however, or to upgrade an existing Agency Administrator account, you will still need to contact the InfoNet State Administrator.

The second level of entry is an **agency user** password. This level of entry allows users to enter information only on client demographics, services provided, activities and presentations, and other information about the level of service that an agency provides. Agency users are not given access to funding or staff information for the agency, and do not have access to the User Administration or Manage Client Records features.

Smaller agencies may find that the same individuals will be responsible for both administrative and data entry tasks, which is perfectly appropriate. If the InfoNet users at your agency will be entering staff information and client information, you may find it convenient to have all of your InfoNet accounts be set up at the “Agency Administrator” level. Simply check the “Administrative Utility” box when setting up an InfoNet account to set up a user as an Agency Administrator.

Larger agencies may differentiate between staff or volunteers with access to personnel and funding information and staff or volunteers without access to personnel and funding information. This is also perfectly appropriate. In that situation, some users, such as an Executive Director or program director, can be set up as Agency Administrators, and other users can be set up as simply Agency Users. When filling out the User Set Up form, simply check “Administrative Utility” for admin users and don’t check it for non-admin users. Keep in mind it is the **agency’s** responsibility to determine user permissions of their own staff.

The InfoNet State Administrator will set up accounts requested by an InfoNet eligible agency, and will set up as many accounts as your agency needs. Once an agency administrator account is established, that individual may set up additional user accounts. Some agencies find it more convenient to share a password between several staff members, and other agencies may find it more convenient to set up individual accounts for each staff or volunteer. There is no limit on the number of InfoNet accounts your agency may activate.

Security for the passwords is your agency’s responsibility; please keep the passwords secure. If at any time you would like to change one of your agency’s passwords, or if you feel any of the passwords have become insecure for any reason, you may change the passwords or de-activate any of your agency’s accounts by contacting your agency’s administrative user(s) or the InfoNet State Administrator Mary Baldwinat OCVA via e-mail at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov). It’s best practice to disable accounts of staff that have left the agency, for example.

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### CONFIRMATION E-MAIL

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Once you have submitted the information on the User Set Up form to the InfoNet State Administrator, she will activate your account. When an account has been activated, the new user will receive a confirmation e-mail that includes the InfoNet website, and account information as it was set up. Once you have received your confirmation e-mail, you are ready to enter InfoNet. You can access the InfoNet website provided to you in the confirmation e-mail.

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### LOGGING INTO INFONET

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To navigate to the InfoNet website, simply click on the link within the e-mail, or type the web address into your web browser’s address bar, just as you would any other website. While InfoNet is an application, it is

web based, meaning it is found on a website, and requires Internet Access to use. The InfoNet website is <https://fortress.wa.gov/cted/ocvainfonet/>.

You will see the following screen:

Washington State InfoNet System

Agency Name	OCVA Administrator
Program Type	Administrative Utility
User Name	
Password	

Enter

Select your **Agency Name** from the pull down menu. You may also place your cursor in the Agency Name field and type the first letter of your agency name to select names beginning with that letter. Typing the starting letter again will select the next name in the list.

Select your **Program Type**. There are five options under Program Type: Sexual Assault, Domestic Violence, Victims of Crime, Victim Witness Assistance Units, and Administrative Utility.

Enter the **User Name** that was provided to you with your password.

Enter the **Password** issued to you by OCVA. Please keep in mind passwords are case sensitive, meaning if your password is in upper case letters, typing it into the system in lower case letters will produce an error message, such as the one shown below:

Washington State InfoNet System

Agency Name	OCVA Administrator
Program Type	Sexual Assault
User Name	nickyg
Password	

Enter

ENTERING THE WRONG AGENCY NAME, PROGRAM TYPE, USER NAME, OR PASSWORD WILL RESULT IN THE ERROR MESSAGE SHOWN HERE:

Invalid user name and/or agency and/or password.


After these fields have been entered, click the Enter button at the lower right hand side of your screen or hit return on your keyboard. If your information and password have been entered correctly, you will proceed into the InfoNet system.

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## INFONET BASICS

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A number of items are similar throughout InfoNet. Familiarizing yourself with the following symbols and icons will help you navigate InfoNet successfully!



Submit

The **Submit** button is one of the features you will probably use the most in InfoNet. It is used to save the information you enter. Submit buttons are always found at the bottom of the screen.




Clear / Add New Record

The **Clear/Add New Record** (or sometimes abbreviated just as the “Clear” button) is the button to hit if you are viewing an existing record and would like to enter a new one. This button won’t delete any saved work, but can delete work you haven’t saved, so when in doubt, hit the “Submit” button before beginning a new record.




Cancel

The **Cancel** button works similarly to the Clear button, although in forms with multiple pages (like the Client information sections) it will take you to the first page of your current form.



Next Page

The **Next Page** button does exactly that – takes you to the next page. This button will also submit any unsaved Client Intake information, and will issue you a Case number if one has not already been issued. Keep in mind, the Next button does NOT save Secondary Victim or Offender information – you must hit the “Add/Edit” buttons to save those types of records.



Find Client or Case

The **Find Client or Case** brings you to the search function that allows you to look up previously entered client intake information. This is useful when you’ve entered part of a client’s information and wish to come back and enter their service information or update their demographic information.



New Client or Case

**New Client or Case** allows you to enter new client intake forms. It is located at the top right of the Client Information screen.





Located throughout InfoNet, the magnifying glass is the InfoNet symbol for **View**. It is used to indicate that you may view more information on a record, and clicking on the magnifying glass will bring up the complete information on whatever item it is next to.

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Located throughout InfoNet, the red X is the InfoNet symbol for **Delete**. It is often found next to records that have been entered, and indicates that the record can be deleted if it was entered in error or is a duplication of another record.

Please note that deleting records is not something that should be done for outdated data. Older or “legacy” data is useful to the InfoNet system because, as time progresses, data that was entered in previous months or years can allow us to predict trends, measure how well we’re doing in comparison to other time periods, and lots of other interesting information. Please use the Delete function only for data that should not have been entered in the first place – in other words, to correct mistakes!



The blue disk symbol is found primarily in the Administrative Utility, and is another symbol for **Save**.

---



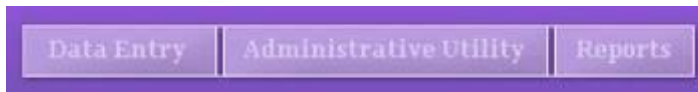
The red asterisk is a symbol that will appear next to required fields that have not been submitted. In addition to the red asterisk symbol next to the field, there will also be a message at the bottom of the screen indicating which required field was left blank. All required fields must be completed in order for a record to be saved.

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[domestic violence >](#) [victims of crime >](#) [administrative utility >](#)

On the top left corner of every screen in InfoNet, you will see **Interface Links**. These links allow you to quickly log out of your current Interface and log-in to another. Agencies that hold only one type of contract (Sexual Assault, Domestic Violence, Victims of Crime, or Victim Witness Assistance Units) will probably have no use for these links, but dual programs that have to switch from the Sexual Assault to the Domestic Violence interface or to Victims of Crime may use these links often.



In the title bar of each page of InfoNet is a **button bar** with buttons to direct you to Data Entry, Administrative Utility, and Reports. Not all InfoNet users will be authorized to use the Administrative Utility, but all will have access to Data Entry (the primary focus of this manual) and Reports.

---

welcome, Nicky Gleason   [logout >](#)

In the top right hand corner of your screen is a message showing that the system recognizes what agency or individual is logged into InfoNet and a link to quickly **logout** of the system. However, you can also logout of InfoNet by closing your web browser at any time.

**Please remember that logging out of the system does not automatically save your data.** Be sure to click the **Submit** button to save before logging out.

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## INTERFACES

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The word interface refers to how two different entities communicate with each other. In InfoNet, when we refer to interface, we're talking about what you, the user, see on the screen when you're entering information. InfoNet has four main interfaces. The first four interfaces are program specific. There is an interface for Sexual Assault programs, an interface for Domestic Violence programs, an interface for VOCA Crime Victim Service Center programs, and a new interface for Victim Witness Assistance Units. These are color coded to assist agencies that have more than one program type. The Sexual Assault interface is **teal** (for Sexual Assault Awareness) the Domestic Violence interface is **purple** (for Domestic Violence Awareness) and the Victims of Crime interface is **blue** (for Victim's Rights Awareness.) The new interface for Victim Witness Assistance Units is color coded **orange**.

These four interfaces are for **Data Entry**. The Data Entry area is where all of the information that your agency enters about victim demographics, services provided, presentations and community activities, and all other information upon which your agency is routinely required to report for state and federal reporting requirements.

In addition, each agency's administrative users have access to the Administrative area, which is color coded **green**. The Administrative Utility is not program specific. This is where information on staff and funding are located. The Administrative Utility allows administrators to enter and modify information on staff members that are funded with each contract or grant, and provides an area to record staff training. Information on the fund sources received from OCVA and DSHS are automatically entered for each agency by the State Administrator at the beginning of each contract year. In addition, administrators who choose to can enter information on other grant or funding sources received by your agency.

The three different program interfaces have many similarities. In the sections that follow, each program interface is outlined in detail; however, if your agency has several different program types, you will notice that there are many similarities between the screens.

## SEXUAL ASSAULT INTERFACE

domestic violence > victims of crime > administrative utility > victim witness assistance units > welcome, Test User  
logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
ICA Children's Administration

Submit New Client or Case Find Client or Case

**Client Intakes**

- Medical and Criminal Justice System
- CSAP and Specialized Services
- Native American and Marginalized Services
- Crisis Intervention/Info. & Referral
- Prevention Activities
- System Coordination
- Community Organizing & Responding

THE DIFFERENT SECTIONS OF THE SEXUAL ASSAULT INTERFACE CAN BE ACCESSED BY CLICKING ON THE LINKS ON THE LEFT HAND SIDE OF THE SCREEN.

THE ACTIVE PAGE IS HIGHLIGHTED IN TEAL.

Client ID: None Case ID: None

Demographics Referrals Other Issues Reported Served Secondary Victims

Year of Birth:  Please enter YEAR only, not a date of birth

Race:  Select an Item

Other Race:

Client Type:  Select an Item

Homeless:  Select an Item

Primary Offense Location:  Select an Item

Health Insurance:  Select an Item

Employment:  Select an Item

Education:  Select an Item

Marital Status:  Select an Item

Pregnant:  Select an Item

Refugee / Immigrant / Asylum Seeker:  Select an Item

Limited English Proficiency?:  Select an Item

If so, what is the client's primary language?:

Does the client have Veteran's Status?:  Select an Item

Did Crime Occur On A Reservation:  Select an Item

Chosen Advocate:  Select an Item

Case Closed ☐ Date Closed:  Reason Closed:  Select an Item

Next Submit Clear Cancel

The Sexual Assault Interface is teal (to correspond to the Sexual Assault awareness color.) It is made up of eight sections, as seen on the menu bar to the left hand side of the page:

- Client Intakes
- Medical and Criminal Justice System
- CSAP and Specialized Services
- Native American and Marginalized Services
- Crisis Intervention & Information/Referral
- Prevention Activities
- Systems Coordination
- Community Organizing & Responding

Each of the sections of the Sexual Assault Interface will be outlined in greater detail later in this manual.

## DOMESTIC VIOLENCE INTERFACE

victims of crime > sexual assault > administrative utility > victim witness assistance units > welcome, Test User  
logout >

### Domestic Violence (DV)

Data Entry | Administrative Utility | Reports

Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
CA Children's Administration

Submit New Client or Case Find Client or Case

Referrals Other Issues Offenders Served Animals

Year of Birth  Please enter YEAR only, not a date of birth

Race  Select an Item

Other Race  Select an Item

Client Type  Select an Item

Homeless  Select an Item

When Incident Occurred  Primary Offense Location  Select an Item

Client's County of Residence  Select an Item

Employment Status  Select an Item

Marital Status  Select an Item

Refugee / Immigrant / Asylum Seeker?  Select an Item

If so, what is the client's primary language?

Did Crime Occur On A Reservation?  Select an Item

Health Insurance  Select an Item

Education  Select an Item

Pregnant  Select an Item

Limited English Proficiency?  Select an Item

Does client have Veterans Status?  Select an Item

Chosen Advocate  Select an Item

Case Closed ☐ Date Closed  Reason Closed  Select an Item

Next Submit Clear Cancel

**Client Information**

Medical and Criminal Justice System

Direct Client Services

Hotline Calls/Info. & Referral Services

STOP GRANT Coordinated Community Response

STOP GRANT Presentations, Publications & Trainings

DSHS Shelter Community Education

DSHS Shelter End of Year Report

STOP Grant Narrative Questions

THE DIFFERENT SECTIONS OF THE DOMESTIC VIOLENCE INTERFACE CAN BE ACCESSED BY CLICKING ON THE LINKS ON THE LEFT HAND SIDE OF THE SCREEN.

THE ACTIVE PAGE IS HIGHLIGHTED IN PURPLE.

The Domestic Violence Interface is purple (in honor of Domestic Violence awareness.) It is made up of nine sections, as seen on the menu bar to the left hand side of the page:

- Client Information
- Medical and Criminal Justice System
- Direct Client Services
- Hotline Calls/Information & Referral Services
- Coordinated Community Response
- Presentations, Publications, and Conducting Trainings
- Community Education
- End of Year Report
- STOP Grant Narrative Questions

Each of the sections of the Domestic Violence Interface will be outlined in greater detail later in this manual.

## VICTIMS OF CRIME INTERFACE

domestic violence > sexual assault > administrative utility > welcome, Test User logout >

**Victims of Crime (VOC)**

Data Entry Administrative Utility Reports

ocv Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

Submit New Client or Case Find Client or Case

**Client Information**

Medical and Criminal Justice System

Direct Services

Hotline Calls/Info. & Referral Services

Outreach and Awareness

THE DIFFERENT SECTIONS OF THE VICTIMS OF CRIME INTERFACE CAN BE ACCESSED BY CLICKING ON THE LINKS ON THE LEFT HAND SIDE OF THE SCREEN.

THE ACTIVE PAGE IS HIGHLIGHTED IN BLUE.

Offenders Secondary Victims

Year of Birth  Please enter YEAR only, not a date of birth

Race  Select an Item

Other Race

Client Type  Select an Item

Homeless  Select an Item

When Crime Occurred  Select an Item

Client's County Of Residence  Select an Item

Employment  Select an Item

Marital Status  Select an Item

Refugee / Immigrant / Asylum Seeker?  Select an Item

If so, what is the client's primary language?

Did Crime Occur On A Reservation?  Select an Item

Primary Offense Location  Select an Item

Health Insurance  Select an Item

Education  Select an Item

Pregnant?  Select an Item

Limited English Proficiency  Select an Item

Does the client have Veteran's Status?  Select an Item

Chosen Advocate  Select an Item

Case Closed ☐ Date Closed  Reason Closed  Select an Item

The Victims of Crime Interface is blue (to signify Victim's Rights awareness.) It is made up of five sections, as seen on the menu bar to the left hand side of the page:

- Client Information
- Medical and Criminal Justice System
- Direct Client Services
- Hotline Calls/Information & Referral Services
- Outreach and Awareness

Each of the sections of the Victims of Crime Interface will be outlined in greater detail later in this manual.

## VICTIM WITNESS ASSISTANCE UNITS INTERFACE

domestic violence > victims of crime > sexual assault > administrative utility >

welcome, Test User  
logout >

### Victim Witness Assistance Units

Data Entry Administrative Utility Reports

OCVA Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
CA Children's Administration

New Client or Case Find Client or Case

Client ID: None Case ID: None

Demographics Referrals Offender

Client ID:   
First Contact Date:   
Ethnicity:  Select an Item  
Gender:  Select an Item  
Crime Type:  Select an Item  
Client Type:  Select an Item  
Disability:  Select an Item

Please enter YEAR only, not a date of birth

When Crime Occurred:  Select an Item  
Client's County of Residence:  Select an Item  
Employment Status:  Select an Item  
Marital Status:  Select an Item  
Refugee / Immigrant / Asylum Seeker?:  Select an Item  
If so, what is the client's primary language?:   
Did Crime Occur On A Reservation:  Select an Item

Primary Offense Location:  Select an Item  
Health Insurance:  Select an Item  
Education:  Select an Item  
Pregnant:  Select an Item  
Limited English Proficiency?:  Select an Item  
Does client have Veterans Status?:  Select an Item  
Chosen Advocate:  Select an Item

Case Closed: ☐ Date Closed:  Reason Closed:  Select an Item

Next Submit Clear Cancel

Internet

THE DIFFERENT SECTIONS OF THE VICTIM WITNESS INTERFACE CAN BE ACCESSED BY CLICKING ON THE LINKS ON THE LEFT HAND SIDE OF THE SCREEN.  
THE ACTIVE PAGE IS HIGHLIGHTED IN ORANGE.

The Victim Witness Assistance Units Interface is orange. It is made up of eight sections, as seen on the menu bar to the left hand side of the page:

- Client Information
- Direct Services
- Hotline Calls/Information & Referral Services
- STOP Grant Coordinated Community Response
- STOP Grant Presentations, Publications, and Training
- STOP Grant Narrative Questions
- Victim Witness Narratives
- STOP Grant Funded Prosecution Activities

Each of the sections of the Victim Witness Assistance Units Interface will be outlined in greater detail later in this manual.

## 2. ADMINISTRATIVE INTERFACE

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The Administrative Interface is where information about Staff and Funding is located. It is the same for any of the program types (Sexual Assault, Domestic Violence, Victims of Crime, or Victim Witness Assistance Units.) It is also the section where administrative users may run special reports, administer user accounts for their agency, and manage client records. Agencies that have more than one program type (dual agencies, for example) will have only one Administrative Interface that will contain information about all staff and grant/contracts.

The information located in this section falls into three main categories in terms of data:

- Agency Information, which is basic information about your agency, such as address and phone number;
- Contract/Grant Information, which is basic information about your program or agency's funding sources;
- Staff Information, which contains information about your staff, how their salaries are allocated, and trainings they have received.

There are also three additional functions that can be used in this section, in addition to data entry:

- Administrative Level Reports, which are reports about your agency's staff, staff training, and services performed by staff
- User Administration, which is where administrative users may set up, disable, or change password accounts for their staff
- Manage Client Records, which is where administrative users may edit client ID numbers or delete duplicate clients or cases.

Each of these sections is outlined in detail in the following sections.

Some agencies may find it more appropriate to have administrative staff only be able to access this interface. Other agencies (particularly smaller agencies) may find it more useful to have all staff that use InfoNet be able to access both the Administrative Interface and the Data Entry area where client and service data is entered. Whichever way works well for your agency is fine. You may also try different combinations of accounts before you determine what level of usage works best. To change a user's access to the Administrative Utility, please just contact Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov).



## AGENCY INFORMATION

domestic violence > victims of crime > sexual assault > welcome, Test User [logout >](#)

### Administrative Utility

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
CA Children's Administration

Submit

- Agency Information
- Staff Information
- Funding for Staff
- Contract/Grant Information
- Administrative Level Reports
- User Administration
- Manage Client Records

Fields marked with an \*are required

\*Agency Name:

Address:

City:

State:

ZIP:

Telephone:

Fax Number:

Email:

Number of FTEs:

Agency Annual Budget:

Program Annual Budget:

Number of Board Members:

Federal Employer ID:

Service Area:

Counties Served	Legislative Districts	Congressional Districts	Judicial Districts	VOCA Regions
<input type="text" value="Thurston"/>	<input type="text" value="14"/>	<input type="text" value="25"/>	<input type="text" value="36"/>	<input type="text" value="1"/>
Select a County	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Hide The Agency List

Submit Clear Cancel

Add Service Region(s)

**TO LIST ADDITIONAL SERVICE AREAS, TYPE IN A BLANK BOX AT THE BOTTOM OF THE APPROPRIATE LIST, THEN CLICK THE ADD SERVICE REGION BUTTON.**

The Agency Information page is the first page you will see when you log into the Administrative Utility. It contains basic agency information such as name and address. You enter the information once, click Submit to save, and then modify it only when that information changes.

The only required field for this page is the Agency Name, which should already be available when you log in, as the State Administrator enters it when your agency is issued its first password. This field also populates the Agency Name on the password screen.

If you have a preferred version of your agency name, changing it here will change it on the password screen as well. For example, if your agency is listed as “Sexual Assault and Domestic Violence Counseling Center” and you prefer to use an acronym, like “SADVCC,” simply type over your agency name in the top field and click Submit. The next time you log into InfoNet, you’ll see your agency’s name changed in the pull-down menu on the password screen. This will also change your agency’s name on reports and other documents.

**Administrative Utility**

Fields marked with an \* are required:

\*Agency Name: New Name

Address: \_\_\_\_\_ State: \_\_\_\_\_

City: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Number of FTEs: 0 Agency Annual Budget: 0

Number of Board Members: 0 Federal Employer ID: \_\_\_\_\_

Service Area: \_\_\_\_\_

County Served: \_\_\_\_\_ Legislative District: \_\_\_\_\_ Congressional District: \_\_\_\_\_

Select a Country: \_\_\_\_\_

Hide The Agency List

**Washington State InfoNet System**

Agency Name: Abused Deaf Women's Advocacy Services

Program Type: Abused Deaf Women's Advocacy Services

User Name: ARC of Spokane

Password: ASPEN

Enter

The other fields, including address, telephone, and fax number information should be entered as you would enter them on a report form. If your agency has several e-mail addresses, please select whichever you normally put on OCVA or DSHS report forms. If information does not apply to your agency (for example, if your agency does not have board members) those fields may be left blank.

In the white area at the bottom of the screen are fields for Counties served, Legislative Districts, Congressional Districts, Judicial Districts, and VOCA Regions. Many agencies serve only one county or district, but a number of agencies serve more than one area. Because of this, InfoNet allows you to select more than one option for each of those fields. To add a county, legislative district, congressional district, judicial district, or VOCA region, simply type your entry (or in the case of County, select from the drop down box) and click the **Add Service Region** button. If you find you have entered a service region in error, simply click the red **X** next to the entry to delete.

When you have finished entering all of your Agency Information, click on the **Submit** button at the bottom of the page. To modify the data after it has been entered, make any changes and click the Submit button again.

## STAFF INFORMATION

The next page in the Administrative Utility is the Staff Information page, shown below. It may be accessed by clicking on the **Staff Information** link on the left hand side of the screen.

domestic violence > victims of crime > sexual assault > welcome, Test User logout >

**Administrative Utility**

Data Entry Administrative Utility Reports

Submit

Agency Information

**Staff Information**

Funding for Staff

Contract/Grant Information

Administrative Level Reports

User Administration

Manage Client Records

Fields marked with an \* are required

\*First Name:  \*Last Name:  Staff ID:

Address:

City:  State:  ZIP:

Workphone:  Email:  Date of Birth:

Gender:  Race:

\*Personnel Type:  Title:  Greeting:

Department:  \*Start Date:  Termination Date:

Staff Name	Personnel Type	Department	Gender
Cross, Marcia	Staff, Direct Service	Domestic Violence	Female
Hatcher, Terri	Staff, Direct Service	Sexual Assault	Female
Longoria, Eva	Staff, Direct Service	Domestic Violence	Female
Huffman, Felicity	Staff, Direct Service	Sexual Assault	Female

Submit Clear Cancel

It is important to enter accurate staff information into the InfoNet system, as the information you enter here will be what populates your pull-down list whenever there is a “Staff” field on other pages like Direct Service, Hotline, and Secondary Services.

Client ID: No Client Selected

Case Id: No Case Selected

Service: Advocacy-Based Counseling

Activity (Optional):

Staff/Volunteer:

Date:

Shelter Began:

Hours Of Service:

Shelter Ended:

THE STAFF RECORDS ENTERED ON THE STAFF INFORMATION PAGE POPULATE THE STAFF/VOLUNTEER DROP DOWN MENUS THROUGHOUT THE SYSTEM.

There are four required fields for Staff Information: The staff member’s **First Name**, **Last Name**, **Personnel Type**, and **Start Date**. The other information under Staff Information is completely optional and intended for your agency’s use only. **This area is not intended for recording staff’s home addresses or any other personal information.** While the information entered and stored into InfoNet is kept

securely, personal information about staff members isn't necessary to state or federal funders and is probably best kept separately.

To enter staff information, simply type the information into the designated boxes (or in the case of drop down boxes, select from the choices available) and when you are finished, click the Submit button at the bottom of the page. Your staff member's record will then be available at the bottom of the screen.

If there are groups of volunteers that you want to have in the system but do not want to designate specifically, you can also enter names such as "Shelter Volunteer" or "Board Member" or "Volunteer Attorney" into the First and Last Name slots. Many agencies find it useful, for example, to have one entry for First Name: "Hotline" and Last Name: "Volunteer" so that when calls are taken by a bank of volunteers, a specific name doesn't have to be selected. This works for groups of volunteers, rather than paid staff. Since paid staff often have training or salary allocation issues that can vary significantly, it is usually not be appropriate to enter them in groups. Some contracts, such as DVLA and STOP, require specific staff information to be entered separately, so grouping is absolutely not allowed for staff paid under those contracts.

To view and enter additional information about each staff member who has been entered into the system, mouse over that staff member's name at the bottom of the screen. You will then see that staff member's record highlighted in green, which indicates which staff member is selected.

Staff Name	Personnel Type	Department	Gender	
Hazel, David	Other	Information Technology		
Gleason, Nicky	Staff, Direct Service		Female	
Emery, Bev	Staff, Direct Service		Female	
Fenno, Chris	Staff, Direct Service		Select an Item	

Submit Clear Cancel

CLICK ON THE MAGNIFYING GLASS TO VIEW A RECORD

Hover your mouse on their name at the bottom of the page, and you will see that the staff member's name is then highlighted in green. Click on the magnifying glass symbol to the right, or anywhere on the green highlighted section, and their staff record appears on the screen, as shown below:

**Funding for Staff**

**Contract/Grant Information**

**Administrative Level Reports**

**User Administration**

**Manage Client Records**

Fields marked with an \* are required

\*First Name: Marcia Last Name: Cross Staff ID: 1222

Address: 100 Main Street

City: Olympia State: WA ZIP: 98502

Workphone: 360-555-1016 Email: marciac@xtesting.com Date of Birth:

Gender: Female Race: White

\*Personnel Type: Staff, Direct Service Title: Program Coordinator Greeting: Ms.

Department: Domestic Violence \*Start Date: 4/1/2006 Termination Date:

**Staff Funding**

Fund Source	Percent	Fund Source Controls
DSHS	25.00 %	
DVLA	75.00 %	
Select a Fund Source	%	
<b>TOTAL</b>	100 %	

Add Funding Source

**Staff Training**

Training Name	Date	# Of Hours	Training Type	Description	Sponsored By	Training
InfoNet Training	6/15/2006	8	Training	Computer Training	Not Specified	
Core Training	4/10/2006	30	Training	Sexual Assault Trai	Not Specified	
Advocacy Training	4/15/2007	16	Training	Sexual Assault	Not Specified	

## DELETING ACCIDENTAL DUPLICATES

If you are entering a staff name, and realize you have accidentally entered a duplicate of a staff record that is already in the list, you may delete it immediately by clicking the red X next to the new entry. However, staff members who have services or hotline call records attached to them may not be deleted. Therefore, it's very important to delete such duplicates right away, as it can be confusing for staff to know which of two identical entries is the correct one to select when entering data.

You may also delete staff/volunteer records for individuals who do not (and never have) provided services. If a particular staff/volunteer was entered (for example, a Board member) when your agency set up InfoNet, but you realize now that the person in question is never going to be associated with a service or hotline call, you can delete that entry by clicking the red X next to the name.

If you attempt to delete a record, and the staff/volunteer is actually attached to a service or hotline call, you will see an error message at the top of the staff information screen, informing you that the staff/volunteer cannot be deleted:

The screenshot shows the 'Administrative Utility' interface. At the top, there are navigation links: 'domestic violence > victims of crime > sexual assault >'. On the right, it says 'welcome, Test User' and 'logout >'. The main header is green with 'Administrative Utility' in white. Below the header are three tabs: 'Data Entry', 'Administrative Utility' (selected), and 'Reports'. To the right of the tabs are logos for 'Office of Crime Victims Advocacy' and 'Washington State Department of Social & Health Services / CA Children's Administration'. On the left, there is a sidebar with 'Agency Information', 'Staff Information' (selected), and 'Funding for Staff'. A red error message is displayed: 'Staff member is associated with a service or a hotline call, please enter termination date instead.' A 'Submit' button is on the right.

If you did not delete a duplicate right away, and you discover later that you have two entries, both of which have service and/or hotline records attached to them, remove one of the records by entering a Termination Date. More details about that in the next section.

The screenshot shows the staff information form and a list of staff members. The form has fields for: \*First Name, \*Last Name, Staff ID, Address, City, State, ZIP, Workphone, Email, Date of Birth, Gender (Select an Item), Race (Select an Item), \*Personnel Type (Staff, Direct Service), Title, Greeting, Department, \*Start Date, and Termination Date. Below the form is a table of staff members:

Staff Name	Personnel Type	Department	Gender
Cross, Marcia	Staff, Direct Service	Domestic Violence	Female
Hatcher, Terri	Staff, Direct Service	Sexual Assault	Female
Longoria, Eva	Staff, Direct Service	Domestic Violence	Female
Huffman, Felicity	Staff, Direct Service	Sexual Assault	Female

At the bottom of the table are 'Submit', 'Clear', and 'Cancel' buttons. To the right of the table is a yellow callout box with the following text:

**TO DELETE A RECORD, CLICK ON THE RED X SYMBOL.**

**THIS SHOULD ONLY BE DONE WITH DUPLICATES AND TYPOS.**

**STAFF RECORDS CANNOT BE DELETED IF THEY ARE LINKED TO SERVICE RECORDS IN THE SYSTEM.**

## ADDING AND REMOVING STAFF NAMES

Adding and removing staff names is completed at the agency level, not by the InfoNet Administrator. To add a new staff or volunteer name to your drop down list, simply add a new staff record. When a new record has been added, you will see the new staff member's name appear on the saved records table:

Staff Name	Personnel Type	Department	Gender	
Hazel, David	Other	Information Technology		Q X
Gleason, Nicky	Staff, Direct Service		Female	Q X
Emery, Bev	Staff, Direct Service		Female	Q X
Fenno, Chris	Staff, Direct Service		Select an Item	Q X

Submit Clear Cancel

To remove a staff member or volunteer's name after they have left your agency, select the staff member's record and enter a Termination Date. The Termination Date may apply for any reason a staff member no longer provides victim services at your agency, even if the staff member was not terminated.

Fields marked with an \* are required

*First Name: Marcia	*Last Name: Cross	Staff ID : 1222
Address : 100 Main Street		
City: Olympia	State: WA	ZIP: 98502
Workphone: 360-555-1016	Email: marciac@xtesting.	Date of Birth:
Gender: Female	Race: White	
*Personnel Type: Staff, Direct Service	Title: Program Coordinat	Greeting: Ms.
Department : Domestic Violence	*Start Date: 4/1/2006	Termination Date: 7/1/2009

ENTER A TERMINATION DATE TO REMOVE A STAFF MEMBER'S NAME FROM THE DROP DOWN LIST.






Click the Submit button to save the termination date, and this will remove the staff member's name from the various drop down lists throughout the system. It will keep that former staff or volunteer's past records intact, and you will continue to see a staff record listed for them in the Staff Information section.

If you remove a staff member's name in error, it is very easy to return it. Simply pull up the staff member's record, delete the Termination date, and click Submit to save. This will return their name to the drop down list so that further services, hotline calls, or presentations may be added under that person's name. If you finish your data entry and want to remove the name again, return to this page, re-enter the Termination date, and click Submit.

## STAFF ALLOCATION

The next item you need to complete is to indicate what percentage of each paid staff member's salary is funded through each OCVA or DSHS contract. Your agency's contract information populates a pull-down menu to select from. Simply select the source of funding and type in what percentage of the staff's salary is paid for out of that contract, and then click the Add Fund Source button.

For each additional fund source you add, the InfoNet system keeps track of the total. Please keep in mind that while it is okay to have a staff's time add up to less than 100% (to allow for part-time staff) it should never add up to more than 100%, or you will receive an error message. When you are done, you will see all the fund sources for each staff member, and the percentage of that person's salary allocated to each.

Fund Source	Percent	Fund Source Controls
CSAP Funding 2006	50 %	 
STOP Grant 2006	50 %	 
Select a Fund Source		
<b>TOTAL</b> 100 %		

CLICK THE  
BLUE DISK  
SYMBOL TO  
SAVE  
REVISIONS

CLICK THE  
RED X  
SYMBOL TO  
DELETE AN  
ITEM

To modify a percentage, simply type over the number you wish to change, then click the **blue disk** symbol to the right of that number. Percents of salary can be adjusted at any time during the year. **However, please keep in mind that changes to staff paid through OCVA or DSHS funding should correspond to conversations you have with your contract manager.** To delete a fund source from that staff's allocation, click on the red **X** symbol. If you are in doubt about whether a particular staff person may be paid out of a contract, please contact your contract manager/program coordinator.

We understand that staff percentages are estimates. However, if a staff member spends a significant amount of their time providing one service and their time is being charged significantly to a contract that does not allow that service, then an alteration in staff allotment most likely needs to be considered. Using this tool will allow agencies to perform time task analyses and adjust staff time to more accurately reflect eligible services. Agencies will be able to refer to past data to provide an educated guess on how much time an advocate will spend on a service in the future.

InfoNet is not intended to replace an agency's decision-making ability when it comes to staff allocation. Agencies will always have final authority of how their staff is allotted, and what services are in each staff member's job description. InfoNet is not intended as a substitute for or an obstacle to those management decisions. What InfoNet does do is allow agencies to make these decisions with the most accurate data available.

All of your staff that provides direct services paid for through your OCVA and DSHS contracts **must be** entered into staff information and their salaries allocated using this method. If you need technical assistance with this process, you may contact OCVA or DSHS and we would be happy to help you get this feature set up.



## STAFF TRAINING

Below the staff funding information on each staff record is an area for tracking staff training hours. This feature was added specifically because it was requested by representatives from the field as being a useful and valuable tool for agencies. Initially, the training area for each staff member will be blank, and will look like this:

Training Name	Date	# Of Hours	Training Type	Description	Training ID
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Add Training

For each training, please enter the Training Name, Date, and total number of hours for which the staff member received training credit. The Training Type and Description are optional fields that are for agency use; if there are categories you wish to assign to trainings, please indicate in Training Type. As we collect more training data, it may become apparent that there are certain categories that most trainings fall into, but for the first year of InfoNet that data is purely a text box.

Indicate whatever “Training Type” your agency would categorize the training as, or leave the box blank if you do not wish to categorize the training. The Description box is for any other information you wish to record about the training. It is a completely optional field, and is for your agency’s information only, so use it however works best for your agency—brief notes about the training, location of the training, cost, additional information, etc.

There is only one Date field for recording training information. If training occurred over multiple dates, please indicate the date that the training started in the Date box. If it is important to your agency to record the end date as well, you may indicate that information in the Description box, or you could choose to enter each day of the training as a separate entry.

When you have entered the information about the training, click on the **Add Training** Button and that training will be added to the staff member’s record, as shown below:

Training Name	Date	# Of Hours	Training Type	Description	Training ID
OCVA Conference	10/13/2005	18	Conference	10/13 thru 10/18	 
Internet Safety	12/2/2005	3	Workshop	WCSAP training	 
InfoNet Training	8/1/2006	8	Workshop	Super fun!!	 
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Add Training

Again, as with the funding list, you may alter any of the fields at any time and then click the blue disk symbol to the right of that record to save your changes. Click red **X** symbol at any time to delete a training you no longer want listed for that staff member (for example, if a training was entered in error.)



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## FUNDING FOR STAFF


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The Funding For Staff page may be accessed by clicking the Funding For Staff link to the left of the Administrative Utility screen, as indicated below:


domestic violence > victims of crime > sexual assault > welcome, Test User [logout >](#)

### Administrative Utility

[Data Entry](#) [Administrative Utility](#) [Reports](#)



Office of  
Crime Victims  
Advocacy



Washington State  
Department of Social  
& Health Services  
CA Children's Administration

☐ [Agency Information](#)

☐ [Staff Information](#)

☒ [Funding for Staff](#)

☐ [Contract/Grant Information](#)

☐ [Administrative Level Reports](#)

☐ [User](#)

**Funding For Staff:**

To view or edit details about funding for a specific staff or a specific fund source, select the link and you will be taken to that staff/fund source.

Staff Name	Fund Source	Percent
<a href="#">Cross, Marcia</a>	<a href="#">DSHS</a>	25.00%
<a href="#">Cross, Marcia</a>	<a href="#">DVLA</a>	75.00%
<a href="#">Hatcher, Terri</a>	<a href="#">DVLA</a>	21.00%
<a href="#">Hatcher, Terri</a>	<a href="#">DSHS</a>	25.34%
<a href="#">Hatcher, Terri</a>	<a href="#">CVSC Contract</a>	50.00%
<a href="#">Longoria, Eva</a>	<a href="#">DSHS</a>	50.00%
<a href="#">Longoria, Eva</a>	<a href="#">United Way</a>	50.00%
<a href="#">Huffman, Felicity</a>	<a href="#">DVLA</a>	50.00%

CLICK ON THE FUNDING FOR STAFF LINK TO ACCESS THAT PAGE OF THE ADMINISTRATIVE UTILITY.

No data entry is needed on the Funding For Staff page. The page is simply a resource that allows you to view all of your staff allocation data in a glance. It also allows you a quick and easy way to access both employee records and contract records, by providing you with convenient links to those records. No information needs to be entered on this page; it is provided solely to give you convenient access to your data without having to page through each employee's record.

If, while viewing this page, you wish to adjust an employee's record, simply click on the employee's name and you will be taken to that employee's record. If you wish instead to view more information about a contract or fund source, click on the fund source. More information about contract data is provided in the next section.


## CONTRACT/GRANT INFORMATION

The Contract/Grant Information page may be accessed by clicking the Contract/Grant Information link on the left hand side of the page, or by selecting any of the existing Contracts from the Funding for Staff page. If the link on the left of the page is selected, the page defaults to a blank entry, shown below:


domestic violence > victims of crime > sexual assault > welcome, Test User [logout >](#)

### Administrative Utility

[Data Entry](#)
[Administrative Utility](#)
[Reports](#)



Office of  
Crime Victims  
Advocacy



Washington State  
Department of Social  
& Health Services  
CA Children's Administration

[Submit](#)

☐ [Agency Information](#)

☐ [Staff Information](#)

☐ [Funding for Staff](#)

☒ [Contract/Grant Information](#)

☐ [Administrative Level Reports](#)

☐ [User Administration](#)

Fields marked with an \* are required

\*Type of Funds:  Contract Number (if applicable)  Total Contract Amount:

\*Award title:  Date Signed:  Project Beginning Date:  Project Ending Date:

	Federal:	State:	Other:	Total:	Match:
Salaries:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="0"/>	<input type="text"/>
Benefits:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="0"/>	<input type="text"/>
Contractual:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="0"/>	<input type="text"/>
Goods/Services:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="0"/>	<input type="text"/>
Travel:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="0"/>	<input type="text"/>
Indirect Overhead:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="0"/>	<input type="text"/>
Totals	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

[↑ Hide All Services Allowed Under This Fund Source](#)

Services allowed under this fund source: [Add Existing Service](#)

[↑ Hide All Fund Sources For This Agency](#)

Fund Source	Contract Number	Award Title
<input checked="" type="checkbox"/> DSHS Emergency DV Shelter	015896587	DSHS
<input checked="" type="checkbox"/> DVLA	07-31108-999	DVLA
<input checked="" type="checkbox"/> VOCA General Crimes	07-31119-9999	CVSC Contract
<input checked="" type="checkbox"/> VAWA-STOP Grant	08-31103-190	STOP Grant 08
<input checked="" type="checkbox"/> United Way	N/A	United Way
<input checked="" type="checkbox"/> Other Funding Source	N/A	Private Grants

There are only two mandatory fields for each Contract/Grant entry: **Type of Funds**, and the **Award Title**. The Type of Funds is a drop down box that allows you to specify what KIND of funding the contract or grant is. The types of funding are not limited to those administered by OCVA and DSHS, but also can include private grants, city funding, and other state and federal programs. If your agency wishes to track services funded by another fund source, such as United Way, you may enter such a grant or contract into this section by selecting United Way as the Type of Funds.

The Award Title is a label that allows agencies to differentiate between two different awards of the same type. In the example above, there are two awards of the same fund source type: VAWA STOP Grant, at the bottom. By looking at the Award Title, we can see that they are for different award years—STOP Grant 2007 and STOP grant 2005.

Fund Source	Contract Number	Award Title
Q X Native American Specialized SA Services	06-31110-002	Tribal Funding
Q X VAWA-Rural DV	06-31104-101	Rural Domestic Violence
Q X CSAP	06-31110-200	Community Sexual Assault Program
Q X Specialized SA Services	05-31110-001	Specialized SA Services
Q X VAWA-STOP Grant	07-31103-108	STOP Grant 2007
Q X VAWA-STOP Grant	05-31103-117	STOP Grant 2005

Another element that can be very useful in distinguishing between contracts is the contract number. For OCVA and DSHS contracts, the state administrator will enter this information into the system for you. If your agency chooses to enter additional funding information (such as for United Way grants or other sources of agency income) you may always leave the contract number field blank if it does not apply to that particular contract or grant.

The project beginning and ending dates allow the system to determine if any given contract or grant is *active*. When you first begin using InfoNet, all of the information in the system will be current; however, as time passes, there will be newer contracts entered and information that was previously entered will become outdated. It can be useful, however, to continue to keep this information in the system for reference, so rather than delete those contract records, there is a project end date field provided, so that we can indicate when those contracts have expired and are no longer current. That way, agencies can go back and look at information on past year's data.

The contract amount and budget information at the bottom of the screen are purely for reference at this point. They allow you to quickly access what the original contract budget was for each contract or grant. You may choose to enter additional contract or grant budget information if that is useful to your agency, but it is completely optional.

### **Important Note: Please Don't Delete Your OCVA/DSHS Contracts**

At the beginning of each contract/grant cycle, the InfoNet State Administrator will enter contract/grant information for your agency's contracts/grants that are administered by either OCVA or DSHS. This information is important, and is used when pulling a variety of statewide reports. Do NOT delete the contracts or grants entered by the State Administrator unless the project ended more than 1 year ago.

Some reports require the previous year's contract information to pull correctly. For example, STOP grant reports are compiled for the entire calendar year in January of the following year. That report will pull information from the previous year's funding (for the January – September time period) and from the current year's funding (for the October – December time period.) If an agency has deleted their contract information for the previous year, that data will not be shown on their report, and must be re-entered by the State Administrator.

Many state reports are pulled based on agencies that have a specific type of contract/grant. If you have deleted your agency's contract/grant, your agency might get missed on these reports. Therefore, please do not delete contracts/grants that have been entered by the State Administrator. (It is fine to delete any entries you entered for funding other than OCVA or DSHS administered funding.) If you're not sure whether it's okay to delete a particular contract/grant, please contact the OCVA State Administrator.

## Allowable Services:

Each contract/grant funds specific services, and these can be listed under allowable services. For example, CSAP contracts allow Legal Advocacy, Medical Advocacy, and General Advocacy. DV Shelter contracts allow a variety of services, including Advocacy-Based Counseling, Child Care, and CVC Assistance. Each contract's eligible services will be listed under the contract in the Allowable Services table, such as the one shown below:

domestic violence > general crimes > sexual assault > welcome, Nicky Gleason logout >

### Administrative Utility

Data Entry Administrative Utility Reports

OCVA Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

Agency Information  
Staff Information  
Funding for Staff  
**Contract/Grant Information**  
Agency Level Client/Service Reports

Fields marked with an \* are required

\*Type of Funds: CSAP Contract Number (if applicable): 06-31110-200 Fund Source Id: 5 Total Contract Amount: 18000

\*Award title: Community Sexual Date Signed: 1/1/2006 Project Beginning Date: 1/1/2006 Project Ending Date: 12/31/2006

	Federal:	State:	Other:	Total:	Match:
Salaries:	0	0	8750	8750	0
Benefits:	0	0	1850	1850	0
Contractual:	0	0	0	0	0
Goods/Services:	0	0	4900	4900	0
Travel:	0	0	500	500	0
Indirect Overhead:	0	0	2000	2000	0
Totals	0	0	18000	18000	0

Hide All Services Allowed Under This Fund Source

Services allowed under this fund source:

Service Type: System Coordination Add Existing Service

Medical Advocacy  
General Advocacy  
Legal Advocacy  
System Coordination

Hide All Fund Sources For This Agency

Fund Source	Award Title	Contract Number
Native American Specialized SA Services	06-31110-002	Tribal Funding
VAWA-Rural DV	06-31104-101	Rural Domestic Violence
VOCA Special Project	05-31103-104	STOP Grant 2006
City funding	05-31103-105	CSAP Funding 2006
CSAP	06-31110-200	Community Sexual Assault Program
Specialized SA Services	05-31110-001	Specialized SA Services
CDBG	N/A	Special City Funding Grant
VAWA-STOP Grant	07-31103-108	STOP Grant 2007
VAWA-STOP Grant	05-31103-117	STOP Grant 2005

Submit Clear Cancel

**EACH CONTRACT'S ELIGIBLE SERVICES IS SHOWN IN THE ALLOWABLE SERVICES TABLE.**

**TO ADD ALLOWABLE SERVICES TO A CONTRACT RECORD, SELECT THE SERVICE FROM THE DROP DOWN BOX AND CLICK THE ADD EXISTING SERVICE**

Entering the allowable services for a particular grant/contract is completely optional. You may add services by selecting a service from the pull down list and click the Add Existing Service button. Not every service that you provide may be on the existing services list. Many activities such as Hotline Calls, Prevention Activities, and many other services that are not associated with an individual client do not appear on the drop down list but instead are entered elsewhere in InfoNet.

Currently, the only services listed are those allowable by one or more of the OCVA and DSHS contracts.

## HIDING AND SHOWING INFORMATION

Many of the tables within InfoNet can be hidden and shown depending on what you wish to view at any given time. For example, both the Allowable Services and Fund Sources for your Agency may be hidden, as seen in the picture below. To show either of them, click on the appropriate “Show” link. To hide a table from view, click the “Hide” link at the top of the table.

domestic violence > general crimes > sexual assault > welcome, Nicky Gleason logout >

### Administrative Utility

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

☐ Agency Information  
☐ Staff Information  
☐ Funding for Staff  
☒ Contract/Grant Information  
☐ Agency Level Client/Service Reports  
☐ System Wide User Administration

Fields marked with an \* are required

\*Type of Funds:  Contract Number (if applicable):  Fund Source Id:  Total Contract Amount:

\*Award title:  Date Signed:  Project Beginning Date:  Project Ending Date:

	Federal:	State:	Other:	Total:	Match:
Salaries:	<input type="text" value="10000"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="10000"/>	<input type="text" value="0"/>
Benefits:	<input type="text" value="5000"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="5000"/>	<input type="text" value="0"/>
Contractual:	<input type="text" value="6000"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="6000"/>	<input type="text" value="0"/>
Goods/Services:	<input type="text" value="10000"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="10000"/>	<input type="text" value="0"/>
Travel:	<input type="text" value="1000"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="1000"/>	<input type="text" value="0"/>
Indirect Overhead:	<input type="text" value="3000"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="3000"/>	<input type="text" value="0"/>
Totals:	<input type="text" value="35000"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="35000"/>	<input type="text" value="0"/>

[Hide All Services Allowed Under This Fund Source](#)
[Add Existing Service](#)

**Services allowed under this fund source:**

**Service Type**

☒ Housing Assistance  
☒ Legal Advocacy  
☒ Medical Advocacy  
☒ Other Advocacy Or Service (must specify)  
☒ Support Groups  
☒ TANF/Welfare Advocacy  
☒ Transportation Assistance

[Show All Fund Sources For This Agency](#)

**To HIDE a TABLE FROM VIEW, CLICK ON THE “HIDE” LINK**

**To SHOW a HIDDEN TABLE, CLICK ON THE “SHOW” LINK**

## USER ADMINISTRATION

domestic violence > victims of crime > sexual assault > welcome, Marcia Cross logout >













**Administrative Utility**

Data Entry Administrative Utility Reports

Agency Information  
Staff Information  
Funding for Staff  
Contract/Grant Information  
Administrative Level Reports  
**User Administration**  
Manage Client Records

Add New User +

All A B C D E F G H I J K L M N O P Q R S T U V W X Y Z All

ACTION	USER
 	 Cross, Marcia
 	 Hatcher, Terri
 	 Huffman, Felicity
 	 Longoria, Eva

CLICK ALL TO VIEW ALL OF YOUR AGENCY'S INFO.NET USERS

The new User Administration section is provided so that agency administrators can set up, change, and delete password accounts for users at your agency. To view a list of all of your agency's users, click the word All at the top of the screen.

### SETTING UP A NEW USER ACCOUNT

To create a new user, click the Add New User button in the upper left of the screen. You will be presented with the following screen:

domestic violence > victims of crime > sexual assault > welcome, Marcia Cross logout >

**Administrative Utility**

Data Entry Administrative Utility Reports

Agency Information  
Staff Information  
Funding for Staff  
Contract/Grant Information  
Administrative Level Reports  
**User Administration**  
Manage Client Records

Fields marked with an asterisk (\*) are required.

\* First Name

\* Last Name

\* Email Address

\* Login

\* Password

User Groups  
Admin Only  
Admin Users -- DV & SA  
Admin Users -- DV & VOC  
Admin Users -- DV only

Save Cancel



Indicate the first and last name of your InfoNet user, the user's e-mail address, and their selected Login and Password. Select the type of User Group the new user will belong to: will they be an admin user, or restricted to data entry? Will they need access to the Domestic Violence, Sexual Assault, or Victims of Crime interface, or some combination of the three?

#### WHY DID MY SCREEN JUST BLINK?

When entering a new user, the Login field will default to the user's first name, last initial. You can feel free to change this to whatever Login the user prefers. However, once you've entered the user's first and last names, the system will refresh to populate the Login field with the first name, last initial default. Depending on your internet connection, this "blink" could be almost instantaneous, or it could take a moment to refresh your screen.

Once the fields have been completed, click the SAVE button to save the new user. The new name will now appear in your User Administration section.

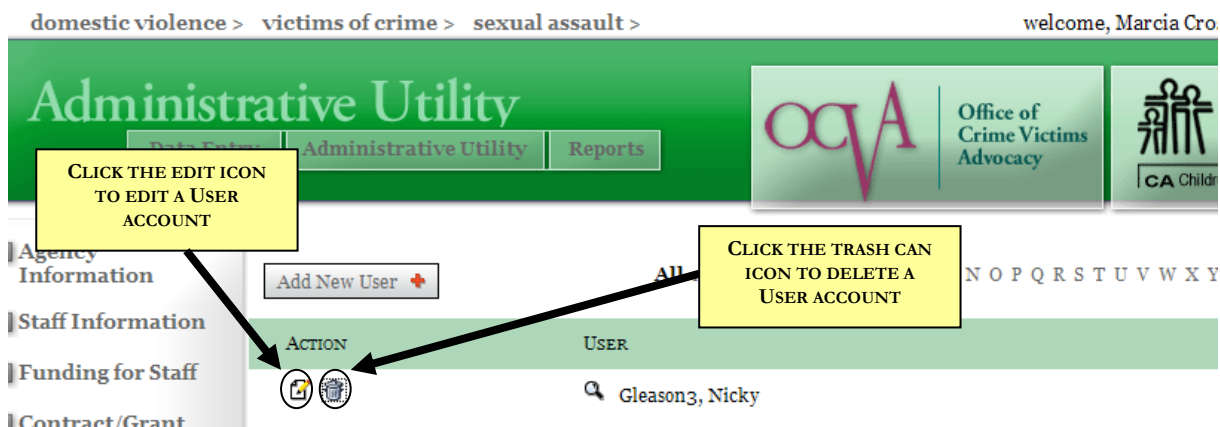
**Please note:** Adding a new user does NOT add the person's name to your staff lists in the InfoNet system, such as the drop down lists under services and hotline. To add a new staff member or volunteer name, please see the Staff Information section.

#### CHANGING A USER PASSWORD OR OTHER INFORMATION

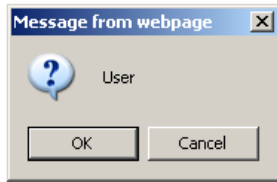
To change an existing user's password, login, or other information, simply select the user by clicking on the Edit icon next to their account, and once their information is shown, overwrite the existing information, and click Save.

#### DELETING A USER ACCOUNT

To delete a user account, click the garbage can icon next to the user account.



After clicking the trash can icon, a pop up window may appear to confirm you wish to delete the account.



Click OK to continue. The user account will then be deleted.



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## MANAGE CLIENT RECORDS

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[domestic violence >](#) [victims of crime >](#) [sexual assault >](#) welcome, Marcia Cross [logout >](#)

### Administrative Utility

[Data Entry](#) [Administrative Utility](#) [Reports](#)



Office of  
Crime Victims  
Advocacy



Washington State  
Department of Social  
& Health Services  
CA Children's Administration

☐ [Agency Information](#)

☐ [Staff Information](#)

☐ [Funding for Staff](#)

☐ [Contract/Grant Information](#)

☐ [Administrative Level Reports](#)

☐ [User Administration](#)

☒ [Manage Client Records](#)

Search by:

Client ID

Search

The new Manage Client Records feature allows Administrative Users to do three things:

- (1) Edit Client ID numbers – useful if a typo was made when entering an intake;
- (2) Delete duplicate cases
- (3) Delete duplicate client intakes.

Before using the feature, it's very important to understand the difference between Clients and Cases. If necessary, please review the section in Chapter 3 in the manual to make sure you fully understand the difference and the relationship between Clients and Cases.

The first step in using the Manage Client Records is to search for the client or case you wish to edit or delete. The Search By box, much like the search feature in the data entry section, allows you to search by either Client ID number or Case ID number. Only Client ID numbers may be edited, but either may be deleted.

domestic violence > victims of crime > sexual assault > welcome, Marcia Cross [logout >](#)

## Administrative Utility

[Data Entry](#)
[Administrative Utility](#)
[Reports](#)

Office of  
Crime Victims  
Advocacy

- ☐ Agency Information
- ☐ Staff Information
- ☐ Funding for Staff
- ☐ Contract/Grant Information
- ☐ Administrative
- ☐ Administration
- ☒ Manage Client Records

Search by:

Client Information:

Client ID	Race	Ethnicity	Gender	Year Of Birth	Delete
Example2	African American, Black	Non-Hispanic/Non-Latino	Female	1980	<a href="#">Delete</a>

New Client ID:

Existing Cases for this Client:

Case	Agency Name	Presenting Issue	Client Type	Delete
86172	X Testing	Domestic Violence	Domestic Violence	<a href="#">Delete</a>
<b>Direct Services</b> Emergency DV Shelter-DV Shelter Home on 7/13/2006 Advocacy-Based Counseling on 8/1/2008 Child Care on 8/1/2008 Crisis Counseling/Intervention on 8/1/2008 Referrals on 8/1/2008 Emergency DV Shelter-DV Shelter Home on 8/1/2008 Civil Legal Advocacy on 7/2/2006 Safety Planning on 7/2/2006 Referrals on 7/2/2006 Housing Assistance on 7/13/2006 Civil Legal Advocacy on 8/15/2008				
<b>Secondary Services</b> DV Shelter Home				
86225	X Testing	Hate Crimes	Victims of Crime	<a href="#">Delete</a>
<b>Direct Services</b> Crisis Intervention on 7/2/2006 Legal Advocacy on 7/2/2006 Advocacy on 7/2/2006 Advocacy on 7/2/2006 Legal Advocacy on 7/3/2006				

CLIENT

THIS CLIENT'S DV CASE

THIS CLIENT'S VOC CASE

SERVICES ASSOCIATED WITH DV CASE

SECONDARY SERVICES ASSOCIATED WITH DV

SERVICES ASSOCIATED WITH VOC CASE

After searching for a client, you will see something similar to the above. In this example, the client has two cases, and multiple services under each case. This is a handy feature, as it is meant as a safeguard against accidentally deleting a client or case thought to be a duplicate, but which in fact contains lots of data. If you intend to delete a duplicate, and you see that there are many services entered under the intake, you may want to double check to make sure those services are entered elsewhere.

## EDITING A CLIENT ID NUMBER

domestic violence > victims of crime > sexual assault > welcome, Marcia Cross logout >

### Administrative Utility

Data Entry Administrative Utility Reports

Agency Information  
Staff Information  
Funding for Staff  
Contract/Grant Information  
Administrative Level Reports  
User Administration  
Manage Client Records

Search by:  
Client ID [Example5]  
Search

No records were updated, Client Id already exists, Try another Client ID.  
Client Information:

Client Id	Race	Ethnicity	Gender	Year Of Birth	Delete
Example5	White	Hispanic/Latino	Female	1950	Delete
New Client ID: [Example6]					

Update

**TO EDIT THE CLIENT ID NUMBER, TYPE THE NEW CLIENT ID AND CLICK UPDATE.**

Existing Cases for this Client:

Case ID	Agency Name	Presenting Issue	Client Type	Delete
86175	X Testing	Domestic Violence	Domestic Violence	Delete
<b>Direct Services</b> Emergency DV Shelter-DV Shelter Home on 7/5/2006				
<b>Secondary Services</b> 86227 X Testing Identity Theft Victims of Crime Delete				
<b>Direct Services</b> Legal Advocacy on 7/5/2006 Legal Advocacy on 7/5/2006 Legal Advocacy on 7/5/2006 Emergency Financial Assistance on 7/5/2006 Legal Advocacy on 7/5/2006 Advocacy on 7/5/2006 Medical Advocacy on 7/5/2006				
<b>Secondary Services</b> 86806 X Testing Sexual Assault Sexual Assault Delete				
<b>Direct Services</b> Medical Advocacy on 7/8/2006 Legal Advocacy on 7/9/2006 General Advocacy on 7/10/2006 Therapy on 7/11/2006 Therapy on 7/12/2006				

Mistakes happen to everyone, and frequently a Client Intake is submitted with a typo or mistake in the Client ID number. To change the Client ID number, you can use the New Client ID field, immediately below the existing client ID number. (see above) Type in the desired change and click Update.

Client ID numbers must be unique throughout the system. If a Client ID number is already being used, you will not be able to use it, just as you would not be able to enter a new client intake with a used number. If you attempt to update a client with an existing Client ID number, you will receive the following error message: "No records were updated, Client ID already exists, Try Another Client ID."

domestic violence > victims of crime > sexual assault > welcome, Marcia Cross logout >

### Administrative Utility

Data Entry Administrative Utility Reports

Agency Information  
Staff Information  
Funding for Staff  
Contract/Grant Information  
Administrative Level Reports

Search by:  
Client ID [Example5]  
Search

No records were updated, Client Id already exists, Try another Client ID.  
Client Information:

Client Id	Race	Ethnicity	Gender	Year Of Birth	Delete
Example5	White	Hispanic/Latino	Female	1950	Delete
New Client ID: [Example6]					

Update

Once you have entered a client ID number that is unique and clicked Update, the Client ID will be updated. You will see the update confirmation shown in red at the top of the screen.

domestic violence > victims of crime > sexual assault > welcome, Marcia Cross [logout >](#)

## Administrative Utility

Data Entry
Administrative Utility
Reports

Washington State  
Department of Social  
& Health Services  
**CA Children's Administration**

- ☐ Agency Information
- ☐ Staff Information
- ☐ Funding for Staff
- ☐ Contract/Grant Information
- ☐ Administrative Level Reports
- ☐ User Administration
- ☒ Manage Client Records

Search by:

Client ID was updated successfully.

**Client Information:**

Client ID	Race	Ethnicity	Gender	Year Of Birth	Delete
Example60	White	Hispanic/Latino	Female	1950	<a href="#">Delete</a>

New Client ID:

**Existing Cases for this Client:**

Case ID	Agency Name	Presenting Issue	Client Type	Delete
86175	X Testing	Domestic Violence	Domestic Violence	<a href="#">Delete</a>
<b>Direct Services</b>				
Emergency DV Shelter-DV Shelter Home on 7/5/2006				
<b>Secondary Services</b>				
86227	X Testing	Identity Theft	Victims of Crime	<a href="#">Delete</a>
<b>Direct Services</b>				
Legal Advocacy on 7/5/2006				
Legal Advocacy on 7/5/2006				
Legal Advocacy on 7/5/2006				
Emergency Financial Assistance on 7/5/2006				
Legal Advocacy on 7/5/2006				
Advocacy on 7/5/2006				
Medical Advocacy on 7/5/2006				
<b>Secondary Services</b>				
86806	X Testing	Sexual Assault	Sexual Assault	<a href="#">Delete</a>
<b>Direct Services</b>				
Medical Advocacy on 7/8/2006				
Legal Advocacy on 7/9/2006				
General Advocacy on 7/10/2006				
Therapy on 7/11/2006				
Therapy on 7/12/2006				
<b>Secondary Services</b>				

You will also see the new Client ID shown on the record itself, in the search box (which previously displayed the incorrect Client ID) and everywhere in the system the old Client ID was used. In fact, if you wish to assign a new client the previous Client ID number, you can now do so, as it no longer exists.

## DELETING CLIENTS AND CASES

The screenshot displays the 'Administrative Utility' interface. At the top, there are navigation links: 'domestic violence > victims of crime > sexual assault >', a user greeting 'welcome, Marcia Cross', and a 'logout >' link. Below this is a green header bar with the title 'Administrative Utility' and three buttons: 'Data Entry', 'Administrative Utility', and 'Reports'. To the right of the header are logos for the 'Office of Crime Victims Advocacy' and the 'Washington State Department of Social & Health Services / CA Children's Administration'.

On the left side, there is a sidebar menu with the following items: 'Contract/Grant Information', 'Administrative Level Reports', 'User Administration', and 'Manage Client Records' (which is highlighted with a green square).

The main content area shows a search for 'Example60'. A yellow callout box points to the search results with the text: 'AFTER CLICKING DELETE, A CONFIRMATION MESSAGE APPEARS'. Another yellow callout box points to the 'Delete' link at the top of the client record with the text: 'TO DELETE THE WHOLE INTAKE & ALL CASES, CLICK THE TOP DELETE'. A third yellow callout box points to a 'Delete' link next to a specific case record with the text: 'TO DELETE JUST ONE CASE, CLICK DELETE NEXT TO THE APPROPRIATE CASE'. A confirmation dialog box is visible in the center, asking 'are you sure you want to delete this case?' with 'OK' and 'Cancel' buttons.

Case ID	Agency Name	Presenting Issue	Client Type	Delete
86175	X Testing	Domestic Violence	Domestic Violence	Delete
<b>Direct Services</b>				
Emergency DV Shelter--DV Shelter Home on 7/5/2006				
<b>Secondary Services</b>				
86227	X Testing	Identity Theft	Victims of Crime	Delete
<b>Direct Services</b>				
Legal Advocacy on 7/5/2006				
Legal Advocacy on 7/5/2006				
Legal Advocacy on 7/5/2006				
Emergency Financial Assistance on 7/5/2006				
Legal Advocacy on 7/5/2006				
Advocacy on 7/5/2006				
Medical Advocacy on 7/5/2006				
<b>Secondary Services</b>				
86806	X Testing	Sexual Assault	Sexual Assault	Delete
<b>Direct Services</b>				

To delete one case from a client, you have two options:

- Search by the Case ID, and when the case is shown, click the word DELETE on the far right of the case record
- Search by the Client ID, determine the case you want to delete, and click the word DELETE to the far right of the case record.

After clicking delete, a confirmation message appears, confirming that you want to delete this case. Click OK to complete the deletion, or Cancel to cancel the deletion.

### Deleting Clients

To delete a client, you must search by the Client ID. When the client intake appears, click the word DELETE next to the client record. This will delete all cases and services associated with that client.

### IMPORTANT WARNING ABOUT DELETING CLIENTS AND CASES

Deleting a client intake deletes ALL cases under that intake, and ALL services under each case. It also deletes ALL secondary victims and services entered under each case. Deletions of that nature are typically only done if the client intake was entered in error, such as a duplicate. Please use **extreme caution** when deleting large amounts of data. There is no way to “undelete” large amounts of data once they have been deleted.

### 3. CLIENTS AND CASES

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Two of the essential elements to understand about the InfoNet system are the terms “Clients” and “Cases.” The use of these two distinct and important elements is crucial to InfoNet’s flexible design, which allows agencies to record significant data on each person who comes in the door for services while maintaining accurate and unduplicated records. Over time, you will become adept at utilizing client and case data, but it takes a little getting used to at first!

Below is a brief explanation of Clients, Cases, and how the two terms work together to make InfoNet a versatile data collection system.

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#### CLIENTS

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In InfoNet, it is important to note that a “client” is a person, typically one who is a direct victim of crime and who has come to your agency for services. (There are a few exceptions, which we’ll discuss later in this chapter.) Client information is recorded via Intakes. An Intake is completed each time a new client comes into your agency for services. Your agency may complete a paper Intake form when a client comes into your agency, or you may enter the information directly into InfoNet via computer.

**CLIENT ID:** InfoNet does not collect identifying information about clients such as names or Social Security Numbers. In order to track clients, your agency must issue each client a non-identifying **Client ID number**. If your agency does not currently assign Client ID numbers, please keep in mind the following:

Client ID numbers may contain letters as well as numbers.

Client ID numbers may be up to 14 digits long.

Avoid using a protocol that puts a limit on how many clients you can possibly number – you never know over time how many clients your agency might serve, so leave your options open.

**DO NOT include client identifying information in the Client ID number, such as any part of the client’s name or the client’s birth date. The point of the Client ID number is to guarantee client anonymity, and using identifying information in the ID number defeats the purpose!**

*Examples of Client ID protocols:*

Good:

Program prefix, date of intake (mm/yy), and three digits in sequential order:

ERC-0506-001

ERC-0506-002

ERC-0506-003

ERC-0606-001

This protocol allows agencies to easily identify an intake number as their own (through the use of the program's initials at the beginning), differentiate client intakes according to time period (by using the intake month and year), and identify if a client intake has been missed or not entered (by using a sequential number at the end)

In addition, the three digit sequential number at the end allows that agency to enter up to 1,000 clients on any given day. If an agency were ever likely to receive more than 1,000 intakes on any given day, they could modify the above protocol by having that sequential number be four digits. A smaller agency might prefer to use two sequential digits instead.

Poor:

Client's initials and client's date of birth (mm/dd/yy)

MNG070172

EAB111271

There are several problems with this type of protocol. First, they contain identifying information. Second, you would run into problems if you ever tried to enter a client with the same initials and birth date as another client.

If you would like more information on client numbering protocols or if you need to change existing client ID numbers to a less identifying or better numbering system, please contact Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov) and she is happy to assist you.

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## CASES

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On rare occasions, a client that has been seen by your agency before may return as a victim of a different crime. For example, a client who originally came to you for services as an adult victim of childhood sexual abuse may come to your agency as an adult victim of an unrelated sexual assault, or a victim of domestic violence may return after having been abused in a later relationship. In cases such as these, the original intake information may not apply to the second victimization – for example, the offender’s relationship to the victim may be different, or the length of time for when the incident occurred may be different. However, it would be useful to connect the two intakes for the same victim. In order to do this, InfoNet links the two intakes using **cases**. Cases allow you to submit two intakes for the same victim, using the same Client ID number.

Understanding the difference between Clients and Cases is critical when searching for existing records. When searching, you may search either using the agency selected Client ID number, or a computer generated Case ID number. When searching for an existing Client ID number, the system will offer you a choice of two options. You may view the client’s current **case**, which is a detailed record of all of the information you have entered about the client, their current services, and other details, which will be the most frequent use of the search function. The other option is that you may also select to begin a new case for an existing **Client**, in the event that a client has returned to your agency as a victim of a different crime. If you accidentally begin a new case instead of selecting the current one, you won’t find much of the information you entered into InfoNet, which can be frustrating and confusing! Not to worry, your information is still there, and can still be accessed, but to avoid this situation, be sure to read carefully over the section **Searching for Existing Clients and Cases** in the Client Intake chapter.



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## REQUIRED DATA

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Entering a client intake will vary slightly according to your agency. There are a number of data elements collected in InfoNet, with many of those elements being optional. Each agency should decide which data elements would provide you the information you need. While it may be tempting to keep data collection at a bare minimum, there are many ways in which data collection can be very useful, and sometimes can be required for grants that are not administered by OCVA and DSHS.

However, for OCVA and DSHS reporting purposes, there are a few data elements that are absolutely mandatory to the reports we compile for our state and federal funding sources. This doesn't imply that any data outside of these elements is purely optional; there is an implication that agencies will continue to provide the best and most complete data that applies to their programs. By required data, we mean fields for which if you cannot provide an answer, the client cannot be counted in the InfoNet system **at all**. This is a pretty severe restriction, and consequently, we tried to keep the number of those elements as small as possible.

In addition to their extensive work in helping to develop the InfoNet system, the InfoNet User Group developed the required fields. The InfoNet User Group was comprised of twelve individuals representing victim service providers from across the state as well as representatives from the state coalitions, OCVA, and DSHS. They represented sexual assault, domestic violence, and crime victim service centers programs both large and small, from both urban and rural areas. The User Group determined which fields were essential for all agencies to collect while avoiding placing an unnecessary burden on agencies to collect data that may not be relevant to their services.

The absolutely mandatory required elements for client intakes in InfoNet are essentially the same for all program types and contract types, and are as follows:

**Client ID Number:** This is essential to being able to track the client in the InfoNet system, since no identifying information such as name, date of birth, or social security number of the client are ever stored in the system. The Client ID number is generated by your agency and must be unique.

**First Contact Date:** This information is crucial to determining how many new clients were served in a given period of time. This date should represent your agency's very first contact with a client. A first contact date should be entered only once. If a client comes in for additional services, or for an additional case, their first contact date remains the same.

**Client's Race:** Race was selected as a mandatory field because all of our state and federal reports ask for the race of the clients served. While Race is a mandatory field, there are options for those individual cases where recording the client's race is not possible, whether because of individual intake issues or because your agency has concerns about confidentiality. In such cases, there are "unspecified" and "not reported" options for this question.

**Client's Ethnicity:** Like Race, Ethnicity is mandatory but also includes "not reported" and "unspecified" options for instances where client confidentiality is a concern in reporting this data.

**Client's Gender:** Like Race and Ethnicity, Gender is also mandatory but also includes an "unspecified" option. There is also an "Other" option for individuals who do not identify as either Male or Female.

**Client's Year of Birth:** Client Year of Birth is mandatory because it allows us to categorize clients into age groups. It is also an important demographic to collect as it allows the system to differentiate between child and adult clients, each of which may be counted toward different reports—for example, STOP grant services are applicable only to clients over age 18. Year of Birth

is used, as it is less identifying than date of birth, but still provides enough detail that the client can be categorized into age ranges.

**Crime Type:** Crime Type is mandatory because it is how we categorize clients according to service provision. It is essential to record the primary crime for which a client sought services. Some clients may receive different services for multiple crime types at different points in their life. A client who was a victim of domestic violence may come back to an agency to receive services for sexual assault, and thus have a second case that has a different crime type.

**Client Type:** Client Type is most applicable to Sexual Assault Clients, and is how we differentiate Adult victims of Sexual Assault, Adult Survivors of Childhood Sexual Assault, and Child victims. For Crime Victim Service Center clients, Client Type is used to differentiate between children and adults, and for Domestic Violence clients, client type is not used.

**Client's Disability:** If a client is not disabled, there is an option to select "None" under Disability; in addition, there are "not reported" and "unspecified" options.

**Client's Homelessness:** This is a Yes/No question regarding whether or not a client is homeless, with additional options for "not reported" and "unspecified."

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## UNSPECIFIED, NOT REPORTED, AND NOT APPLICABLE

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Many of the questions in the Client Intake have options for Unspecified, Not Reported, and Not Applicable. At first glance, these may seem like interchangeable answers, but in fact they are offered for very different purposes.

**Unspecified:** The term Unspecified in InfoNet refers to questions that your agency does not ask clients as a matter of policy. This may be because those questions do not apply to the client's you serve, or because your agency does not find the answers to those questions useful. The implication of selecting "Unspecified" is that your agency doesn't collect this information from anyone.

Unspecified should never be selected on required fields. The reason Unspecified is shown as an option under questions like Gender is that these questions are asked later in the intake about other individuals, such as Secondary Victims or Offenders, where selecting Unspecified is allowable. If, for confidentiality reasons, you do not want to select an answer for your client's Race, you should select Not Reported.

**Not Reported:** The term Not Reported in InfoNet refers to questions that your client did not disclose the answer to. This may be because she was unable or unwilling to answer the question, or because she was able to give your advocate only limited information at the time the intake was completed. The implication of selecting "Not Reported" is that your agency asks the question, but that the client did not provide an answer for this intake.

**Not Applicable:** The term Not Applicable in InfoNet refers to questions that may apply to some clients but would not apply to this one. An example of a question for which you might answer "Not Applicable" would be Employment if you were filling out an Intake for a child who was not old enough to be employed. Consequently, Not Applicable is not an option for every question – for example, there is not a "Not Applicable" option for Race, Ethnicity, or Gender.

There's a very specific reason that we offer these three options for many questions. Over time, the data that agencies enter into InfoNet will be available for use in compiling statistics on the clients we serve. If the data from all agencies was used, regardless of whether or not those agencies answered the question based on client response or on agency policy, we could come up with skewed and invalid data.

## 4. CLIENT INTAKES

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When you first log-in to InfoNet under Domestic Violence, Sexual Assault, or Victims of Crime, the client intake screen is shown by default. To begin entering information, simply move your cursor to the first available box and enter data. Data in InfoNet falls into one of three categories for data entry: text fields, drop down boxes, and check boxes.

**Text fields** are those fields that you enter data into using your keyboard; examples of typed fields are Client ID number, First Contact Date, and Year of Birth. Some of these fields require you to enter data in a specific format, such as a date, and others, such as Client ID number, allow more flexibility.

**Drop down boxes** are those fields that offer a predetermined list of options from which to choose. The majority of information in InfoNet is available via drop down boxes. To select an option from a drop down box, you may either click with your mouse to select the item you want, or you can move your cursor to the drop down box using the TAB key and type the first letter of the option you want from the keyboard. If more than one option beginning with the same letter exists, pressing the letter again will toggle through the choices beginning with that letter.

**Check boxes** are exactly that—boxes that can be checked to indicate yes, or left blank to indicate no. These are typically questions where you may want to select more than one answer, such as agencies you referred your client to, or the variety of services your client needed. Check boxes can be selected with the mouse, or selected using the TAB key and clicked by hitting the SPACEBAR on the keyboard.

## SEXUAL ASSAULT CLIENT INTAKES

domestic violence > victims of crime > administrative utility > welcome, Test User [logout >](#)

### Sexual Assault (SA)

[Data Entry](#) [Administrative Utility](#) [Reports](#)

[Submit](#) [New Client or Case](#) [Find Client or Case](#)

Client ID: None Case ID: None

**Demographics** **Offenders** **Income** **Referrals** **Other Issues Reported** **Served** **Secondary Victims**

Client ID:  Year of Birth:  Please enter YEAR only, not a date of birth

First Contact Date:  Race:  Other Race:

Ethnicity:  Gender:

Crime Type:  Client Type:

Disability:  Homeless:

When Assault Occurred:  Primary Offense Location:

Client's County Of Residence:  Health Insurance:

Employment:  Education:

Marital Status:  Pregnant:

Refugee / Immigrant / Asylum Seeker:  Limited English Proficiency?:

Also, what is the client's primary language?:  Does the client have Veteran's Status?:

Did Crime Occur On A Reservation:  Chosen Advocate:

Case Closed: ☐ Date Closed:  Reason Closed:

[Next](#) [Submit](#) [Clear](#) [Cancel](#)

**Client Intakes**

- Medical and Criminal Justice System
- CSAP and Specialized Services
- Native American and Marginalized Services
- Crisis Intervention/ Info. & Referral
- Prevention Activities
- System Coordination

**YOU CAN SELECT DIFFERENT PAGES OF THE CLIENT INTAKE BY CLICKING EITHER THE TAB LABEL AT THE TOP OR THE NEXT PAGE BUTTON AT THE BOTTOM OF THE SCREEN**

There are seven sections, or pages, of the Sexual Assault Client Intake: Demographics, Offenders, Income, Referrals, Other Issues Reported, Served, and Secondary Victims.

You can tell which page you are on by looking at the tab bar at the top of the screen; the active page will be in black text. You can select between the different pages in one of two ways: either by clicking on the name of the page you want on the tab bar, or by clicking the Next Page button at the bottom left of the screen.

## DOMESTIC VIOLENCE CLIENT INTAKES

The Domestic Violence interface has many of the same tabs seen on the Sexual Assault Interface, but with some differences:

victims of crime > sexual assault > administrative utility >

welcome, Test User    Logout >

**Domestic Violence (DV)**

Data Entry    Administrative Utility    Reports

TO SWITCH BETWEEN DV, SA, AND VICTIMS OF CRIME INTERFACES, CLICK ON ANY OF THE INTERFACE LINKS AT THE TOP LEFT OF THE SCREEN.

Client ID: None    Case ID: None

Demographics    Children and Youth    Income    Referrals    Other Issues    Offenders    Served    Animals

Client ID:     Year of Birth:     Please enter YEAR only, not a date of birth

First Contact Date:     Race:     Other Race:

Ethnicity:     Gender:     Client Type:

Disability:     Homeless:

When Incident Occurred for Which Client Sought Services:     Primary Offense Location:

Client's County of Residence:     Health Insurance:

Employment Status:     Education:

Marital Status:     Pregnant:

Refugee / Immigrant / Asylum Seeker?:     Limited English Proficiency?:

If so, what is the client's primary language?:     Does client have Veterans Status?:

Did Crime Occur On A Reservation:     Chosen Advocate:

Case Closed: ☐    Date Closed:     Reason Closed:

The different pages are indicated on the tab bar at the top of the screen: Demographics, Children and Youth, Income, Referrals, Other Issues, Offenders, Served, and Animals.


Like the Sexual Assault interface, you can tell which page you are on by looking at the purple bar; the active tab will be highlighted in white, as “Demographics” is highlighted in the picture above. You can select between the different pages either by selecting the next tab on the purple bar with your mouse, or by clicking the Next Page button at the bottom left of the screen.

## VICTIMS OF CRIME CLIENT INTAKES


domestic violence> sexual assault> administrative utility> welcome, Test User logout>

### Victims of Crime (VC)

Data Entry
Administrative Utility
Reports



Office of  
Crime Victims  
Advocacy



Washington State  
Department of Social  
& Health Services  
CA Children's Administration

New Client or Case
Find Client or Case

Client Information
Medical and Criminal Justice System
Direct Services

Client ID: None Case ID: None

Demographics
Income
Referrals
Offenders
Secondary Victims

Client ID
Year of Birth
Please enter YEAR only, not a date of birth

First Contact Date
Race
Select an Item

Ethnicity
Select an Item
Other Race

Gender
Select an Item
Client Type
Select an Item

Crime Type
Select an Item
Homeless
Select an Item

Disability
Select an Item

When Crime Occurred
Select an Item
Primary Offense Location
Select an Item

Client's County Of Residence
Select an Item
Health Insurance
Select an Item

Employment
Select an Item
Education
Select an Item

Marital Status
Select an Item
Pregnant?
Select an Item

Refugee / Immigrant / Asylum Seeker?
Select an Item
Limited English Proficiency
Select an Item

If so, what is the client's first Language?
Does the client have Veteran's Status?
Select an Item

Did Crime Occur On A Reservation
Select an Item

Case Closed
☐
Date Closed
Reason Closed
Select an Item

Next
Submit
Clear
Cancel

THE FIELDS IN THE GRAY SHADED AREA OF THE CLIENT INTAKE INDICATE REQUIRED FIELDS.

The Victims of Crime interface has five tabs of Client Information: Demographics, Income, Referrals, Offenders, and Secondary Victims. Just as with the other two interfaces, you can see which page is active by looking at the tab bar. The active tab will have black text, as “Demographics” is in the picture above. You can select between the different pages by selecting the next title on the bar with your mouse, or by clicking the Next Page button at the bottom left of the screen.

## VICTIM WITNESS ASSISTANCE UNIT CLIENT INTAKES

[domestic violence >](#)
[victims of crime >](#)
[sexual assault >](#)
[administrative utility >](#)

welcome, Test User  
[logout >](#)

### Victim Witness Assistance Units

Data Entry
Administrative Utility
Reports

**Office of  
Crime Victims  
Advocacy**

**Washington State  
Department of Social  
& Health Services**

CA Children's Administration

**Client Information**

[Direct Services](#)

[Hotline Calls/Info. & Referral Services](#)

[Publications & Training](#)

[Stop Grant Narrative Questions](#)

[Victim Witness Narrative](#)

[Stop Grant Funded Prosecution Activities](#)

Submit
New Client or Case
Find Client or Case

Client ID: None    Case ID: None

Demographics
Referrals
Offenders

Client ID

First Contact Date

Ethnicity

Gender

Crime Type

Client Type

Disability

Year of Birth  Please enter YEAR only, not a date of birth

Race

Other Race

Other Crime

Homeless

When Crime Occurred

Client's County of Residence

Employment Status

Marital Status

Refugee / Immigrant / Asylum Seeker?

If so, what is the client's primary language?

Did Crime Occur On A Reservation

Primary Offense Location

Health Insurance

Education

Pregnant

Limited English Proficiency?

Does client have Veterans Status?

Chosen Advocate

Case Closed ☐    Date Closed     Reason Closed

Next
Submit
Clear
Cancel

THE FIELDS IN THE GRAY SHADED AREA OF THE CLIENT INTAKE INDICATE REQUIRED FIELDS.

The Victim Witness Assistance Units interface has three tabs of Client Information: Demographics, Referrals, and Offenders. Just as with the other three interfaces, you can see which page is active by looking at the tab bar. The active tab will have black text, as “Demographics” is in the picture above. You can select between the different pages by selecting the next title on the bar with your mouse, or by clicking the Next Page button at the bottom left of the screen.

INFONET USERS MANUAL, JULY 2010

4-5



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## DEMOGRAPHICS

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### REQUIRED DATA

To enter the information on any of the three Client Demographics pages, you must first enter the required data. If any of the required data fields is left blank, the record cannot be submitted into the InfoNet System. Required data is shaded in gray on each of the three interfaces to make it easier to identify.

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#### Required Data Fields

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Client ID

**Client ID:** Client ID numbers may contain letters as well as numbers and may be up to 14 digits long. Each agency should have an established protocol about how Client ID numbers are assigned to clients. See Required Data section for more details about assigning Client ID numbers.

First Contact Date

**First Contact Date:** The first contact date is entered into the date box as shown below. There are a variety of formats you can use to enter a date, such as mm/dd/yy, or m-d-yy. The First Contact Date may be significantly prior to when the InfoNet record is typed into the system, as some agencies will decide to complete paper intake forms and enter their data monthly or even quarterly, although it is recommended to enter your data frequently. The First Contact Date is the date you filled out an Intake form for that Client.

Year of Birth

**Year of Birth:** The year of birth is exactly that, the year your client was born. It is typed into the text box labeled, appropriately enough, year of birth. Please make sure to type the year of birth, and not the client's age—if you type only a one or two digit number in this field, you will receive an error message.

Race   
African American, Black  
Asian  
Native American/Alaska Native  
Pacific Islander/Native Hawaiian  
Multi Racial  
Other  
Not Reported  
White  
Select an Item  
Select an item

**Race:** Race is a drop down box with the options shown in the diagram to the left. Select the race your client most identifies with, or if necessary choose unspecified if you believe identifying your client's race would likely cause a breach of confidentiality.

Please note such issues should be extremely rare, as it is not required data for you to identify which county your client resides in.

Other Race

**Other Race:** If you select Other, please specify the client's race in the Other Race text field. This field can also be used for agencies that need to be more specific about Race/Ethnicity categories than InfoNet allows. For example, if you have another funder that requires you specify categories within Multiracial, for example, you can select Multiracial as your Race category, and in the Other Race text box you can specify "African American and Asian."

---

Ethnicity

- Select an item
- Non-Hispanic/Non-Latino
- Hispanic/Latino
- Not Reported
- Unspecified

**Ethnicity:** Select the ethnicity your client most identifies with from the options shown on the left. Ethnicity is separated from race in InfoNet because this is how the U.S. Census collects race and ethnicity data, and because this is how many of our federal reports require we submit this data.

Gender

- Select an Item
- Male
- Female
- Other
- Unspecified

**Gender:** Select the gender your client most identifies with from the options shown on the left.

Crime Type

- Select an Item
- Assault
- Child Physical Abuse
- DUI/DWI Crashes
- Elder Abuse
- Fraud
- Hate Crimes
- Homicide/ Attempted Homicide
- Identity Theft
- Kidnapping and/or Missing Person
- Property Crimes
- Robbery
- Human Trafficking/Exploitation
- Vehicular Assault

**Crime Type:** Select which Crime Type your Client was a victim of. For the SA Interface, there is only one selection – Sexual Assault. For the DV Interface, you may choose between Domestic Violence and Stalking. For Victims of Crime and for Victim Witness Assistance Units, however, there are a variety of crime types to choose from, as seen on the left. Scroll down, or type the first letter to select choices beginning with that letter.

Other Crime

**Other Crime:** Victim Witness Assistance Units may also select Crime Type = “Other” at which point they will need to fill in the “Other Crime” selection box. This text box is disabled unless “Other” is chosen as the Crime Type, and is not available for the DV, SA, or VOC interfaces.

Disability

- Select an Item
- None
- Physical Disability
- Mental Disability
- Sensory Disability
- Other Disability
- Multiple Disabilities
- Not Reported
- Unspecified

**Disability:** Select any Disability your client has. If your client has more than one disability, select Multiple Disabilities. If your client is not disabled, select None. If the client does not disclose whether or not they have a disability, select Not Reported. If your agency does not collect information on disabilities, select Unspecified.

Client Type

- Select an Item
- Survivor of Childhood Incest or Sexual Assault
- Adult Sexual Assault or Abuse
- Child Sexual Assault or Abuse

SA VERSION

**Client Type:** This field pertains primarily to the SA Interface, where you may select from Survivor of Childhood Incest or Sexual Assault, Adult Sexual Assault or Abuse, or Child Sexual Assault or Abuse, or to the Victim Witness Interface, where the field is used to differentiate between Victims, Witnesses, or Co-Victims.

Client Type

- Child
- Adult
- Select an item

VOC VERSION

In the Victims of Crime Interface, you may use this field to differentiate between Child Victims and Adult Victims.

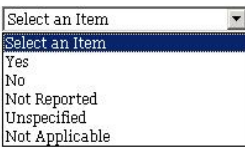
This field is not even shown on the DV Interface, as direct DV services are provided only to adult victims through DSHS and OCVA contracts.

Client Type

- Select an Item
- Victim
- Witness
- Co-Victim

VICTIM WITNESS VERSION

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Homeless 

**Homeless:** Select whether or not your client is homeless. This is a standard yes-or-no type question, with additional options for unreported, unspecified, and not applicable, although it is strongly encouraged for you to select either Yes or No for this question unless very special circumstances prevent you from answering otherwise.



Once these questions about your client have been answered, you will be able to save the Intake by clicking on the Submit button at the bottom of your screen. This will also allow you to save the Intake if you need to enter additional information at another time.

---

## ERROR MESSAGE: REQUIRED FIELD

If you have not entered all of the required data fields, an error message will appear at the bottom of the screen indicating that a required data field has been left blank. In addition, a red asterisk will appear next to the field that is required.

In the following screen shot, a number of required fields have been left blank, and each is detailed in the error message at the bottom of the page:

The screenshot displays the 'Sexual Assault (SA)' data entry form. The top navigation bar includes links for 'domestic violence >', 'general crimes >', and 'administrative utility >'. The main header features the 'Sexual Assault (SA)' title, 'Data Entry', 'Administrative Utility', and 'Reports' tabs. Logos for the 'Office of Crime Victims Advocacy' and 'Washington State Department of Social & Health Services' are present. A sidebar on the left lists various service categories like 'Client Intakes', 'Medical and Criminal Justice System', etc. The form itself has tabs for 'Demographics', 'Offenders', 'Income', 'Referrals', 'SA History', 'Needed / Received', and 'Secondary Victims'. The 'Demographics' tab is active, showing fields for Client ID (filled with 'SAClient7'), Year of Birth (empty, marked with a red asterisk), First Contact Date (empty, marked with a red asterisk), Race (dropdown, marked with a red asterisk), Ethnicity (dropdown, marked with a red asterisk), Gender (dropdown, marked with a red asterisk), Crime Type (dropdown, filled with 'Sexual Assault'), Client Type (dropdown, marked with a red asterisk), Disability (dropdown, marked with a red asterisk), and Homeless (dropdown, marked with a red asterisk). Below these are more dropdowns for 'When Assault Occurred', 'Client's County Of Residence', 'Employment', 'Marital Status', 'Refugee / Immigrant / Asylum Seeker', 'Primary Offense Location', 'Health Insurance', 'Education', 'Pregnant', 'Limited English Proficiency?', and 'Does the client have Veteran's Status?'. At the bottom, there are checkboxes for 'Case Closed', a 'Date Closed' field, and a 'Reason Closed' dropdown. A red error message at the bottom lists the required fields: YearOfBirth, FirstContactDate, Race, Ethnicity, Gender, ClientType, Disability, and Homeless. Navigation buttons 'Next Page', 'Submit', 'Clear', and 'Cancel' are at the very bottom.

domestic violence > general crimes > administrative utility > welcome, sticky message! logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

New Client or Case Find Client or Case

Client Intakes

- Medical and Criminal Justice System
- CSAP and Specialized Services
- Marginalized Services
- Crisis Intervention & Information/Referral
- Prevention Activities
- Systems Coordination & Program Support
- Community Organizing & Responding

Demographics Offenders Income Referrals SA History Needed / Received Secondary Victims

Client ID: None Case ID: None

Client ID: SAClient7 Year of Birth: \* Please enter YEAR only, not a date of birth

First Contact Date: \* Race: Select an item \* Ethnicity: Select Item \* Gender: Select an Item \* Crime Type: Sexual Assault Client Type: Select an item \* Disability: Select an Item \* Homeless: Select an item \*

When Assault Occurred: Select an item Primary Offense Location: Select an Item

Client's County Of Residence: Select an Item Health Insurance: Select an Item

Employment: Select an Item Education: Select an Item

Marital Status: Select an Item Pregnant: Select an item

Refugee / Immigrant / Asylum Seeker: Select an item Limited English Proficiency?: Select an item

If so, what is the client's first Language? Does the client have Veteran's Status?: Select an item

Case Closed: ☐ Date Closed: Reason Closed: Select an Item

- YearOfBirth is a required field
- FirstContactDate is a required field
- Race is a required field
- Ethnicity is a required field
- Gender is a required field
- ClientType is a required field
- Disability is a required field
- Homeless is a required field

Next Page Submit Clear Cancel

To successfully enter a record with such an error message, just fill in the fields marked with the red asterisk (\*) and click the Submit button again. You will know that you successfully submitted a client intake when the Client ID and Case ID numbers appear at the top of the screen.

Client ID: SAClient7 Case ID: 370

## OPTIONAL DATA

Even after the required data has been entered, there is a lot more information about clients that agencies collect. Much of this information may not be “required” by InfoNet, but it is necessary and essential to a particular contract or program, or is useful data that can later be analyzed for demographic or outreach purposes. The following are additional elements of the Client Demographics page on each of the various interfaces:

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### Optional Data Fields

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When Assault Occurred

Select an Item
Select an Item
72 hours or less before intake
3 days - 14 days before intake
2 weeks - 6 months before intake
6 months - 12 months before intake
1 year - 5 years before intake
5 years - 10 years before intake
10 years before intake
Unknown

SA VERSION

After Disability is a field that has a different name depending on which Interface you are logged onto. In the Sexual Assault Interface, this field is called **When Assault Occurred**, and has the choices listed on the top left. The options available are different than on the other two interfaces, as they match up with the categories of data previously collected on Sexual Assault Client Intake forms.

When Incident Occurred  
for Which Client Sought  
Services

12 hours or less before intake
12 hours or less before intake
12 - 24 hours before intake
24 - 48 hours before intake
2 - 7 days before intake
7 - 14 days before intake
14 days - 1 month before intake
More than one month before intake
Not Reported
Select an item

DV VERSION

On the DV Interface, the same question is called **When Incident Occurred for Which Client Sought Services**. This name was chosen instead of When Assault Occurred as the DV providers on our InfoNet User Group planning committee determined this would be a more accurate term for the question being asked, given many cases of domestic violence have an extended duration, and cannot be limited to a single assault or abuse incident.

When Crime Occurred

12 hours or less before intake
12 hours or less before intake
12 - 24 hours before intake
24 - 48 hours before intake
2 - 7 days before intake
7 - 14 days before intake
14 days - 1 month before intake
More than one month before intake
Unknown
Select an item

VOC AND VICTIM WITNESS VERSION

On the VOC and Victim Witness Interfaces, the question is called **When Crime Occurred**, and the choices are the same as those shown on the DV Interface.

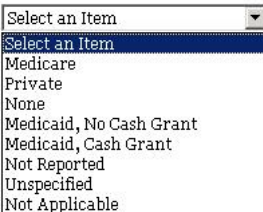
Client's County Of Residence

Select an Item
Select an Item
Adams
Asotin
Benton
Chelan
Clallam
Clark
Columbia
Cowlitz
Douglas
Ferry

**Client's County of Residence:** Select the Client's county of residence. Notice there is a scroll bar at the right hand side of the drop down box, indicating there are more choices than is immediately shown.

If the client does not disclose the county she or he resides in, select Not Reported. If your agency does not collect this data from anyone, select Unspecified. Keep in mind this is an optional field, and if you feel disclosing the client's county of residence is detrimental to the client's safety, you may always choose not reported. There is also an option to select Out of State if the client is not a resident of a Washington State county.

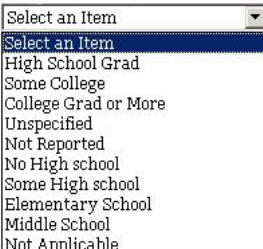
## Optional Data Fields

Health Insurance 

Select an Item

- Select an Item
- Medicare
- Private
- None
- Medicaid, No Cash Grant
- Medicaid, Cash Grant
- Not Reported
- Unspecified
- Not Applicable

**Health Insurance:** Select the Client's Health Insurance. This variable will be more useful to some agencies than others. If the client does not disclose their health insurance, select Not Reported. If your agency does not collect Health Insurance information from anyone, select Unspecified.

Education 

Select an Item

- Select an Item
- High School Grad
- Some College
- College Grad or More
- Unspecified
- Not Reported
- No High school
- Some High school
- Elementary School
- Middle School
- Not Applicable

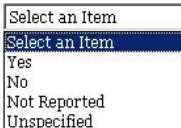
**Education:** Select the highest level of Education your client has received from the list. There are options for both adults and children; please do not select "Elementary" or "Middle School" for adult clients, these are intended for child clients only. For children that are not yet school age, choose "Not Applicable." If the client does not wish to disclose their level of education, select Not Reported. If your agency does not collect Education information, select Unspecified.

Pregnant 

Select an Item

- Select an Item
- Yes
- No
- Not Reported
- Unspecified
- Not Applicable

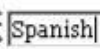
**Pregnant:** Indicate whether the client is pregnant or not, if desired. If the client is a child or male, select Not Applicable. If the client does not disclose whether or not she is pregnant, select Not Reported. If your agency does not collect information about pregnancy, select Unspecified.

Limited English Proficiency? 

Select an Item

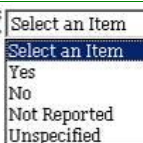
- Select an Item
- Yes
- No
- Not Reported
- Unspecified

**Limited English Proficiency:** Indicate whether your client has limited English Proficiency. If the client does not disclose this information, select Not Reported. If your agency does not collect information on language proficiency, select Unspecified.

If so, what is the client's first Language? 

Spanish

**Client's First Language:** If you selected Yes under Limited English Proficiency, please enter the client's first language in the text box immediately following. If the client does not have limited English proficiency, you may leave this box blank.

Does the client have Veteran's Status? 

Select an Item

- Select an Item
- Yes
- No
- Not Reported
- Unspecified

**Veteran's Status:** Indicate whether the client has veteran's status. If the client does not choose to disclose whether they have veteran's status, select Not Reported. If your agency does not collect this information, select Unspecified.

Primary Offense Location 

Select an Item

- Select an Item
- Victim's Home
- Offender's Home
- Third Party's Home
- Car
- Street
- School
- Park
- Faith facility (e.g. church, syn-
- Other Private Location
- Other Public Location

**Primary Offense Location:** This field allows you to indicate where the offense occurred for which the client sought services. The question may be more applicable to certain crime types than others. This is an optional field.

Please note there is a scroll bar on the right of the pull down list. The scroll bar indicates there are several more options not shown, including Not Reported and Unspecified. Please indicate Not




---

### Optional Data Fields

---

Reported if the client chose not to disclose this information and Unspecified if your agency chooses not to collect this information.

Employment 

Select an Item

Select an Item

Full Time

Part Time

Not Employed

Not Reported

Unspecified

Not Applicable

**Employment:** This field allows you to track employment information on the clients you serve. It is an optional field. If the client chooses not to disclose this information, please select Not Reported. If your agency does not collect this information, please select Unspecified. If the client is a child below legal working age, please select Not Applicable.

Marital Status 

Select an Item

Select an Item

Single

Married

Divorced

Legally Separated

Widowed

Unspecified


Common Law Marriage

Not Reported

Living With Partner

Not Applicable

**Marital Status:** This field allows you to collect marital status of the clients you serve. **Please note** this is not related to the client's relationship to the offender – there is a separate Offender section for recording that information. This field is intended as demographic information on your client's only. Please select Not Reported if the client chooses not to disclose this information, Unspecified if your agency chooses not to collect this information and Not Applicable if your client is a child.

Refugee /  
Immigrant /  
Asylum Seeker 

Select an Item

Select an Item


Yes

No

Not Reported

Unspecified

**Refugee/Immigrant/Asylum Seeker:** This field allows you to collect information on whether your client is a refugee, immigrant or asylum seeker. This information is important if you are a STOP grant recipient, and also for tracking the number of refugee clients our agencies serve across the state. If your client does not choose to disclose this information, please select Not Reported. If your agency does not collect this information on clients, select Unspecified.

Did Crime Occur On A  
Reservation 


Select an Item

Select an Item

Yes

No

**Did Crime Occur On A Reservation:** This field allows you to collect information on whether or not the crime occurred on a reservation. If your agency does not collect this information on clients, you may leave this question blank.

Chosen Advocate 

Hatcher, Terri


Select an Item

Cross, Marcia

Hatcher, Terri

Huffman, Felicity

Longoria, Eva

Closed 

Select an Item

**Chosen Advocate:** In some scenarios, a client may end up working predominantly with one staff member more than others, either because of assignment, or because the client comes for a particular service, such as support group, that one particular staff member provides. If a client will be working mostly with one particular advocate, selecting that person's name in the "Chosen Advocate" field will speed up data entry of services, because the selected advocate's name will be first on the list by default under services. (If the client receives services from another staff member, simply select another name from the drop down menu on the services page.)



Once these questions about your client have been answered, you will be able to save the Demographics portion of the Intake by clicking on the Submit button at the bottom of your screen. If you need to exit this screen and finish entering the Intake at another time, this button will save your information for you. **Please remember to click on the Submit button** or your information may not be saved.

---

## CLOSING A CASE

Some agencies prefer to close a client's case file when it is anticipated the client will not receive any more services from that agency. This is an optional feature, and many agencies never close cases, as a client may come back for additional services at any time. However, as many agencies do routinely close inactive cases, this option is available in InfoNet should you choose to use it.

The area at the bottom of the Demographics page is provided for this purpose. The area contains three fields: Case Closed, Date Closed, and Reason Case Closed, as shown in the illustration below:

Case Closed ☐ Date Closed  Reason Closed Select an Item

TO REOPEN A CLOSED CASE, SIMPLY UNCHECK THE CASE CLOSED BOX AND DELETE THE DATE.

To close a case on a client, follow the three easy steps outlined below:

### Closing A Client Case

Click on the box next to the words "Case Closed." A check mark will appear, indicating this is a closed case.

Case Closed ☒

Enter the date the case was closed. Please make sure the date you close a case is AFTER you've entered any services you provided for the client.

Date Closed

Select the Reason the case was closed from the pull down menu. The reason a case is closed is an optional field.

Reason Closed Select an Item

- Select an Item
- No Further Service Needed
- Client Moved
- Client Declined Further Service
- Can No Longer Contact Client
- Other
- No Services in 3 months
- No Services in 6 months
- No Services in 9 months
- No Services in 12 months

Submit

Remember to click on the Submit button after entering Case Closed data to save your information.

## REOPENING A CLOSED CASE

If at any time you wish to re-open a closed case, simply pull up the case and uncheck the "Case Closed" box and delete the date and reason, remembering to click on the Submit button to save your changes. You may re-enter this information again the next time you decide to close that client's case. Keep in mind if your client comes into your agency at another time for a different crime incident, you may still use her Client ID number – Clients never close, only cases. The case represents the incident which occurred and for which the client sought services. The Client represents the person.



## INCOME

domestic violence > general crimes > administrative utility > welcome, Nicky Gleason logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

OCVA Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

New Client or Case Find Client or Case

Demographics Offenders **Income** Referrals SA History Needed / Received Secondary Victims

**Income Information**

Primary Income Source

Monthly Income

Other income sources, check as many as apply:

<input type="checkbox"/> TANF/AFDC	<input type="checkbox"/> General Assistance
<input type="checkbox"/> Social Security	<input type="checkbox"/> SSI
<input type="checkbox"/> Alimony/Child Support	<input type="checkbox"/> Employment
<input type="checkbox"/> Other Income	<input type="checkbox"/> Spouse's Income
<input type="checkbox"/> None	

Next Page Submit Clear Cancel

**SELECT THE CLIENT'S PRIMARY INCOME SOURCE FROM THE DROP DOWN BOX AT THE TOP AND ANY ADDITIONAL INCOME SOURCES IN THE**

Each of the interfaces has a page for Client Income information, and the page is identical whether you are in the DV, SA, or VOC interface. It is not currently an option to collect this data for Victim Witness Assistance Units. While not required for any of the OCVA or DSHS funded contracts, Client Income is often a requirement for other funders such as United Way or other state or city funding, so it is available in InfoNet for agencies that need to collect it. However, this information is purely optional and may or may not be collected by your agency. If your agency does not collect this data, you may skip this page.

Client Income may vary significantly from month to month, and income sources can certainly fluctuate. The purpose of the data you collect on this page is to estimate the client's typical monthly income and income sources. A good rule of thumb if your agency chooses to collect this information is to ask the client to describe her or his income situation for the month prior to coming to your agency. Select any income sources she received and use the income she or he received in the last month as an "income snapshot" even if her income and income sources fluctuate in past and future months.

It is not intended for you to routinely update this information if your client's income varies month per month. However, if you are working with a client and you determine her income situation has varied significantly, you may update this information whenever you choose.

There are three fields you may choose to complete on the Income page:

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### Income Fields

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Primary Income Source TANF/AFDC

- TANF/AFDC
- General Assistance
- Social Security
- SSI
- Alimony/Child Support
- Employment
- Other Income
- Spouse's Income
- None

**Primary Income Source:** Identify the primary income source for your client. If there are income sources your clients regularly report which are not on this list, please contact the InfoNet administrator and additional options may be added to the list in the future.

Monthly Income \$1350.00

**Monthly Income:** Enter the client's approximate monthly income. This field is meant to be an approximate value, and fluctuations in monthly income do not need to be updated or recorded.

Other income sources, check as many as apply:

<input type="checkbox"/> TANF/AFDC	<input type="checkbox"/> General Assistance
<input type="checkbox"/> Social Security	<input type="checkbox"/> SSI
<input checked="" type="checkbox"/> Alimony/Child Support	<input checked="" type="checkbox"/> Employment
<input type="checkbox"/> Other Income	<input type="checkbox"/> Spouse's Income
<input type="checkbox"/> None	

**Other income sources:** Select any additional income sources your client receives in addition to their primary income source here. Please do not select the primary income source again.

Submit

Click on the **Submit** button to save your data before continuing.

---

## REFERRALS

general crimes > sexual assault > administrative utility > welcome, Nicky Gleason logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
CA Children's Administration

New Client or Case Find Client or Case

Client Information  
Medical and Criminal Justice System  
Direct Client Services  
Hotline Calls/Info. & Referral Services  
Coordinated Community Response  
Presentations, Publications & Conducting Trainings

Demographics Kids Income **Referrals** Presenting Issues Offenders Needed / Received

Client ID: None Case ID: None

Referred From:	Referred To:
<input type="checkbox"/> Police	<input type="checkbox"/> Police
<input type="checkbox"/> Hospital	<input type="checkbox"/> Hospital
<input type="checkbox"/> Clergy	<input type="checkbox"/> Clergy
<input type="checkbox"/> Media	<input type="checkbox"/> DCFS
<input type="checkbox"/> Self	<input type="checkbox"/> Education System
<input type="checkbox"/> Friend	<input type="checkbox"/> Legal System, Prosecutor
<input type="checkbox"/> Relative	<input type="checkbox"/> Other Medical
<input type="checkbox"/> Center Hotline	<input type="checkbox"/> Private Attorney
<input type="checkbox"/> DCFS	<input type="checkbox"/> Public Health
<input type="checkbox"/> Education System	<input type="checkbox"/> Social Services Program
<input type="checkbox"/> Legal System, Prosecutor	<input type="checkbox"/> Medical Advocacy Program
<input type="checkbox"/> Other Medical	<input type="checkbox"/> Other Project/Crisis Line
<input type="checkbox"/> Private Attorney	<input type="checkbox"/> Legal Aid Attorney
<input type="checkbox"/> Public Health	<input type="checkbox"/> Court
<input type="checkbox"/> Social Services Program	<input type="checkbox"/> Other (please specify below)
<input type="checkbox"/> Medical Advocacy Program	<input type="text"/>
<input type="checkbox"/> Other Project/Crisis Line	
<input type="checkbox"/> Telephone	
<input type="checkbox"/> Legal Aid Attorney	
<input type="checkbox"/> Court	
<input type="checkbox"/> Other (please specify below)	<input type="text"/>

Next Page Submit Clear Cancel

Each of the interfaces has a page for Referral information, and the page is identical whether you are in the DV, SA, VOC or Victim Witness interface. The referral information is optional, and if your agency does not collect this data, you may skip this page of the client intake. Referral information can be useful to your agency in a variety of ways. Over time, referral information can tell your agency where to send brochures, where to do outreach, and what agencies or organizations in your area are working with your client population. You may collect only part of this information (such as collecting Referred From data, but not Referred To data) or you may collect referral information on specific types of clients – whatever is the most useful to your agency.

The intention of this page is to collect referral information at the time the Intake is completed. **It is not the area where the majority of Information and Referral services are recorded;** there are different areas in InfoNet for recording the work your agency does giving out referrals. Instead, this section is meant to be a quick picture of how your client found out about your agency, and to what other agencies you referred your client.

To complete the Referral page, simply check the box for the agency that referred your client to your agency in the **Referred From** column on the left. While you may select more than one agency, in most cases you will select only one option in the Referred From column. Then select any agencies you referred your client to in the **Referred To** column. If you would like to return and update this page after the Intake has been completed, you may do so at any time.

If there are organizations your agency routinely receives referrals from or gives referrals to that do not appear on the list, please feel free to contact the InfoNet administrator and she may be able to add more choices to the list.

As always, remember to click the **Submit** button when you are finished to save your information before continuing.

## OFFENDERS

domestic violence > general crimes > administrative utility > welcome, Nicky Gleason logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

New Client or Case Find Client or Case

Client Intakes Medical and Criminal Justice System CSAP services Marginalized Services Crisis Intervention & Information/Referral Prevention Activities Systems Coordination & Program Support Community Organizing & Responding

Demographics **Offenders** Income Referrals SA History Needed / Received Secondary Victims

Client ID: None Case ID: None

Relationship to Victim	Select an Item	Gender	Select an Item
Race	Select an Item	Ethnicity	Select an item
County	Select an Item	Visitation	Select an item
Age at Victim Intake		Offender Age Range	Select an item
Registered Sex Offender	Select an Item		

Add/Edit Offender Clear Offender Data

Next Page Submit Clear Cancel

Each of the interfaces has a page for Offender information. While it is strongly encouraged to collect Offender information whenever possible, some clients choose not to disclose Offender Information, or do not have any information on the Offender. In those situations, you can skip the Offender section for that client, or if your funding requires certain Offender data (for example, STOP grant, STOP ARRA, and SASP funding all require offender relationship) you can make your best guess regarding offender relationship and leave the rest of the fields blank. Agencies that do collect offender information have different amounts of data they collect, and different fields may be more appropriate to some crime types than others. Therefore, the fields on the Offender page are not all required, and you may enter as little or as much information about each Offender as you wish.

The fields available are outlined below.

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## Offender Fields

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Relationship to Victim	Select an item
	Parent/guardian
	Other relative
	Acquaintance/friend
	Caregiver
	Prof. Service provider
	Spouse/partner/ex-partner
	Stranger
	Select an item

**Relationship to Victim:** The relationship to victim pull down is different for each interface.

For Sexual Assault, the options are the same as were previously available on the yellow Client Intake forms.

### SA VERSION

Relationship to Victim	Select an item
	Spouse
	Partner
	Ex-spouse
	Ex-partner
	Parent/Stepparent
	Other relative
	Other non-relative
	Select an item

On the Domestic Violence interface, the relationship categories are those that are more appropriate to DV instances, and include variations on many family and intimate partner relationships.

### DV VERSION

Relationship to Victim	Select an item
	Parent/guardian
	Other relative
	Acquaintance/friend
	Caregiver
	Prof. Service provider
	Spouse/partner
	Ex-spouse/ex-partner
	Stranger
	Select an item

On the Victims of Crime and Victim Witness interface, the relationship categories are broader and include relationships such as Stranger.

### VOC AND VICTIM WITNESS VERSION

Gender	Select an Item
	Select an Item
	Male
	Female
	Other
	Unspecified

**Gender:** This field is for recording the offender's gender if that information is available and collected by your agency. It uses the same drop down list as the Demographic area of the client intake.

Race	Select an Item
	Select an Item
	African American, Black
	Asian
	Native American/Alaska Native
	Pacific Islander/Native Hawaiian
	White
	Multi Racial
	Other
	Not Reported
	Unspecified

**Race:** This field is for recording the offender's race if such information is available and collected by your agency. It uses the same drop down list as the Demographic area of the client intake.

Ethnicity	Select an item
	Select an item
	Non-Hispanic/Non-Latino
	Hispanic/Latino
	Not Reported
	Unspecified

**Ethnicity:** This field is for recording the offender's ethnicity if such information is available and collected by your agency. It uses the same drop down list as the Demographic area of the client intake.

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## Offender Fields

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County Where Offender Resides 

**County Where Offender Resides:** This field is for recording the county where the offender resides. This can be useful information if there is a restraining order or other potential of contact or restricted contact with the client that your agency wishes to track. It uses the same county drop down list as the Demographic section of the client intake.

Visitation   
Supervised Visitation  
Unsupervised Visitation  
Visitation Not An Issue  
Not Reported  
Unspecified  
Select an item

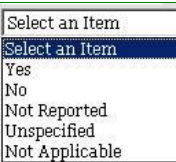
**Visitation:** This field is used if the offender and your client have children in common, and is used to record if there are visitation issues involved between the offender and the client. If the offender has supervised visitation of the client's children, select Supervised Visitation. If unsupervised visitation is permitted between the Offender and the client's children, select Unsupervised. If this is not an issue, you may select Visitation Not An Issue. If the client did not report this information, select Not Reported. If your agency does not collect this data, select Unspecified.

Age at Victim Intake


**Age at Victim Intake:** This field is used to record the current age of the offender, if that information is known. The age, rather than the year of birth, is used for the offender for simplicity – to keep advocates from having to guess or calculate a year of birth if the client only knows the offender's age. If the exact age is not known, you can also use the Offender Age Range instead of answering this question.

Offender Age Range   
< 12 years of age  
12 - 17 years  
18 - 29 years  
30 - 59 years  
> 59  
Unknown  
Not Reported  
Unspecified  
Select an item

**Offender Age Range:** This field is used to record the approximate age of the offender, if that information is known rather than the offender's exact age. If the exact age was already entered, feel free to skip this field. In addition, offender age in either question is optional. If the client does not disclose the Offender's age, you may select Not Reported. If your agency does not collect Offender's Age information from anyone, select Unspecified.

Registered Sex Offender   
Select an Item  
Yes  
No  
Not Reported  
Unspecified  
Not Applicable

**Registered Sex Offender:** This field is only available on the Sexual Assault Interface, and is to record if the offender is known to be a registered sex offender (if so, select yes) or not (if not, select no.) As with all the other fields, select Not Reported if the victim did not disclose, and Unspecified if your agency does not collect that data.



When you have entered all of the Offender data you wish to record, click on the Submit button at the bottom of the page to save your data.

---

## Adding an Offender




InfoNet allows you to enter zero, one, or multiple offenders' information for each client. If you've finished submitting information about one offender and would like to add information on a second or third offender, click on the **Add/Edit Offender** button. **Please note**



that hitting the “Submit” button will save information about your client, but not about the offender – you must click the Add/Edit Offender button to save Offender information. The reason for this is that some clients have no Offender information to record, and some clients have multiple offenders, so the save function for Offenders is a separate tool from the Submit button.

### **Editing an existing offender record**

Once one or more offenders have been entered into a client’s record, information about the offender(s) will appear in the table at the bottom of the page:

Age	Age Range	Gender	Relationship To Victim		
28	18 - 29 years	Male	Dating relationship		
32	30 - 59 years	Male	Acquaintance		

You can view any of those records by clicking on the magnifying glass for the appropriate offender on the right hand side of the screen. That offender’s information is then shown in the fields on the main part of the form. You may then edit, change, or add any information you wish to that offender’s record. To save your changes, be sure to click on the Submit button at the bottom of the page, or you may click on the Add/Edit Offender button for the same result. If you wish to delete an offender completely, click on the red **X** icon.

### **Clear Offender Data**

If you begin typing information about an offender and realize you didn’t want to enter that information, or if you realize halfway through entering an offender record that the information has already been entered, you can delete the information you typed by clicking on the Clear Offender Data Button.



## OTHER ISSUES REPORTED: SEXUAL ASSAULT INTERFACE

domestic violence > victims of crime > administrative utility > welcome, Test User logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
CA Children's Administration

New Client or Case Find Client or Case

Client ID: Example2 Case ID: 86803

Demographics Offenders Income Referrals Other Issues Reported Needed / Received Secondary Victims

Other Issues Reported for client, check as many as apply:

- ☐ Rape or Sexual Assault
- ☐ Adult Survivor of Incest or Child Sexual Assault
- ☐ Stalking
- ☐ Domestic Violence
- ☐ Human Trafficking/Exploitation

Next Submit Clear Cancel

The Other Issues Reported page is an updated version of a page previously titled “SA History.” The crime for which they initially came to your agency to receive services is listed on the Demographics page as “Client Type,” and this area allows you to indicate if the client also disclosed an additional crime, which could affect the treatment they receive in support groups, therapy, or advocacy in your agency, but for which they will not be receiving primary client services.

For example, if a client’s primary reason for coming into your agency for services as an assault that occurred to them as an adult, they may disclose during their intake that they are also an adult survivor of incest or child sexual assault. In that case, you would list their “client type” as Adult Sexual Assault or Abuse and then select Adult Survivor of Incest or Child Sexual Assault on the Other Issues Reported page.

If your agency will provide separate, distinguishable services for another crime victimization, you should start a second case for this client, rather than simply checking the Other Issues Reported page. This is most often seen when a client is a victim of both Sexual Assault and Domestic Violence, or Sexual Assault and one of the crimes in the Victims of Crime interface, etc.

A good rule of thumb is if you can distinguish which services would be recorded under a different case – for example, if my client is going to receive medical and legal advocacy for her sexual assault case, but support group and shelter for her domestic violence case, I can distinguish which services would go under each case, and I would start a second case for my client. If, however, my client initially came in as an Adult

victim of Sexual Assault, and in support group disclosed that she was also an Adult Survivor of Childhood Sexual Assault, but I provide no additional services other than the support group she was already attending, I would not start an additional case, but would use the “other issues reported” page instead.

If the client does not have additional issues, or if your agency does not collect this information, you may skip this page. If you do select an item under Other Issues Reported, always remember to click on the Submit button to save your changes.

## OTHER ISSUES: DOMESTIC VIOLENCE INTERFACE

The screenshot displays the 'Domestic Violence (DV)' interface. At the top, there is a breadcrumb trail: 'victims of crime > sexual assault > administrative utility >'. To the right, it says 'welcome, Test User' and 'logout >'. Below this is a purple header bar with the title 'Domestic Violence (DV)' and three tabs: 'Data Entry', 'Administrative Utility', and 'Reports'. To the right of the header are logos for 'OCVA Office of Crime Victims Advocacy' and 'Washington State Department of Social & Health Services CA Children's Administration'. Below the header, there are three buttons: 'Submit', 'New Client or Case', and 'Find Client or Case'. On the left side, there is a vertical menu with several options: 'Client Information', 'Medical and Criminal Justice System', 'Direct Client Services', 'Hotline Calls/Info. & Referral Services', 'Coordinated Community Response', 'Presentations, Publications & Conducting Trainings', 'Community Education', 'End Of Year Report', and 'STOP Grant Narrative Questions'. The main content area shows 'Client ID: None' and 'Case ID: None'. Below this are several tabs: 'Demographics', 'Children and Youth', 'Income', 'Referrals', 'Other Issues', 'Offenders', 'Served', and 'Animals'. The 'Other Issues' tab is currently selected. It contains two sections: 'Other Issues Reported for client, check as many as apply:' and 'Other issues for client's children:'. The first section has checkboxes for 'Stalking', 'Harassment', 'Adult Survivor of Incest/Child Sexual Assault', 'Rape or Sexual Assault', 'Other Issue', and 'Human Trafficking/Exploitation'. The second section has checkboxes for 'Child Sexual Assault', 'Child Physical Abuse', and 'Child Neglect'. At the bottom of the form are four buttons: 'Next', 'Submit', 'Clear', and 'Cancel'.

The Other Issues Reported page is on the DV interface is an updated version of the page previously labeled “Presenting Issues.” It works very similarly to the Other Issues Reported page on the Sexual Assault Interface, but contains more options and also includes options for the client’s children.

The purpose of this page is to provide a space to record other crimes that the client may have been a victim of that would impact the services she needed from your agency. Currently, the options on this page are sexual assault, stalking, and harassment, although more may be added in the future if agencies request additional options to be listed on this page. In addition to information about the client, there is a space to record if the client’s children have issues with sexual assault, abuse, or neglect, as those issues would impact the services children residing in a DV shelter receive.

If either your client or your client’s children will be receiving different, primary services as the result of a separate crime or victimization, you should start a separate case rather than just checking the box here. For instance, if your agency also provides Victims of Crime services, and one of your client’s children will be receiving services as a victim of Child Abuse, you should create a Victims of Crime intake for that child and enter the direct services provided to the child in that section.

This page is optional and is intended as a tool to be useful to agencies. If your agency does not find this information useful, it is fine to skip this page.

If you have entered this information for your client, remember to click on the Submit button to save your changes.

---

## SERVED

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The Sexual Assault and Domestic Violence Interfaces both have a page titled “Served.” This page is intended for STOP grant recipients and SASP grant recipients, and is how we record when a client has been “fully served, partially served, and not served” for the federal grant reports. If your agency is not a STOP or SASP grant recipient, please feel free to skip this page unless your agency would like to collect this information for your own use. This replaces the section formerly known as “Needed/Received.”

victims of crime > sexual assault > administrative utility > victim witness assistance units > welcome, Test User  
[logout >](#)

---

### Domestic Violence (DV)

[Data Entry](#) | [Administrative Utility](#) | [Reports](#)



Office of  
Crime Victims  
Advocacy



Washington State  
Department of Social  
& Health Services  
**CA** Children's Administration

**Client Information**

[Medical and Criminal Justice System](#)

[Direct Client Services](#)

[Hotline Calls/Info. & Referral Services](#)

[STOP GRANT Coordinated Community Response](#)

[STOP GRANT Presentations, Publications & Trainings](#)

[DSHS Shelter Community Education](#)

Submit

New Client or Case

Find Client or Case

Client ID: None    Case ID: None

[Demographics](#) | [Children and Youth](#) | [Income](#) | [Referrals](#) | [Other Issues](#) | [Offenders](#) | [Served](#) | [Animals](#)

**For clients that received STOP grant funded victim services, please indicate whether the client was served, partially served, or not served.** (These questions replace the "Needed/Received" section.)

- Count a victim/survivor **served** if they requested grant-funded services, or services provided through the required match, and your program was able to provide all of those services.
- Count a victim **partially served** if they requested grant-funded services, or services provided through the required match, but your program could not provide all of those services.
- Count a victim **not served** if they requested grant-funded services, or services provided through the required match, and your program could not provide any of those services.

Client Served:  

Select an Item

Reason partially or not served:  

Select an Item

Because of the way Washington State counts our STOP & SASP grant clients, none of your clients will be “unserved” by the federal definition. Likewise, your clients will likewise rarely be “partially served” according to the federal definition. Because of this, we assume that your clients are “served” unless you specify otherwise.

However, the question is there for the rare cases in which a STOP or SASP grant client is unserved or partially served. If you select either “partially served” or “unserved,” please specify the reason from the drop down list provided.

If the reason someone was unserved or partially served is NOT one of the options available, chances are that the client was actually served by the federal definition. In those situations, if you aren’t sure, contact your STOP or SASP program coordinator to discuss the case in more detail.


When you have finished completing this information, be sure to click on the Submit button at the bottom of the page to save your changes.


## SECONDARY VICTIMS

domestic violence > victims of crime > administrative utility > welcome, Test User [logout >](#)

---

**Sexual Assault (SA)**  
[Data Entry](#) [Administrative Utility](#) [Reports](#)

 **Office of  
Crime Victims  
Advocacy**

 **Washington State  
Department of Social  
& Health Services**  
CA Children's Administration

---

**Client Intakes**  
[Medical and Criminal Justice System](#)  
[CSAP and Specialized Services](#)  
[Native American and Marginalized Services](#)  
[Crisis Intervention/ Info. & Referral](#)  
[Prevention Activities](#)  
[System Coordination](#)  
[Community Organizing & Responding](#)

[Submit](#) [New Client or Case](#) [Find Client or Case](#) [Print this Client's Record](#)

**Client ID:** Examples **Case ID:** 86806







[Demographics](#) [Offenders](#) [Income](#) [Referrals](#) [Other Issues Reported](#) [Served](#) [Secondary Victims](#)

Year of Birth  Gender

Race  Ethnicity

Relationship to Client

[Add / Edit Secondary](#) [Clear Secondary](#)

Year Of Birth	Gender	Relationship To Client		
1972	Female	Parent or Guardian		
1999	Male	Other Relative		
2004	Female	Other Relative		

Services Provided to this Secondary Victim

Service	Staff/Volunteer	Date	Hours of Service
<input type="text" value="Select an Item"/>	<input type="text" value="Cross, Marcia"/>	<input type="text"/>	<input type="text"/>

[Add / Edit Service](#) [Clear Service](#)

[Next](#) [Submit](#) [Clear](#) [Cancel](#)

The Secondary Victims page is available on the Sexual Assault and Victims of Crime Interfaces and is used to record information on the Secondary Victims served. There are separate areas to record both the demographics on the secondary victims (gray shaded area at the top) and services provided to each of those victims (Services Provided area at the bottom.)

To begin recording information about Secondary Victim services, create a record for the secondary victim to whom you provided services, using any combination of five demographic fields, outlined below:

### Secondary Victim Fields

Year of Birth

**Year of Birth:** This field is for recording the Year of Birth of the secondary victim. This field, like all of the demographic fields for secondary victims, is optional.

## Secondary Victim Fields

Gender

- Select an Item
- Male
- Female
- Other
- Unspecified

**Gender:** This field is for recording the gender of the secondary victim. It uses the same drop-down list as the other gender fields in InfoNet. If the information was not disclosed, select Not Reported. If your agency does not collect this information, select Unspecified or leave the question blank.

Race

- Select an Item
- African American, Black
- Asian
- Native American/Alaska Native
- Pacific Islander/Native Hawaiian
- White
- Multi Racial
- Other
- Not Reported
- Unspecified

**Race:** This field is for recording the race of the secondary victim. It uses the same drop-down list as the other race fields in InfoNet. If the information was not disclosed, select Not Reported. If your agency does not collect this information, select Unspecified or leave the question blank.

Ethnicity

- Select an item
- Non-Hispanic/Non-Latino
- Hispanic/Latino
- Not Reported
- Unspecified

**Ethnicity:** This field is for recording the ethnicity of the secondary victim. It uses the same drop-down list as the other ethnicity fields in InfoNet. If the information was not disclosed, select Not Reported. If your agency does not collect this information, select Unspecified or leave the question blank.

Relationship to Client

- Select an Item
- Significant Other
- Parent or Guardian
- Child
- Friend
- Roommate
- Grandparent
- Other Relative

**Relationship to Client:** This field is for recording the relationship the secondary victim has to your client. While it is an optional field, this field is also what is used to identify the secondary client's record, so it is recommended you complete this field when recording secondary victim services. If the information was not disclosed, select Not Reported. If your agency does not collect this information, select Unspecified or leave the question blank.

Add / Edit Secondary

Click on the **Add/Edit Secondary** button to save your secondary victim demographic information. **Please note that clicking the Submit button does not save Secondary Victim information.** The submit button will save information about your client, but because any given client may have zero, one, or more secondary victims, this is a separate tool for saving Secondary Victim information so that multiple records may be added.

Once you have created a record for the secondary victim, it will appear in the list on the screen. Moving your mouse over a particular record will highlight the record in light teal, and clicking the record will pull up the secondary client's information for editing or review.

<u>Year Of Birth</u>	<u>Gender</u>	<u>Relationship To Client</u>		
1963	Female	Other Relative		
1961	Male	Significant Other		

Below this list is the area for the services provided to secondary victims. You will need to return to the client's intake form to record secondary victim services as they are provided. You may update this page at any time.

To enter services provided to a particular secondary victim, enter information in the fields outlined below:

---

### Secondary Victim Services Fields

---

Service

Select an Item

Select an Item

Medical Advocacy

Legal Advocacy

General Advocacy

Support Group

Therapy

Medical Social Work

**Service:** Select the type of service provided to the client. This pull down is similar to the options for direct client services.

If your agency receives either Sexual Assault Core or Specialized funding, the Sexual Assault Secondary Victims Services list mirrors the CSAP/Specialized direct services list. If your agency receives Sexual Assault Services to Native American or Marginalized Communities, the secondary service list mirrors those shown on the Native American and Marginalized Services page. If your agency receives BOTH SA Core/Specialized AND Native American or Marginalized funding, your secondary services list will include BOTH types of services.

The Victims of Crime Secondary Victims Services list mirrors the Victims of Crime direct services list.

The Domestic Violence Secondary Victims Services lists shows services that are allowable through DSHS Emergency Shelter funding, which will be some, but not all, of those services shown on the DV Direct Services page.

Staff/Volunteer

Select an item

Hazel, David

Gleason, Nicky

Emery, Bev

Fenno, Chris

Select an item

**Staff/Volunteer:** Select the staff member or volunteer who provided the service. If the staff member or volunteer's name is not shown, you may need to update the Staff Information in the Administrative Utility.

Date

5/10/06

**Date:** Enter the date the service was provided.

Hours of Service

1







**Hours of Service:** Enter the approximate number of hours the service was provided. Please enter hours in quarter hour increments – if approximately 15 minutes of service or less were provided, enter 0.25.

Add/Edit Service

Click on the **Add/Edit Service** button to save your data before continuing. **Please note that clicking the Submit button does not save Secondary Victim Service information.**

---

When you have entered a secondary victim service, it will appear on the list at the bottom of the page:

Service	Staff	Date	Hours	
Medical Advocacy	Gleason, Nicky	5/10/2006	1	
 Legal Advocacy	Emery, Bev	5/14/2006	2	
 Legal Advocacy	Emery, Bev	5/17/2006	1	
				

Secondary services are linked to secondary victims. If you try to enter a service on this page and have not selected the secondary victim to whom you provided the services, you will see the following error message at the top of the page:

You must select a secondary victim in order to add a service.

To successfully enter the service, click on the secondary victim's record, and then click the Add/Edit Service button again. You will see the service appear in the services provided list, indicating you have successfully entered the service.



## CHILDREN AND YOUTH

victims of crime > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

OCVA Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

New Client or Case Find Client or Case

Client ID: Example1 Case ID: 138093

Demographics Children and Youth Income Referrals Other Issues Reported Offenders Needed / Received

Year of Birth  Gender

Race  Ethnicity

Add / Edit Secondary Clear Secondary

Services Provided to this Child

Service	Staff/Volunteer	Date
<input type="text" value="Select an Item"/>	<input type="text" value="Cross, Marcia"/>	<input type="text"/>
Hours of Service	Shelter In	Shelter Out
<input type="text"/>	<input type="text"/>	<input type="text"/>

Add/Edit Service Clear Service

Service	Staff	Date	Hours	Shelter In	Shelter Out
---------	-------	------	-------	------------	-------------

Next Submit Clear Cancel

The Children and Youth page is only available on the Domestic Violence Interface and is used to record information on the Client's children who are served, particularly in shelters. There are separate areas to record both the demographics on the children (gray shaded area at the top) and services provided to each of those children (Services Provided to this Child area at the bottom.)

First, create a record for the child to whom you provided services, using any combination of four demographic fields, outlined below:

### Children And Youth Fields


Year of Birth

**Year of Birth:** This field is for recording the year of birth of the client's child. As there are few identifying fields for children, it is highly recommended you complete this field.

---

## Children And Youth Fields

---

Gender 

Select an Item

Male

Female

Other

Unspecified

**Gender:** This field is for recording the child's gender. It uses the same drop-down list as the other gender fields in InfoNet. If the information was not disclosed, select Not Reported. If your agency does not collect this information, select Unspecified.

Race 

Select an Item

African American, Black

Asian

Native American/Alaska Native

Pacific Islander/Native Hawaiian

White


Multi Racial

Other

Not Reported

Unspecified

**Race:** This field is for recording the child's race. It uses the same drop-down list as the other race fields in InfoNet. If the information was not disclosed, select Not Reported. If your agency does not collect this information, select Unspecified or leave the question blank.

Ethnicity 

Select an item

Non-Hispanic/Non-Latino

Hispanic/Latino

Not Reported

Unspecified





**Ethnicity:** This field is for recording the ethnicity of the child. It uses the same drop-down list as the other ethnicity fields in InfoNet. If the information was not disclosed, select Not Reported. If your agency does not collect this information, select Unspecified or leave the question blank.



Click on the **Add/Edit Secondary** button to save the child's demographic information. **Please note that clicking the Submit button at the bottom of the intake does not save this information.**

---

Once you have created a record for the child, it will appear in the list on the screen. Moving your mouse over a particular record will highlight the record in purple, and clicking the record will pull up the child's information for editing or review.

<u>Year Of Birth</u>	<u>Gender</u>	<u>Relationship To Client</u>		
1996	Female	Child		
1999	Male	Child		

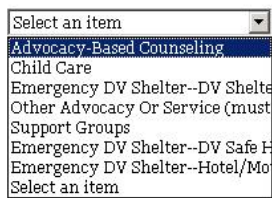
Below this list is the area for the services provided to the child. You will need to return to the client's intake form to record services to children as they are provided. You may update this page at any time.

To enter service information, enter information in the fields outlined below:

---

### Children And Youth Services Fields

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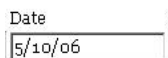
A screenshot of a web form's dropdown menu for the 'Service' field. The menu is open, showing a list of service options: 'Advocacy-Based Counseling', 'Child Care', 'Emergency DV Shelter--DV Shelter', 'Other Advocacy Or Service (must be supported by a contract)', 'Support Groups', 'Emergency DV Shelter--DV Safe Home', and 'Emergency DV Shelter--Hotel/Motel'. The first option, 'Advocacy-Based Counseling', is highlighted in blue. Above and below the list is a 'Select an item' prompt.

**Service:** Select the type of service provided to the child. The pull down list reflects the eligible services for children under the DSHS DV Shelter contract.



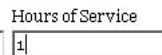
A screenshot of a web form's dropdown menu for the 'Staff/Volunteer' field. The menu is open, showing a list of names: 'Hazel, David', 'Gleason, Nicky', 'Emery, Bev', and 'Fenno, Chris'. The first name, 'Hazel, David', is highlighted in blue. Above and below the list is a 'Select an item' prompt.

**Staff/Volunteer:** Select the staff member or volunteer who provided the service. If the staff member or volunteer's name is not shown, you may need to update the Staff Information in the Administrative Utility.



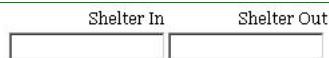
A screenshot of a web form's date input field. The field is labeled 'Date' and contains the text '5/10/06'.

**Date:** Enter the date the service was provided.



A screenshot of a web form's numeric input field for 'Hours of Service'. The field is labeled 'Hours of Service' and contains the number '1'.

**Hours of Service:** Enter the approximate number of hours the service was provided. Please enter hours in quarter hour increment. If approximately 15 minutes of service or less were provided, enter 0.25.



A screenshot of a web form showing two adjacent date input fields. The first field is labeled 'Shelter In' and the second is labeled 'Shelter Out'. Both fields are currently empty.

**Shelter In/Shelter Out:** These fields are for recording the dates the client's children entered and exited the shelter. If the child stayed in your agency's DV shelter, enter the Shelter In date on the date the child began staying in the shelter, and enter the Shelter Out date for the date the child left the shelter.

If a child enters and exits the shelter multiple times, you may enter multiple records for this. For example, if a child stayed in the shelter Monday through Friday, then went to stay with their other parent for the weekend, then returned to the shelter the following Monday, enter Shelter In and Out dates for the first week of their stay, then enter a second service record for the second week of their stay.

When recording Shelter In and Out dates, be sure the service selected is one of the Shelter services, and not a different service such as Advocacy Based Counseling or Support Group.



A screenshot of a button labeled 'Add/Edit Service'.

Click on the **Add/Edit Service** button to save your data before continuing.

---

When you have entered a service to a child, it will appear on the Saved Records table at the bottom of the page:

<u>Service</u>	<u>Staff</u>	<u>Date</u>	<u>Hours</u>	<u>Shelter In</u>	<u>Shelter Out</u>		
DV Shelter Home	Gleason	12/30/2008	1.25	12/30/2008	12/31/2008		

If you have not selected a child and try to enter a service, you will see the following error message at the top of the page:

You must select a child in order to add a service.

To successfully enter the service, just click on the child to whom you provided the service, and then click the Add/Edit Service button again. You will see the service appear in the services provided list, indicating you have successfully entered the service.

## SEARCHING FOR AN EXISTING CLIENT OR CASE

To find an existing client or case, click the Find Client or Case button. When searching by Client ID, enter the desired Client ID number in the search box, then click the Search button. (You may also search using Case numbers by selecting “Case ID” from the Search By pull down menu.)

If that client has been entered, you will see something that looks like the following:

The screenshot shows the Domestic Violence (DV) system interface. At the top, there are navigation links: general crimes > sexual assault > administrative utility >. On the right, it says 'welcome, Test User' and 'logout >'. The main header is 'Domestic Violence (DV)' with tabs for 'Data Entry', 'Administrative Utility', and 'Reports'. Below the header, there are two buttons: 'New Client or Case' and 'Find Client or Case'.

On the left, there is a sidebar with a list of categories: Client Information, Medical and Criminal Justice System, Direct Client Services, Hotline Calls/Info. & Referral Services, Coordinated Community Response, Presentations, Publications & Conducting Trainings, Community Education, and End Of Year Report.

The main content area shows a search results table. The search criteria are: Search by: Client ID, Example3. The search button is 'Search'. Below the search criteria, there are two sections: 'Start New Case for this Client:' and 'Open Existing Case for this Client:'. The 'Start New Case' section has a table with columns: Client ID, First Contact Date, Race, Ethnicity, Gender, and Year Of Birth. The table contains one row with the following data: Example3, 7/3/2006, African American, Black, Non-Hispanic/Non-Latino, and Female. The 'Open Existing Case' section has a table with columns: Case ID, Client ID, Presenting Issue, and Client Type. The table contains one row with the following data: 86173, Example3, Domestic Violence, and Domestic Violence.

Below the tables, there are two yellow callout boxes. The first box, labeled 'SELECT "START NEW CASE" TO START A NEW CASE FOR THIS CLIENT.', points to the 'Start New Case' section. The second box, labeled 'SELECT "OPEN EXISTING CASE" TO ENTER SERVICES RECEIVED BY THIS CLIENT.', points to the 'Open Existing Case' section.

Below the callout boxes, there are two sections: 'Client ID: None Case ID: None' and a 'Demographics' section. The 'Demographics' section has tabs for 'Demographics', 'Children and Youth', 'Income', 'Referrals', 'Presenting Issues', 'Offenders', and 'Needed / Received'. The 'Demographics' tab is selected. It contains a form with fields for Client ID, Year of Birth, First Contact Date, Race, Ethnicity, Other Race, Gender, Client Type, Disability, and Homeless. Below the form, there are several dropdown menus for 'When Incident Occurred for Which Client Sought Services', 'Client's County of Residence', 'Employment Status', 'Marital Status', 'Refugee / Immigrant / Asylum Seeker?', 'Primary Offense Location', 'Health Insurance', 'Education', 'Pregnant', and 'Limited English Proficiency?'. The bottom of the screen shows a Windows taskbar with various icons and the system clock.

There are two items that the search returned: Start New Case, at the top (circled in blue) and Open Existing Case (circled in red.) You must select the Existing Case (red) to view all of the information on that client, or to enter services.

## OPENING AN EXISTING CASE

The most frequent reason you will need to search for a record in InfoNet is when you want to add direct or secondary services to the system. All direct and secondary services must be attached to an existing case. Your first step will always be to search for your client, either using the Client ID or the Case Number. Once your search is completed, you will see the following screen:

general crimes > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy

Washington State Department of Social & Health Services  
CA Children's Administration

New Client or Case Find Client or Case

Search by:

Client ID  Search

Start New Case for this Client:

Client ID	First Contact Date	Race	Ethnicity	Gender	Year Of Birth
Example2	7/2/2006	White	Non-Hispanic/Non-Latino	Female	1980

Open Existing Case for this Client:

Case ID Client ID Presenting Issue Client Type  
86172 Example2 Domestic Violence Domestic Violence

Client ID: example20 Case ID: 138130

Demographics Children and Youth Income Referrals Presenting Issues Offenders Needed / Received

Client ID  Year of Birth  Please enter YEAR only, not a date of birth

First Contact Date  Race

Ethnicity  Other Race

Gender  Client Type

Disability  Homeless

When Incident Occurred for Which Client Sought Services  Primary Offense Location

Client's County of Residence  Health Insurance

Employment Status  Education

Marital Status  Pregnant

Refugee / Immigrant / Asylum Seeker?  Limited English Proficiency?

Click on the record that is shown beneath the words “Open Existing Case for this Client” to pull up the existing case. You can perform this search either from the Client Information screen (shown above) or from the direct client services screen. You’ll see both the Client ID and Case ID fields shown at the top of the screen will indicate the client you just selected. If the Case ID field says “none,” you selected the “Start New Case” option. To correct this, simply search again and this time, click the option under “Open Existing Case.”

Once the Existing Case has been selected, you will see any previously entered information, including previously entered direct or secondary services. If you know you entered information about this client and it does not appear on your screen, make sure you have selected a case, and that your client doesn’t have a different case where those services are entered. If you’re unsure why information about your client does not appear where you expect it, contact Mary Baldwin at mary.baldwin@commerce.wa.gov, and she can look to see if your client has a different case elsewhere in the system.

## STARTING A NEW CASE FOR AN EXISTING CLIENT

Selecting **Start New Case** indicates you want to start a brand new case for an existing client. Agencies typically enter a new case for an existing client only when a client is a victim of another, separate incident of crime, such as Sexual Assault **and** Domestic Violence.

When starting a new case for an existing client, the system presents an intake form that is only partially completed. Information on Homelessness and Disability, for example, are blank for the new case, because this information may change over time. Services must be related to a specific case – services entered for one case will not be shown in the Services section of a new case.

To assign a new case to an existing client, first search for the client's ID number as usual. You will see something like the screen below:

general crimes > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy

Washington State Department of Social & Health Services  
CA Children's Administration

New Client or Case Find Client or Case

Client Information

Medical and Criminal Justice System

Direct Client Services

Hotline Calls/Info. & Referral Services

Coordinated Community Response

Presentations, Publications & Conducting Trainings

Community Education

End Of Year Report

Search by:

Client ID Example20

Search

Start New Case for this Client:

Client ID	First Contact Date	Race	Ethnicity	Gender	Year Of Birth
example20	5/20/2008	White	Non-Hispanic/Non-Latino	Female	1972

Client ID: None Case ID: None

Demographics Children and Youth Income Referrals Presenting Issues Offenders Needed / Received

Client ID Year of Birth Please enter YEAR only, not a date of birth

First Contact Date Race Select an Item

Ethnicity Select an Item Other Race

Gender Select an Item Client Type Select an Item

Disability Select an Item Homeless Select an Item

When Incident Occurred for Which Client Sought Services Select an Item Primary Offense Location Select an Item

Client's County of Residence Select an Item Health Insurance Select an Item

Employment Status Select an Item Education Select an Item

Marital Status Select an Item Pregnant Select an Item

Refugee / Immigrant / Asylum Seeker? Select an Item Limited English Proficiency? Select an Item

If so, what is the client's first language? Does client have Veterans Status? Select an Item

Did Crime Occur On A Select an Item

In the example above, we are planning on entering a Domestic Violence case for a client that was entered under Sexual Assault. Notice that the only option to select is “Start New Case for this Client” because there is not a Domestic Violence Case entered yet. (If a different case existed under Domestic Violence, we would also see the client's previous case.)

Selecting Start New Case will present us with a partially completed intake form:

general crimes > sexual assault > administrative utility > welcome, Test User logout >

## Domestic Violence (DV)

Data Entry Administrative Utility Reports

OCVA Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

New Client or Case Find Client or Case

Client ID: example20 Case ID: None

Demographics Children and Youth Income Referrals Presenting Issues Offenders Needed / Received

Client ID example20 Year of Birth 1972 First Contact Date 5/20/2008 Race White Ethnicity Non-Hispanic/Non-Latino Other Race Gender Female Client Type Select an Item Disability Select an Item Homeless

When Incident Occurred for Which Client Sought Services Select an Item Primary Offense Location Select an Item Client's County of Residence Select an Item Health Insurance Select an Item Employment Status Select an Item Education Select an Item Marital Status Select an Item Pregnant Select an Item Immigrant / Asylum Seeker? Select an Item Limited English Proficiency? Select an Item Does client have Veterans Status? Select an Item Is this the client's first language? Crime Occur On A Reservation Date Closed Reason Closed

Next Submit Clear Cancel

SOME FIELDS ON THE INTAKE FORM THAT DON'T CHANGE BETWEEN CASES (SUCH AS THE CLIENT'S YEAR OF BIRTH, RACE, AND GENDER) ARE COMPLETED.

OTHER FIELDS THAT MAY CHANGE BETWEEN CASES, SUCH AS CRIME TYPE AND DISABILITY, ARE BLANK.

THE FIRST CONTACT DATE OF YOUR CLIENT DOES NOT CHANGE, AND REPRESENTS THE FIRST DATE OF CONTACT YOUR AGENCY HAD WITH THE CLIENT FOR ANY CASE.

NOTICE THAT AT THIS STEP, THE CLIENT ID IS COMPLETED, BUT CASE ID STILL SAYS "NONE."

Once the Start New Case has been selected, fill in the blank fields on the partially completed intake as they pertain to the new case. Once the intake is completed, click the Submit button at the bottom of the screen.

general crimes > sexual assault > administrative utility > welcome, Test User logout >

## Domestic Violence (DV)

Data Entry Administrative Utility Reports

OCVA Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

New Client or Case Find Client or Case

Client ID: example20 Case ID: 138130

Demographics Children and Youth Income Referrals Presenting Issues Offenders

Client ID example20 Year of Birth 1972 First Contact Date 5/20/2008 Race White Ethnicity Non-Hispanic/Non-Latino Other Race Gender Female Client Type Domestic Violence Disability Physical Disability Homeless No

When Incident Occurred for Which Client Sought Services 12 - 24 hours before intake Primary Offense Location Victim's Home Client's County of Residence Pierce Health Insurance None Employment Status Not Employed Education High School Grad Marital Status Legally Separated Pregnant No

Referral / Treatment / Action Plan Limited English Proficiency

ONCE THE NEW CASE HAS BEEN SUBMITTED, YOU WILL SEE BOTH THE CLIENT ID AND THE CASE ID COMPLETED AT THE TOP OF THE INTAKE. NOW YOU MAY ATTACH SERVICES TO THIS CASE.



Sometimes new users will enter a second case accidentally, when a second incident of crime hasn't occurred. This can be confusing when entering services. If you find you have entered a second case by mistake, e-mail Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov) and indicate the duplicate case you do not want, and she can delete the duplicate for you.

## 5. MEDICAL AND CRIMINAL JUSTICE SYSTEM

The Medical and Criminal Justice System section is for recording information about each client's experiences with those systems. This information is optional and may be more appropriate to the services offered by some agencies than others. The pages described in the following section are identical in all three interfaces in InfoNet, and you may feel free to enter as much or as little information in these sections as is useful to your agency.

You reach the Medical/Criminal Justice System pages by clicking on the link on the left side of the screen. This link is identical whether you are in the DV interface (as shown below), the SA Interface, or the Victims of Crime interface. This section is not available for Victim Witness Assistance Units, as their experience with these systems is different, and leads to different types of questions.

general crimes > sexual assault > administrative utility > welcome, Nicky Gleason logout >

### Domestic Violence (DV)

Data Entry | Administrative Utility | Reports

OCVA Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

Client Information

- Medical and Criminal Justice System
- Direct Client Services
- Hotline Calls/Info. & Referral Services
- Coordinated Community Response
- Presentations, Publications & Conducting Trainings

Demographics Kids Income Re

Agency ID: None Client ID: None Case ID: None

Required Data

Agency Entered ID Year of Birth Please enter YEAR only, not a date of birth

First Contact Date Race Select an Item

Ethnicity Select an Item Gender Select an Item

Client Type Select an Item

Disability Select an Item Homeless Select an Item

When Incident Occurred for Which Client Sought Services 12 hours or less before intake Primary Offense Location Select an Item

Client's County of Residence Select an Item Client ZIP Code

Health Insurance Select an Item Employment Status Select an Item

Education Select an Item Marital Status Select an Item

Pregnant Select an Item Refugee / Immigrant / Asylum Seeker? Select an Item

Limited English Proficiency? Select an Item

If so, what is the client's first language?

Does client have Veterans Status? Select an Item

Case Closed ☐ Date Closed Reason Closed Select an Item

Next Page Submit Clear Cancel

## MEDICAL

general crimes > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

OCVA Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

Find Client or Case

- Client Information
- Medical and Criminal Justice System**
- Direct Client Services
- Hotline Calls/Info. & Referral Services
- Coordinated Community Response
- Presentations, Publications & Conducting Trainings
- Community Education
- End Of Year Report

**Medical** Police Prosecution Protection Orders

Client ID: Example1 Case ID: 86171

Did client visit a medical facility? Yes

Was client treated for injuries? Yes

Was hospitalization required? Yes

Were photos taken? Yes

If so, where are the photos?

Type of medical facility? Clinic

Was an evidence kit used? No

Was a sexual assault forensic exam used? No

Other Family Problems

Next Page Submit Clear Cancel

The first page of the section is an area to record Medical information. The fields on this page are completely optional, and are provided for your agency's use only. The Medical information is not part of the information collected for state and federal reports. The fields are as follows:

### Medical Fields

Did client visit a medical facility?

- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

**Medical Facility:** If the client visited a medical facility, select Yes. If not, select No.

Was client treated for injuries?


- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

**Treated for Injuries:** If the client was treated for injuries, select Yes. If not, select No.


---

### Medical Fields

---

Was hospitalization required? 

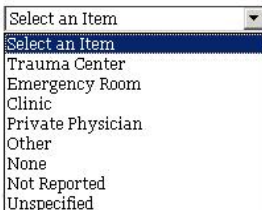
**Hospitalization Required:** If the client was hospitalized, select Yes; if not, select No.

Where photos taken? 


**Photos taken:** If photos were taken of your client's injuries, select Yes; otherwise, select No.

If so, where are the photos? 


**Where are the photos?** This field is provided for your convenience, if there are different places the photos may be kept – by the police, by your client, etc. It is a text field and you may enter any information that is valuable to your agency, or leave it blank if you prefer.

Type of medical facility? 

**Type of medical facility:** Select the type of medical facility, if any, where your client was treated.

Was an evidence kit used? 

**Evidence kit:** If an evidence kit was used, select yes; otherwise, select No.


Was a sexual assault forensic exam used? 

**Sexual Assault exam:** If your client received a sexual assault forensic exam, select Yes; if not, select No.

Other Family Problems



**Other Family Problems:** This text box is provided to record any additional data associated with your client's medical visit. For example, you may wish to note the client's children also received medical assistance in this area.



When you have completed the client's medical information, remember to click on the **Submit** button to save your data.

---

## POLICE

general crimes > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

OCVA Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

Find Client or Case

Client Information  
Medical and Criminal Justice System  
Direct Client Services  
Hotline Calls/Info. & Referral Services  
Coordinated Community Response  
Presentations, Publications & Conducting Trainings  
Community Education  
End Of Year Report

Medical Police Prosecution Protection Orders

Client ID: Example1 Case ID: 86171

Was the crime reported to law enforcement? Select An Item

If so, date reported:

Was a patrol interview conducted? Select An Item

Did a detective interview the client? Select An Item

Was the offender arrested? Select An Item

If so, date arrested:

Next Page Submit Clear Cancel

The Police page is for agencies that wish to record the client's interaction with law enforcement. It is completely optional information, and is only to be completed if recording such information is useful to your agency. The information is not part of state or federal funding reports. Each field is optional and you may enter as little or as much information for your client as you wish. The fields are as follow:

### Police Fields

Was the crime reported to law enforcement? Select an Item

- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

**Was crime reported?** If the crime was reported to law enforcement, select Yes; otherwise, select No.

If so, date reported: 5/1/2006

**Date reported:** If the crime was reported and you know the date of the report, you may enter the date here. It is also alright leave this field blank.

Was a patrol interview conducted? Select an Item

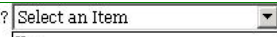
- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item


**Patrol Interview:** If a patrol interview as conducted, select Yes; otherwise, select No.

---

### Police Fields

---

Did a detective interview the client? 



- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

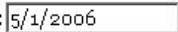
**Detective Interview:** If the client was interviewed by a detective, select Yes; otherwise, select No.

Was the offender arrested? 



- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

**Offender Arrested:** If the offender was arrested, select Yes; otherwise, select No.

If so, date arrested: 

**Date arrested:** If the offender was arrested and the date of arrest was known, you may enter the date here. If the offender was arrested multiple times on the same charge, please enter the most recent date of arrest.



When you have completed the police information, remember to click on the **Submit** button to save your data.

---

## PROSECUTION

domestic violence > general crimes > administrative utility > welcome, Nicky Gleason logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Find Client or Case

Medical Police **Prosecution** Protection Orders

Client ID: Case ID:

Did the prosecutor's office interview the client? Select an Item

Did the prosecutor press charges? Select an Item

Did the prosecutor's office have a Victim/Witness advocate? Select an Item

If so, did the Victim/Witness advocate participate? Select an Item

Was a trial Scheduled? Select an Item

If so, what type of trial? Select an Item

Number Of Court Appearances:

Number Of Prosecution Continuances:

Number Of Defense Continuances:

Charged With  Date of Charges  Charge Type Select an item

Disposition Select an Item Disposition Date

Sentence Select an Item Sentence Date  Months Sentence

Add/Edit Trial Charge Clear Trial Charge

Next Page Clear Cancel

The Prosecution page is for recording the client's experience with the court system. The page records yes/no type information regarding whether the prosecutor filed charges or interviewed the client, and also provides an area for entering charges filed by the prosecutor. Again, the fields on this page are completely optional, and are provided for your agency's use only. The Prosecution information is not part of the information collected for state and federal reports. The fields are as follows:

### Prosecution Fields

Did the prosecutor's office interview the client? Select an Item

- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

**Prosecution interview:** If the prosecutor's office interviewed your client, select Yes; otherwise, select No.

---

### Prosecution Fields

---

Did the prosecutor press charges?

- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

**Press charges:** If the prosecutor's office filed charges in your client's case, select Yes. Keep in mind answering yes to this field does not imply your client supported the filing of charges, or that the charges that your client wished to be pressed were the ones the prosecutor's pursued. It also does not indicate the charges were not eventually dropped or altered. This field is merely an indicator of if any charges were pressed whatsoever. If no charges were pressed, select No.

Did the prosecutor's office have a Victim/Witness advocate?

- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

**Victim/Witness Advocate:** This field is used to record if the prosecutor's office had a Victim Witness Advocate. If the prosecutor's office has a Victim/Witness program, select Yes; otherwise select No.

If so, did the Victim/Witness advocate participate?

- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

**Victim/Witness Participation:** If you selected Yes in the preceding question, indicate whether a Victim/Witness advocate participated in your client's case. If so, select Yes. If not, select No.

Was a trial Scheduled?

- Yes
- No
- Not Reported
- Not Applicable
- Unspecified
- Select an Item

**Trial Scheduled?** If a trial was scheduled in your client's case, select Yes. If no trial was scheduled, select No. Indicating yes in this field does not imply the trial was held. It only indicates a trial was scheduled at some point during the proceedings.

If so, what type of trial?

- Select an Item
- Bench
- Jury
- Unknown

**Trial Type:** If a trial was scheduled, indicate whether it was a Jury or Bench trial, if known. If no trial was scheduled, leave this field blank.

Number Of Court Appearances:

**Court Appearances:** Indicate the number of times, if any, your client appeared in court, whether to testify or to observe.

Number Of Prosecution Continuances

**Prosecution Continuances:** Enter the number of continuances, if any, which were requested by the prosecution.

Number Of Defense Continuances:

**Defense Continuances:** Enter the number of continuances, if any, which were requested by the defense.


---



---

### Prosecution Fields

---

A rectangular button with a light gray gradient and a thin black border. The word "Submit" is centered on the button in a dark gray, sans-serif font.

When you have completed the prosecution information, remember to click on the **Submit** button to save your data.

---

In the area at the bottom of the page is an area to record the Charges filed by Prosecution in your client's case. InfoNet allows you to record multiple charges for each case. This information is optional and does not need to be recorded unless it is useful for your agency's legal advocacy program.

### Charge Fields

Charged With

**Charged With:** Enter the charge you wish to record. Keep in mind in cases where multiple charges were filed, each charge should have its own record, so please do not enter multiple charges in this text field.

Date of Charges

**Date of Charges:** Enter the date the charge was filed.

Disposition   
 Select an Item  
 Acquitted  
 Dismissed, Want of Prosecution  
 Dismissed, Other Reason  
 Dismissed, Victims Didn't Show  
 Dismissed, Fines  
 Mistrial  
 Charges Dropped  
 Stricken on Leave  
 Convicted  
 Convicted, Lesser Charge

**Disposition:** Enter how the charge was disposed. You may enter the charge initially and return to this record later to indicate how the charge was disposed if you prefer. Please note in addition to convictions and acquittals, the drop down list also allows you to signify a charge was dropped, dismissed for a variety of reasons, or the offender was convicted of a lesser charge as well as other options.

Disposition Date

**Disposition Date:** Indicate the date the charges were disposed, if known.

Sentence   
 Select an Item  
 Not Sentenced  
 Probation  
 Restitution  
 Supervision  
 Conditional Discharge  
 Jail/Prison  
 Fines  
 Other  
 Unknown  
 Mandated Counseling

**Sentence:** If the charge resulted in a conviction, indicate the type of sentence. Currently, you may only select one item under sentencing. However, in future expansions of the InfoNet system, we will add the ability to record multiple sentencing conditions for each charge. Until this update is made, please note other sentencing conditions in your client file and use your own judgment to select the one you feel is most relevant to record in InfoNet.

Sentence Date

**Sentence Date:** Indicate the date the offender was sentenced, if applicable.

Months Sentence

**Months Sentence:** If the offender was sentenced to jail or prison, indicate the number of months sentenced.

When you have entered the information you wish to record on this charge, click the **Add/Edit Trial Charge** button to save your data or changes to your data.

After a charge has been entered, it will appear in the list at the bottom of the screen:

Date of Charges	Charge Type	Charged With	Disposition Date	Months Sentenced	
	Felony	1st Degree Assault	7/1/2006 12:00:00 AM	18	

X

## PROTECTION ORDERS

victims of crime > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy

Washington State Department of Social & Health Services  
CA Children's Administration

Find Client or Case

Client Information

Medical and Criminal Justice System

Direct Client Services

Hotline Calls/Info. & Referral Services

Coordinated Community Response

Presentations, Publications & Conducting Trainings

Community Education

End Of Year Report

Medical Police Prosecution **Protection Orders**

Client ID: Example1 Case ID: 138093

Originally Sought Order: 1/30/2007

Date Filed: 1/30/2007

County: Clark

Date Issued: 2/15/2008

Type: Temporary

Status: Granted

Forum: Criminal

Comments:

Number Of Extensions:

Date of Last Extension:

Violation WITHOUT Police Charges:

Number Of Violations:

Date Of Last Violation:

Date Vacated:

Date Expiration: 2/15/2009

Number Of Modifications:

Date of Last Modification:

Violation WITH Police Charges:

Number Of Violations:

Date Of Last Violation:

Add/Edit Protection Order Clear Protection Order

Date Filed / Date Issued	Type of Protection Order	Forum of Protection Order	Date Vacated / Date Expired	Comments

Next Page Submit Clear Cancel

The Protection Orders page is for recording the client's experience with filing restraining orders, no-contact orders, and other orders of protection. This page allows you to collect and monitor a wide variety of information about protection orders that will be more useful to some agencies than others. **If your agency receives STOP, STOP ARRA, SASP, or DVLA funding, you must enter the date filed, type of order, and status here at a minimum for protection orders your STOP, STOP ARRA, SASP or DVLA advocate assists clients with.** For other agencies, this information is optional.

### Protection Order Fields

Originally Sought Order: 5/1/2006

**Originally Sought Order:** Enter the date the client originally tried to get a protection order, if known.

Date Filed: 5/10/2006

**Date Filed:** Enter the date your client filed paperwork to receive a protection order, if known. **Please complete this field if you report Protection Order information on your grant reports.**

---

### Protection Order Fields

---

County:

- Select an Item
- Adams
- Asotin
- Benton
- Chelan
- Clallam
- Clark
- Columbia
- Cowlitz
- Douglas
- Ferry

**County:** Enter the county where your client filed for a protection order, if known.

Date Issued:

**Date Issued:** If your client was granted an order of protection, please indicate the date the order was issued.

Type:

- Select an Item
- Emergency
- Temporary
- Permanent
- Unknown

**Type:** Enter the type of protection order – Emergency, Temporary, or Permanent. Some jurisdictions do not differentiate between “emergency” and “temporary” protection orders. Please use the terminology that is used in your jurisdiction, and disregard any options that don’t apply. **Please complete this field if you report Protection Order information on your grant reports.**

Status:

- Select an Item
- Granted
- Denied
- Status Not Known

**Status:** Enter the status of the protection order – granted, denied, or unknown. **Please complete this field if you report Protection Order information on your grant reports.**

Forum:

- Select an Item
- Civil
- Criminal
- Unknown
- None

**Forum:** Indicate whether the protection order was filed in criminal or civil court, if known.

Date Vacated:

**Date Vacated:** If the protection order was vacated, indicate the date it was vacated here.

Date Expiration:

**Date Expiration:** If the protection order will expire on a given date, indicate the expiration date here. If the expiration date is updated in the future, you may edit this field to indicate the most current expiration date at any time.

Comments:


**Comments:** If there are comments about the protection order, space is provided here. Please keep comments brief.

It may be helpful to note the differences between multiple active protection orders here. For example, if your client has active protection orders against more than one individual, this may be where you indicate which order is for the “client’s ex-husband” vs. “former mother-in-law.” Or, if a client has one protection order filed in District Court and one filed in Municipal Court, you may choose to indicate the court each protection order was filed.

---

Protection Order Fields	
Number Of Extensions: <input type="text"/>	<b>Number of Extensions:</b> Indicate the number of times the protection order was extended.
Date of Last Extension: <input type="text"/>	<b>Date of Last Extension:</b> If the protection order was extended, indicate the date of the extension here. If the protection order is extended at a later date, you may edit this date to indicate the most recent date of extension.
Number Of Modifications: <input type="text"/>	<b>Number of Modifications:</b> If the protection order is modified, enter a 1 here. If the protection order is modified again in the future, you may come back and update the number to reflect the total number of modifications.
Date of Last Modification: <input type="text"/>	<b>Date of Last Modification:</b> If the protection order was modified, indicate the date of modification here. If the protection order is modified again at a later date, you may edit this date to indicate the most recent date of modification.
Violation WITH Police Charges: Number Of Violations: <input type="text"/> Date Of Last Violation: <input type="text"/>	<b>Violations WITH Police Charges:</b> If the offender violates the protection order, and is charged by the police with those violations, you may indicate so in this area.
Violation WITHOUT Police Charges: Number Of Violations: <input type="text"/> Date Of Last Violation: <input type="text"/>	<b>Violations WITHOUT Police Charges:</b> If the client reports the protection order was violated, but the offender was not charged by police, you may indicate those violations here.
<input type="button" value="Add/Edit Protection Order"/>	When you have entered all of the information you wish about this protection order, click on the <b>Add/Edit Protection Order</b> button to save your changes.

After you have entered a Protection Order and clicked the Add/Edit Protection Order button, the protection order you just entered will appear at the list on the bottom of the screen:

Date Filed / Date Issued	Type of Protection Order	Forum of Protection Order	Date Vacated / Date Expired	Comments
5/10/2006 12:00:00 AM / X	Emergency	Civil	/ 5/12/2007 12:00:00 AM	

To edit the protection order, simply click on the record for it and edit the appropriate dates or fields. To delete a protection order that was entered in error, click the red X. When you have finished your edits, click again on the Add/Edit Protection Order button to save your edits.

This page will allow you to enter information on multiple protection orders for each client. However, please note that modifications, extensions, or vacations of one protection order should not be entered as a separate record, but should be edited on the existing protection order record. Please do not enter separate protection orders unless they are actually different orders!

## 6. DIRECT CLIENT SERVICES

---

Direct Client Services in InfoNet refers to any service associated with a particular client. For Sexual Assault, examples of direct client services are activities such as Medical Advocacy and Therapy. For Domestic Violence programs, direct services include Advocacy Based Counseling and Emergency DV Shelter. For Victims of Crime, direct client services include Legal Advocacy and Emergency Financial Assistance. For Victim Witness Assistance Units, direct services include Victim Rights and Impact Statements.

Direct Client Services are always associated with a particular client and a particular case, unlike services like Sexual Assault Prevention activities, which are often presentations given to a group of people, or crisis-line or hotline calls, where the person making the call may not ever be identified. In InfoNet, a Client Intake form is entered for every client who receives Direct Client Services, and when the service itself is entered into the InfoNet system, it is linked to the Client via the Client's ID number and Case number.

Before InfoNet, there was not an easy way for agencies statewide to keep track of the hours and staff performing Direct Services. We have set up InfoNet to allow agencies to record the staff performing the direct services, and the amount of time spent. While this may at first seem cumbersome for agencies that are not used to tracking this data, we designed InfoNet to produce the maximum amount of information with the least amount of time recording and entering information.

Why is it so important to enter this information into InfoNet? There are three essential pieces of information that allow the InfoNet system to have a very flexible and powerful reporting system:

- OCVA and DSHS administrators enter the services that are eligible for each contract or grant.
- Agency administrators estimate what contracts and grants pay for staff salaries.
- InfoNet users enter Client Intakes and Direct Client Service information, and report on the staff performing services.

Using those three pieces of information, InfoNet then is able to connect clients, services, staff, and contracts in order to compile a variety of state and federal reports.

As you begin using the InfoNet system, you may realize that there are better and more efficient ways for your advocates to enter this data into the system. When you have those ideas, let us know! InfoNet is a work in progress, and we will be making regular updates to the system as we discover new and better ways to collect information. Even if collecting direct service information this way is not what your agency is used to, in a matter of weeks it will become easier and easier to collect and enter direct service information into InfoNet.

## DOMESTIC VIOLENCE DIRECT CLIENT SERVICES

### Domestic Violence (DV)

Data Entry
Administrative Utility
Reports

**Office of  
Crime Victims  
Advocacy**

**Washington State  
Department of Social  
& Health Services**  
**CA Children's Administration**

- ☐ [Client Information](#)
- ☐ [Medical and Criminal Justice System](#)
- ☒ [Direct Client Services](#)
- ☐ [Hotline Calls/Info. & Referral Services](#)
- ☐ [Coordinated Community Response](#)
- ☐ [Presentations, Publications & Conducting Trainings](#)
- ☐ [Community Education](#)
- ☐ [End Of Year Report](#)
- ☐ [STOP Grant Narrative Questions](#)

Client ID:

Case Id:

Service:

Activity (Optional):

Staff/Volunteer:

Date:  Hours Of Service:

**WHEN ENTERING DIRECT SERVICES, BE SURE THAT YOU HAVE A CLIENT AND CASE NUMBER SELECTED.**

[Shortcut to Secondary Victims Page](#)

Service	Staff/Volunteer	Date:	Hours Of Service:	Shelter Begin:	Shelter End:	
Emergency DV Shelter--DV Shelter Home	Hatcher, Terri	08/11/2009	1.25	08/11/2009	08/25/2009	
Other (please specify)	Cross, Marcia	07/13/2009	1			
Advocacy-Based Counseling	Hatcher, Terri	05/03/2009	0			
Advocacy-Based Counseling	Hatcher, Terri	05/04/2009	0			
Hospital Response	Cross, Marcia	02/11/2009	1.25			
Immigration Assistance	Huffman, Felicity	02/11/2009	1.25			
Emergency DV Shelter--DV Safe Home	Cross, Marcia	07/03/2006	1			
Advocacy-Based Counseling	Cross, Marcia	07/03/2006	1			
<b>Total Hours of Service Provided:</b>			<b>6.75</b>			

Previous 20 records Next 20 records

To access the DV Direct Client Services page, click on the link on the left hand side of the screen. This page is only available on the Domestic Violence Interface, although the Sexual Assault and Victims of Crime interfaces have Direct Services pages that work very similarly.

The DV Client Direct Services page has seven fields to complete for each service you provide to your client. Those fields are described below:

### DV Direct Client Service Fields

Service	Advocacy-Based Counseling <b>Advocacy-Based Counseling</b> Child Care Civil Legal Advocacy Criminal Justice Advocacy Crisis Counseling/Intervention CVC Assistance Emergency DV Shelter--DV Safe Home Emergency DV Shelter--DV Shelter Home Emergency DV Shelter - Hotel/Motel Emergency Financial Assistance Emergency Shelter (STOP) Employment Assistance Hospital Response Housing Assistance Immigration Assistance Medical Advocacy Referrals Safety Planning Support Groups TANF/Welfare Assistance Transitional Shelter (STOP) Transportation Assistance Victim Witness Notification Other (please specify)
---------	---

**Service:** Select the first service you provided to the client. You may always type the first letter of a selection to pull up items starting with that letter – if more than one service with that first letter exists, hitting the first letter multiple times will allow you to toggle through the choices.

A list of all available services and their definitions is provided in the back of this manual. You can also access service definitions at any time by clicking the “View Service Definitions” link at the bottom of the direct services screen.

Service	Other (please specify)
Other (please specify)	

If you select the service “Other (please specify)” an additional text box will appear for your description. You must complete the “please specify” box in order to continue. This text box will not appear for any of the other services in the list.

Activity (Optional)	Attended trial
---------------------	----------------

**Activity:** For agencies that would like to further describe the service provided, an optional text box is provided to describe the activity associated with the service provided.

Staff/Volunteer	Hazel, David Hazel, David Gleason, Nicky Emery, Bev <b>Fenno, Chris</b>
-----------------	---

**Staff/Volunteer:** Select the staff member or volunteer who provided the service.

If the staff or volunteer is not shown in this pull down list, you may need to update the Staff Information in the Administrative Utility for your agency.

If you are entering a series of direct service entries, the staff field will default to the last used staff entry for your next record. This makes data entry easier when entering a series of service entries by the same staff member. To select a different staff member, simply type the first letter of their last name, or select with the mouse.

Date	1/2/2006
------	----------

**Date:** Enter the date the service was provided. Please note the date cannot be earlier than the first contact date listed on the Client’s Intake. If you try to enter a date prior to the client’s first contact date, the service date will default to the



DV Direct Client Service Fields	
date you entered as the first contact date on the Client Intake form.	
Hours Of Service	<input type="text" value="0.5"/> <b>Hours Of Service:</b> Enter the number of hours, rounded to the nearest quarter hour you provided the service. For example, if you provided the service for fifteen minutes or less, enter 0.25.
Shelter Began	<input type="text"/> <b>Shelter Began:</b> If the service you selected was a shelter service (such as Emergency DV Shelter – DV Safe Home, Emergency Shelter – DV Shelter Home, or Emergency DV Shelter – Hotel/Motel) enter the date the client began to stay in the shelter. You must complete the “Shelter Began” date if an Emergency Shelter service is selected.
Shelter Ended	<input type="text"/> <b>Shelter Ended:</b> If the service you selected was a shelter service, enter the date the client left the shelter. You may come back to this field and update this field after the client has left the shelter, but you will need to enter both dates so the system can calculate the number of bed nights a client stayed in your shelter.
<div>Emergency DV Shelter - Hotel/Motel</div> <div><input type="checkbox"/> Add the same shelter stay to existing secondary victims?</div> <div><input type="button" value="Submit"/></div> <div><b>Add Same Shelter Stay:</b> If the service you selected was Emergency DV Shelter, you will see an option to add the same shelter stay for existing secondary victims. If you click this box, an identical shelter service will be added for each of the client’s children.</div> <div>When you have completed your service data, click on the <b>Submit</b> button at the bottom of the page to save your data.</div>	

After each service has been entered, it will appear at the bottom of the page in the Saved Records table:

Service	Staff/Volunteer	Date:	Hours Of Service:	Shelter Begin:	Shelter End:	
Advocacy-Based Counseling	Cross, Marcia	12/01/2008	1.25			
Child Care	Cross, Marcia	12/01/2008	1.25			
Civil Legal Advocacy	Cross, Marcia	12/01/2008	1.25			
Criminal Justice Advocacy	Cross, Marcia	12/01/2008	1			
Advocacy-Based Counseling	Longoria, Eva	12/01/2008	1.25			
Emergency DV Shelter--DV Safe Home	Hatcher, Terri	12/01/2008	1.25	12/01/2008		
Crisis Counseling/Intervention	Cross, Marcia	12/02/2008	1			
CVC Assistance	Cross, Marcia	12/02/2008	1			
Emergency DV Shelter--DV Shelter Home	Cross, Marcia	12/02/2008	2	12/02/2008	12/03/2008	
Emergency DV Shelter--DV Safe Home	Cross, Marcia	12/03/2008	1	12/03/2008	12/04/2008	
Emergency DV Shelter - Hotel/Motel	Cross, Marcia	12/04/2008	2	12/04/2008	12/05/2008	
Emergency Financial Assistance	Cross, Marcia	12/04/2008	1.25			
Emergency Shelter (STOP)	Cross, Marcia	12/06/2008	1	12/06/2008	12/07/2008	
Employment Assistance	Cross, Marcia	12/07/2008	1.25			
Hospital Response	Cross, Marcia	12/08/2008	1			
Housing Assistance	Cross, Marcia	12/08/2008	1			
Immigration Assistance	Cross, Marcia	12/08/2008	1			
Medical Advocacy	Cross, Marcia	12/08/2008	0.75			
Referrals	Huffman, Felicity	12/09/2008	1.25			
Safety Planning	Huffman, Felicity	12/09/2008	1.25			
Previous 20 records <a href="#">Next 20 records</a>						
<a href="#">View Service Definitions</a>						

You may click on any service record to update information about the service. For example, if your initial record for a stay in shelter included the Shelter Began date, but you left the Shelter Ended date blank because you weren't sure when a client would be leaving shelter, you can come back to this page and update information after the client leaves the shelter.

---

## ENTERING EMERGENCY DV SHELTER STAYS

---

Entering shelter services is similar to entering any other kinds of direct or secondary services. For direct shelter (shelter of adults) log into InfoNet and access the DV Direct Client Services page by clicking on the link on the left hand side of the screen.

OCVA Domestic Violence - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <https://fortress.wa.gov/cted/ocvainfonet/Default.aspx> Go

Links [INFONET Live Site](#) [Google](#) [Yahoo!](#) [Dictionary.com](#) [Wikipedia](#) [OCVA Homepage](#)

general crimes > sexual assault > administrative utility > welcome, Test User [logout](#)

### Domestic Violence (DV)

[Data Entry](#) [Administrative Utility](#) [Reports](#)

[Client Information](#)  
[Medical and Criminal Justice System](#)  
**[Direct Client Services](#)**  
[Hotline Calls/Info. & Referral Services](#)  
[Coordinated Community Response](#)  
[Presentations, Publications & Conducting Trainings](#)

[Find Client or Case](#)

Client ID: No Client Selected  
Case Id: No Case Selected  
Service: [Advocacy-Based Counseling](#)  
Activity (Optional):   
Staff/Volunteer: [Cross, Marcia](#)  
Date:  Hours Of Service:   
Shelter Began:  Shelter Ended:

[Submit](#) [Clear](#) [Cancel](#)

[Service](#) [Staff/Volunteer](#) [Date](#) [Hours Of Service](#) [Shelter Begin](#) [Shelter End](#)  
[Previous 20 records](#) [Next 20 records](#)  
[View Service Definitions](#)

As with all services, you must first select a client and case to enter the services for. Select the Find Client or Case button, and search for the client that stayed in shelter:

OCVA Domestic Violence - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <https://fortress.wa.gov/cted/ocvainfonet/Default.asp> Go Links [INFONET Live Site](#) [Google](#) [Yahoo!](#) [Dictionary.com](#) [Wikipedia](#) [OCVA Homepage](#)

general crimes > sexual assault > administrative utility > welcome, Test User [logout](#)

## Domestic Violence (DV)

Data Entry Administrative Utility Reports

[Client Information](#)  
[Medical and Criminal Justice System](#)  
**[Direct Client Services](#)**  
[Hotline Calls/Info. & Referral Services](#)  
[Coordinated Community Response](#)  
[Presentations, Publications & Conducting Trainings](#)

[Find Client or Case](#)

Search by:  
 Client ID

Matching Clients Found:

Client ID	First Contact Date	Race	Ethnicity	Gender	Year Of Birth
Example2	7/2/2006	White	Non-Hispanic/Non-Latino	Female	1980

Matching Cases Found:

Case ID	Client ID	Presenting Issue	Client Type
86172	Example2	Domestic Violence	Domestic Violence

Client ID:   
 Case ID:   
 Service:   
 Activity (Optional):   
 Staff/Volunteer:   
 Date:   
 Shelter Began:   
 Hours Of Service:   
 Shelter Ended:

[Service](#) [Staff/Volunteer](#) [Date](#) [Hours Of Service](#) [Shelter Begin](#) [Shelter End](#)

Previous 20 records Next 20 records

Done

start [Inbox - Microsoft Out...](#) [Internet Explorer](#) [H:\Infonet\Manual](#) [InfoNet User's Manua...](#) [Document2 - Microsof...](#) 9:21 AM

AS WITH ALL SERVICES, BE SURE TO SELECT "MATCHING CASES FOUND." SERVICES, INCLUDING SHELTER, ARE ALWAYS ATTACHED TO A CASE.

When the client and case have been selected, you can enter a shelter service for that client. There are three different Emergency DV Shelter services to choose from: DV Safe Home, DV Shelter Home, and Hotel/Motel. For clarification on the difference between these terms, see the Service Definitions or contact your program coordinator.

[Criminal Justice System](#)  
**[Direct Client Services](#)**  
[Hotline Calls/Info. & Referral Services](#)  
[Coordinated Community Response](#)  
[Presentations, Publications & Conducting Trainings](#)  
[Community Education](#)

Client ID:   
 Case ID:   
 Service:   
☐ Add the same shelter stay to existing secondary victims?  
 Activity (Optional):   
 Staff/Volunteer:   
 Date:   
 Shelter Began:   
 Hours Of Service:   
 Shelter Ended:

[Shortcut to Secondary Victims Page](#)

The staff/volunteer should be whoever has checked the person into shelter, or completed the shelter intake for that shelter client. The hours of service should be the amount of time spent checking the person into shelter, NOT the amount of time spent in shelter. The service date is typically the date that the staff member performed the shelter intake.

At the bottom of the service box are two additional fields that apply only to Emergency DV Shelter: Shelter Began and Shelter Ended. These two fields are how bed nights are calculated in InfoNet.

At this point, when entering a shelter service, one of two scenarios is true:

The client you are entering the shelter service for has already exited shelter.

The client you are entering the shelter service for is still being sheltered by your agency.

If scenario (1) is true, and the client has exited shelter, you will have all of the information you need to complete this shelter record – both the Shelter Began date and the Shelter Ended date. Enter both of these dates and click the submit button, and your shelter record will be saved at the bottom of the page:

general crimes > sexual assault > administrative utility > welcome, Test User logout >

## Domestic Violence (DV)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

Find Client or Case

Client Information

Medical and Criminal Justice System

Direct Client Services

Hotline Calls/Info. & Referral Services

Coordinated Community Response

Presentations, Publications & Conducting Trainings

Client ID: Example2

Case ID: 86172

Service: Advocacy-Based Counseling

Activity (Optional):

Staff/Volunteer: Cross, Marcia

Date:

Hours Of Service:

Shelter Began:

Shelter Ended:

Submit Clear Cancel

Service	Staff/Volunteer	Date	Hours Of Service	Shelter Begin	Shelter End
Advocacy-Based Counseling	Cross, Marcia	07/02/2006	0.5		
Safety Planning	Cross, Marcia	07/02/2006	1.5		
Referrals	Cross, Marcia	07/02/2006	0.5		
Housing Assistance	Cross, Marcia	07/13/2006	2		
Emergency DV Shelter-DV Shelter Home	Longoria, Eva	08/01/2008	1.25	08/01/2008	08/14/2008

Previous 20 records next 20 records

View Service Definitions

THIS SHELTER SERVICE IS "COMPLETE" BECAUSE BOTH THE SHELTER BEGAN AND SHELTER ENDED DATES HAVE BEEN COMPLETED.

InfoNet will calculate the number of bednights for this client by calculating the difference between the Shelter Ended date and the Shelter Began date. In the example above, InfoNet will calculate the difference between 8/14/08 (Shelter Ended date) and 8/01/08 (Shelter Began date) and will record that this client was in shelter for 13 nights. If the client entered shelter in one reporting period, and exited in another reporting period, InfoNet will automatically determine which bednights get counted on each report.

But, what happens with Scenario (2), when you need to enter a shelter service for a client that is currently IN shelter? InfoNet was set up for you to do this as well. In that case, just enter the Shelter Began date, and leave the Shelter Ended date blank. Your saved record will look like this:

A CLIENT THAT IS CURRENTLY IN SHELTER WILL HAVE A SHELTER BEGIN DATE ON THEIR SHELTER RECORD, BUT NO SHELTER ENDED DATE.

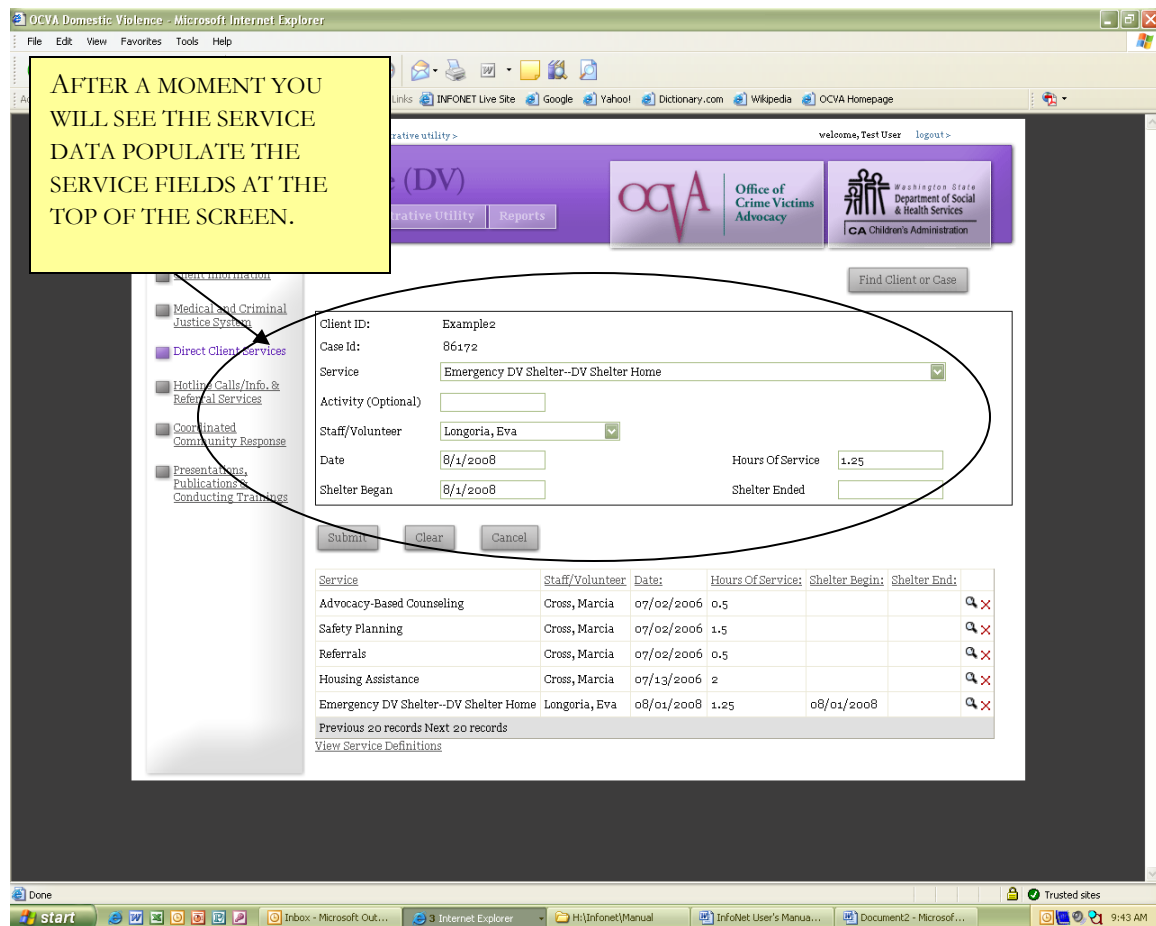
	Staff/Volunteer	Date:	Hours Of Service:	Shelter Begin:	Shelter End:	
	Cross, Marcia	07/02/2006	0.5			Q X
	Cross, Marcia	07/02/2006	1.5			Q X
	Cross, Marcia	07/02/2006	0.5			Q X
Housing Assistance	Cross, Marcia	07/13/2006	2			Q X
Emergency DV Shelter--DV Shelter Home	Longoria, Eva	08/01/2008	1.25	08/01/2008		Q X
Previous 20 records Next 20 records						
<a href="#">View Service Definitions</a>						

For this client, InfoNet will calculate the bednights for that client from their begin date until now. So, for the client above, if a report is pulled for 7/1/2008 through 9/30/2008, InfoNet will count the number of bednights from 8/1/2008 through 9/30/2008 – because this client is “still in shelter.”

When this client does leave shelter, it's extremely important to go back and enter that missing Shelter Ended Date. To do this, click on the **exact same shelter record**. InfoNet will only calculate shelter nights based on the same shelter service record. Select the shelter record with a Shelter Begin date, and the information will appear in the Service fields at the top of the page:

Service	Staff/Volunteer	Date:	Hours Of Service:	Shelter Begin:	Shelter End:	
Advocacy-Based Counseling	Cross, Marcia	07/02/2006	0.5			Q X
Safety Planning	Cross, Marcia	07/02/2006	1.5			Q X
Referrals	Cross, Marcia	07/02/2006	0.5			Q X
Housing Assistance	Cross, Marcia	07/13/2006	2			Q X
Emergency DV Shelter--DV Shelter Home	Longoria, Eva	08/01/2008	1.25	08/01/2008		Q X
Previous 20 records Next 20 records						
<a href="#">View Service Definitions</a>						

SELECT THE SHELTER RECORD BY CLICKING ON IT.



When the shelter service is selected, enter the Shelter Ended date and click the Submit button. The record at the bottom of the screen will now show a completed shelter record – both a Shelter Began and Shelter Ended date.


<u>Service</u>	<u>Staff/Volunteer</u>	<u>Date:</u>	<u>Hours Of Service:</u>	<u>Shelter Begin:</u>	<u>Shelter End:</u>	
Advocacy-Based Counseling	Cross, Marcia	07/02/2006	0.5			Q X
Safety Planning	Cross, Marcia	07/02/2006	1.5			Q X
Referrals	Cross, Marcia	07/02/2006	0.5			Q X
Housing Assistance	Cross, Marcia	07/13/2006	2			Q X
Emergency DV Shelter--DV Shelter Home	Longoria, Eva	08/01/2008	1.25	08/01/2008	08/14/2008	Q X
Previous 20 records Next 20 records						
<a href="#">View Service Definitions</a>						

IMPORTANT NOTE: The **ONLY** way that InfoNet will calculate bednights is in this manner. Entering Shelter Begin and Shelter End dates for other services, such as Safety Planning or Advocacy-based counseling, will NOT result in bed nights being calculated. InfoNet ignores shelter dates for all services except shelter. So, for example, if you choose to enter shelter begin and end dates for other records, you might end up with services that look like this:


general crimes > sexual assault > administrative utility > welcome, Test User logout >

## Domestic Violence (DV)

Data Entry Administrative Utility Reports



Office of  
Crime Victims  
Advocacy



CA Children's Administration

Find Client or Case

☐ Client Information

☐ Medical and Criminal Justice System

☒ Direct Client Services

☐ Hotline Calls/Info. & Referral Services

☐ Coordinated Community Response

☐ Presentations, Publications & Conducting Trainings

Client ID: Example2

Case Id: 86172

Service: Advocacy-Based Counseling

Activity (Optional):

Staff/Volunteer: Cross, Marcia

Date:  Hours Of Service:

Shelter Began:  Shelter Ended:

Service	Staff/Volunteer	Date	Hours Of Service	Shelter Begin	Shelter End	
Advocacy-Based Counseling	Cross, Marcia	07/02/2006	0.5	08/01/2008		X
Safety Planning	Cross, Marcia	07/02/2006	1.5	08/01/2008		X
Referrals	Cross, Marcia	07/02/2006	0.5	08/01/2008		X
Housing Assistance	Cross, Marcia	07/13/2006	2		08/14/2008	X
Emergency DV Shelter--DV Shelter Home	Longoria, Eva	08/01/2008	1.25	08/01/2008		X

Previous 20 records Next 20 records

[View Service Definitions](#)

For this client, a Shelter End date has been entered, but for the wrong service record – for Housing Assistance. InfoNet doesn't look for shelter dates associated with Housing Assistance, or with any other services. It is only looking at that Emergency DV Shelter record. On that record, the Shelter End date is blank, and so InfoNet thinks the client is still in shelter. It will continue calculating more and more bednights until the user selects that specific service and enters the Shelter End date there.



## INDIVIDUALS WITH MULTIPLE SHELTER STAYS

Sometimes, you may have a shelter client that stays in shelter, exits for a period of time, and returns for a second stay. To enter the correct shelter designation for this, the client will need two different shelter entries – one for the first stay, with one Shelter Began and Shelter Ended date, and a second entry for her second stay. The final result might look something like this:

general crimes > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

Find Client or Case

**Client Information**

Medical and Criminal Justice System

**Direct Client Services**

Hotline Calls/Info, & Referral Services

Coordinated Community Response

Presentations, Publications & Conducting Trainings

Client ID: Example2  
Case Id: 86172  
Service: Advocacy-Based Counseling  
Activity (Optional):  
Staff/Volunteer: Cross, Marcia  
Date:  
Shelter Began:  
Hours Of Service:  
Shelter Ended:

Submit Clear Cancel

Service	Staff/Volunteer	Date	Hours Of Service	Shelter Begin	Shelter End	
Advocacy-Based Counseling	Cross, Marcia	07/02/2006	0.5			Q X
Safety Planning	Cross, Marcia	07/02/2006	1.5			Q X
Referrals	Cross, Marcia	07/02/2006	0.5			Q X
Housing Assistance	Cross, Marcia	07/13/2006	2			Q X
Emergency DV Shelter--DV Shelter Home	Longoria, Eva	07/13/2006	1.25	07/13/2006	07/15/2006	Q X
Advocacy-Based Counseling	Cross, Marcia	08/01/2008	1.25			Q X
Child Care	Cross, Marcia	08/01/2008	2.25			Q X
Crisis Counseling/Intervention	Cross, Marcia	08/01/2008	0.5			Q X
Referrals	Cross, Marcia	08/01/2008	0.25			Q X
Emergency DV Shelter--DV Shelter Home	Cross, Marcia	08/01/2008	0.5	08/01/2008	08/14/2008	Q X

Previous 20 records Next 20 records

[View Service Definitions](#)

PostBackWithOptions(new WebForm\_PostBackOptions("ctl00\$LnkBtnSubmit", "", true, "", false, true))

Inbox - Microsoft Out... Internet Explorer H:\Infonet\Manual Microsoft Word Why Is Our Shelter B...

For this client, you can see that the client stayed in shelter twice – once for two nights in July, 2006 and then later for a two week stay in August, 2008. This could be done for any number of shelter entrances and exits. It's important, however, that each shelter entry be “complete” with its own Began and End date entered, as shown above. InfoNet can then calculate the right number of bednights and determine which report those nights could get shown on.

## CHILDREN IN SHELTER

There are two ways to enter shelter stays for children of primary clients. On the Direct Client Services Screen, when a shelter service is selected from the drop down menu, you will see a checkbox immediately beneath the Services drop down menu:

The screenshot shows the 'Direct Client Services' form. A yellow callout box on the left contains the text: 'THE CHECKBOX TO ADD SAME SHELTER STAY TO SECONDARY VICTIMS IS ONLY DISPLAYED WHEN ONE OF THE EMERGENCY DV SHELTER SERVICES IS SELECTED.' An arrow points from this box to a checkbox labeled 'Add the same shelter stay to existing secondary victims?' which is located below the 'Service' dropdown menu. The 'Service' dropdown is currently set to 'Emergency DV Shelter--DV Shelter Home'. Other fields on the form include 'Client ID' (Example1), 'Case Id' (86173), 'Activity (Optional)', 'Staff/Volunteer' (Huffman, Felicity), 'Date' (8/13/2009), 'Shelter Began' (8/13/2009), 'Hours Of Service' (1.25), and 'Shelter Ended'. The form also has 'Submit', 'Clear', and 'Cancel' buttons at the bottom.

If the client and the client's children stayed in shelter for the exact same time period, click this box to add an identical shelter entry to each of the children's records. If the shelter entry contains no end date, be sure to check this box again when you return to the record to enter a Shelter Ended date, so that the Shelter Ended date will be applied to the children's records as well.

Children in shelter may also be entered individually on the Children's page of the client intake. This is done when children do not stay in shelter the exact length of time as their parent. Sometimes, children stay with a non-custodial parent for visitation, and stay in shelter only on weekends, or only on weekdays, or only for certain periods of time, for which their mother may have stayed continuously. Likewise, not all children stay for the same amount of time as one another. Therefore, a separate shelter entry may be submitted for each child in shelter. In those situations, do not check the "add same shelter stay" box, as the entries will be submitted individually instead.

To do this, navigate to the client's Intake form and click on the "Children and Youth" tab. The client's children should already have been entered:

general crimes >

sexual assault >

administrative utility >

welcome, Test User

logout >

Domestic Violence (DV)

Data Entry

Administrative Utility

Reports

Office of Crime Victims Advocacy

Washington State Department of Social & Health Services

CA Children's Administration

New Client or Case

Find Client or Case

Client Information

Medical and Criminal Justice System

Direct Client Services

Hotline Calls/Info. & Referral Services

Coordinated Community Response

Presentations, Publications & Conducting Trainings

Client ID: Example2 Case ID: 86172

Demographics

Children and Youth

Income

Referrals

Presenting Issues

Offenders

Needed / Received

Age

Gender

Race

Ethnicity

Add / Edit Secondary

Clear Secondary

Age	Gender	Relationship To Client		
14	Female	Child		
8	Male	Child		

Services Provided to this Child

Service	Staff/Volunteer	Date
Select an Item	Cross, Marcia	

Hours of Service

Shelter In

Shelter Out

Add/Edit Service

Clear Service

Service	Staff	Date	Hours	Shelter In	Shelter Out
---------	-------	------	-------	------------	-------------

Next

Submit

Clear

Cancel

THIS CLIENT HAS A 14 YEAR OLD FEMALE CHILD AND AN 8 YEAR OLD MALE CHILD.

INFONET USERS MANUAL, JULY 2010

6-14

To enter service entries for these children, first select one of the children and click directly on their record to select. You'll know the child is selected when their information fills the gray box at the top of the screen.

general crimes > sexual assault > administrative utility > welcome, Test User logout >

## Domestic Violence (DV)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

New Client or Case Find Client or Case

Client ID: Example2 Case ID: 86172 Service has been added to the database.

Demographics Children and Youth Income Referrals Presenting Issues Offenders Needed / Received

Age 14 Gender Female Race White Ethnicity Non-Hispanic/Non-Latino

Add / Edit Secondary Clear Secondary

Age	Gender	Relationship To Client
14	Female	Child
8	Male	Child

Services Provided to this Child

Service	Staff/Volunteer	Date
Select an Item	Cross, Marcia	
Hours of Service	Shelter In	Shelter Out

Add/Edit Service Clear Service

Service	Staff	Date	Hours	Shelter In	Shelter Out
DV Shelter Home	Cross	8/1/2008	1.25	8/1/2008	8/14/2008

Next Submit Clear Cancel

Above, the shelter entry has been entered for the 14 year old female. Now I need to select the 8 year old male and enter the shelter nights for him as well. To do that, I click directly on the 8 year old's secondary victim record, and his information will populate the gray box at the top:

Medical and Criminal Justice System Direct Client Services Hotline Calls/Info. & Referral Services Coordinated Community Response Presentations, Publications & Conducting Trainings

Client ID: Example2 Case ID: 86172

Demographics Children and Youth Income Referrals Presenting Issues Offenders Needed / Received

Age 8 Gender Male Race White Ethnicity Non-Hispanic/Non-Latino

Add / Edit Secondary Clear Secondary

Age	Gender	Relationship To Client
14	Female	Child
8	Male	Child


Services Provided to this Child

Next, I move to the Secondary Service box lower on the screen and select the type of shelter in which the child stayed. In this example, I'll be choosing DV Shelter Home. I enter the service data just like I did for the mother, including the Shelter IN and Shelter OUT dates. However, when my information is complete, I click the **Add/Edit Service** button to enter children's services – not the SUBMIT button at the bottom, which is for entering information about the primary client only.


general crimes > sexual assault > administrative utility > welcome, Test User logout >

## Domestic Violence (DV)

Data Entry Administrative Utility Reports



Office of  
Crime Victims  
Advocacy



Washington State  
Department of Social  
& Health Services  
CA Children's Administration

New Client or Case Find Client or Case

Client ID: Example2 Case ID: 86172

Demographics Children and Youth Income Referrals Presenting Issues Offenders Needed / Received

Age 8 Gender Male  
Race White Ethnicity Non-Hispanic/Non-Latino

Add / Edit Secondary Clear Secondary

Age	Gender	Relationship To Client
14	Female	Child
8	Male	Child

Services Provided to this Child

Service	Staff/Volunteer	Date
DV Shelter Home	Cross, Marcia	8/01/2008

Hours of Service Shelter In Shelter Out

Hours of Service	Shelter In	Shelter Out
1	8/01/2008	8/14/08

Add/Edit Service Clear Service

Service	Staff	Date	Hours	Shelter In	Shelter Out
---------	-------	------	-------	------------	-------------

Next Submit Clear Cancel

Once the record has been saved, I will see it appear toward the bottom of the screen:

Next

Clear

Service	Staff	Date	Hours	Shelter In	Shelter Out		
DV Shelter Home	Cross	8/1/2008	1	8/1/2008	8/14/2008		

Next

Submit

Clear

Cancel

Again, if the Shelter OUT date is left blank, InfoNet would assume this child is still in shelter, and would continue to calculate bednights.

## SEXUAL ASSAULT – CSAPs AND SPECIALIZED SERVICES

domestic violence > general crimes > administrative utility > welcome, Nicky Gleason logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Find Client or Case

Client ID: SAClient2  
Case Id: 348  
Service: Medical Advocacy  
Activity (Optional): Assist w/ informed medical decisions  
Staff/Volunteer: Hazel, David  
Date:  Hours Of Service:

Case ID: Client ID: Service Staff/Volunteer Date  
View Service Definitions

Submit Clear Cancel

CLICK THE VIEW SERVICE DEFINITIONS LINK TO VIEW THE SEXUAL ASSAULT SERVICE STANDARDS

There are two pages for Sexual Assault Client Services. The first, shown above, is CSAP and Specialized Services, which is, appropriately enough, for CSAPs and Specialized Service providers.

To access the CSAPs and Specialized Services page, click on the link on the left hand side of the screen. This page is only available on the Sexual Assault Interface. The page has seven fields to complete for each service you provide to your client. Those fields are described below:

### CSAPs and Specialized Services Fields

Service	Medical Advocacy Medical Advocacy Legal Advocacy General Advocacy Therapy Medical Social Work Support Groups
Activity (Optional)	On-going personal support On-going personal support Outreach calls or visits Information and referral, case specific Ongoing crisis intervention Arranging services Consult with others about case
GENERAL ADVOCACY ACTIVITIES	

**Service:** Select the first service you provided to the client. This pull down list shows those direct client services for which CSAPs and Specialized SA services are eligible. You may always type the first letter of a selection to pull up items starting with that letter – if more than one service with that first letter exists, hitting the first letter multiple times will allow you to toggle through the choices.

**Activity:** Activity is an optional field agencies may use to drill down and determine more specifically how they use their time. Each of the CSAPs and Specialized services has activities associated with it.

### CSAPs and Specialized Services Fields

Service	Therapy
Activity (Optional)	Psychosocial history taking <b>Psychosocial history taking</b> Psychiatric evaluation In-person interviews Collateral contacts Report writing Individual therapy Group therapy Family therapy In-person visit Interpretation of findings Expert testimony

The picture to the left, for example, shows the activities when General Advocacy is selected as the service on the top and the activities when Therapy is selected as the service on the bottom.

#### THERAPY ACTIVITIES

Staff/Volunteer	Hazel, David Hazel, David Gleason, Nicky Emery, Bev <b>Fenno, Chris</b>
-----------------	---

**Staff/Volunteer:** Select the staff member or volunteer who provided the service. If the staff or volunteer is not shown in this pull down list, you may need to update the Staff Information in the Administrative Utility for your agency.

Date	1/2/2006
------	----------

**Date:** Enter the date the service was provided. Please note the date cannot precede the first contact date listed on the Client's Intake. If you try to enter a date prior to the client's first contact date, the service date will default to the date you entered as the first contact date on the Client Intake form.







Hours Of Service	0.5
------------------	-----

**Hours Of Service:** Enter the number of hours, rounded to the nearest quarter hour you provided the service. For example, if you provided the service for fifteen minutes or less, enter 0.25.



When you have completed your service data, click on the **Submit** button at the bottom of the page to save your data.

After a service has been entered, it will appear at the bottom of the page:

Case ID:	Client ID:	Service	Staff/Volunteer	Date	
348	SAClient2	Medical Advocacy	Hazel, David	6/7/2006	 
348	SAClient2	Legal Advocacy	Emery, Bev	6/8/2006	 
348	SAClient2	Support Groups	Gleason, Nicky	6/8/2006	 
<a href="#">View Service Definitions</a>					

You may click on any service record to update information about that service by clicking on the magnifying glass next to it.



## SEXUAL ASSAULT – NATIVE AMERICAN AND MARGINALIZED SERVICES

domestic violence > general crimes > administrative utility > welcome, Test User logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Find Client or Case

☐ Client Intakes  
☐ Medical and Criminal Justice System  
☐ CSAP and Specialized Services  
☒ Native American and Marginalized Services  
☐ Crisis Intervention & Information/Referral  
☐ Prevention Activities  
☐ System Coordination  
☐ Community Organizing & Responding

Client ID: No Client Selected  
Case Id: No Case Selected  
Service: Peer Support Group  
Activity (Optional): No activities associated with this service.  
Staff/Volunteer: Cross, Marcia  
Date: Hours Of Service:

Submit Clear Cancel

Service Staff/Volunteer Date Hours Of Service: Shelter Begin: Shelter End:  
Previous 20 records Next 20 records  
[View Service Definitions](#)

The Native American and Marginalized Services page on the Sexual Assault interface is for direct client services provided by Native American and Marginalized service providers **only**. This page is NOT for CSAPs to enter services provided to clients who are from marginalized communities – if you enter data here and do not receive either Native American Specialized SA funding or Sexual Assault to Marginalized Communities funding, your services will not appear on the correct report, and you may be asked to go back and re-enter your data.

To access the Native American and Marginalized Services page, click on the link on the left side of the screen. This page is only available on the Sexual Assault Interface. The page has seven fields to complete for each service you provide to your client. Those fields are described below:

### Marginalized Services Fields

Service	Peer Support Group
	Peer Support Group
	Educational Support Group
	Therapy
	Culturally/Linguistically Appropriate Techniques
	Support/Accompaniment through Service Delivery and Criminal Justice Syst

**Service:** Select the first service you provided to the client. This pull down list shows those direct client services for which Marginalized and Native American Specialized Services are eligible. You may always type the first letter of a selection to pull up items starting with that letter – if more than one service with that first letter exists, hitting the first letter multiple

---

### Marginalized Services Fields

---

times will allow you to toggle through the choices.

---

Activity (Optional)	No activities associated with this service.
---------------------	---

---

**Activity:** Currently, there are no specific activities associated with Marginalized Services, so you may skip this field.

---

Staff/Volunteer	<div>Hazel, David Hazel, David Gleason, Nicky Emery, Bev Fenno, Chris</div>
-----------------	---

---

**Staff/Volunteer:** Select the staff member or volunteer who provided the service. If the staff or volunteer is not shown in this pull down list, you may need to update the Staff Information in the Administrative Utility for your agency.

---

Date	1/2/2006
------	----------

---

**Date:** Enter the date the service was provided. Please note the date cannot precede the first contact date listed on the Client's Intake. If you try to enter a date prior to the client's first contact date, you will receive an error message.

---

Hours Of Service	0.5
------------------	-----

---

**Hours Of Service:** Enter the number of hours, rounded to the nearest quarter hour you provided the service. For example, if you provided the service for fifteen minutes or less, enter 0.25.

---







Submit

---

When you have completed your service data, click on the **Submit** button at the bottom of the page to save your data.

---

After a service has been entered, it will appear at the bottom of the page:

Case ID:	Client ID:	Service	Staff/Volunteer	Date	
348	SAClient2	Peer Support Group	Gleason, Nicky	6/1/2006	 
348	SAClient2	Therapy	Hazel, David	6/1/2006	 
348	SAClient2	Culturally/Linguistically Appropriate Techniques	Hazel, David	6/3/2006	 

[View Service Definitions](#)

You may click on any service record to update information about that service by clicking on the magnifying glass next to it. If you have entered a service in error, click on the red **X** to delete.

## VICTIMS OF CRIME DIRECT SERVICES

domestic violence > sexual assault > administrative utility >
welcome, Test User    [logout >](#)

### Victims of Crime (VC)

Data Entry
Administrative Utility
Reports

Office of  
Crime Victims  
Advocacy

Washington State  
Department of Social  
& Health Services

CA Children's Administration

- ☐ [Client Information](#)
- ☐ [Medical and Criminal Justice System](#)
- ☒ [Direct Services](#)
- ☐ [Hotline Calls/Info. & Referral Services](#)
- ☐ [Community Education](#)

[Find Client or Case](#)

Client ID:
Example1

Case Id:
138094

Service
Crisis Intervention

Activity (Optional)

Staff/Volunteer
Longoria, Eva ☒

Date

Hours Of Service

Service	Staff/Volunteer	Date	Hours Of Service	Shelter Begin	Shelter End	
Crisis Intervention	Hatcher, Terri	12/01/2008	1.25			Q X
Legal Advocacy	Huffman, Felicity	12/02/2008	2.5			Q X
Medical Advocacy	Longoria, Eva	12/05/2008	0.75			Q X

Previous 20 records    Next 20 records

[View Service Definitions](#)

WHEN ENTERING DIRECT SERVICES, BE SURE THAT YOU HAVE A CLIENT AND CASE NUMBER SELECTED.

To access the VOC Direct Services page, click on the link on the left hand side of the screen. To enter services, you must first search for the client you wish to add services to by using the “Find Client or Case” button in the upper right hand corner of your screen.

The VOC Direct Services page has five fields to complete for each service you provide to your client. Those fields are described below:

### VOC Direct Client Service Fields

- Crisis Intervention
- Crisis Intervention
- Information and Referral
- Support Groups
- Therapy
- Emergency Financial Assistance
- Legal Advocacy
- Advocacy
- Medical Advocacy
- Community Responding

**Service:** Select the first service you provided to the client. You may always type the first letter of a selection to pull up items starting with that letter – if more than one service with that first letter exists, hitting the first letter multiple times will allow you to toggle through the choices. A list of all available Victims of Crime services and their definitions is provided at the end of this manual.

Activity  
(Optional)

**Activity:** For agencies that would like to further describe the service provided, an optional text box is provided to describe the activity associated with the service provided.

## VOC Direct Client Service Fields

Staff/Volunteer

- Hazel, David
- Gleason, Nicky
- Emery, Bev
- Fenno, Chris

**Staff/Volunteer:** Select the staff member or volunteer who provided the service. If the staff or volunteer is not shown in this pull down list, you may need to update the Staff Information in the Administrative Utility for your agency.

Date

**Date:** Enter the date the service was provided. Please note the date cannot precede the first contact date listed on the Client's Intake. If you try to enter a date prior to the client's first contact date, the service date will default to the date you entered as the first contact date on the Client Intake form.

Hours Of Service

**Hours Of Service:** Enter the number of hours, rounded to the nearest quarter hour you provided the service. For example, if you provided the service for fifteen minutes or less, enter 0.25.

When you have completed your service data, click on the **Submit** button at the bottom of the page to save your data.

After a service has been entered, it will appear at the bottom of the page:

domestic violence > sexual assault > administrative utility > welcome, Test User logout >

**Victims of Crime (VC)**

Data Entry Administrative Utility Reports

Find Client or Case

Client Information

Medical and Criminal Justice System

Direct Services

Hotline Calls/Info. & Referral Services

Community Education

Client ID: Example1

Case Id: 138094

Service: Crisis Intervention

Activity (Optional):

Staff/Volunteer: Longoria, Eva

Date:

Hours Of Service:

Submit Clear Cancel

Service	Staff/Volunteer	Date	Hours Of Service	Shelter Begin:	Shelter End:
Crisis Intervention	Hatcher, Terri	12/01/2008	1.25		
Legal Advocacy	Huffman, Felicity	12/02/2008	2.5		
Medical Advocacy	Longoria, Eva	12/05/2008	0.75		

Previous 20 records Next 20 records

[View Service Definitions](#)

You may click on any service record to update information about the service at any time.

## VICTIM WITNESS ASSISTANCE UNITS DIRECT SERVICES

domestic violence > victims of crime > sexual assault > administrative utility > welcome, Test User [logout >](#)

**Victim Witness Assistance Units**

Data Entry Administrative Utility Reports

**Client Information**

**Direct Services**

Hotline Calls/Info. & Referral Services

Stop Grant Coordinated Community Response

Stop Grant Presentations, Publications & Training

Stop Grant Narrative Questions

Victim Witness Narrative

Stop Grant Funded Prosecution Activities

Submit New Client or Case

Client ID: Example2

Case Id: 181042

Service: Victim Rights

Activity (Optional):

Staff/Volunteer: Cross, Marcia

Date: Hours Of Service:

Submit Clear Cancel

Service	Staff/Volunteer	Date	Hours Of Service	Shelter Begin	Shelter End	
Court Proceedings	Cross, Marcia	03/15/2010	1.5			Q X
Victim Rights	Cross, Marcia	03/15/2010	2			Q X
Restitutions	Cross, Marcia	03/15/2010	1			Q X
<b>Total Hours of Service Provided:</b>			<b>4.5</b>			

To access the Victim Witness Direct Services page, click on the link on the left hand side of the screen. To enter services, you must first search for the client you wish to add services to by using the “Find Client or Case” button in the upper right hand corner of your screen.

The Victim Witness Direct Services page has five fields to complete for each service you provide to your client. Those fields are described below:

---

### VOC Direct Client Service Fields

---



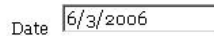
**Service:** Select the first service you provided to the client. You may always type the first letter of a selection to pull up items starting with that letter – if more than one service with that first letter exists, hitting the first letter multiple times will allow you to toggle through the choices.




**Activity:** For agencies that would like to further describe the service provided, an optional text box is provided to describe the activity associated with the service provided. For example, an agency that selected “Court Proceedings” for the service might choose to specify “Sentencing Hearing” in the optional Activity box. If that level of detail is not useful to your agency, you may leave the Activity box blank.



**Staff/Volunteer:** Select the staff member or volunteer who provided the service. If the staff or volunteer is not shown in this drop down list, you may need to update the Staff Information in the Administrative Utility for your agency.



**Date:** Enter the date the service was provided. The date cannot precede the first contact date listed on the Client’s Intake. If you try to enter a date prior to the client’s first contact date, the service date will default to the date you entered as the first contact date on the Client Intake form.









**Hours Of Service:** Enter the number of hours, **rounded to the nearest quarter hour** you provided the service. For example, if you provided the service for fifteen minutes or less, enter 0.25. If you provided two or more services over a period of time, estimate the amount of that time spent on each. For example, if you assisted a victim with Victim Rights, Protection Orders, and Compensation Claims over a two hour period, you might estimate 0.5 hours spent discussing Victim Rights, 1 hour working on Protection Orders, and 0.5 hours working on Compensation Claims.



When you have completed your service data, click on the **Submit** button at the bottom of the page to save your data.

---

After a service has been entered, it will appear at the bottom of the page:

<u>Service</u>	<u>Staff/Volunteer</u>	<u>Date:</u>	<u>Hours Of Service:</u>	
Court Proceedings	Cross, Marcia	03/15/2010	1.5	 
Victim Rights	Cross, Marcia	03/15/2010	2	 
Restitutions	Cross, Marcia	03/15/2010	1	 
<b>Total Hours of Service Provided:</b>			<b>4.5</b>	

You may click on any service record to update information about the service at any time. To edit or update an existing record, click on the record to select, then edit the information after it appears in the data entry area, and click Submit to save the revised entry.

To delete a service that was entered in error, click the red X to the right of the saved service entry.

## 7. ADDITIONAL SERVICES

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The following sections address the other features of InfoNet not connected directly to a particular client – services agencies perform including hotline calls, presentations and publications, prevention, community organizing and response, and other types of activities not linked to a single client intake. These services are different for every agency depending on the programs your agency provides, contracts your agency receives, and state and federal reporting requirements.

Some services, such as hotline calls, are performed on a daily basis by staff or volunteers, and the data collection is similar to Direct Client Services. Other services, such as Coordinated Community Response, can be collected annually and updated as needed. However, the goal of all of these sections is to increase the accuracy and ease with which various state and federal funding reports are compiled.



## HOTLINE CALLS/INFORMATION & REFERRAL SERVICES

Hotline/Information and Referral services have different names for each of the three interfaces, but in general it refers to interactions with people for whom you have not completed a client intake form. Many times, this means people you interact with on the phone for crisis intervention, to provide information, or to give a referral to another agency, although these contacts may also happen in person. For simplicity, this manual will refer to these “anonymous” contacts as “hotline” contacts, whether they happened in person or over the phone.

**Please note** clients who have an intake already in the system should have crisis intervention/information and referral contacts documented as direct services rather than hotline whenever possible.

### DOMESTIC VIOLENCE HOTLINE SECTION

general crimes > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry | Administrative Utility | Reports

OCVA | Office of Crime Victims Advocacy | Washington State Department of Social & Health Services | CA Children's Administration

**Client Information**

Medical and Criminal Justice System

Direct Client Services

**Hotline Calls/Info. & Referral Services**

Coordinated Community Response

Presentations, Publications & Conducting Trainings

Community Education

End Of Year Report

#### Hotline Information

Date:

Time Of Day:

During Business Hours?

County:

In-Person Or Phone:

Unmet Request for Emergency DV Shelter:

Referred From:

Number of calls:

Referred To:

☐ Police

☐ Court

☐ Clergy

☐ Self

☐ Friend

☐ Relative

☐ DCFS

☐ Education System

☐ Center Hotline

☐ Other Medical

☐ Legal System, Prosecutor

☐ Public Health

☐ Private Attorney

☐ Medical Advocacy Program

☐ Social Services Program

☐ Telephone

☐ Other Project/Crisis Line

☐ Phone Book

☐ Legal Aid Attorney

☐ Unspecified

☐ Not Reported

☐ Other (please specify below)

Date	Staff/Volunteer	Referred From	Type Of Intervention	
07/01/2006	Marcia, Cross	Hospital	Crisis Intervention	
08/15/2006	Terri, Hatcher		Information and Referral	
09/11/2006	Terri, Hatcher	Legal System, Prosecutor	Information and Referral	
10/31/2006	Eva, Longoria	DCFS	Information and Referral	
11/20/2006	Marcia, Cross	Hospital	Both	
12/25/2006	Terri, Hatcher	Medical Advocacy Program	Information and Referral	
09/07/2007	Marcia, Cross		Select an Item	

Staff/Volunteer:

Total Time:

City / Town of Caller:

Type Of Intervention:

**DATE, STAFF, AND TYPE OF INTERVENTION ARE REQUIRED FOR EVERY HOTLINE ENTRY.**

**ADDITIONAL FIELDS, SUCH AS UNMET REQUEST FOR EMERGENCY DV SHELTER OR NUMBER OF CALLS, ARE REQUIRED FOR CERTAIN TYPES OF ENTRIES**

**IF YOU WISH TO VIEW A PREVIOUSLY ENTERED RECORD, CLICK ON THE MAGNIFYING GLASS TO THE RIGHT OF THAT RECORD. TO DELETE A HOTLINE CALL, CLICK ON THE RED X.**

There are twelve fields in the DV Hotline Calls/Information and Referral Services page, of which only three are mandatory for every call– the **date** of the call, the **staff/volunteer** that took the call, and the **type of intervention**.

Several other fields are mandatory for certain types of entries – **Unmet Request for Emergency DV Shelter** is mandatory for recording “shelter turnaways,” and **Number of Calls** is required if you are entering “batches” of calls.

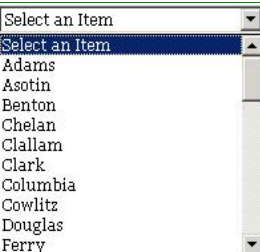
All other fields on the hotline page are optional. Each of the fields is described below.

DV Hotline Calls/Information & Referral Fields	
Date: <input type="text" value="6/5/2006"/>	<b>Date:</b> Enter the date the hotline call or other form of information/referral was completed. This is the first of two mandatory fields for each hotline call or information/referral contact.
Staff/Volunteer: <div><div>Cross, Marcia</div><div>Cross, Marcia Hatcher, Terri Longoria, Eva Huffman, Felicity Hotline, Volunteers</div></div>	<b>Staff:</b> It is mandatory you enter the staff/volunteer who took the call. However, some agencies have pools of volunteers answer hotline calls, and tracking which volunteer took each call is impractical. In those situations, you may want to enter a Staff record for “ <b>Hotline Volunteer</b> ” and be able to record all hotline calls taken by volunteers as that option. (See example, left)
Time Of Day: <input type="text" value="1:00 pm"/>	<b>Time of Day:</b> Some agencies may find it useful to record the time of day a call was received. If you choose to enter the time of day, please enter it in hh:mm (am/pm) format. Do not put periods in the “am” or “pm” suffix. If you enter the time in an incorrect format, you will receive an error message.
City/Town: <input type="text" value="Omak"/>	<b>City/Town:</b> Some agencies may find it useful to track the city or town a hotline call was received from, possibly to determine where outreach efforts should be focused, or to measure the effectiveness of publicizing of hotline numbers in certain areas. This field is completely optional, however, and may be left blank.
During Business Hours? <div><div>Select an Item</div><div>Yes No Not Reported Not Applicable Unspecified Select an Item</div></div>	<b>During Business Hours:</b> While some agencies prefer to track the actual time a call was received, others reported they preferred to record whether or not the call was received during business hours. To do so, this field was provided. However, it is optional and if it is not useful to your agency, it may be left blank.
Total Time: <input type="text"/>	<b>Total Time:</b> Enter the approximate time (in hours) spent on the hotline call. This can be useful to agencies that want to do time task studies and other tracking activities, but the field is optional. If you use this field, enter as you would for direct services, rounded to nearest quarter hours: e.g. calls of 15 minutes or less enter 0.25.

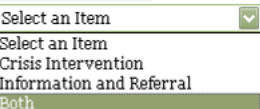
---

### DV Hotline Calls/Information & Referral Fields

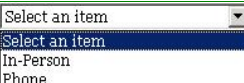
---

County:  Select an Item  
Select an Item  
Adams  
Asotin  
Benton  
Chelan  
Clallam  
Clark  
Columbia  
Cowlitz  
Douglas  
Ferry

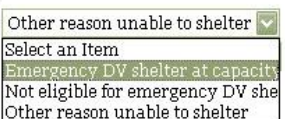
**County:** This field may be useful to agencies that serve multiple counties and want to track how many calls they receive from each area. This is an optional field for most InfoNet users, although certain agencies, such as those that receive separate funds for serving different counties, may be required to collect this information to meet contract requirements.

Type Of Intervention:  Select an Item  
Select an Item  
Crisis Intervention  
Information and Referral  
Both

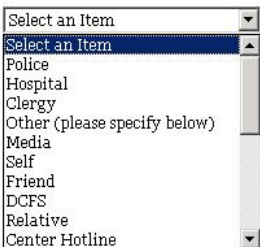
**Type of Intervention:** This is one of the mandatory fields, and requires you select either “Crisis Intervention” or “Information and Referral” as the type of contact you had with the individual. If the contact involved both Crisis Intervention AND Information and Referral in the same contact, select “Both.”

In-Person Or Phone:  Select an item  
Select an item  
In-Person  
Phone

**In Person Or Phone:** This field is for differentiating between information/referral contacts conducted in person or via telephone.

Unmet Request for  
Emergency DV Shelter  Other reason unable to shelter  
Select an Item  
Emergency DV shelter at capacity  
Not eligible for emergency DV she  
Other reason unable to shelter

**Unmet Request for Emergency DV Shelter:** This field is required if you are recording an unmet request for shelter, or “shelter turnaway” only. If the person with whom you had contact requested shelter but wasn’t sheltered, record the reason for that unmet request: either because the shelter was at capacity, the client wasn’t eligible for shelter, or other reason unable to shelter. If the client you worked with wasn’t turned away from shelter or didn’t require shelter, you may disregard this field.

Referred From:  Select an Item  
Select an Item  
Police  
Hospital  
Clergy  
Other (please specify below)  
Media  
Self  
Friend  
DCFS  
Relative  
Center Hotline

**Referred From:** This field is to record how the client found out about your agency. Collecting this information can be useful in determining where your agency needs to provide more outreach, or which agencies you should send updated brochures to if your contact information changes. If you have additional suggestions for agency types to add to this list, please contact the InfoNet Administrator and she may be able to add them to the drop down list. If “Other” is specified as the Referral Source, please type an entry into the space provided.

Number of calls:

**Number of Calls:** As an alternative to entering each call individually, this field is used for entering batches of calls that have the same information. See the following section for more detailed instructions on entering batches of calls. Entering batched calls is optional, and agencies who chose not to use that function can disregard this field – Number of Calls will automatically default to “1” call per entry unless you specify otherwise.

## DV Hotline Calls/Information & Referral Fields

Referred To:

<input type="checkbox"/> Police	<input type="checkbox"/> Hospital
<input type="checkbox"/> Clergy	<input type="checkbox"/> Media
<input type="checkbox"/> Self	<input type="checkbox"/> Friend
<input type="checkbox"/> DCFS	<input type="checkbox"/> Relative
<input type="checkbox"/> Center Hotline	<input type="checkbox"/> Education System
<input type="checkbox"/> Legal System, Prosecutor	<input type="checkbox"/> Other Medical
<input type="checkbox"/> Private Attorney	<input type="checkbox"/> Public Health
<input type="checkbox"/> Social Services Program	<input type="checkbox"/> Medical Advocacy Program
<input type="checkbox"/> Other Project/Crisis Line	<input type="checkbox"/> Telephone
<input type="checkbox"/> Legal Aid Attorney	<input type="checkbox"/> Court
<input type="checkbox"/> Other (please specify below)	

**Referred To:** Check any and all boxes of agencies to which you referred the client. If you have additional suggestions for agency types to add to this list, please contact the InfoNet Administrator. If "Other" is specified as the Referral Source, please type an entry into the space provided.

**Submit**

When you have completed your service data, click on the **Submit** button at the bottom of the page to save your data.

After you have entered a hotline call and clicked Submit, the hotline call will appear on the Saved Call list at the bottom of your screen:

**Submit**
**Clear / Add New Record**
**Cancel**

<u>Date</u>	<u>Staff/Volunteer</u>	<u>Referred From</u>	<u>Type Of Intervention</u>	
07/01/2006	Marcia, Cross	Hospital	Crisis Intervention	
08/15/2006	Terri, Hatcher		Information and Referral	
09/11/2006	Terri, Hatcher	Legal System, Prosecutor	Information and Referral	
10/31/2006	Eva, Longoria	DCFS	Information and Referral	
11/20/2006	Marcia, Cross	Hospital	Both	
12/25/2006	Terri, Hatcher	Medical Advocacy Program	Information and Referral	
09/07/2007	Marcia, Cross		Select an Item	
01/01/2008	Terri, Hatcher	Select An Item	Both	
10/29/2008	Marcia, Cross	Police	Crisis Intervention	

**1** 2

**IF YOU WISH TO SORT HOTLINE CALLS BY DATE (OR OTHER FIELDS) CLICK THE HEADER AT THE TOP OF THE SAVED RECORDS TABLE.**

**CLICKING ONCE WILL SORT IN ASCENDING ORDER. CLICKING A SECOND TIME WILL SORT IN DESCENDING ORDER.**

**THIS CAN BE ESPECIALLY USEFUL WHEN SEARCHING FOR RECENTLY RECEIVED OR ENTERED CALLS THAT ARE OTHERWISE SAVED AT THE END OF YOUR SAVED RECORDS.**

If your agency has more than 20 hotline calls entered, only some of your saved entries are visible from this page. To view later pages, click on the appropriate link at the bottom of the table. (In the example above, there are two pages of saved records – to advance to the next page, the user would click on the link to page “2.”)

You may also sort the saved records by clicking the headers at the top of the Saved Records Table. Clicking each header once will sort the records in ascending order, and sorting a second time will sort the records in descending order.

## ENTERING BATCHES OF HOTLINE CALLS

Most hotline call entries will only take a minute or two to enter. However, some agencies receive hundreds of hotline calls each month, and those minutes entering each call can add up to hours of data entry. One of the new features added to InfoNet in November, 2008 is the ability to record batches of hotline calls in one entry.

This feature hinges on a new field, **Number of Calls**, which by default will record the number “1.” To record many calls, simply change the value of this field to whatever number of entries you wish to record with the same information, and click Submit.

Entering batches of calls will require some advance preparation to determine the batches of similar calls to be entered. The mandatory fields for individual hotline calls are still required, so batches may only be entered if they share a **date**, **type of intervention**, and **staff member** taking the call.

For example:

Staff member Eva Longoria took 41 calls on 12/1/2008. Of those, 10 were crisis intervention calls, 26 were information and referral calls, and 5 were calls which involved both crisis intervention and information and referral. Therefore, she will make three separate “batch” entries for 12/1/2008:

Batch Entry #1:

- Date = 12/1/2008
- Staff = Eva Longoria
- Type of Intervention = Crisis Intervention
- Number Of Calls = 10

Batch Entry #2:

- Date = 12/1/2008
- Staff = Eva Longoria
- Type of Intervention = Information and Referral
- Number Of Calls = 26

Batch Entry #3:

- Date = 12/1/2008
- Staff = Eva Longoria
- Type of Intervention = Both
- Number Of Calls = 5

Thus, Eva has only had to make 3 hotline call entries for 12/1/2008, while without batching her calls she would have had to make 41 individual entries. This method does lose a level of detail – for example, Eva cannot track referral information, or time of day information, the same way she could with individually entered calls. Agencies with lower numbers of calls may find the benefits of entering individual, detailed calls outweigh the time saved by entering batches.

Agencies can also “mix and match” – entering some calls in batches, such as those taken after hours, and entering other calls individually, such as those taken during business hours, or by certain staff members.

## UNMET REQUESTS FOR EMERGENCY DV SHELTER, AND BATCHED HOTLINE CALLS

Another element of entering batches of domestic violence hotline calls is capturing “Unmet requests for emergency DV shelter” data as applicable. Normally, these “shelter turnaways” would be entered as an individual hotline call, but if hotline calls are entered in batches, those unmet request contacts must be entered as well. This may be done individually, or in batches, as with other calls.

For example:

Staff member Marcia Cross took 35 hotline calls on 12/15/2008. Of these calls, 10 were crisis intervention, 15 were information and referral, and 10 were both. In addition, one of her crisis intervention calls was an unmet need for emergency shelter, and two of her information and referral calls were, too. All three of the unmet needs for emergency shelter calls that day were because the shelter was at capacity. Therefore, Marcia would enter the following:

Batch Entry #1: (Crisis Intervention without shelter turnaway)

- Date = 12/15/2008
- Staff = Marcia Cross
- Type of Intervention = Crisis Intervention
- Number Of Calls = 9

Batch Entry #2: (Crisis Intervention with shelter turnaway)

- Date = 12/15/2008
- Staff = Marcia Cross
- Type of Intervention = Crisis Intervention
- Unmet Need for Emergency DV Shelter = Emergency DV Shelter At Capacity
- Number Of Calls = 1

Batch Entry #3: (Information and Referral without shelter turnaway)

- Date = 12/15/2008
- Staff = Marcia Cross
- Type of Intervention = Information and Referral
- Number Of Calls = 13

Batch Entry #4: (Information and Referral with shelter turnaway)

- Date = 12/15/2008
- Staff = Marcia Cross
- Type of Intervention = Information and Referral
- Unmet Need for Emergency DV Shelter = Emergency DV Shelter At Capacity
- Number Of Calls = 2

Batch Entry #5: (Both Crisis Intervention/Information and Referral, without shelter turnaway)

- Date = 12/15/2008

- Staff = Marcia Cross
- Type of Intervention = Both
- Number Of Calls = 10

While Marcia still has to make 5 hotline entries for 12/15/2008, that's significantly less than the 35 entries she had to make before batching her calls. Over the course of a month, this can save Marcia hours and hours of data entry time. However, the key element is that Marcia collects the information she needs in order to batch those calls correctly.

One way to do this would be by recording hotline calls in a way that lines up with those batches. Calls would then be totaled up for ease of entry. In the Sample Forms section at the back of this manual are examples of forms an agency might use to record hotline call information and then total that information for easy batch entry. Your agency can set up any form that captures the required information, and you are also welcome to modify the example forms in any way you find useful. To receive a copy of any of these forms in Word, please e-mail Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov).

Another, less complicated way to record this information is to set up an internal rule at your agency that unmet requests for emergency shelter be entered individually. This removes a layer of complexity from the batch hotline system, and makes totaling the calls each date much easier. A second set of example forms in the Sample Form section demonstrates a way this information could be collected from staff.

It's important to note that, while in the attached examples, individual staff members would fill out each sheet documenting calls, it is also possible to "group" sets of volunteers, etc. using the "Hotline Volunteer" suggestion described on page 7-3. Likewise, agencies may find that batching calls by day is not as time effective as batching several days together.

However, please remember the more "batched" you enter, whether by staff, by date, or by call, the less detail your agency collects, and the less analysis you are able to do on your hotline services. It is important to review your reporting requirements, not just for OCVA and DSHS, but also for your other funders to make sure that any shortcuts you take in data collection to "batch" hotline calls doesn't end up making it impossible for you to report that data in ways that you will need or want later.

Ideally, agencies will find a balance between avoiding cumbersome and invasive data entry tasks, while still collecting useful and valuable data. For additional ideas about incorporating batched hotline calls to your agency, please feel free to contact Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov).

## SEXUAL ASSAULT CRISIS INTERVENTION/INFORMATION AND REFERRAL

domestic violence > general crimes > administrative utility > welcome, Test User logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
CA Children's Administration

**Client Intakes**  
Medical and Criminal Justice System  
CSAP and Specialized Services  
Native American and Marginalized Services  
**Crisis Intervention & Information/Referral**  
Prevention Activities  
System Coordination  
Community Organizing & Responding

**Hotline Information**

Date:   
Time Of Day:   
During Business Hours?  Select An Item  
County:  Select an Item  
Referred From:  Select An Item  
Number of calls:  1

Referred To:

☐ Police ☐ Hospital  
☐ Clergy ☐ Court  
☐ Friend ☐ Self  
☐ DCFS ☐ Relative  
☐ Center Hotline ☐ Education System  
☐ Legal System, Prosecutor ☐ Other Medical  
☐ Private Attorney ☐ Public Health  
☐ Social Services Program ☐ Medical Advocacy Program  
☐ Other Project/Crisis Line ☐ Telephone  
☐ Legal Aid Attorney ☐ Phone Book  
☐ Not Reported ☐ Unspecified  
☐ Other (please specify below)

Staff/Volunteer:  Cross, Marcia  
Total Time:   
City / Town of Caller:   
Type Of Intervention:  Select an Item

**DATE, STAFF, AND TYPE OF INTERVENTION ARE REQUIRED FOR EVERY HOTLINE ENTRY.**

Submit Clear / Add New Record Cancel

Date	Staff/Volunteer	Referred From	Type Of Intervention	
11/12/2008	Marcia, Cross	Friend	Crisis Intervention	Q X
11/12/2008	Marcia, Cross	Private Attorney	Crisis Intervention	Q X
11/12/2008	Marcia, Cross	Social Services Program	Information and Referral	Q X
11/12/2008	Marcia, Cross	Hospital	Information and Referral	Q X

The Sexual Assault Crisis Intervention & Information/Referral page is almost identical to the DV Hotline Calls/Information and Referral Services page. There are only three mandatory fields – the **date** of the call, the **staff/volunteer** that took the call, and the **type of intervention**. All other fields should be filled out based on what is useful to your agency.

### SA Crisis Intervention/Information & Referral Fields

Date:  6/5/2006

**Date:** Enter the date the hotline call or other form of information/referral was completed.

Staff/Volunteer:  Cross, Marcia

Cross, Marcia  
Hatcher, Terri  
Longoria, Eva  
Huffman, Felicity  
Hotline, Volunteers

**Staff:** Enter the staff/volunteer who took the call if it is practical to do so. However, several agencies have pools of volunteers answer hotline calls, and tracking which volunteer took each call is impractical for those agencies. In those cases, you may want to enter a Staff record for "Hotline Volunteer" and be able to record all hotline calls taken by volunteers as that option.

Time Of Day:  1:00 pm

**Time of Day:** Some agencies may find it useful to record the time of day a call was received. If you choose to enter



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### SA Crisis Intervention/Information & Referral Fields

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the time of day, please enter it in hh:mm (am/pm) format. Do not put periods in the “am” or “pm” suffix. If you enter the time in an incorrect format, you will receive an error message.

City/Town:

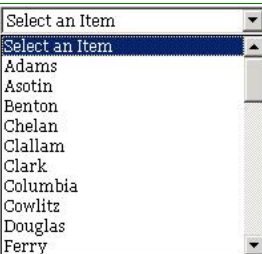
**City/Town:** Some agencies may find it useful to track the city or town a hotline call was received from, possibly to determine where outreach efforts should be focused, or to measure the effectiveness of publicizing of hotline numbers in certain areas. This field is completely optional, however, and may be left blank.

During Business Hours? 

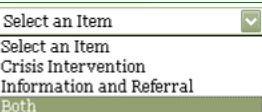
**During Business Hours:** While some agencies prefer to track the actual time a call was received, others reported they preferred to record whether or not the call was received during business hours. To do so, this field was provided. However, it is optional and if it is not useful to your agency, it may be left blank.

Total Time:

**Total Time:** Enter the approximate time (in hours) spent on the hotline call. This can be useful to agencies that want to do time task studies and other tracking activities, but the field is optional. If you use this field, enter as you would for direct services, rounded to nearest quarter hours: e.g. calls of 15 minutes or less enter 0.25.

County: 

**County:** This field may be useful to agencies that serve multiple counties and want to track how many calls they receive from each area. Again, this is an optional field.

Type Of Intervention: 

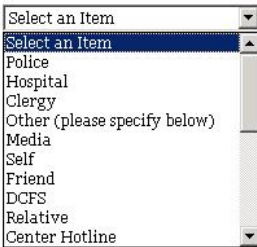
**Type of Intervention:** This is one of the mandatory fields, and requires you select either “Crisis Intervention” or “Information and Referral” as the type of contact you had with the individual. If the contact involved both Crisis Intervention AND Information and Referral in the same contact, select “Both.”

---

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### SA Crisis Intervention/Information & Referral Fields

---

Referred From: 

**Referred From:** This field is to record how the client found out about your agency. Collecting this information can be useful in determining where your agency needs to provide more outreach, or which agencies you should send updated brochures to if your contact information changes. If you have additional suggestions for agency types to add to this list, please contact the InfoNet Administrator and she may be able to add them to the drop down list.


Number of calls:

**Number of Calls:** This field is used for entering batches of calls that have the same information. See the following section for more detailed instructions on entering batches of calls. Entering batched calls is optional, and agencies who chose not to use that function can disregard this field – Number of Calls will automatically default to “1” call per entry unless you specify otherwise.

Referred To:

<input type="checkbox"/> Police	<input type="checkbox"/> Hospital
<input type="checkbox"/> Clergy	<input type="checkbox"/> Media
<input type="checkbox"/> Self	<input type="checkbox"/> Friend
<input type="checkbox"/> DCFS	<input type="checkbox"/> Relative
<input type="checkbox"/> Center Hotline	<input type="checkbox"/> Education System
<input type="checkbox"/> Legal System, Prosecutor	<input type="checkbox"/> Other Medical
<input type="checkbox"/> Private Attorney	<input type="checkbox"/> Public Health
<input type="checkbox"/> Social Services Program	<input type="checkbox"/> Medical Advocacy Program
<input type="checkbox"/> Other Project/Crisis Line	<input type="checkbox"/> Telephone
<input type="checkbox"/> Legal Aid Attorney	<input type="checkbox"/> Court
<input type="checkbox"/> Other (please specify below)	

**Referred To:** Check any and all boxes of agencies to which you referred the client. If you have additional suggestions for agency types to add to this list, please contact the InfoNet Administrator.



When you have completed your service data, click on the **Submit** button at the bottom of the page to save your data.

---

After you have entered a crisis intervention/information and referral contact and clicked Submit, the hotline call will appear at the list on the bottom of the screen:

Date	Staff/Volunteer	Referred From	Type Of Intervention	
11/12/2008	Marcia, Cross	Friend	Crisis Intervention	
11/12/2008	Marcia, Cross	Private Attorney	Crisis Intervention	
	a, Cross	Social Services Program	Information and Referral	
	a, Cross	Hospital	Information and Referral	
	a, Cross	Other Project/Crisis Line	Information and Referral	
	a, Cross	Media	Information and Referral	
	a, Cross	Media	Information and Referral	
	Longoria	Legal System, Prosecutor	Information and Referral	
	Longoria	Media	Information and Referral	
	Longoria	Medical Advocacy Program	Information and Referral	
	Longoria	Hospital	Both	
	a, Cross	DCFS	Information and Referral	
05/09/2008	Eva, Longoria	Other Project/Crisis Line	Information and Referral	
05/04/2008	Eva, Longoria	Legal System, Prosecutor	Information and Referral	
05/01/2008	Felicity, Huffman	Hospital	Information and Referral	
04/20/2008	Eva, Longoria	Clergy	Information and Referral	
04/20/2008	Marcia, Cross	Other Project/Crisis Line	Information and Referral	
04/12/2008	Eva, Longoria	Hospital	Crisis Intervention	
04/11/2008	Eva, Longoria	Legal Aid Attorney	Both	
03/01/2008	Marcia, Cross	Other Medical	Both	

**TO SORT  
HOTLINE  
RECORDS BY  
DATE, CLICK THE  
DATE HEADER  
IN THE SAVED  
RECORD TABLE.**

**CLICK ONCE TO  
SORT IN  
ASCENDING  
ORDER, AND  
CLICK AGAIN TO  
SORT IN  
DESCENDING  
ORDER.**

**TO NAVIGATE  
ADDITIONAL PAGES OF  
SAVED RECORDS, CLICK  
THE LINK AT THE  
BOTTOM OF THE TABLE.**

**1 2**

If your agency has more than 20 hotline calls entered, only some of your saved entries are visible from this page. To view later pages, click on the appropriate link at the bottom of the table. (In the example above, there are two pages of saved records – to advance to the next page, the user would click on the link to page “2.”)

You may also sort the saved records by clicking the headers at the top of the Saved Records Table. Clicking each header once will sort the records in ascending order, and sorting a second time will sort the records in descending order. This feature also works on most of the saved records tables throughout the system, and allows you to sort by any of the fields shown on the table. For example, you may sort hotline calls by date, staff, where the caller was referred from, or type of intervention.

### *Batched Crisis Intervention/Information and Referral*

One of the new features added to InfoNet in November, 2008 is the ability to record batches of hotline calls in one entry. This feature hinges on a new field, **Number of Calls**, which by default will record the number “1.” To record many calls, simply change the value of this field to whatever number of entries you wish to record with the same information, and click Submit. For more detail on entering batched calls, please see the Entering Batches of Hotline Calls section earlier in this chapter.


## VICTIMS OF CRIME: HOTLINE CALLS/INFORMATION & REFERRAL SERVICES

[domestic violence>](#)
[sexual assault>](#)
[administrative utility>](#)


[welcome, Test User](#)
[logout>](#)

# Victims of Crime (VC)

[Data Entry](#)
[Administrative Utility](#)
[Reports](#)



**Office of  
Crime Victims  
Advocacy**



**Washington State  
Department of Social  
& Health Services**  
**CA Children's Administration**

Client Information

Medical and Criminal Justice System

Direct Services

**Hotline Calls/Info. & Referral Services**

Community Education

### Hotline Information

Date: 
Staff/Volunteer:

Time Of Day: 
Total Time:

During Business Hours? 
City / Town of Caller:

County: 
Type Of Intervention:

Referred From:

Number of calls:

Referred To:

☐ Police
☐ Hospital

☐ Clergy
☐ Court

☐ Friend
☐ Self

☐ DCFS
☐ Relative

☐ Center Hotline
☐ Education System

☐ Legal System, Prosecutor
☐ Other Medical

☐ Private Attorney
☐ Public Health

☐ Social Services Program
☐ Medical Advocacy Program

☐ Other Project/Crisis Line
☐ Telephone

☐ Legal Aid Attorney
☐ Phone Book

☐ Not Reported
☐ Unspecified

☐ Other (please specify below)

Date	Staff/Volunteer	Referred From	Type Of Intervention	
12/01/2008	Felicity, Huffman	Police	Crisis Intervention	
12/02/2008	Felicity, Huffman	Other Medical	Information and Referral	
12/03/2008	Felicity, Huffman	Education System	Crisis Intervention	

[Previous 20 records](#)
[Next 20 records](#)

The Victims of Crime Hotline Calls/Info & Referral Services page is identical to the Sexual Assault Crisis Intervention/Information and Referral Services page except in name. Again, there are only three mandatory fields – the **date** of the call, the **staff/volunteer** that took the call, and the **type of intervention**. All other fields should be filled out based on what is useful to your agency.

### Victims of Crime Hotline Calls/Information & Referral Fields

Date:

**Date:** Enter the date the hotline call or other form of information/referral was completed.

Staff/Volunteer:

Cross, Marcia

Hatcher, Terri

Longoria, Eva

Huffman, Felicity

Hotline, Volunteers

**Staff:** Enter the staff/volunteer who took the call if it is practical to do so. However, several agencies have pools of volunteers answer hotline calls, and tracking which volunteer took each call is impractical for those agencies. In those cases, you may want to enter a Staff record for “Hotline Volunteer” and be able to record all hotline calls taken by volunteers as that option.

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### Victims of Crime Hotline Calls/Information & Referral Fields


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Time Of Day:

**Time of Day:** Some agencies may find it useful to record the time of day a call was received. If you choose to enter the time of day, please enter it in hh:mm (am/pm) format. Do not put periods in the “am” or “pm” suffix. If you enter the time in an incorrect format, you will receive an error message.

City/Town:

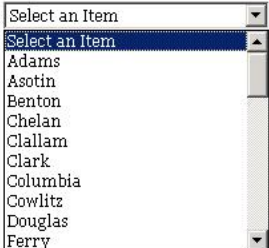
**City/Town:** Some agencies may find it useful to track the city or town a hotline call was received from, possibly to determine where outreach efforts should be focused, or to measure the effectiveness of publicizing of hotline numbers in certain areas. This field is completely optional, however, and may be left blank.

During Business Hours? 

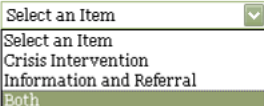
**During Business Hours:** While some agencies prefer to track the actual time a call was received, others reported they preferred to record whether or not the call was received during business hours. To do so, this field was provided. However, it is optional and if it is not useful to your agency, it may be left blank.

Total Time:

**Total Time:** Enter the approximate time (in hours) spent on the hotline call. This can be useful to agencies that want to do time task studies and other tracking activities, but the field is optional. If you use this field, enter as you would for direct services, rounded to nearest quarter hours: e.g. calls of 15 minutes or less enter 0.25.

County: 

**County:** This field may be useful to agencies that serve multiple counties and want to track how many calls they receive from each area. While this is an optional field for most InfoNet users, if your agency receives separate funding for serving separate areas (such as multiple regions) you may have program requirements to collect this data, so that your calls may be sorted for geographic reporting purposes.

Type Of Intervention: 

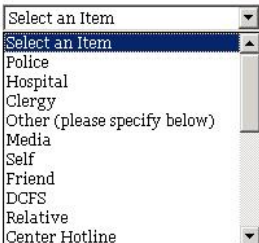
**Type of Intervention:** This is one of the mandatory fields, and requires you select either “Crisis Intervention” or “Information and Referral” as the type of contact you had with the individual. If the contact involved both Crisis Intervention AND Information and Referral in the same contact, select “Both.”

---

---

### Victims of Crime Hotline Calls/Information & Referral Fields

---

Referred From: 

**Referred From:** This field is to record how the client found out about your agency. Collecting this information can be useful in determining where your agency needs to provide more outreach, or which agencies you should send updated brochures to if your contact information changes. If you have additional suggestions for agency types to add to this list, please contact the InfoNet Administrator and she may be able to add them to the drop down list.

Number of calls:

**Number of Calls:** This field is used for entering batches of calls that have the same information. See the following section for more detailed instructions on entering batches of calls. Entering batched calls is optional, and agencies who chose not to use that function can disregard this field – Number of Calls will automatically default to “1” call per entry unless you specify otherwise.

Referred To:

<input type="checkbox"/> Police	<input type="checkbox"/> Hospital
<input type="checkbox"/> Clergy	<input type="checkbox"/> Media
<input type="checkbox"/> Self	<input type="checkbox"/> Friend
<input type="checkbox"/> DCFS	<input type="checkbox"/> Relative
<input type="checkbox"/> Center Hotline	<input type="checkbox"/> Education System
<input type="checkbox"/> Legal System, Prosecutor	<input type="checkbox"/> Other Medical
<input type="checkbox"/> Private Attorney	<input type="checkbox"/> Public Health
<input type="checkbox"/> Social Services Program	<input type="checkbox"/> Medical Advocacy Program
<input type="checkbox"/> Other Project/Crisis Line	<input type="checkbox"/> Telephone
<input type="checkbox"/> Legal Aid Attorney	<input type="checkbox"/> Court
<input type="checkbox"/> Other (please specify below)	

**Referred To:** Check any and all boxes of agencies to which you referred the client. If you have additional suggestions for agency types to add to this list, please contact the InfoNet Administrator.



When you have completed your service data, click on the **Submit** button at the bottom of the page to save your data.

---



After you have entered a crisis intervention/information and referral contact and clicked Submit, the hotline call will appear at the list on the bottom of the screen:

<u>Date</u>	<u>Staff/Volunteer</u>	<u>Referred From</u>	<u>Type Of Intervention</u>	
11/12/2008	Marcia, Cross	Friend	Crisis Intervention	
11/12/2008	Marcia, Cross	Private Attorney	Crisis Intervention	
11/12/2008	Marcia, Cross	Social Services Program	Information and Referral	
11/12/2008	Marcia, Cross	Hospital	Information and Referral	
11/11/2008	Marcia, Cross	Other Project/Crisis Line	Information and Referral	
05/20/2008	Marcia, Cross	Media	Information and Referral	
05/20/2008	Marcia, Cross	Media	Information and Referral	
05/20/2008	Eva, Longoria	Legal System, Prosecutor	Information and Referral	
05/19/2008	Eva, Longoria	Media	Information and Referral	
05/19/2008	Eva, Longoria	Medical Advocacy Program	Information and Referral	
05/16/2008	Eva, Longoria	Hospital	Both	
05/12/2008	Marcia, Cross	DCFS	Information and Referral	
05/09/2008	Eva, Longoria	Other Project/Crisis Line	Information and Referral	
05/04/2008	Eva, Longoria	Legal System, Prosecutor	Information and Referral	
05/01/2008	Felicity, Huffman	Hospital	Information and Referral	
04/20/2008	Eva, Longoria	Clergy	Information and Referral	
04/20/2008	Marcia, Cross	Other Project/Crisis Line	Information and Referral	
04/12/2008	Eva, Longoria	Hospital	Crisis Intervention	
04/11/2008	Eva, Longoria	Legal Attorney	Both	
03/01/2008	Marcia, Cross	Other Medical	Both	

**TO SORT  
HOTLINE  
RECORDS BY  
DATE, CLICK THE  
DATE HEADER  
IN THE SAVED  
RECORD TABLE.**

**CLICK ONCE TO  
SORT IN  
ASCENDING  
ORDER, AND  
CLICK AGAIN TO  
SORT IN  
DESCENDING  
ORDER.**

**TO NAVIGATE  
ADDITIONAL PAGES OF  
SAVED RECORDS, CLICK  
THE LINKS AT THE  
BOTTOM OF THE TABLE.**

1 2

If your agency has more than 20 hotline calls entered, only some of your saved entries are visible from this page. To view later pages, click on the appropriate link at the bottom of the table. (In the example above, there are two pages of saved records – to advance to the next page, the user would click on the link to page “2.”)

You may also sort the saved records by clicking the headers at the top of the Saved Records Table. Clicking each header once will sort the records in ascending order, and sorting a second time will sort the records in descending order. This feature also works on most of the saved records tables throughout the system, and allows you to sort by any of the fields shown on the table. For example, you may sort hotline calls by date, staff, where the caller was referred from, or type of intervention.

### *Batched Hotline/Information and Referral*

One of the new features added to InfoNet in November, 2008 is the ability to record batches of hotline calls in one entry. This feature hinges on a new field, **Number of Calls**, which by default will record the number “1.” To record many calls, simply change the value of this field to whatever number of entries

you wish to record with the same information, and click Submit. For more detail on entering batched calls, please see the Entering Batches of Hotline Calls section earlier in this chapter.



## VICTIM WITNESS ASSISTANCE UNITS: HOTLINE CALLS

domestic violence > victims of crime > sexual assault > administrative utility > welcome, Jane Doe  
logout >

### Victim Witness Assistance Units

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
CA Children's Administration

Submit

**Client Information**

**Direct Services**

**Hotline Calls/Info. & Referral Services**

**Stop Grant Coordinated Community Response**

**Stop Grant Presentations, Publications & Training**

**Stop Grant Narrative Questions**

**Victim Witness Narrative**

**Stop Grant Funded Prosecution Activities**

**Hotline Information**

\* Date:

Time Of Day:

During Business Hours?

Caller's County:

In-Person Or Phone:

Unmet Request for

Emergency DV Shelter:

Referred From:

Number of calls:

Interpretation/Translation services used?

Caller's language

Referred To:

☐ Center Hotline ☐ Clergy

☐ Court ☐ DCFS

☐ Education System ☐ Friend

☐ Hospital ☐ Legal Aid Attorney

☐ Legal System, Prosecutor ☐ Medical Advocacy Program

☐ Not Reported ☐ Other Medical

☐ Other Project/Crisis Line ☐ Phone Book

☐ Police ☐ Private Attorney

☐ Public Health ☐ Relative

☐ Self ☐ Social Services Program

☐ Telephone ☐ Unspecified

☐ Other (please specify below)

Submit Clear / Add New Record Cancel

\* Staff/Volunteer:

Total Time:

City / Town of Caller:

\* Type Of Intervention:

The Victim Witness Hotline page is identical to the Sexual Assault Crisis Intervention/Information and Referral Services page except in name. There are only three required fields – the **date** of the call, the **staff/volunteer** that took the call, and the **type of intervention**. (Required fields are marked with a red asterisk.) All other fields should be filled out based on what is useful to your agency.

### Victim Witness Hotline Call Fields

Date:

**Date:** Enter the date the hotline call or other form of information/referral was completed.

Staff/Volunteer:

Cross, Marcia  
Hatcher, Terri  
Longoria, Eva  
Huffman, Felicity  
Hotline, Volunteers

**Staff:** Enter the staff/volunteer who took the call if it is practical to do so. However, several agencies have pools of volunteers answer hotline calls, and tracking which volunteer took each call is impractical for those agencies. In those cases, you may want to enter a Staff record for "Hotline Volunteer"

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### Victim Witness Hotline Call Fields

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and be able to record all hotline calls taken by volunteers as that option.

Time Of Day:

**Time of Day:** Some agencies may find it useful to record the time of day a call was received. If you choose to enter the time of day, please enter it in hh:mm (am/pm) format. Do not put periods in the “am” or “pm” suffix. If you enter the time in an incorrect format, you will receive an error message.

City/Town:

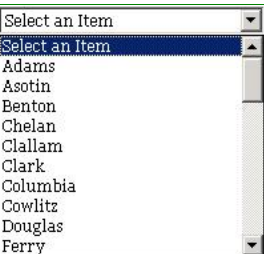
**City/Town:** Some agencies may find it useful to track the city or town a hotline call was received from, possibly to determine where outreach efforts should be focused, or to measure the effectiveness of publicizing of hotline numbers in certain areas. This field is completely optional, however, and may be left blank.

During Business Hours? 

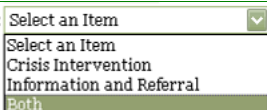
**During Business Hours:** While some agencies prefer to track the actual time a call was received, others reported they preferred to record whether or not the call was received during business hours. To do so, this field was provided. However, it is optional and if it is not useful to your agency, it may be left blank.

Total Time:

**Total Time:** Enter the approximate time (in hours) spent on the hotline call. This can be useful to agencies that want to do time task studies and other tracking activities, but the field is optional. If you use this field, enter as you would for direct services, rounded to nearest quarter hours: e.g. calls of 15 minutes or less enter 0.25.

County: 

**County:** This field may be useful to agencies that serve multiple counties and want to track how many calls they receive from each area. While this is an optional field for most InfoNet users, if your agency receives separate funding for serving separate areas (such as multiple regions) you may have program requirements to collect this data, so that your calls may be sorted for geographic reporting purposes.

Type Of Intervention: 

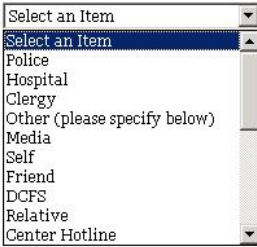
**Type of Intervention:** This is one of the mandatory fields, and requires you select either “Crisis Intervention” or “Information and Referral” as the type of contact you had with the individual. If the contact involved both Crisis Intervention AND Information and Referral in the same contact, select “Both.”

---

---

### Victim Witness Hotline Call Fields

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Referred From: 

**Referred From:** This field is to record how the client found out about your agency. Collecting this information can be useful in determining where your agency needs to provide more outreach, or which agencies you should send updated brochures to if your contact information changes. If you have additional suggestions for agency types to add to this list, please contact the InfoNet Administrator and she may be able to add them to the drop down list.


Number of calls:

**Number of Calls:** This field is used for entering batches of calls that have the same information. See the following section for more detailed instructions on entering batches of calls. Entering batched calls is optional, and agencies who chose not to use that function can disregard this field – Number of Calls will automatically default to “1” call per entry unless you specify otherwise.

Referred To:

<input type="checkbox"/> Police	<input type="checkbox"/> Hospital
<input type="checkbox"/> Clergy	<input type="checkbox"/> Media
<input type="checkbox"/> Self	<input type="checkbox"/> Friend
<input type="checkbox"/> DCFS	<input type="checkbox"/> Relative
<input type="checkbox"/> Center Hotline	<input type="checkbox"/> Education System
<input type="checkbox"/> Legal System, Prosecutor	<input type="checkbox"/> Other Medical
<input type="checkbox"/> Private Attorney	<input type="checkbox"/> Public Health
<input type="checkbox"/> Social Services Program	<input type="checkbox"/> Medical Advocacy Program
<input type="checkbox"/> Other Project/Crisis Line	<input type="checkbox"/> Telephone
<input type="checkbox"/> Legal Aid Attorney	<input type="checkbox"/> Court
<input type="checkbox"/> Other (please specify below)	

**Referred To:** Check any and all boxes of agencies to which you referred the client. If you have additional suggestions for agency types to add to this list, please contact the InfoNet Administrator.



When you have completed your service data, click on the **Submit** button at the bottom of the page to save your data.

---

After you have entered a crisis intervention/information and referral contact and clicked Submit, the hotline call will appear at the list on the bottom of the screen:

<u>Date</u>	<u>Staff/Volunteer</u>	<u>Referred From</u>	<u>Type Of Intervention</u>	
11/12/2008	Marcia, Cross	Friend	Crisis Intervention	
11/12/2008	Marcia, Cross	Private Attorney	Crisis Intervention	
11/12/2008	Marcia, Cross	Social Services Program	Information and Referral	
11/12/2008	Marcia, Cross	Hospital	Information and Referral	
11/11/2008	Marcia, Cross	Other Project/Crisis Line	Information and Referral	
05/20/2008	Marcia, Cross	Media	Information and Referral	
05/20/2008	Marcia, Cross	Media	Information and Referral	
05/20/2008	Eva, Longoria	Legal System, Prosecutor	Information and Referral	
05/19/2008	Eva, Longoria	Media	Information and Referral	
05/19/2008	Eva, Longoria	Medical Advocacy Program	Information and Referral	
05/16/2008	Eva, Longoria	Hospital	Both	
05/12/2008	Marcia, Cross	DCFS	Information and Referral	
05/09/2008	Eva, Longoria	Other Project/Crisis Line	Information and Referral	
05/04/2008	Eva, Longoria	Legal System, Prosecutor	Information and Referral	
05/01/2008	Felicity, Huffman	Hospital	Information and Referral	
04/20/2008	Eva, Longoria	Clergy	Information and Referral	
04/20/2008	Marcia, Cross	Other Project/Crisis Line	Information and Referral	
04/12/2008	Eva, Longoria	Hospital	Crisis Intervention	
04/11/2008	Eva, Longoria	Legal and Attorney	Both	
03/01/2008	Marcia, Cross	Other Medical	Both	

**TO SORT  
HOTLINE  
RECORDS BY  
DATE, CLICK THE  
DATE HEADER  
IN THE SAVED  
RECORD TABLE.**

**CLICK ONCE TO  
SORT IN  
ASCENDING  
ORDER, AND  
CLICK AGAIN TO  
SORT IN  
DESCENDING  
ORDER.**

**TO NAVIGATE  
ADDITIONAL PAGES OF  
SAVED RECORDS, CLICK  
THE LINKS AT THE  
BOTTOM OF THE TABLE.**

1 2

If your agency has more than 20 hotline calls entered, only some of your saved entries are visible from this page. To view later pages, click on the links at the bottom of the table.

You may also sort the saved records by clicking the headers at the top of the Saved Records Table. Clicking each header once will sort the records in ascending order, and sorting a second time will sort the records in descending order. This feature also works on most of the saved records tables throughout the system, and allows you to sort by any of the fields shown on the table. For example, you may sort hotline calls by date, staff, where the caller was referred from, or type of intervention.

### *Batched Hotline/Information and Referral*

One of the new features added to InfoNet in November, 2008 is the ability to record batches of hotline calls in one entry. This feature hinges on a new field, **Number of Calls**, which by default will record the number "1." To record many calls, simply change the value of this field to whatever number of entries you wish to record with the same information, and click Submit. For more detail on entering batched calls, please see the Entering Batches of Hotline Calls section earlier in this chapter.

## STOP GRANT COORDINATED COMMUNITY RESPONSE

victims of crime > sexual assault > administrative utility > welcome, Test User [logout >](#)

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
CA Children's Administration

- Client Information
- Medical and Criminal Justice System
- Direct Client Services
- Hotline Calls/Info. & Referral Services
- STOP GRANT Coordinated Community Response**
- STOP GRANT Presentations, Publications & Trainings
- DSHS Shelter Community Education
- DSHS Shelter End Of Year Report
- STOP Grant Narrative Questions

**STOP Grant Coordinated Community Response activities during the current reporting period**  
Select the appropriate choices to indicate the agencies or organizations that you provided victim/survivor referrals to, received victim/survivor referrals from, engaged in consultation with provided technical assistance to, and/or attended meetings with, during the current reporting period, according to the usual frequency of interactions. If the interactions were not part of a regular schedule, you will need to estimate the frequency with which these interactions occurred during the current reporting period

Last updated: 10/28/2009 10:41:23 AM

Agency/Organization	Victim/survivor referrals, consultations, technical assistance:	Meetings
Batterer intervention program	Monthly	Select an item
Community Advocacy Organization	Weekly	Select an item
Corrections	None	None
Court	None	Select an item
Domestic violence organization	Monthly	Select an item
Faith Based Organization	Select an item	Select an item
	Select an item	Select an item
	Select an item	Select an item
	Select an item	Select an item
	Select an item	Select an item
	Select an item	Select an item
	Select an item	Select an item
Sexual Assault Organization	Select an item	Select an item
Social Service Organization	Select an item	Select an item
Tribal Government/Tribal Govt Agency	Select an item	Select an item

[Save Response](#)

**YOU CAN ACCESS THE STOP GRANT COORDINATED COMMUNITY RESPONSE PAGE BY CLICKING ON THE LINK ON THE LEFT HAND**

The Coordinated Community Response page exists only on the Domestic Violence and Victim Witness Unite Interfaces and is provided **only for those agencies that receive STOP grant funding**. If you do not receive STOP grant funding, you do not have to use this page. If you use your STOP grant funding for both domestic violence and sexual assault, or for sexual assault only, please use the Domestic Violence Interface to record your coordinated community response for both.

The purpose of this page is to record how frequently your agency has meetings, victim/survivor referrals, consultations, and technical assistance contacts with various entities. To complete the report, simply select the correct option from each of the drop down lists. If your agency does not have a specific type of contact with an entity, select NONE in the appropriate drop down list.

When all of the fields have been completed, click the **Save Response** button at the bottom of your screen to save. At the top of the screen, you will see the date and time that this page was Last Updated. This will let you know the last time you or anyone from your agency updated this page. If you see that the date was a long time ago (i.e. more than a year) that can be an indicator that you may want to review your data to see if the frequency of any of the items has changed over time.

You can modify any of your answers by selecting a different choice from the pull down menu and then clicking the Save Response button to save. At any time during the reporting period, you may come back to this report and update the frequency of referrals or meetings if they change over time.

Once the page is completed, the data is saved indefinitely – so if you find that your data has not changed, you do not need to submit a new report. Your existing CCR data will continue to be shown on future STOP grant and STOP ARRA reports. It is highly recommended that you review the data for accuracy at least quarterly, to make sure the information has not changed.

## STOP GRANT PRESENTATIONS, PUBLICATIONS, AND TRAININGS

The Presentations, Publications, and Trainings section is available only on the Domestic Violence and Victim Witness Unit Interfaces. It is provided for **STOP grant recipients**, as it contains information required for federal STOP grant reports.

If you are a STOP grant recipient **and** you use your STOP grant funds to provide presentations or produce publications, you are required to enter this information. However, **please keep in mind that many STOP grant recipients do not use STOP funding for presentations**, so if you are unsure whether you are required to report presentations here, please contact the person that administers your STOP grant.

The Presentations, Publications, and Trainings section is comprised of four pages, or tabs: Presentations, STOP Funded Training Attendees, STOP Funded Training Topic Areas, and Publications. Each of the four sections is described in detail in this section.

### PRESENTATIONS

**Domestic Violence (DV)**

Data Entry | Administrative Utility | Reports

Office of Crime Victims Advocacy | Washington State Department of Social & Health Services | CA Children's Administration

**Presentations** | STOP Funded Trainings -- Attendees | STOP Funded Trainings -- Topic Areas | Publications

Client Information  
Medical and Criminal Justice System  
Direct Client Services  
Hotline Calls/Info. & Referral Services  
Coordinated Community Response  
**Presentations, Publications & Conducting Trainings**

Date: 5/22/2002  
Presentation Hours: 5  
Preparation Hours: 0  
Travel Hours: 5  
Number of Participants: 5  
# of Staff Conducting Program: 2  
Comments:

**Staff Members:**  
Hazel, David  
Add Name  
Gleason, Nicky X  
Emery, Bev X

**STAFF MEMBERS WHO WORKED ON A PROJECT ARE LISTED IN THE TABLE AT THE MIDDLE OF THE SCREEN.**  
**TO REMOVE A STAFF MEMBER FROM A PRESENTATION, CLICK THE RED X NEXT TO THEIR NAME.**

Presentation Date	Number of Participants	Comments	Publication Date	Publication Type	Staff/Volunteer
5/22/2002	5		6/1/2006	Other	Q
5/25/2005	0			Select an Item	Q

[View Service Definitions](#)  
The form was successfully added to the Database.

Next Page | Submit | Clear | Cancel

The Presentations page is the first tab of the Presentations, Publications, and Trainings section, and by default will open to this page when you click on the Presentations, Publications and Conducting Trainings link on the left hand side of your screen. It has eight fields you may fill out for each presentation you conduct.



---

### Presentation Fields

---

Date:

**Date:** Enter the date the presentation was conducted.

Presentation Hours:

**Presentation Hours:** Enter the number of hours the presentation took place. Please round your answers to the nearest quarter of an hour.

Preparation Hours:

**Preparation Hours:** Enter the number of hours staff spent preparing the presentation. Please round your answers to the nearest quarter of an hour.

Travel Hours:

**Travel Hours:** Enter the number of hours staff spent traveling to and from the presentation. Please round your answers to the nearest quarter of an hour.

Number of Participants:

**Number of Participants:** Enter the number of participants who attended the presentation. Please enter numbers only, not a range of numbers. If you are unclear exactly how many people attended, please enter an approximate number of attendees.

# of Staff Conducting Program:

**Number of Staff Conducting Program:** Enter the number of staff who worked on preparation for or presentation of the event.

Comments:

**Comments:** This text box is provided for agency use to describe the presentation for your own information. This can be handy if several different presentations are conducted close together. If two trainings were held on June 12, you might want to add a description of how they were different in the Comment box, such as the topic or location.

---

**Staff Members:**

▼  
Hazel, David  
Gleason, Nicky  
Emery, Bev  
Fenno, Chris

**Name**

Gleason, Nicky   
Emery, Bev

**Staff Members:** Select the staff members who worked on preparation or conducting of the presentation. The total number of staff selected should match up to what you indicated in “number of staff conducting program.” If a staff member’s name is not found in this pull down menu, you may need to update Staff Information in the Administrative Utility. Select the first staff member and then click the Add button directly beneath the pull down list. If more than one staff member participated, select the next staff member and click the Add button again. Continue until all staff members have been added to the presentation.

When you have entered the information about your presentation, click on the submit button.

---



## STOP FUNDED TRAININGS—ATTENDEES

### Domestic Violence (DV)

Data Entry
Administrative Utility
Reports

**Office of  
Crime Victims  
Advocacy**

Washington State  
Department of Social  
& Health Services  
**CA Children's Administration**

- ☐ Client Information
- ☐ Medical and Criminal Justice System
- ☐ Direct Client Services
- ☐ Hotline Calls/Info. & Referral Services
- ☐ Coordinated Community Response
- ☒ Presentations, Publications & Conducting Trainings

Presentations

**STOP Funded Trainings -- Attendees**

STOP Funded Trainings -- Topic Areas

Publications

Report the number of people trained with STOP program funds

Attorneys or law students	
Batterer intervention staff	
Community advocacy staff	
SA forensic examiners	12
Social services organization staff	10
SA Coalition staff	
Corrections personnel	
Disability organization staff	
DV coalition staff	
DV program staff	
Elder organization staff	
Faith-based organization staff	
Government agency staff	
Health professionals	
Immigrant organization staff	
Law enforcement officers	
Legal services staff	
Mental health professionals	
Multidisciplinary group	
Prosecutors	
SA program staff	
Supervised visitation and exchange center staff	
Tribal coalition staff	
Tribal government/Tribal government agency	
Victim-Witness specialists	
Volunteers	
Other	<div style="flex-grow: 1;"></div> <div style="font-size: small; margin-left: 5px;">Please Specify:</div> <div style="border: 1px solid #ccc; width: 100px; height: 15px;"></div>


The STOP Funded Training – Attendees page is to allow you to indicate who the audience for your presentation was. In the box next to each type of training attendee, indicate the number of people in that category. If no one from a particular category attended, you do **not** have to enter zeros. Simply enter the number of attendees in the appropriate boxes, and then click the **Submit** button when finished.

Submit


## STOP FUNDED TRAININGS – TOPIC AREAS

### Domestic Violence (DV)

[Data Entry](#)
[Administrative Utility](#)
[Reports](#)



**Office of  
Crime Victims  
Advocacy**



**Washington State  
Department of Social  
& Health Services**  
**CA Children's Administration**

☐ Client Information
 ☐ Medical and Criminal Justice System
 ☐ Direct Client Services
 ☐ Hotline Calls/Info. & Referral Services
 ☐ Coordinated Community Response
 ☒ **Presentations, Publications & Conducting Trainings**

[Presentations](#)
[STOP Funded Trainings -- Attendees](#)
[STOP Funded Trainings -- Topic Areas](#)
[Publications](#)

**Sexual assault, domestic violence, and stalking**
☐ Advocate response
 ☐ Child witnesses
 ☐ Confidentiality
 ☐ Dating violence overview, dynamics and services
 ☐ Domestic violence overview, dynamics and services
 ☐ Mandatory reporting requirements
 ☐ Safety planning for victims/survivors
 ☐ Sexual assault overview, dynamics and services
 ☐ Stalking overview, dynamics and services
 ☐ Supervised visitation and exchange
 ☐ Other (specify)

**Justice System**
☐ Civil court procedures
 ☐ Criminal court procedures
 ☐ Domestic violence statutes/codes
 ☐ Firearms and domestic violence
 ☐ Immigration
 ☐ Identification and arrest of predominant aggressor
 ☐ Judicial response
 ☐ Law enforcement response
 ☐ Pro-arrest policies
 ☐ Probation response
 ☐ Prosecution response
 ☐ Protection orders (including full faith and credit)
 ☐ Sexual assault statutes/codes
 ☐ Sexual assault forensic examination
 ☐ Stalking statutes/codes
 ☐ Tribal jurisdiction and Public Law 280
 ☐ Other (specify)

**Underserved Populations**
☐ live in rural areas
 ☐ are American Indian or Alaska Native
 ☐ are Asian
 ☐ are black or African American
 ☐ are disabled
 ☐ are elderly
 ☐ are Hispanic or Latino
 ☐ are institutionalized or isolated
 ☐ are homeless or living in poverty
 ☐ are immigrants, refugees or asylum seekers
 ☐ are lesbian, gay, bisexual, transgender, or intersex
 ☐ are Native Hawaiian or other Pacific Islander
 ☐ have mental health problems
 ☐ have substance abuse problems
 ☐ Other (specify)

**Community Response**
☐ Coordinated community response
 ☐ Response teams (DART, DVRT, SART)
 ☐ Technology
 ☐ Other (specify)

The STOP Funded Training – Topic Areas page allows you to indicate what the content of your presentation was. Simply click to check the appropriate boxes, and if you select “Other” in any of the categories, please fill in the “specify” text box beneath it. You may select as many topic areas as needed to indicate what was covered in the presentation you conducted. Click the **Submit** button when finished.

Submit

## PUBLICATIONS

### Domestic Violence (DV)

Data Entry
Administrative Utility
Reports

**Office of  
Crime Victims  
Advocacy**

- ☐ Client Information
- ☐ Medical and Criminal Justice System
- ☐ Direct Client Services
- ☐ Hotline Calls/Info. & Referral Services
- ☐ Coordinated Community Response
- Presentations, Publications & Conducting Trainings**

Presentations
STOP Funded Trainings -- Attendees
STOP Funded Trainings -- Topic Areas
**Publications**

Date:

Publication Title:

Publication Type:

Preparation Hours:

Developed Or Revised:

Intended Audience:

Number Used or Distributed:

Other Languages:

Staff Preparing Publication:

Comments:

Next Page
Submit
Clear
Cancel

The Publications page is the last tab of the Presentations, Publications, and Trainings section. It has ten fields you may fill out for each publication you produce or revise with STOP grant funds (if you are a STOP grant recipient). Agencies that do not receive STOP grant funding may report on any publications on this page if they would like to use the area to track staff time or other information for their own use.

### Publications Fields

Date: <input style="width: 100%;" type="text" value="6/1/2006"/>	<b>Date:</b> Indicate the date the publication was completed.
Publication Title: <input style="width: 100%;" type="text" value="Victims Rights"/>	<b>Publication Title:</b> Indicate the title of the publication. If your publication has a lengthy title, please abbreviate.
Publication Type: <div style="border: 1px solid black; padding: 2px;">           Brochures           <div style="background-color: white; border: 1px solid black; padding: 2px; margin-top: 2px;">             Select an Item              Brochures              Manuals              Training Curricula              Training Materials              Other           </div> </div>	<b>Publication Type:</b> Indicate the type of publication that was produced.
Preparation Hours: <input style="width: 100%;" type="text" value="12"/>	<b>Preparation Hours:</b> Estimate the number of staff hours spent in developing and preparing the publication.
Developed Or Revised: <div style="border: 1px solid black; padding: 2px;">           Developed           <div style="background-color: white; border: 1px solid black; padding: 2px; margin-top: 2px;">             Developed              Revised              Select an Item           </div> </div>	<b>Developed or Revised:</b> Indicate whether this is a new publication or a revision of an existing publication.

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### Publications Fields

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Intended Audience:

**Intended Audience:** Briefly describe the intended audiences of the publication. Examples of intended audiences might be “public,” “law enforcement,” “victims of DV,” or “advocates.”

Number Used or Distributed:

**Number used or distributed:** Indicate the number of publications that were produced and used or distributed.

Other Languages:

**Other Languages:** Indicate languages other than English (if any) you produced the publication in or had it translated to.

Staff Preparing Publication:

**Staff Preparing Publication:** Indicate the primary staff member involved in preparing the publication. If the staff member you’re looking for is not part of this drop down box, you may need to update the Staff Information in the Administrative Utility.

Comments:

**Comments:** This text box is provided so you may enter any comments about this publication your agency would like to note for your own records. It is not part of your federal report.

When you have entered the information about your presentation, click on the submit button.

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## SEXUAL ASSAULT PREVENTION ACTIVITIES

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The Prevention Activities page is available only on the Sexual Assault Interface, and is used by CSAPs to collect data that aligns with the new Sexual Assault Prevention standards. Prevention data is not associated with a particular client, so it may be entered at any time and without having to search for a Client or Case ID number.

There are two sections for Prevention Data: Building Skills and Community Development.

### BUILDING SKILLS

The screenshot shows the 'Sexual Assault (SA)' interface. At the top, there are tabs for 'Data Entry', 'Administrative Utility', and 'Reports'. To the right are logos for 'OCVA Office of Crime Victims Advocacy', 'Washington State Department of Social & Health Services', and 'CA Children's Administration'. On the left is a sidebar menu with options: 'Client Intakes', 'Medical and Criminal Justice System', 'CSAP and Specialized Services', 'Native American and Marginalized Services', 'Crisis Intervention/Info. & Referral', 'Prevention Activities' (highlighted), 'System Coordination', 'Community Organizing & Responding', and 'SASP Narrative'. The main content area has two tabs: 'Building Skills' and 'Community Development'. Below the tabs is a text box with instructions: 'Please report all primary prevention activities your agency has conducted. Primary Prevention is defined as approaches that take place BEFORE sexual violence has occurred to prevent initial perpetration or victimization.' The form includes fields for 'Date', 'Audience', 'Do you have a project name you would like to give this: (not required.)', 'Type' (a dropdown menu), 'Other' (a text box), 'Participants' (a dropdown menu), 'Age' (a dropdown menu), 'Number of Participants', and a list of activities to check as many as apply: 'Enhance personal safety skills', 'Promote nonviolent behavior', 'Enhance bystander intervention skills', 'Address topics logically connected with sexual assault prevention', 'Activity that influences participants on an individual level', 'Activity that influences participants on a relationship level', 'Activity that influences participants on a community level', and 'Activity that influences participants on a societal level'. There are also fields for 'Subject', 'Curriculum', 'Are you using a purchased or professionally developed curriculum?' (a dropdown menu), 'If so, what:' (a text box), 'Staff' (a dropdown menu), and a large text box for 'Is there anything else you want OCVA to know about this activity?'. At the bottom are 'Submit', 'Clear', and 'Cancel' buttons.

The following describes the fields on the Building Skills page.

Building Skills Fields	
Date: <input type="text" value="6/6/2006"/>	<b>Date:</b> Enter the date of the prevention activity you wish to record. This field is mandatory.
Audience: <input type="text" value="Riverside School"/>	<b>Audience:</b> Enter the audience to whom you provided the prevention activity. This is a text box, so you may enter the

Building Skills Fields	
	actual audience name, rather than having to choose from a pull down list. This is also a mandatory field.
Do you have a project name you would like to give this: (not required.):	<b>Project Name:</b> The project name field is optional – if you would like to give a name to the project, you can do so here.
Type: <input type="text" value="Select an Item"/> Other: <input type="text"/>	<b>Type:</b> Select whether the prevention activity was a Presentation, Technical Assistance, Training, Media Work, Policy Work, Prevention Group, or Other. If you select Other, please specify in the box below the field.
Participants: <input type="text" value="Select an Item"/>	<b>Participants:</b> Select whether the activity was provided for service providers, parents/caregivers, community members, or children/youth.
Age: <input type="text" value="Select an Item"/> <input type="text" value="Select an Item"/> Elementary Junior High/Middle School High School College Adult	<b>Age:</b> Select the age of the participants your event was geared towards.
Number of Participants: <input type="text" value="30"/>	<b>Number of Participants:</b> Enter the approximate number of participants at your activity.
<input type="checkbox"/> Enhance personal safety skills <input type="checkbox"/> Promote nonviolent behavior <input type="checkbox"/> Enhance bystander intervention skills <input type="checkbox"/> Address topics logically connected with sexual assault prevention <input type="checkbox"/> Activity that influences participants on an individual level <input type="checkbox"/> Activity that influences participants on a relationship level <input type="checkbox"/> Activity that influences participants on a community level <input type="checkbox"/> Activity that influences participants on a societal level	<b>Activity:</b> Check as many as apply to the activity that you are reporting. You must select at least one activity for each Building Skills record you report.
Subject: <input type="text" value="Select an Item"/> If you selected "Other", please specify here: <input type="text"/>	<b>Subject:</b> Select the primary subject your prevention activity addressed. If you select "Other" please specify in the box below.
Curriculum: Are you using a purchased or professionally developed curriculum? <input type="text" value="Select An Item"/> If so, what: <input type="text"/>	<b>Curriculum:</b> Indicate whether or not you are using a purchased or professionally developed curriculum and, if so, indicate what the title of the curriculum is.
Staff: <input type="text" value="Select a staff"/> <input type="text" value="Select a staff"/> Cross, Marcia Gleason, Nicky Hatcher, Terri Huffman, Felicity Longoria, Eva	<b>Staff:</b> Use this field to select the primary staff member that presented the activity. If multiple staff members participated in the presentation, select the staff member who presented for the longest period of time.
Is there anything else you want OCVA to know about this activity? <input type="text"/>	<b>Additional Information (optional):</b> Indicate anything else you would like OCVA to know about the activity.

## Building Skills Fields

Submit

When you have entered the information about your prevention activity, click on the **Submit** button.

When you have successfully submitted one or more Prevention activities, they will be shown in the table at the bottom of your screen:

**SORT SAVED RECORDS BY CLICKING THE HEADER TITLE ONCE FOR ASCENDING ORDER, TWICE FOR DESCENDING ORDER.**

Submit Clear Cancel

Date	Type of Activity	Audience	Subject	
07/15/2006	Outreach	Middle school	Child Sexual Abuse/Incest	
06/20/2007	Outreach	Elementary school	Child Sexual Abuse/Incest	
08/02/2007	Presentation	Jefferson Middle School	Safety Skills/Self Defense	
08/03/2007	Presentation	Bankers Union	Sexual Harassment	
08/05/2007	Community Event	County Fair	General Sexual Assault Info	
08/11/2008	Community Event	Evergreen State College	Child Sexual Abuse/Incest	
09/15/2008	Outreach	Tumwater Middle School	Sexual Harassment	
10/01/2008	Presentation	Tumwater Country Club	Rape	

**VIEW OR EDIT ANY SAVED RECORD BY CLICKING ON IT IN THE SAVED RECORD TABLE.**

**DELETE ANY RECORD BY CLICKING THE RED X.**

**NAVIGATE PAGES OF SAVED RECORDS USING THE LINKS AT THE BOTTOM OF THE PAGE.**

Previous 20 records Next 20 records

To sort your saved records, click the header of any column. Clicking the header once will sort by that field in ascending order. Clicking a second time will sort by that field in descending order.

To view or edit any existing prevention activity, simply click on the magnifying glass on the right hand side of the screen. To delete a prevention activity that was entered in error, click on the red X.

When your agency has entered more than 20 prevention activities, you will only see one page of activities per screen. To navigate through other pages, click the “next 20 records” link at the bottom of the page.



## COMMUNITY DEVELOPMENT

**Sexual Assault (SA)**

Data Entry | Administrative Utility | Reports

OCVA | Office of Crime Victims Advocacy

Washington State Department of Social & Health Services  
CA Children's Administration

**Client Intakes**

**Medical and Criminal Justice System**

**CSAP and Specialized Services**

**Native American and Marginalized Services**

**Crisis Intervention/Info. & Referral**

**Prevention Activities**

**System Coordination**

**Community Organizing & Responding**

**SASP Narrative**

**Building Skills** | **Community Development**

Grantees must enter a brief summary of the Community Development work completed during the quarter. OCVA requires that every CSAP be facilitating at least one community development project throughout each grant period. If your agency is working with more than one community, you may enter information for all of the communities you are working with, although you are only required to report on one community development project. It is not expected that every community will move through the community development process in sequential order.

Steps 2 – 8 of the Community Development Service Standard are listed in the activity drop down box. Select the activity/activities that correspond to your community development work for the quarter. In the narrative box, describe the work you completed for the activities selected. Each activity selected requires a brief narrative. Some CSAPs may have multiple entries during the quarter for different steps of the community development process (listed as activities).

OCVA is not collecting data on Step1: Establishing relationships within communities.

Questions about each activity:

- Describe the stakeholder recruiting process.
- Describe your stakeholders' response to why sexual violence happens in their community. List or describe the underlying conditions they identified. (Condition A)
- Describe what your stakeholders' response to what their community would look like without sexual violence. (Condition B)
- What did the stakeholders identify as their plan to get from A to B?
- What did the stakeholders identify as a way to measure their accomplishments on the plan?
- How is carrying out the plan going? Describe the activities the stakeholders are doing.
- Please describe how the project will be evaluated and/or revised.

Quarter: Select An Item

Year: Select An Item

Community:

Activity: Select An Item

For the activity selected, please write a brief description of what was accomplished/completed during the reporting period.

Please provide us a brief description of the successes and challenges the community development project had during the reporting period.

Submit Clear Cancel

The second tab in the Sexual Assault Prevention Activities section is for Community Development activities. The following describes the fields on the Community Development page.

Community Development Fields	
Quarter: Select An Item	<b>Quarter:</b> Select the quarter in which the activity occurred. This field is mandatory.
Year: Select An Item	<b>Year:</b> Select the state fiscal year in which the activity occurred. This is also a mandatory field.
Community:	<b>Community:</b> Enter the name of the community where the community development project was facilitated. This field is mandatory.
Activity: Select An Item	<b>Activity:</b> Select the activity you are describing in this record.
For the activity selected, please write a brief description of what was accomplished/completed during the reporting period.	<b>Narrative Question 1:</b> Provide a brief description of what was accomplished during the reporting period as pertains to this activity.



---

### Community Development Fields

---

Please provide us a brief description of the successes and challenges the community development project had during the reporting period.

**Narrative Question 2:** Provide a brief description of the successes and challenges related to this community development project during this reporting period.

Submit

When you have entered the information about your prevention activity, click on the **Submit** button.


---


## SYSTEMS COORDINATION

domestic violence > general crimes > administrative utility > welcome, Test User logout >

### Sexual Assault (SA)

Data EntryAdministrative UtilityReports

Office of  
Crime Victims  
Advocacy

Washington State  
Department of Social  
& Health Services  
CA Children's Administration

☐ Client Intakes

☐ Medical and Criminal Justice System

☐ CSAP and Specialized Services

☐ Native American and Marginalized Services

☐ Crisis Intervention & Information/Referral

☐ Prevention Activities

☒ System Coordination

☐ Community Organizing & Responding

#### System Coordination:

Please report any system coordination activities conducted by your agency. Coordination of the service system entails the development of working relationships and agreements (formal and informal) among programs and services with a role in the array of sexual abuse/assault service provision with the goal of improving service delivery.

This may include presentation activities to raise awareness of sexual violence, enhance or improve response to victims, and informing the community about services available to victims.

Date:

Title:

Type of Activity:

Audience:

Number of participants:

Staff:

Hours Of Service:

Submit

Clear/Add New Record

Cancel

Date	Title	Type Of Activity	Audience	No of Participants	Hours of Service	Staff	
11/06/2008	Example1	Community Education	Law enforcement,Prosecutors,Judiciary,Child Protective Services,Schools,Social service (private and public),Mental health services,Medical facilities/practitioners,Emergency services,Other relevant gr	15	0.25	Cross Marcia	
10/01/2008	Example2	Community Education	Law enforcement	20	20	Cross Marcia	
08/01/2008	eXAMPLE3	Assess gaps in service	Judiciary	50	15	Cross Marcia	
10/05/2008	Presentation	Community Education	Law enforcement,Prosecutors,Child Protective Services,Schools,Social service (private and public)	52	3	Cross Marcia	
11/10/2008	Example	Outreach	Judiciary,Child Protective Services	100	2.25	Cross Marcia	
11/12/2008	example2	Outreach	Prosecutors,Judiciary	1000	1.25	Cross Marcia	

Previous 20 recordsNext 20 records

The System Coordination page is only available on the Sexual Assault Interface, and provides an area to record your system coordination activity. It works similarly to the Sexual Assault Prevention page, with a few different elements.

There are seven fields for the System Coordination page:

### System Coordination Fields

Date:

**Date:** Enter the date of your system coordination activity.

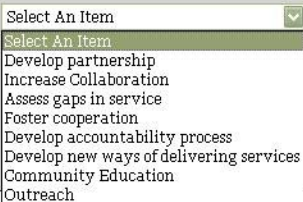
Title:

**Title:** This text field is where you can assign a title to briefly describe the system coordination activity you performed.

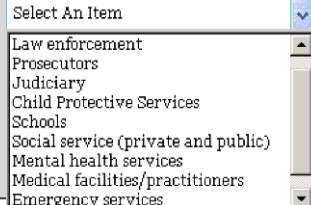
---

### System Coordination Fields


---

Type of Activity:  Select An Item  
Develop partnership  
Increase Collaboration  
Assess gaps in service  
Foster cooperation  
Develop accountability process  
Develop new ways of delivering services  
Community Education  
Outreach

**Type of Activity:** Select the type of system coordination activity you performed from the drop down list.

Audience:  Select An Item  
Law enforcement  
Prosecutors  
Judiciary  
Child Protective Services  
Schools  
Social service (private and public)  
Mental health services  
Medical facilities/practitioners  
Emergency services

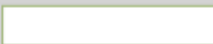
**Audience:** Select the group or groups that were the audience of this activity. You may select as many groups as apply. To select more than one option, hold the CTRL key while selecting additional options from the drop down list.

Number of participants: 

**Number of participants:** Enter the total number of participants in this field, regardless of audience type. For example, if your systems coordination activity involved 10 individuals from law enforcement, and 5 individuals from mental health services, enter 15 here.

Staff/Volunteer:  Cross, Marcia  
Cross, Marcia  
Hatcher, Terri  
Longoria, Eva  
Huffman, Felicity  
Hotline, Volunteers

**Staff :** Select the primary staff member who performed the system coordination activity you are reporting. If the staff member is not shown in the drop down list, you may need to update the Staff Information in the Administrative Utility.

Hours Of Service: 

**Hours of Service:** Indicate the approximate hours of service the activity was performed. Please round hours of service to the nearest quarter hour.

 Submit

When you have entered the information about your system coordination or program support, click on the **Submit** button.

---

When you have successfully submitted a system coordination activity, it will appear in the list at the bottom of the screen:

Date	Title	Type Of Activity	Audience	No of Participants	Hours of Service	Staff	
11/06/2008	Example1	Community Education	Law enforcement,Prosecutors,Judiciary,Child Protective Services,Schools,Social service (private and public),Mental health services,Medical facilities/practitioners,Emergency services,Other relevant gr	15	0.25	Cross Marcia	 
10/01/2008	Example2	Community Education	Law enforcement	20	20	Cross Marcia	 
08/01/2008	eXAMPLE3	Assess gaps in service	Judiciary	50	15	Cross Marcia	 
10/05/2008	Presentation	Community Education	Law enforcement,Prosecutors,Child Protective Services,Schools,Social service (private and public)	52	3	Cross Marcia	 
11/10/2008	Example	Outreach	Judiciary,Child Protective Services	100	2.25	Cross Marcia	 
11/12/2008	example2	Outreach	Prosecutors,Judiciary	1000	1.25	Cross Marcia	 
Previous 20 records Next 20 records							

To view any existing activity, click on the magnifying glass on the right hand side of the table. To delete any activity that was entered by mistake, click on the red X symbol.

---

## COMMUNITY ORGANIZING AND RESPONDING

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The Community Organizing and Responding section on the Sexual Assault Interface is specifically for agencies that receive Sexual Assault Services to Native American Communities or Sexual Assault Services to Marginalized Communities. If your agency does not receive either of those two types of funds, you should not report your activities here, as they will not appear on the correct report for your agency. If you are uncertain whether you should report your information here, please contact your Sexual Assault Program Coordinator.

The Community Organizing and Responding section has two tabs or pages: one for Activity and Participant information, where individual activities may be recorded, and a second tab for the Year End narrative report. The two pages are outlined below.

### ACTIVITY AND PARTICIPANT INFORMATION

The screenshot shows the 'Sexual Assault (SA)' interface. At the top, there are navigation links: 'domestic violence >', 'general crimes >', and 'administrative utility >'. On the right, it says 'welcome, Test User' and 'logout >'. Below the navigation bar, there are three tabs: 'Data Entry', 'Administrative Utility', and 'Reports'. The 'Data Entry' tab is selected. On the left, there is a sidebar with a list of categories: 'Client Intakes', 'Medical and Criminal Justice System', 'CSAP and Specialized Services', 'Native American and Marginalized Services', 'Crisis Intervention & Information/Referral', 'Prevention Activities', 'System Coordination', and 'Community Organizing & Responding'. The 'Community Organizing & Responding' category is selected. The main content area has two tabs: 'Activity and Participant Information' and 'Year End Report'. The 'Activity and Participant Information' tab is active. It contains a form with the following fields: 'Date:', 'Audience:', 'Type of Activity:', 'Service Standard:', 'Participant:', 'Age:', 'Number of Participants:', 'Subject:', and 'If you selected "Other", please specify here:'. Below the form are 'Submit', 'Clear', and 'Cancel' buttons. At the bottom, there is a table with the following data:

Date	Type of Activity	Service Standard	Audience	Subject	
11/14/2008	Presentation	Community Organizing	Example Activity	Safety Skills/Self Defense	Q X
11/13/2008	Training	Community Organizing	Black Hills High School	Safety Skills/Self Defense	Q X
11/12/2008	Outreach	Community Responding	Soroptimists	General Sexual Assault Info	Q X
11/11/2008	Television or Radio	Community Organizing	KISW Radio Presentation	Rape	Q X
1					

The Activity and Participant data is not associated with a particular client, so it may be entered at any time and without having to search for a Client or Case ID number.

There are 10 fields to collect. All fields are mandatory.

---

### Community Organizing/Responding Activity Fields

---

Date:

**Date:** Enter the date of the activity you wish to record.

Audience:

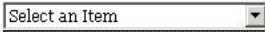
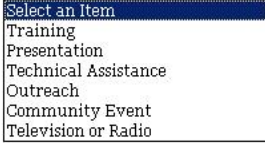
**Audience:** Enter the audience to whom you provided the prevention activity. This is a text box, so you may enter the actual audience name, rather than having to choose from a pull down list.

---

---


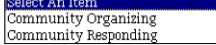
### Community Organizing/Responding Activity Fields

---



Type of Activity:   
  
Select an Item  
Training  
Presentation  
Technical Assistance  
Outreach  
Community Event  
Television or Radio

**Type of Activity:** Select whether the prevention activity was a training, presentation, community event, or other type of activity.



Keep in mind that if you select Community Event or Television/Radio, you should enter number of participants as zero.

Service Standard:   
  
Select An Item  
Community Organizing  
Community Responding

**Service Standard:** Select the appropriate service standard, either Community Organizing or Community Responding, that applies to this activity.

Participant:   
  
Select an Item  
Service Providers  
General Public


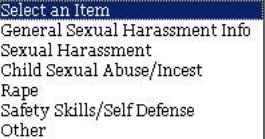
**Participant:** Select whether the activity was provided for service providers or for the general public.

Age:   
  
Select an Item  
Elementary  
Junior High/Middle School  
High School  
College  
Adult

**Age:** Select the age of the participants your event was geared towards.

Number of Participants:


**Number of Participants:** Enter the approximate number of participants at your activity. If you selected Community Event or Television/Radio, enter 0.

Subject:   
  
Select an Item  
General Sexual Harassment Info  
Sexual Harassment  
Child Sexual Abuse/Incest  
Rape  
Safety Skills/Self Defense  
Other

**Subject:** Select the primary subject your prevention activity addressed.

If you selected "Other", please specify here:

**Other/Please Specify:** If you selected "Other" in the Subject category above, please indicate what the topic area was in this text box.



When you have entered the information about your prevention activity, click on the **Submit** button.









---

When you have successfully submitted one or more Community Organizing or Responding activities, they will be shown in the table at the bottom of your screen:

**SORT SAVED RECORDS BY CLICKING THE HEADER TITLE ONCE FOR ASCENDING ORDER, TWICE FOR DESCENDING ORDER.**

**VIEW OR EDIT ANY SAVED RECORD BY CLICKING ON IT IN THE SAVED RECORD TABLE.**

**DELETE ANY RECORD BY CLICKING THE RED X.**

<u>Date</u>	<u>Type of Activity</u>	<u>Service Standard</u>	<u>Audience</u>	<u>Subject</u>	
11/14/2008	Presentation	Community Organizing	Example Activity	Safety Skills/Self Defense	 
11/13/2008	Training	Community Organizing	Black Hills High School	Safety Skills/Self Defense	 
11/12/2008	Outreach	Community Responding	Soroptimists	General Sexual Assault Info	 
11/11/2008	Television or Radio	Community Organizing	KISW Radio Presentation	Rape	 
1					

**NAVIGATE MULTIPLE PAGES OF SAVED RECORDS USING THE LINKS AT THE BOTTOM OF THE TABLE.**

To sort your saved records, click the header of any column. Clicking the header once will sort by that field in ascending order. Clicking a second time will sort by that field in descending order.

To view or edit any existing community organizing/responding activity, simply click on the magnifying glass on the right hand side of the screen. To delete an activity that was entered in error, click on the red X.

When your agency has entered more than 20 activities, you will only see one page of activities per screen. To navigate through other pages, click the page numbers at the bottom of the screen.

## YEAR END REPORT

domestic violence > general crimes > administrative utility > welcome, Test User logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy  
Washington State Department of Social & Health Services  
CA Children's Administration

Client Intakes  
Medical and Criminal Justice System  
CSAP and Specialized Services  
Native American and Marginalized Services  
Crisis Intervention & Information/Referral  
Prevention Activities  
System Coordination  
**Community Organizing & Responding**

Activity and Participant Information Year End Report

Date: 11/14/2008

What were your key accomplishments this reporting period in community organizing?

These were my key accomplishments in community organizing.

What were your key accomplishments this reporting period in community responding?

These were my key accomplishments in community responding.

Date	Details	
11/14/2008	These were my key accomplishments in community organizing.	Q X
1		

Submit Clear Cancel

The Community Organizing and Responding Year End Report provides a section for agencies to type a narrative report about their community organizing and responding accomplishments during each reporting period. To complete this section, enter the date of the report you are submitting, and then type a narrative answer to each of the questions, “What were your key accomplishments this reporting period in community organizing?” and “What were your key accomplishments this reporting period in community responding?” When you have completed your report, click on the **Submit** button to save your responses. After you have successfully submitted a report, it will appear at the bottom of the screen:

Date:	Details:	Action:
6/7/2006	Our key accomplishments this reporting period were to complete community organizing events, activiti	Q X

To view or edit a previous response, click on the magnifying glass to the right of that response. If you have entered a report in error and wish to delete it entirely, click on the red X symbol.



## SASP NARRATIVE

domestic violence > victims of crime > administrative utility > victim witness assistance units welcome, Emily O'Connor logout >

### Sexual Assault (SA)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy

Washington State Department of Social & Health Services  
CA Children's Administration

☐ Client Intakes

☐ Medical and Criminal Justice System

☐ CSAP and Specialized Services

☐ Native American and Marginalized Services

☐ Crisis Intervention/ Info. & Referral

☐ Prevention Activities

☐ System Coordination

☐ Community Organizing & Responding

☒ SASP Narrative

**SASP Narrative Questions**

Reporting Period: **Not Available**

The questions below are for SASP subgrantees only, and must be completed once per reporting period. If you are unsure about whether to complete these narrative questions, please contact your SASP program coordinator.

**20. (Optional) Additional Information**  
Use the space below to discuss the effectiveness of victim services funded or supported by your SASP Program subgrant and to provide any additional information you would like to share about your victim services activities beyond what you have provided in the data above. An example might include that your agency, as a result of SASP funding, was able to provide medical accompaniment to an increased number of sexual assault survivors. This resulted in a higher percentage of survivors also seeking additional support services.

**21. What do you see as the most significant areas of remaining need, with regard to improving services to victims/survivors of sexual assault, increasing victims/survivors safety, and enhancing community response (including offender accountability for sex offenders)?** (Consider geographic regions, underserved populations, service delivery systems, and challenges and barriers unique to your jurisdiction.)

**22. What has SASP Program funding allowed you to do that you could not do prior to receiving this funding?**  
(e.g., expanding services to include criminal justice advocacy; expand coordination and cross-referrals with sexual assault

Submit

The questions on the SASP Narrative page are for SASP subgrantees only, and are completed only once per reporting period. Prior to the correct time for submission, the Submit buttons on the page will be disabled. The SASP Narrative will be opened when reporting is allowed, and grantees can then submit their responses. If you are unsure about whether to complete these narrative questions, please contact your SASP program coordinator.



When you have completed entering your responses to the narrative questions, your report complete. Click on the Submit button at the bottom of your screen, and you will receive a message indicating your report has been successfully submitted. This means your report has been saved, but you may continue to return to edit or modify your report until the report closes on the date specified by your SASP program coordinator. You can view your answers in context by viewing the SASP report.

## DSHS SHELTER COMMUNITY EDUCATION

victims of crime > sexual assault > administrative utility > welcome, Test User [logout >](#)

### Domestic Violence (DV)

[Data Entry](#) [Administrative Utility](#) [Reports](#)

 **Office of Crime Victims Advocacy**  **Washington State Department of Social & Health Services**  
CA Children's Administration

[Client Information](#) [Medical and Criminal Justice System](#) [Direct Client Services](#) [Hotline Calls/Info. & Referral Services](#) [STOP GRANT Coordinated Community Response](#) [STOP GRANT Presentations, Publications & Trainings](#) **DSHS Shelter Community Education** [DSHS Shelter End Of Year Report](#) [STOP Grant Narrative Questions](#)

[Submit](#)

#### DSHS Shelter Community Education

Date of presentation or training  Title of presentation or training

Type of Activity  Audience

Number of participants

[Submit](#) [Clear/Add New Record](#) [Cancel](#)

Date	Title	Type Of Activity	Audience	No of Participants	
03/01/2009	Community Health Fair	Outreach	Adult/Mixed	500	<a href="#">Q</a> <a href="#">X</a>
02/12/2009	outreach	Outreach	Adult/Mixed	2	<a href="#">Q</a> <a href="#">X</a>
02/12/2009	talked to dawna	Outreach	Adult/Mixed	1	<a href="#">Q</a> <a href="#">X</a>
11/17/2008	Nov 18 Example 3	Outreach	Youth	25	<a href="#">Q</a> <a href="#">X</a>
11/18/2008	Nov 18 Example 2	Community Event	Youth	N/A	<a href="#">Q</a> <a href="#">X</a>
11/18/2008	Nov 18 Example	Media	Adult/Mixed	N/A	<a href="#">Q</a> <a href="#">X</a>

[Previous 20 records](#) [Next 20 records](#)

The Community Education page is available on the Domestic Violence Interface, and collects data on Community Education activities performed by DV Emergency Shelter contractors. The data and options for each question are explained more in-depth in the DV Emergency Shelter contracts administered by the DSHS Children's Administration.

Community Education data is not associated with a particular client, so it may be entered at any time and without having to search for a Client or Case ID number.

There are 5 fields to collect on the Community Education page. All fields are mandatory.

### Community Education Fields

Date of presentation or training

**Date of presentation or training:** Enter the date of the Community Education activity you wish to record.

Title of presentation or training

**Title of presentation or training:** Enter a title for the Community Education activity. This is a text box, so you may enter a descriptive title, rather than having to choose from a pull down list.

## Community Education Fields

Type of Activity Select An Item

- Select An Item
- Training
- Presentation
- Outreach
- Community Event
- Media

**Type of Activity:** Select the type activity was a training, presentation, community event, or other type of activity.

Keep in mind that if you select Community Event or Media, the Number of Participants field will default to "N/A."

Audience Select An Item

- Select An Item
- Adult/Mixed
- Youth

**Audience:** Select the approximate audience for your Community Education presentation or training. Select "Adult/Mixed" if your audience was either all adults or a mix of adults and youth. Select "Youth" if your audience was youth only.

Number of participants

**Number of participants:** For Trainings, Presentations, and Outreach, enter the number of participants at your event. For Community Events and Media, this field will default to "N/A" since number of participants is not collected for those two types of activities.



When you have entered the information about your Community Education activity, click the **Submit** button.

When you have successfully submitted one or more Community Education activities, your entries will be shown in the table at the bottom of your screen:

**SORT SAVED RECORDS BY CLICKING THE HEADER TITLE ONCE FOR ASCENDING ORDER, TWICE**

Date	Title	Type Of Activity	Audience	No of Participants	
11/10/2008	Example8	Media	Adult/Mixed	N/A	Q X
10/01/2007	Example6	Outreach	Youth	50	Q X
10/01/2008	Example4	Media	Adult/Mixed	N/A	Q X
10/01/2008	Example3	Media	Adult/Mixed	N/A	Q X
01/01/2008	Example2	Outreach	Youth	100	Q X
10/01/2008	Example1	Presentation	Adult/Mixed	20	Q X
10/01/2008	Example 2	Media	Adult/Mixed	N/A	Q X
Previous 20 records Next 20 records					

**VIEW OR EDIT ANY SAVED RECORD BY CLICKING ON IT IN THE SAVED RECORD TABLE.**

**DELETE ANY RECORD BY CLICKING THE RED X.**

**NAVIGATE PAGES OF SAVED RECORDS USING THE LINKS AT THE BOTTOM OF THE PAGE.**

To sort your saved records, click the header of any column. Clicking the header once will sort by that field in ascending order. Clicking a second time will sort by that field in descending order.

To view or edit any existing community education activity, click on the magnifying glass next to it, or click directly on the record in the table. To delete an activity that was entered in error, click on the red X.

When your agency has entered more than 20 community education activities, you will only see one page of activities per screen. To navigate through other pages, click the "next 20 records" link at the bottom of the page.

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## VICTIMS OF CRIME OUTREACH AND AWARENESS


---

domestic violence > sexual assault > administrative utility > welcome, Test User    [logout >](#)

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**Victims of Crime (VOC)**  
[Data Entry](#)   [Administrative Utility](#)   [Reports](#)

 **Office of  
Crime Victims  
Advocacy**

 **Washington State  
Department of Social  
& Health Services**  
**CA Children's Administration**

[Submit](#)

[Client Information](#)  
[Medical and  
Criminal Justice  
System](#)  
[Direct Services](#)  
[Hotline Calls/Info.  
& Referral Services](#)  
**[Outreach and  
Awareness](#)**

**Outreach and Awareness**  

Date of Activity  Topic or Title

Type of Activity  Who was the activity for?

Number of participants

Number of Hours

[Submit](#)   [Clear/Add New Record](#)   [Cancel](#)

Date	Title	Type Of Activity	Audience	No of Participants	Number of Hours	
02/12/2009	Outreach to Carolyn	Outreach	Adult/Mixed	2	N/A	<a href="#">Q</a> <a href="#">X</a>
01/26/2009	title	Media	Adult/Mixed	9000	N/A	<a href="#">Q</a> <a href="#">X</a>
12/16/2008	example	Media	Adult/Mixed	N/A	N/A	<a href="#">Q</a> <a href="#">X</a>
11/18/2008	Nov 18 Example 8	Training	Adult/Mixed	15	N/A	<a href="#">Q</a> <a href="#">X</a>
11/18/2008	Nov 18 Example 7	Community Event	Adult/Mixed	N/A	N/A	<a href="#">Q</a> <a href="#">X</a>
11/18/2008	Nov 18 Example 6	Media	Adult/Mixed	N/A	N/A	<a href="#">Q</a> <a href="#">X</a>
11/18/2008	Nov 18 Example 5	Outreach	Youth	50	N/A	<a href="#">Q</a> <a href="#">X</a>

Previous 20 records   Next 20 records

The Outreach and Awareness page is available on the Victims of Crime Interface, and collects data on Outreach and Awareness activities performed by Crime Victim Service Center contractors.

Outreach and Awareness data is not associated in InfoNet with a particular client, so it may be entered at any time and without having to search for a Client or Case ID number.

There are 5 fields to collect on the Community Education page. All fields are mandatory.

---

### Community Education Fields

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Date of Activity

**Date of Activity:** Enter the date of the Outreach And Awareness activity you wish to record.

Topic or Title

**Topic or Title:** Enter a title for the Community Education activity. This is a text box, so you may enter a descriptive title, rather than having to choose from a pull down list.

Type of Activity

Select An Item  
Community Event  
Direct outreach to victims  
Media  
Outreach  
Presentation  
Training

**Type of Activity:** Select the type activity was a training, presentation, community event, or other type of activity.

Keep in mind that if you select Community Event or Media, the Number of Participants field will default to "N/A."

---

## Community Education Fields

Who was the activity for?

**Who was the activity for?** Describe who the activity was for in the text box provided.

Number of participants

**Number of participants:** For Trainings, Presentations, and Outreach, enter the number of participants at your event. For Community Events and Media, this field will default to “N/A” since number of participants is not collected for those two types of activities.















Number of Hours

**Number of Hours:** Enter the number of hours spent on the event in this box. For Media, this field will default to “N/A” since number of hours for media events are not collected.

**Submit**

When you have entered the information about your Community Education activity, click the **Submit** button.

When you have successfully submitted one or more Community Education activities, your entries will be shown in the table at the bottom of your screen:

Date	Title	Type Of Activity	Audience	No of Participants	
11/10/2008	Example8	Media	Adult/Mixed	N/A	 
10/01/2007	Example6	Outreach	Youth	50	 
10/01/2008	Example4	Media	Adult/Mixed	N/A	 
10/01/2008	Example3	Media	Adult/Mixed	N/A	 
01/01/2008	Example2	Outreach	Youth	100	 
10/01/2008	Example1	Presentation	Adult/Mixed	20	 
10/01/2008	Example 2	Media	Adult/Mixed	N/A	 
Previous 20 records Next 20 records					

**SORT SAVED RECORDS BY CLICKING THE HEADER TITLE ONCE FOR ASCENDING ORDER, TWICE**

**NAVIGATE PAGES OF SAVED RECORDS USING THE LINKS AT THE BOTTOM OF THE PAGE.**

**VIEW OR EDIT ANY SAVED RECORD BY CLICKING ON IT IN THE SAVED RECORD TABLE.**

**DELETE ANY RECORD BY CLICKING THE RED X.**

To sort your saved records, click the header of any column. Clicking the header once will sort by that field in ascending order. Clicking a second time will sort by that field in descending order.

To view or edit any existing community education activity, click on the magnifying glass next to it, or click directly on the record in the table. To delete an activity that was entered in error, click on the red X.


When your agency has entered more than 20 community education activities, you will only see one page of activities per screen. To navigate through other pages, click the “next 20 records” link at the bottom of the page.


## DSHS SHELTER END OF YEAR REPORT

victims of crime > sexual assault > administrative utility > welcome, Test User [logout >](#)

### Domestic Violence (DV)

[Data Entry](#) [Administrative Utility](#) [Reports](#)

 Office of Crime Victims Advocacy

 Washington State Department of Social & Health Services  
CA Children's Administration

[Submit](#)

#### Client Information

- ☐ Medical and Criminal Justice System
- ☐ Direct Client Services
- ☐ Hotline Calls/Info. & Referral Services
- ☐ STOP GRANT Coordinated Community Response
- ☐ STOP GRANT Presentations, Publications & Trainings
- ☐ DSHS Shelter Community Education
- ☒ DSHS Shelter End Of Year Report
- ☐ STOP Grant Narrative Questions

#### DSHS Shelter End Of Year Report

Reporting Period: **State Fiscal Year 2009**

[OutCome Data](#) [Volunteer Information](#) [Narrative Questions](#)

##### Outcomes Data

For the above reporting period, report the following numbers for your emergency domestic violence shelter contract. For each program area report how surveys/questionnaires were completed, and how many YES responses you received to each of the outcome questions. Report actual numbers, not percentages. If you do not expend DSHS contract funds to provide a specific service (e.g. support groups) enter o (zero). For all other services (emergency shelter, supportive services, and advocacy) you must report actual numbers. InfoNet will Autosum each column.

**a. Emergency Domestic Violence Shelter: All adult victims of domestic violence who receive emergency domestic violence shelter.**

Number of surveys completed:	<input type="text" value="15"/>	Number of YES responses to safety outcome:	<input type="text" value="15"/>	Number of YES responses to resource outcome:	<input type="text" value="15"/>
------------------------------	---------------------------------	--	---------------------------------	--	---------------------------------

**b. Supportive Services and Advocacy: All or sample of adult victims of domestic violence who receive in-person, non-residential supportive services and advocacy if you agency expends DSHS contract funding to provide these services.**

Number of surveys completed:	<input type="text" value="25"/>	Number of YES responses to safety outcome:	<input type="text" value="24"/>	Number of YES responses to resource outcome:	<input type="text" value="24"/>
------------------------------	---------------------------------	--	---------------------------------	--	---------------------------------

**c. Support Groups: All or a sample of adult victims of domestic violence who participate in non-residential support groups if your agency expends DSHS contract funding to provide this service.**

Number of surveys completed:	<input type="text" value="44"/>	Number of YES responses to safety outcome:	<input type="text" value="41"/>	Number of YES responses to resource outcome:	<input type="text" value="42"/>
------------------------------	---------------------------------	--	---------------------------------	--	---------------------------------

<b>Total Number of Surveys Completed:</b>	<input type="text" value="84"/>	<b>Total Number of YES responses to safety outcome:</b>	<input type="text" value="80"/>	<b>Total number of YES responses to resource outcome:</b>	<input type="text" value="81"/>
---	---------------------------------	---	---------------------------------	---	---------------------------------

The End of Year Report section is only available on the Domestic Violence Interface, and collects an end of year report by DV Emergency Shelter contractors. The data and options for each question are explained more in-depth in the DV Emergency Shelter contracts administered by the DSHS Children's Administration.

End of Year Report data is not associated with a particular client, so it may be entered without having to search for a Client or Case ID number.

### TIME PERIOD FOR REPORTING

Unlike other sections of InfoNet, the End of Year report may only be submitted during certain periods. As the name implies, the End of Year report will only be submitted once, after the end of the contract year. **You will only be able to submit the report after July 1, 2009.** Prior to the end of the contract year, you will be able to view all of the questions on the End of Year report, but the Submit button will be disabled.

The report will be "opened" at the end of the year, which will allow you to use the Submit button to save your entry. Contractors will be notified that the report is available, and when the report is due. You may then enter and save your End of Year Report, and during the period of time that the report is "open," you may continue to edit or add to your report. When the report period is over, the report is "closed" and considered final, and you will no longer be able to edit or modify your end of year report.



Each agency will submit only one End of Year Report per year. End of Year Reports are only required for agencies that receive Emergency DV Shelter funding from DSHS Children's Administration.

The End of Year Report consists of three tabs, described in the next sections.

## OUTCOMES DATA

general crimes > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

Client Information  
Medical and Criminal Justice System  
Direct Client Services  
Hotline Calls/Info. & Referral Services  
Coordinated Community Response  
Presentations, Publications & Conducting Trainings  
Community Education  
**End Of Year Report**

Reporting Period: Example: 2009

Outcome Data Volunteer Information Narrative Questions

**Outcomes Data**  
For the above reporting period, report the following numbers for your emergency domestic violence shelter contract. For each program area report how surveys/questionnaires were completed, and how many YES responses you received to each of the outcome questions. Report actual numbers, not percentages. If you do not expend DSHS contract funds to provide a specific service (e.g. support groups) enter 0 (zero). For all other services (emergency shelter, supportive services, and advocacy) you must report actual numbers. InfoNet will Autosum each column.

**a. Emergency Domestic Violence Shelter: All adult victims of domestic violence who receive emergency domestic violence shelter.**

Number of surveys completed:	15	Number of YES responses to safety outcome:	20	Number of YES responses to resource outcome:	25
------------------------------	----	--	----	--	----

**b. Supportive Services and Advocacy: All or sample of adult victims of domestic violence who receive in-person, non-residential supportive services and advocacy if you agency expends DSHS contract funding to provide these services.**

Number of surveys completed:	15	Number of YES responses to safety outcome:	15	Number of YES responses to resource outcome:	15
------------------------------	----	--	----	--	----

**c. Support Groups: All or a sample of adult victims of domestic violence who participate in non-residential support groups if your agency expends DSHS contract funding to provide this service.**

Number of surveys completed:	15	Number of YES responses to safety outcome:	15	Number of YES responses to resource outcome:	15
------------------------------	----	--	----	--	----

<b>Total Number of Surveys Completed:</b>	45	<b>Total Number of YES responses to safety outcome:</b>	50	<b>Total number of YES responses to resource outcome:</b>	55
---	----	---	----	---	----

Next Submit Cancel

There are 9 fields, divided into 3 program area sections, to collect on the Outcomes Data page. All fields are mandatory.

Outcomes Data Fields	
a. Emergency Domestic Violence Shelter:	For the Emergency Domestic Violence shelter program area indicate how many program evaluation surveys/responses were completed by domestic violence clients, and how many YES responses you received to each of the two (2) outcome questions. Enter actual numbers, not percentages.
<ul style="list-style-type: none"> <li>Number of surveys completed</li> <li>Number of YES responses to safety outcome</li> <li>Number of YES responses to resource outcome</li> </ul>	
b. Supportive Services and Advocacy:	For the Supportive Services and Advocacy program area indicate how many program evaluation surveys/responses were completed by domestic violence clients, and how many
<ul style="list-style-type: none"> <li>Number of surveys completed</li> <li>Number of YES responses to safety outcome</li> </ul>	

Outcomes Data Fields	
<ul style="list-style-type: none"> <li>Number of YES responses to resource outcome</li> </ul>	YES responses you received to each of the two (2) outcome questions. Enter actual numbers, not percentages.
c. Support Groups: <ul style="list-style-type: none"> <li>Number of surveys completed</li> <li>Number of YES responses to safety outcome</li> <li>Number of YES responses to resource outcome</li> </ul>	For Support Groups, indicate how many program evaluation surveys/responses were completed by domestic violence clients, and how many YES responses you received to each of the two (2) outcome questions. Enter actual numbers, not percentages. If you do not provide support groups, enter 0 (zero).
<ul style="list-style-type: none"> <li>Total Number of Surveys Completed</li> <li>Total YES Responses to safety outcome</li> <li>Total YES Responses to resource outcome</li> </ul>	InfoNet will automatically calculate the totals at the bottom of the Outcomes Data screen, so you do not need to enter any information into these three Totals fields.
<div data-bbox="704 812 850 894" data-label="Image"> </div>	<p>When you have entered the information about Outcomes Data, select Next to continue to the next page of your report. You must complete all three pages of the report before you can Submit it.</p> <p>If you have already completed your End of Year report and are just editing or modifying an existing entry, click Submit to save your revisions.</p>



## VOLUNTEER INFORMATION

The second page of the End of Year report is for recording Volunteer Information. For the period of this contract, report the total number of volunteers in the domestic violence program. “Domestic violence program” means all aspects of your program and should include volunteers providing direct services (e.g. advocacy, transportation, crisis/I&R line) and administrative services (e.g. board members). Report the total number of hours donated by these volunteers during the period of this contract.

general crimes > sexual assault > administrative utility > welcome, Test User logout >

### Domestic Violence (DV)

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy Washington State Department of Social & Health Services CA Children's Administration

Client Information  
Medical and Criminal Justice System  
Direct Client Services  
Hotline Calls/Info. & Referral Services  
Coordinated Community Response  
Presentations, Publications & Conducting Trainings  
Community Education  
**End Of Year Report**

Reporting Period: Example: 2009

Outcome Data **Volunteer Information** Narrative Questions

**Volunteer Information**  
For the above reporting period, report the total number of volunteers in the domestic violence program. "Domestic violence program" means all aspects of your program and should include volunteers providing direct services (e.g. advocacy, transportation, crisis/I&R line) and administrative services (e.g. board members). Report the total number of hours donated by these volunteers during the reporting period.

Number of volunteers in the domestic violence program: 20

Amount of volunteer time (in hours): 250

Next Submit Cancel

There are only two fields to enter on the Volunteer Information tab. Both fields are mandatory.

Volunteer Information Fields	
Number of volunteers in the domestic violence program: 20	<b>Number of volunteers in the domestic violence program:</b> For the period of this contract, report the total number of volunteers in the domestic violence program. “Domestic violence program” means all aspects of your program and should include volunteers providing direct services (e.g. advocacy, transportation, crisis/I&R line) and administrative services (e.g. board members).
Amount of volunteer time (in hours): 250	<b>Amount of volunteer time (in hours):</b> Report the total number of hours donated by these volunteers

---

### Volunteer Information Fields

---

during the period of this contract. Please enter whole numbers, not decimal points.

---



When you have entered the data for Volunteer Information, select Next to continue to the next page of your report. You must complete all three pages of the report before you can Submit it.

If you have already completed your End of Year report and are just editing or modifying an existing entry, click Submit to save your revisions.

---

## NARRATIVE QUESTIONS

The final page of the End of Year report is the section for answering Narrative Questions.

For activities supported in whole or in part by this contract during the current contract period, provide a narrative response to the following questions. DSHS will read and review each submittal, and select a sample for submission as part of its annual federal grant report – individual program names will not be submitted. Do not use any personally identifying information on clients.

1. Share a story about a domestic violence survivor that you assisted, a service you provide or a community initiative in which your agency was involved.
2. What does the DSHS contract allow your agency to do that you wouldn't be able to do without this funding?
3. Describe your agency's efforts to meet the needs of domestic violence victims/survivors from marginalized populations in your community.
4. What on-going challenges does your agency have in your community in meeting the needs of domestic violence victims/survivors?
5. Describe significant community education activities supported by this contract.
6. (Optional) Describe any additional information you would like DSHS to know about the services and activities supported by this contract.

When you have completed entering your responses to the narrative questions, your End of Year report is complete. Click on the Submit button at the bottom of your screen, and you will receive a message indicating



your End of Year report has been successfully submitted. This means your report has been saved, but you may continue to return to edit or modify your report until the report closes on the date specified by your DSHS administrator.

## STOP GRANT NARRATIVE QUESTIONS

victims of crime > sexual assault > administrative utility > welcome, Test User [logout >](#)

### Domestic Violence (DV)

[Data Entry](#) [Administrative Utility](#) [Reports](#)

 **Office of Crime Victims Advocacy**  **Washington State Department of Social & Health Services**  
**CA Children's Administration**

[Client Information](#)  
[Medical and Criminal Justice System](#)  
[Direct Client Services](#)  
[Hotline Calls/Info. & Referral Services](#)  
[STOP GRANT Coordinated Community Response](#)  
[STOP GRANT Presentations, Publications & Trainings](#)  
[DSHS Shelter Community Education](#)  
[DSHS Shelter End Of Year Report](#)  
**[STOP Grant Narrative Questions](#)**

[Submit](#)

#### STOP Grant Narrative Questions

Reporting Period: **Jan - Dec 2009**

The questions below are for STOP grant subgrantees only, and must be completed once per reporting period. If you are unsure about whether to complete these narrative questions, please contact your STOP grant program coordinator.

1. What do you see as the most significant areas of remaining need, with regard to improving services to victims/survivors of sexual assault, domestic violence, dating violence, and stalking, increasing victim/survivor safety, and enhancing community response (including offender accountability for both batterers and sex offenders)? (Consider geographic regions, underserved populations, service delivery systems, type of victimization, and challenges and barriers unique to your jurisdiction.)

Narrative #1: Will be displayed under #60 on the STOP Report.

2. What has STOP Program funding allowed you to do that you could not do prior to receiving this funding? (e.g. expand coordination and cross-referrals with victim/survivor services, or track data on arrests and prosecution)

Narrative #2: Will be displayed under #61 on the STOP Report.

3. Provide any additional information that you would like us to know about your STOP Program subgrant and/or effectiveness of your grant. (If you have any other data or information that you have not already reported that

The STOP Grant Narrative Questions section is found on the Domestic Violence and Victim Witness Assistance Unit interfaces and is for STOP Grant recipients only. It contains six narrative questions for reporting at the end of the STOP grant reporting period. If you receive STOP grant funding, and you are uncertain when or if you need to report on these narrative questions, please contact the person who administers your STOP grant.

Like the DSHS End of Year Report, the STOP Grant Narrative Questions may only be submitted during certain specific periods. Narrative questions will only be submitted once, each reporting period. Narratives may be typed directly onto the page, or you can cut and paste your answers from a Word or other word processing document.

The report will be “opened” at the end of the report period, which will allow you to use the Submit button to save your entry. You may then enter and save your STOP Grant Narrative questions. You must answer each mandatory question to be able to “Submit” your response, but you may continue to come back and edit your answers until the report is closed. When the report period is over, the report is “closed” and considered final, and you will no longer be able to edit or modify your end of year report.

Narrative questions will be shown in different locations throughout the written STOP grant report. The first two narrative questions in this section, for example, will be answers to questions #60 and #61 on the STOP grant report. The questions themselves are repeated in both InfoNet and on the report, so you can determine which question corresponds with which section on the written report.


## VICTIM WITNESS NARRATIVE

domestic violence > victims of crime > sexual assault > administrative utility > welcome, Nicky Gleason  
[logout >](#)


---

### Victim Witness Assistance Units

[Data Entry](#) [Administrative Utility](#) [Reports](#)



Office of  
Crime Victims  
Advocacy



Washington State  
Department of Social  
& Health Services

CA Children's Administration

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☐ [Client Information](#)

☐ [Direct Services](#)

☐ [Hotline Calls/Info. & Referral Services](#)

☐ [Stop Grant Coordinated Community Response](#)

☐ [Stop Grant Presentations, Publications & Training](#)

☐ [Stop Grant Narrative Questions](#)

☒ [Victim Witness Narrative](#)

☐ [Stop Grant Funded Prosecution Activities](#)

#### Victim Witness Narrative

Date:

Provide any additional information that you would like us to know.

Date

1

The Victim Witness Narrative section is found on the Victim Witness Assistance Unit interfaces only. It is required for all agencies that receive Victim Witness Assistance funds. This space is provided so that agencies can report on additional narrative information each reporting period. Simply enter the date of the report you are submitting in the Date field, and type or paste your answer to the narrative question in the box provided. When finished, click Submit to save.

Please note that until you click the Submit button, your narrative question is not saved in the InfoNet system. If your internet connection is interrupted while typing, if you navigate away from the website accidentally before you're finished, if your network connection forces your computer to time out, or if your power goes out, your partially completed response will not be saved. If your narrative response is more than a few sentences long, you may find it useful to type up your response in a word processing document first, and then cut and paste your answer into the text box.

Once your answer is submitted, you will see it appear as a saved record (labeled by date) at the bottom of the page. To edit an existing answer, simply select the record you wish to edit by clicking on it, edit your response, and click Submit to save. As with other records, to delete an entry that was submitted in error, click the red X to the right of the saved record.

To make sure your narrative report shows up in the correct reporting period, keep in mind you must use a date that falls within that reporting period. For example, a report dated April 2 would appear on your April – June report. So, if entering a narrative question for January – March, 2010, please choose a date that falls within the actual period, such as March 31, 2010.

## 8. REPORTS

### ENTERING THE BASIC REPORTS INTERFACE

To use the reports feature in InfoNet, select the Reports button located at the top of any screen:

The screenshot shows a web browser window titled "OCVA Domestic Violence - Microsoft Internet Explorer". The address bar shows the URL "https://forbess.wa.gov/cted/qaocvainfonet/Default.a...". The browser's menu bar includes File, Edit, View, Favorites, Tools, and Help. The address bar also shows a search bar and a "Go" button. The main content area has a purple header with the text "Domestic Violence (DV)" and a navigation bar with buttons for "Data Entry", "Administrative Utility", and "Reports". The "Reports" button is circled in red. Below the header, there is a sidebar on the left with a list of links: "Client Information", "Medical and Criminal Justice System", "Direct Client Services", "Hotline Calls/Info. & Referral Services", "Coordinated Community Response", and "Presentations, Publications & Conducting Trainings". The main content area has a tabbed interface with tabs for "Demographics", "Kids", "Income", "Referrals", "Presenting Issues", "Offenders", and "Needed / Received". The "Demographics" tab is selected. Below the tabs, there is a form with various fields for client information, including "Client ID", "Year of Birth", "First Contact Date", "Race", "Ethnicity", "Gender", "Client Type", "Disability", "Homeless", "When Incident Occurred for Which Client Sought Services", "Primary Offense Location", "Client's County of Residence", "Health Insurance", "Employment Status", "Education", "Marital Status", "Pregnant", "Refugee / Immigrant / Asylum Seeker?", "Limited English Proficiency?", "If so, what is the client's first language?", and "Does client have Veterans Status?".

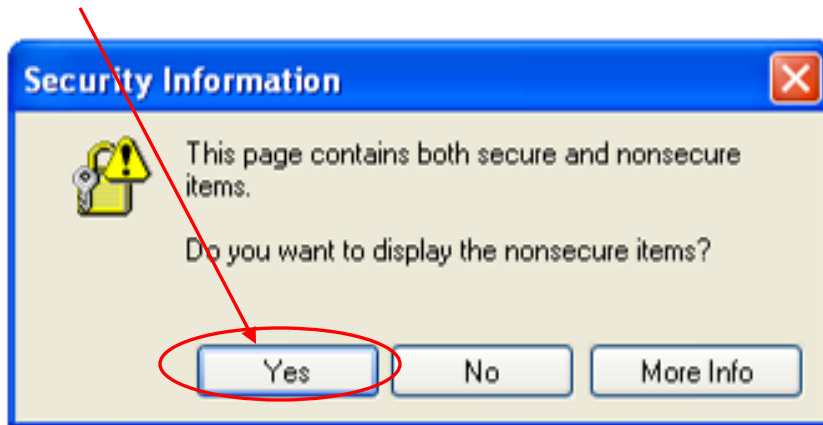
This will open the Reports function screen, from which you can access a variety of different reports for your agency.

You can access Reports the same way whether you enter from the Domestic Violence, Sexual Assault, Victims of Crime, or Administrative Utility interfaces – there is an identical report button at the top of each screen. This will give you access to all applicable reports, not just reports for the interface you started from. For example, to view Sexual Assault reports for your agency, you do not need to begin from the Sexual Assault interface – you can select the Report feature from anywhere in the system.

## PAGE CONTAINS BOTH SECURE AND NONSECURE ITEMS

If your browser is IE versions 5 or 6, you may be prompted with the following Security message.

Select Yes to continue.



### What does this message mean?

What this message is telling you is that the report feature accesses two kinds of information – one set of data that is “secure,” which is your InfoNet data, and one set of data that is “nonsecure,” which in this case refers to the templates and formatting of the reports themselves. You get this message because InfoNet is a secure website – as you can tell because the website begins with “https.” However, some of the templates that the reports reference for formatting are stored on a separate website that begins with “http.”

Not all users will receive this message – it may depend on what browser you are using, or what your security settings are. In any case, it is perfectly safe to select Yes to continue.



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## NAVIGATING THE REPORTS SCREEN

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The Reports screen is shown below. There are several pieces of information you will need to enter to generate a report. The first is selecting the type of report you wish to view. Select the report you wish to view by clicking on the **Reports** drop down menu. InfoNet currently has 24 basic reports to choose from at the Agency User level.

The screenshot shows the 'Reports' screen. At the top, there is a green header bar with the word 'Reports' in white. To the right of the header are three logos: the 'ocva' logo, the 'Office of Crime Victims Advocacy' logo, and the 'Washington State Department of Social & Health Services' logo with 'CA Children's Administration' below it. Below the header is a form area. On the left, there is a 'Reports' label next to a dropdown menu. The dropdown menu is open, showing a list of 24 report types. To the right of the dropdown menu are two buttons: 'Adobe' and 'View Report'.

Reports	SELECT ONE	Adobe	View Report
	SELECT ONE		
	Cases Breakdown		
	Client Intake Summary		
	Client Service Summary		
	Clients Currently In DV Shelter		
	Crime Victim Service Center Report		
	DSHS Shelter End of Year Report		
	DSHS Shelter Report		
	DVLA Report		
	Hotline Summary Report		
	Individual DV Shelter Entries		
	Rollup For Clients		
	Secondary Victims and Services Summary Report		
	Service Details Report		
	Services For Clients		
	Sexual Assault Community Organizing and Responding Report		
	Sexual Assault Community Organizing and Responding Year End Report		
	Sexual Assault Community Responding		
	Sexual Assault Demographics		
	Sexual Assault Field		
	Sexual Assault Prevention Summary		
	Sexual Assault Service Summary		
	Sexual Assault System Coordination Report		
	STOP Grant Report		
	Victim Witness Report		

Select the type of report you wish to view to continue. A brief description of each report type follows in the next section. **Not all report types are applicable for every agency.** For example, if your agency does not provide Sexual Assault Services, none of the Sexual Assault reports will contain any data.

## TYPES OF REPORTS

### CLIENT INTAKE SUMMARY

**Client Intake Summary**

Agency Name: X Testing

07/01/2008      THROUGH      06/30/2009

THE CLIENT INTAKE SUMMARY AND SEVERAL OF THE REPORTS IN INFO.NET ARE “WYSIWYG” REPORTS – “WHAT YOU SEE IS WHAT YOU GET.”

THAT IS BECAUSE THE REPORTS SHOW EXACTLY WHAT YOU TYPED INTO INFO.NET. IF YOU ENTER 20 INTAKES IN APRIL, THEN THE CLIENT INTAKE SUMMARY WILL SHOW EXACTLY 20 INTAKES FOR APRIL.

Domestic Violence											
11 Clients											
Gender	Count	Race	Count	Ethnicity	Count	Client Type	Count	Disability	Count	Age	Count
Female	11	African American, Black	5	Hispanic/Latino	4	Stalking	0	None	6	17 and Below	0
Male	0	Asian	1	Non-Hispanic/Non-Latino	7	Domestic Violence	11	Physical Disability	0	18 - 24	1
Not Reported	0	Native American/Alaska Native	0	Not Reported	0			Mental Disability	5	25 - 59	10
Other	0	Pacific Islander/Native Hawaiian	0					Sensory Disability	0	60 and Up	0
		Multi Racial	0					Other Disability	0		
		Not Reported	0					Multiple Disabilities	0		
		Other	0					Not Reported	0		
		Unspecified	0								
		White	5								

Victims of Crime											
7 Clients											
Gender	Count	Race	Count	Ethnicity	Count	Client Type	Count	Disability	Count	Age	Count
Female	7	African American, Black	2	Hispanic/Latino	0	Child	6	None	4	17 and Below	1
Male	0	Asian	1	Non-Hispanic/Non-Latino	7	Adult	1	DUI/DWI Crashes	1	Physical Disability	0
Not	0	Native	0	Not Reported	0			Elder Abuse	0	Mental	5

**TOTAL NUMBER OF CLIENT INTAKES FOR EACH PROGRAM TYPE SHOWN IN PROGRAM HEADER.**

The client intake summary is an agency wide overview of all client intakes with a First Contact Date within the selected reporting period. Intakes are divided into program types based on the interface they were entered in: Domestic Violence, Victims of Crime, and Sexual Assault.

This report shows a total count of intakes as well as breakouts of basic demographic information – Gender, Race, Ethnicity, Client or Crime type, Disability, and Age.

Please note that this is a report on new client intakes only. It does not indicate that services have been listed yet for the intakes shown. An agency could have a high number of client intakes and yet have a low number on service reports because no direct services were reported.

**Applicability:** This report is applicable to all agencies that provide direct client services, regardless of funding or contract type.

## CLIENT SERVICE SUMMARY

**Service Summary**

Agency Name: X Testing

07/01/2008 THROUGH 08/30/2008

**TOTAL NUMBER OF HOURS FOR THIS PARTICULAR SERVICE**

**NUMBER OF ENTRIES OR CONTACTS FOR THIS PARTICULAR SERVICE**

Domestic Violence			
Service Type	Total Hours	Total Entries	Total Clients
Advocacy-Based Counseling	17.25	5	4
Child Care	42.25	2	2
Civil Legal Advocacy	1.5	1	1
Crisis Counseling/Intervention	0.5	1	1
Emergency DV Shelter--DV Shelter Home	2.5	3	2
Hospital Response	1.25	1	1
Immigration Assistance	1.25	1	1
Other (please specify)	1.5	1	1
Referrals	0.25	1	1
<b>Total</b>	<b>68.25</b>	<b>18</b>	<b>6</b>

**TOTAL NUMBER OF HOURS FOR THIS PROGRAM TYPE**

**TOTAL NUMBER OF UNDUPLICATED CLIENTS THAT RECEIVED THIS PARTICULAR SERVICE**

Victims Of Crime			
Service Type	Total Hours	Total Entries	Total Clients
Advocacy	13.5	2	2
Community Responding	1	1	1
Crisis Intervention	1.25	1	1
Information and Referral	0.5	1	1
Support Groups	1	1	1
Therapy	4	1	1
<b>Total</b>	<b>21.25</b>	<b>7</b>	<b>5</b>

**TOTAL NUMBER OF UNDUPLICATED CLIENTS SERVED BY A PARTICULAR PROGRAM.**

Sexual Assault			
Service Type	Total Hours	Total Entries	Total Clients
Culturally/Linguistically Appropriate Techniques	2.5	2	2
Medical Advocacy	3	1	1
Medical Social Work	0.5	1	1
Peer Support Group	3	2	1
Support/Accompaniment through Service Delivery and Criminal Justice Systems	2	1	1
Therapy	0	1	1
<b>Total</b>	<b>11</b>	<b>8</b>	<b>4</b>

8/13/2009 11:26:32 AM Page 1 of 2

The Client Service Summary is an agency wide overview of all direct client services within the selected reporting period. Services are divided into program types: Sexual Assault, Domestic Violence, and Victims of Crime. The report includes a count of hours, number of entries, and number of unduplicated clients receiving that particular service.

There is also a subtotal of the total number of hours and entries for each program type. At the very bottom of the report (not shown in the example) there is a total across programs – all hours, all contacts, and all unduplicated clients for your agency during the report period.

Please note that, because many clients may receive more than one service, a client may be represented more than once throughout the report, which is why the “total number of clients served” overall may be lower than the sum of the total clients for *each service* column.

**Applicability:** This report is applicable to all agencies that provide direct client services, regardless of funding or contract type.

## CLIENTS CURRENTLY IN DOMESTIC VIOLENCE SHELTER REPORT

### Clients Currently In Domestic Violence Shelter Report

This report displays all shelter service entries for which a Shelter Begin Date has been entered, but for which no Shelter End Date has been entered. These clients are considered by InfoNet to be “currently in shelter” and bednights continue to be added for them on shelter related reports. If one of these clients has exited shelter, complete the original shelter entry by adding the shelter exit date. For more information about shelter data entry, please view the InfoNet User Manual, Chapter 6.

Adult Bednights				
Client Id	Case Id	Service Date	Service Type	Begin Date
5555	173859	01/14/2010	Emergency DV Shelter--DV Safe Home	01/14/2010

Children's Bednights				
Parent's Client Id	Year of Birth	Service Date	Service Type	Begin Date
5555	2000	01/14/2010	DV Safe Home	01/14/2010

The Clients Currently in DV Shelter Report is an report of all DV shelter clients and their children with “incomplete” shelter entries, meaning shelter entries with a beginning date but no exit date. Ideally, when reviewing this report, you will see a list of clients and children currently residing in your agency’s shelter. However, this can be an excellent way to check for data entry mistakes, as you will be able to quickly see if a client who should be listed as having exited shelter has not yet had an exit date listed. To complete the original shelter entry, please see Chapter 6 for more detailed instructions on editing a shelter record.

**Applicability:** This report is applicable to all agencies that provide Emergency DV Shelter.

## CRIME VICTIM SERVICE CENTER REPORT:

<p>Department of Community, Trade, and Economic Development Office of Crime Victims Advocacy</p> <p>Victims of Crime Act Crime Victim Service Centers</p> <p>Quarterly Activity Report</p> <p>Report Period: July 1, 2006 TO September 30, 2006</p>																																	
<p>Section One: Agency Information</p>	<p>VOCA Region: 1</p> <p>Agency Name: X Testing</p> <p>Contract Number: 07-31119-9999</p>																																
<p>Section Two: Victim Statistics</p>	<p>A. Indicate the number of victims served by type of victimization:</p> <p><i>Note: Indicate the number of victims (unduplicated) served by VOCA-funded projects during the grant period. Each victim should be counted only once, i.e. a victim of child abuse assaults should be counted more than once only as a result of separate and unrelated crimes.</i></p> <table> <tr> <td>No. of victims served</td> <td></td> <td>No. of victims served</td> <td></td> </tr> <tr> <td><input type="text" value="1"/></td> <td>Child physical abuse</td> <td><input type="text" value="0"/></td> <td>Kidnapping and/or Missing Persons</td> </tr> <tr> <td><input type="text" value="2"/></td> <td>DUI/DWI Crashes</td> <td><input type="text" value="0"/></td> <td>Vehicular Assault</td> </tr> <tr> <td><input type="text" value="1"/></td> <td>Elder Abuse</td> <td><input type="text" value="0"/></td> <td>Property Crimes</td> </tr> <tr> <td><input type="text" value="2"/></td> <td>Hate Crimes</td> <td><input type="text" value="0"/></td> <td>Fraud</td> </tr> <tr> <td><input type="text" value="0"/></td> <td>Robbery</td> <td><input type="text" value="0"/></td> <td>Trafficking</td> </tr> <tr> <td><input type="text" value="4"/></td> <td>Assault</td> <td><input type="text" value="0"/></td> <td>Survivors of Homicide Victims and/or Victims of Attempted Homicide</td> </tr> <tr> <td><input type="text" value="1"/></td> <td>Identity Theft</td> <td><input type="text" value="11"/></td> <td><b>Total</b></td> </tr> </table>	No. of victims served		No. of victims served		<input type="text" value="1"/>	Child physical abuse	<input type="text" value="0"/>	Kidnapping and/or Missing Persons	<input type="text" value="2"/>	DUI/DWI Crashes	<input type="text" value="0"/>	Vehicular Assault	<input type="text" value="1"/>	Elder Abuse	<input type="text" value="0"/>	Property Crimes	<input type="text" value="2"/>	Hate Crimes	<input type="text" value="0"/>	Fraud	<input type="text" value="0"/>	Robbery	<input type="text" value="0"/>	Trafficking	<input type="text" value="4"/>	Assault	<input type="text" value="0"/>	Survivors of Homicide Victims and/or Victims of Attempted Homicide	<input type="text" value="1"/>	Identity Theft	<input type="text" value="11"/>	<b>Total</b>
No. of victims served		No. of victims served																															
<input type="text" value="1"/>	Child physical abuse	<input type="text" value="0"/>	Kidnapping and/or Missing Persons																														
<input type="text" value="2"/>	DUI/DWI Crashes	<input type="text" value="0"/>	Vehicular Assault																														
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<input type="text" value="0"/>	Robbery	<input type="text" value="0"/>	Trafficking																														
<input type="text" value="4"/>	Assault	<input type="text" value="0"/>	Survivors of Homicide Victims and/or Victims of Attempted Homicide																														
<input type="text" value="1"/>	Identity Theft	<input type="text" value="11"/>	<b>Total</b>																														

4/24/2007 4:56:56 PM

VOCA Quarterly Report Form  
1 of 3

**NOTE: THIS REPORT IS MORE THAN ONE PAGE LONG – BE SURE TO VIEW THE OTHER PAGES AS WELL.**

This report is for agencies receiving Crime Victim Service Center funding for Victims of Crime victims. It is similar to the paper report that agencies filled out prior to InfoNet, and includes information about the Victims of Crime client intakes entered during the reporting period as well as services provided. It also provides information on the outreach and education activities your agency provided during the reporting period.

This report is specifically formatted to match the requirements of the federal funder, and may involve combining, filtering, or relabeling data from what you entered into InfoNet. If you would like further explanation of the federal funder's reporting requirements, please contact the person that manages your grant or contract.

**Applicability:** This report is applicable only to agencies that provide Victims of Crime services through a Crime Victim Service Center contract or subcontract. If your agency does not provide services to victims of Victims of Crime, this report will be blank.

DSHS END OF YEAR REPORT:

DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
Emergency Domestic Violence Shelter Report

DSHS Emergency DV Shelter End of Year Report For: X Testing

REPORT PERIOD: 07/01/2009 TO 06/30/2010

Service Outcome Data

Indicates how many surveys were completed from each program area for which data was collected, and how many YES responses were received to each of the outcome questions (safety and resources).

Service Outcome Data			
For Report Period State Fiscal Year 2009			
Survey Type	Number of Surveys Completed	No of Yes Responses To Safety Outcome	Number of Yes Responses To Community Resources Outcome
Shelter	15	15	15
Supportive Services and Advocacy	25	24	24
Support Group	44	41	42
Total	84	80	81

Volunteers

Number of volunteers in the domestic violence program and the total number of hours they donated. Domestic violence program means all aspects of the program and includes volunteers providing direct services and administrative services.

Volunteers	
For Report Period State Fiscal Year 2009	
Volunteers	Count
No of Volunteers	28
Number of Volunteer Hours	765

8/13/2009 2:27:38 PM

Page 1 of 2

The DSHS End of Year report is for agencies that receive DSHS Emergency Shelter funding. This report is designed so that agencies can print out the information submitted on the DSHS End of Year report in an easy to read fashion. If you're unsure whether your DSHS End of Year Report submitted correctly, checking this report can allow you to see your report exactly as it is currently saved in the system.

**Applicability:** This report is applicable only to agencies that receive DSHS Emergency DV Shelter funding and who have completed an End of Year Report. If your agency does not receive that funding, or has not completed the End of Year Report section, this report will be blank.

## DSHS SHELTER REPORT:

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES**  
**Emergency Domestic Violence Shelter Report**

Report For: ☒ Testing

Reporting Period: 07/01/2008 THROUGH 08/30/2008

People Served (unduplicated within each contractor seen for the 1st time during the reporting period).  
Includes the number of domestic violence clients (including their children) served by gender, race, ethnicity, and age. Youth Intimate Partner Violence (Youth IPV) means youth age 17 and under who are the primary victim of IPV; youth IPV does not include dependent children accompanying an adult victim/client for services.

RESIDENTIAL (EMERGENCY SHELTER)	Count
Female	4
Male	1
Children(0-17)	0
Youth IPV	0
Not Reported	0
Other	0
Unspecified	0
<b>Total Residential</b>	<b>5</b>

NON-RESIDENTIAL	Count
Female	9
Male	2
Children(0-17)	1
Youth IPV	0
Not Reported	1
Other	0
Unspecified	0
<b>Total Non-Residential</b>	<b>13</b>

Race	Count
African American, Black	2
Asian	1
Multi Racial	0
Native American/Alaska Native	0
Not Reported	0
Other	0

**THE FIRST PAGE OF THE DSHS SHELTER REPORTS COUNT UNDUPLICATED CLIENTS WHO WERE NEW DURING THE REPORT PERIOD AND WHO RECEIVED ELIGIBLE SERVICES. CLIENTS MAY BE COUNTED EITHER IN RESIDENTIAL OR NON-RESIDENTIAL FOR THIS COUNT, ALTHOUGH ALL SERVICE HOURS AND BEDNIGHTS ARE COUNTED LATER IN THE REPORT FOR BOTH NEW AND CONTINUING CLIENTS.**

**THE TOTALS HERE ARE USUALLY LESS THAN THE TOTAL NUMBER OF CLIENTS WHO WERE SERVED BY YOUR AGENCY.**

8/13/2009 2:51:33 PM Page 1 of 4

This report is for agencies receiving DSHS Emergency DV Shelter funding for domestic violence victims. It contains demographic information on the eligible client intakes entered with First Contact Dates during the reporting period, the services provided to both new and continuing clients, and the number of shelter bed nights that occurred during the reporting period for both adult and child clients, as well as hotline calls, unmet requests for shelter, and community education activities.

This report includes data on all clients and services eligible for DSHS Emergency DV Shelter funding, and is not limited to only information on residential clients.

This report is specifically formatted to match the requirements of the federal funder, and may involve combining, filtering, or relabeling data from what you entered into InfoNet. If you would like further explanation of the federal funder's reporting requirements, please contact the person that manages your grant or contract.

**Applicability:** This report is applicable only to agencies that provide Domestic Violence services through a DSHS Emergency Shelter contract. If your agency does not provide services to victims of Domestic Violence, this report will be blank.

## DVLA REPORT:

DEPARTMENT OF COMMUNITY, TRADE AND ECONOMIC DEVELOPMENT  
OFFICE OF CRIME VICTIMS ADVOCACY  
Domestic Violence Legal Advocacy  
Quarterly Activity Report

AGENCY NAME: X Testing

LEGAL ADVOCATE NAME: Terril Halcher

REPORT PERIOD: July 1, 2006 TO September 30, 2006

CONTRACT NUMBER: 07-31108-999

**NEW INDIVIDUALS SERVED:** (Unduplicated count of primary and secondary victims assisted by DVLA Grant-funded staff during the current reporting period.)

Primary Victims: 1 Secondary (children): 0

**ACTIVITIES:** (Total number of each during this current reporting period.)

2 **SYSTEMS ADVOCACY**  
(Number of contacts made within a system (criminal, civil, government agencies) on behalf of the victim and/or to ensure the victim's rights.)

8 **ACCOMPANIMENT TO CRIMINAL JUSTICE PROCEEDINGS**  
(Number of meetings with law enforcement, prosecutors or courts.)

0 **REFERRALS**  
(Number of referrals to a criminal justice agency, DSHS, TANF, food bank, crime victims compensation, housing, employment, health care, legal services, etc.)

1 **IMMIGRATION ASSISTANCE**  
(Number of victims assisted with immigration matters, such as VAWA self-petitions.)

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Page 1 of 3

This report is for agencies receiving Domestic Violence Legal Advocacy (DVLA) funding for domestic violence victims. It is similar to the paper report that agencies filled out prior to InfoNet. The report contains information based on the services provided and clients assisted by **your agency's specified DVLA staff**.

If your agency has a DVLA contract but has not specified your DVLA staff in the Administrative Utility, you will receive a blank report with the following error message beneath your contract number:

CONTRACT NUMBER:	07-31108-999
No DVLA staff designated	

To correct this, indicate in the Administrative Utility which staff members are paid out of your DVLA contract using the Staff Allocation feature. Instructions for this can be found on page 2-5 of the InfoNet User's Manual.

**Applicability:** This report is applicable only to agencies that provide Domestic Violence Legal Advocacy through a DVLA contract. If your agency does not receive DVLA funding, this report will be blank.



## HOTLINE SUMMARY REPORT

### Hotline Summary for X Testing

REPORT PERIOD: 07/01/2006 TO 06/30/2009

#### Domestic Violence

<u>Hotline Call Type</u>	<u>No of Calls</u>
Crisis Intervention	0
Information and Referral	0
Both	2
Unspecified	0

Domestic Violence Total Calls: 2

#### Sexual Assault

<u>Hotline Call Type</u>	<u>No of Calls</u>
Crisis Intervention	9
Information and Referral	32
Both	8
Unspecified	0

Sexual Assault Total Calls: 49

#### Victims of Crime

<u>Hotline Call Type</u>	<u>No of Calls</u>
Crisis Intervention	2
Information and Referral	0
Both	1
Unspecified	0

Victims of Crime Total Calls: 3

**Total Calls: 54**

The Hotline Summary report is a simple report for agencies that would like a snapshot summary of the hotline calls they have entered into the system for a particular time period. Calls are separated by program type (DV, SA, and VOC) and intervention type (crisis intervention, I& R, calls that included both crisis intervention AND I&R, and calls whose intervention type was unspecified.)

If an agency enters calls in “batches” the system will automatically tally those batches for an accurate representation of calls. For example, if an agency enters two hotline call entries in a week, with 10 calls entered in the number of calls field for the first entry, and 2 entered under number of calls for the second, this report will show 12 total calls.

**Applicability:** This report is applicable to any agency that enters data on the Hotline or Crisis Intervention/Information and Referral pages. It is a “WYSYWIG” (what you see is what you get) report, and will reflect exactly what was entered into InfoNet without any filters or changes.

## INDIVIDUAL DOMESTIC VIOLENCE SHELTER ENTRIES REPORT

### Individual Domestic Violence Shelter Entries Report

07/01/2006 THROUGH 06/30/2010

All Adult Bednights for 07/01/2006 through 06/30/2010							
Client Id	Case Id	Service Date	Service Type	Begin Date	End Date	Bednights In Report Period	Total Bednights
Example20	86171	07/01/2006	Emergency DV Shelter--DV Shelter Home	07/01/2006	07/15/2006	14	14
Example1	86173	07/03/2006	Emergency DV Shelter--DV Shelter Home	07/03/2006	07/05/2006	2	2
Example5	86175	07/05/2006	Emergency DV Shelter--DV Shelter Home	07/05/2006	07/06/2006	1	1
Example15	120316	07/14/2008	Emergency DV Shelter--DV Shelter Home	07/14/2008	07/18/2008	4	4
5555	173859	12/25/2009	Emergency DV Shelter--DV Shelter Home	12/25/2009	12/31/2009	6	6
5555	173859	01/14/2010	Emergency DV Shelter--DV Safe Home	01/14/2010		168	
Example2	86172	01/24/2010	Emergency DV Shelter--DV Shelter Home	01/24/2010	01/28/2010	4	4
Total Adults Sheltered in this report period: 6						Total: 199	

All Children's Bednights							
Parent's Client ID	Child's Year of Birth	Service Date	Service Type	Begin Date	End Date	Bednights in Report Period	Total Bednights
5555	2000	12/25/2009	DV Shelter Home	12/25/2009	12/31/2009	6	6
5555	2000	01/14/2010	DV Safe Home	01/14/2010		168	
Example12	1999	07/01/2009	DV Shelter Home	07/01/2009	07/03/2009	2	2
Example2	1992	01/24/2010	DV Shelter Home	01/24/2010	01/28/2010	4	4
Example2	1998	01/24/2010	DV Shelter Home	01/24/2010	01/28/2010	4	4
Total Children Sheltered in this report period: 4						Total: 184	

The Individual DV Shelter Entries Report is an report of all DV shelter entries for clients and children with at least one bednight in the desired report period. The report will show the client's begin date, end date, as well as calculations for the number of bednights in the report period and, if possible, the total number of bednights altogether.

This report is a great way to understand how bednight totals get calculated for reports. It can also be a great way to check for typos and mistakes – by skimming the number of bednights, if you encounter a record with, for example, 300 bednights, you might want to look a little more closely at the dates that were entered. Sometimes, a typo in the year of a shelter exit date can throw bednight totals way off!

**Applicability:** This report is applicable to all agencies that provide Emergency DV Shelter.

## SECONDARY VICTIMS AND SERVICES SUMMARY

### Secondary Victims and Services Summary

Agency Name: X Testing

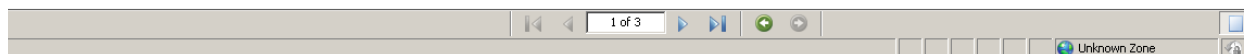
07/01/2006

THROUGH

06/30/2010

Domestic Violence Secondary Victim Intakes								
Race	Count	Ethnicity	Count	Gender	Count	Age	Count	
Unspecified	2	Unspecified	3	Unspecified	2	0-6	1	
African American, Black	2	Hispanic/Latino	1	Female	8	7-12	5	
Asian	1	Non-Hispanic/Non-Latino	5	Male	1	13-17	2	
Multi Racial	0	Not Reported	2	Not Reported	0	18-24	1	
Native American/Alaska Native	2	Total	11	Other	0	25-59	2	
Not Reported	0			Total	11	60+		0
Other	1					Total		11
Pacific Islander/Native Hawaiian	0							
White	3							
Total		11						

Domestic Violence Secondary Victim Services			
Service	Total Hours	Total Entries	Total Secondary Victims Served
Advocacy Based Counseling	14.5	3	3
Childcare or Children's Activities	2.5	2	2
DV Safe Home	2	1	1
DV Shelter Home	5.75	4	4
Support Group	4	4	1
Totals	28.75	14	7



This report is designed for agencies that provide services to Secondary Victims. It shows a Secondary Victim Client Intake summary at the top of each section, and a Secondary Victim Client Service Summary immediately below. The report is divided into Domestic Violence, Sexual Assault, and Victims of Crime Secondary Clients.

It is important to note that the secondary victims at the top of the report are new intakes, and are not necessarily the same ones that are shown on the service report. Just as clients on the Client Intake Summary reflect intakes, and clients on the Client Service Summary reflect clients served, the secondary report sections show the same two different types of data.

Typically, the number of new intakes should not be higher than the secondary clients served, as you would expect to serve all new victims and potentially some of the continuing ones. In the example above, there are 11 new DV secondary victims, but only 7 were served. This lets me know there are at least four secondary victims I've forgotten to enter services for, and can be my cue to review my data entry for omissions.

**Applicability:** If your agency does not provide services to secondary victims, or if you did not report any new secondary victims or secondary victim services during this reporting period, this report will be blank.

# SEXUAL ASSAULT COMMUNITY ORGANIZING AND RESPONDING REPORT

## Office of Crime Victim Advocacy Sexual Assault Program

### Community Organizing and Responding Report

07/01/2006 THROUGH 09/30/2009

Agency Code	Agency Description	Community Organizing		Community Responding		Unspecified Activity		Activities Per Age Group				
		Activity Count	Participant Count	Activity Count	Participant Count	Activity Count	Participant Count	Elemen.	Jr. High	High School	College	Adult
	X Testing	1	150	0	0	1	0	0	0	0	0	1

This report is designed for agencies receiving funding for Sexual Assault Services To Native American Communities and/or Sexual Assault Services to Marginalized Communities. If your agency doesn't receive either of those two funds, please disregard this report.

The report is a count of the number of activities and participants in the Community Organizing and Responding Activities section during the reporting period. The activities and participants are divided into service standard – those activities where Community Organizing was selected are listed in one set of columns, those with Community Responding in the second set of columns, and any activities where the Service Standard wasn't specified are listed separately. The report also shows the number of total activities per age group of the participants.

**Applicability:** If your agency does not provide activities with Sexual Assault Services to Native American or Marginalized Communities funding, or if you did not report any activities during this reporting period, this report will be blank.

# SEXUAL ASSAULT COMMUNITY ORGANIZING AND RESPONDING YEAR END REPORT

## Community Organizing and Responding Year End Report For X Testing

REPORT PERIOD: 07/01/2006 TO 06/30/2009

X Testing		
Date	Key accomplishments this reporting period in community organizing?	Key accomplishments this reporting period in community responding?
05/01/2009	<p>This report is designed for agencies receiving funding for Sexual Assault Services To Native American Communities and/or Sexual Assault Services to Marginalized Communities. If your agency doesn't receive either of those two funds, please disregard this report.</p> <p>The report is a count of the number of activities and participants in the Community Organizing and Responding Activities section during the reporting period. The activities and participants are divided into service standard – those activities where Community Organizing was selected are listed in one set of columns, those with Community Responding in the second set of columns, and any activities where the Service Standard wasn't specified are listed separately. The report also shows the number of total activities per age group of the participants.</p> <p>Applicability: If your agency does not provide activities with Sexual Assault Services to Native American or Marginalized Communities funding, or if you did not report any activities during this reporting period, this report will be blank.</p>	<p>This report is designed for agencies receiving funding for Sexual Assault Services To Native American Communities and/or Sexual Assault Services to Marginalized Communities. If your agency doesn't receive either of those two funds, please disregard this report.</p> <p>The report is a count of the number of activities and participants in the Community Organizing and Responding Activities section during the reporting period. The activities and participants are divided into service standard – those activities where Community Organizing was selected are listed in one set of columns, those with Community Responding in the second set of columns, and any activities where the Service Standard wasn't specified are listed separately. The report also shows the number of total activities per age group of the participants.</p> <p>Applicability: If your agency does not provide activities with Sexual Assault Services to Native American or Marginalized Communities funding, or if you did not report any activities during this reporting period, this report will be blank.</p>

This report is designed for agencies receiving funding for Sexual Assault Services to Native American or Marginalized Communities.

The report is a printable version of the narrative questions submitted in the Community Organizing and Responding/Year End Report tab. Viewing this report can also be a quick way to double check that your entries were completely and correctly submitted.

**Applicability:** If your agency does not provide Sexual Assault Services to Native American or Marginalized Communities, or if you have not submitted an End of Year report on the Community Organizing and Responding page, this report will be blank.

SEXUAL ASSAULT COMMUNITY RESPONDING REPORT:

**Office of Crime Victim Advocacy Sexual Assault Program**  
**Community Responding and Therapy Service Summary Report**

FY 2007, Quarter 1: July 1, 2006 THROUGH September 30, 2006

Agency Description	Peer Support Group	Educate Support Group	Therapy	Culturally/Linguistically Appropriate Techniques	Support/Accompaniment through Service Delivery and Criminal Justice Systems
Example	2	1	1	2	1

This report is designed for agencies receiving funding for Sexual Assault Services to Native American or Marginalized Communities.

The report is a count of the number of unduplicated clients that received each of the direct services in the Native American/Marginalized Services section of InfoNet. It is not dependent on the First Contact Date of the clients receiving the service. If a new client and a continuing client received Peer Support Group services during the specified quarter, both clients will be counted on this report.

A client may be counted for each service they receive – so, for example, if a client received Culturally/Linguistically Appropriate Techniques and Peer Support Group during the quarter, they will be counted once in each of those two columns. However, they are counted only once per column – so if a client attended Peer Support Group eight times in the quarter, they are only counted once in that column.

**Applicability:** If your agency does not provide Sexual Assault Services to Marginalized Communities, this report will be blank.

## SEXUAL ASSAULT DEMOGRAPHICS REPORT

### Office of Crime Victim Advocacy Sexual Assault Program

#### Demographics Report

FY 2006, Quarter 4: April 1, 2006 THROUGH June 30, 2006

Agency Code	Agency Description	Client Type				Gender			
		Child	Adult	Adult Survivor	Total	Females	Males	Other	Not Reported
	Example	0	2	0	2	1	0	0	1

This report is designed for agencies receiving funding for Sexual Assault Services from OCVA.

The report is a count of the number of sexual assault client intakes your agency has entered where the client's First Contact Date was in the reporting period.

Throughout InfoNet, we refer to clients with a First Contact Date within the reporting period as "new" clients. This report counts only clients that were new during the report period. In the example above, the report shows information on the clients with a First Contact Date between and including April 1, 2006 and June 30, 2006. A client with a First Contact Date in March, 2006 would not be shown.

The Demographics report sorts clients into Client Type (Child, Adult, or Adult Survivor) and client gender. This report does not indicate that the clients have had services reported. It is a count of client intakes only. This report also does not show information on Secondary Victims – the count is for primary clients (clients for whom you completed an intake form) only.

This report is usable for any agency that provides Sexual Assault Services, whether those services are CSAP, Specialized, Native American Specialized, or Services to Marginalized Communities – any clients for whom you have completed a Sexual Assault Client Intake form will be shown on this report.

**Applicability:** If your agency does not provide Sexual Assault Services, or if you did not have any new client intakes with a First Contact Date during the reporting period, this report will be blank.

## SEXUAL ASSAULT FIELD REPORT

### Office of Crime Victim Advocacy Sexual Assault Program

#### SA Field Report

FY 2006, Quarter 4: April 1, 2006 THROUGH June 30, 2006

Agency Description	Client Type				Gender				Crisis Intervention/Information and Referral				Secondary Victims
	Child	Adult	Adult Survivor	Total	Female	Male	Other	Not Reported	Crisis Inter.	Info. Referral	Both	Unspecified	
Example	0	2	0	2	1	0	0	1	0	0	0	1	3

This report is very similar to the Sexual Assault Demographics Report, but displays some additional information.

In addition to listing the number of client intakes within the reporting period sorted by Client Type and Gender, it also indicates the number of Sexual Assault Crisis Intervention/Information and Referral contacts during the reporting period, and the total number of Secondary Victims listed for the applicable client intakes.

Again, like the Demographics Report, this does not indicate services are listed for the primary or secondary clients, and counts only primary or secondary clients that were new during the report period.

Crisis Intervention/Information and Referral contacts are counted if the date of the contact was during the reporting period. The type of intervention is shown for each contact.

**Applicability:** If your agency does not provide Sexual Assault Services, or if you did not have any new clients or crisis intervention/information and referral calls during the reporting period, this report will be blank.



## SEXUAL ASSAULT PREVENTION SUMMARY

### Office of Crime Victim Advocacy Sexual Assault Program

#### Prevention Summary Report

FY 2007, Quarter 1: July 1, 2006 THROUGH September 30, 2006

Agency Description	Information and Awareness		Skill Building		Activities Per Age Group				
	Activity Count	Participant Count	Activity Count	Participant Count	Elemen.	Jr. High	High School	College	Adult
Example	1	25	2	65	1	1	1	0	0

This report is designed for agencies receiving funding for Sexual Assault Prevention Activities.

The report is a count of the number of activities and participants in Sexual Assault prevention during the reporting period. The activities and participants are divided into Information and Awareness activities and Skill Building activities. The report also shows the number of total activities per age group of the participants.

**Applicability:** If your agency does not provide Sexual Assault Prevention activities, or if you did not report any prevention activities during this reporting period, this report will be blank.

## SEXUAL ASSAULT SERVICE SUMMARY

### Office of Crime Victim Advocacy Sexual Assault Program

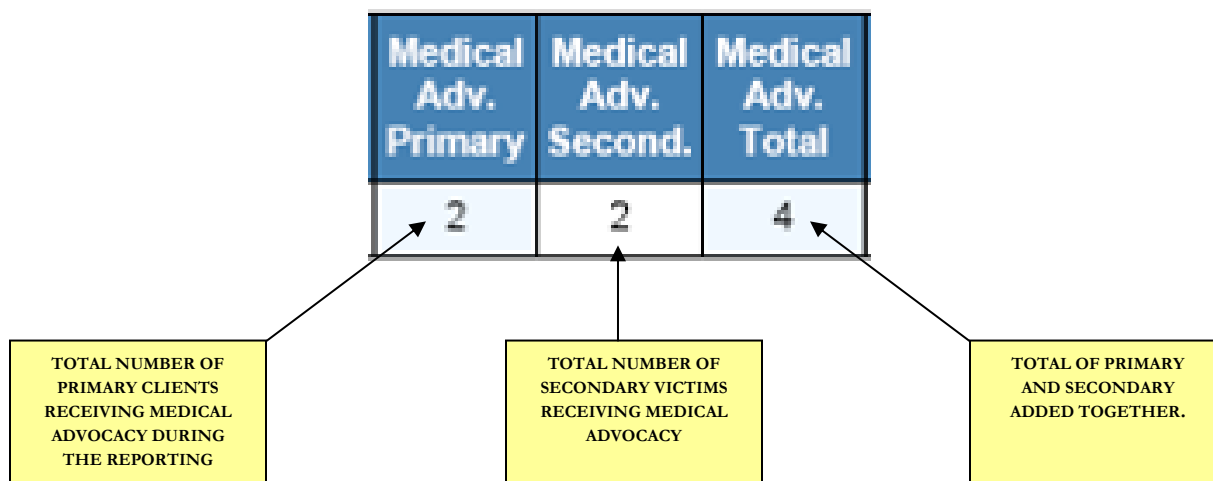
#### Service Summary Report

FY 2007, Quarter 1: July 1, 2006 THROUGH September 30, 2006

Agency Description	Medical Adv. Primary	Medical Adv. Second.	Medical Adv. Total	Legal Adv. Primary	Legal Adv. Second.	Legal Adv. Total	General Adv. Primary	General Adv. Second.	General Adv. Total	Support Groups Primary	Support Groups Second.	Support Groups Total	Therapy Primary	Therapy Second.	Therapy Total	Med SW	Info. & Referral	Crisis Intervention	Both	Unspecified
Example	2	2	4	1	1	2	0	0	0	1	2	3	1	1	2	1	0	4	1	0

This report is designed for agencies receiving CSAP or Specialized SA Services funding. It is a count of the number of clients and secondary victims that received each type of service during the reporting period.

The report counts each client or secondary victim once for each applicable service. Each applicable service shows the total number of primary clients receiving the service, secondary clients receiving the service, and the total number of all clients receiving the service:



A client may be counted for each service they receive – so, for example, if a client received Medical Advocacy and Support Group during the quarter, they will be counted once in each of those two columns. However, they are counted only once for each service type they received – so if a client attended Support Group eight times in the quarter, they are only counted once in that column.

Secondary Victims are counted similarly. The number represented is the total of unduplicated people receiving the service. It does not reflect total service hours or number of entries.

On the far right of the report is a count of the crisis intervention and information and referral contacts your agency reported with dates during the reporting period. This is the same information that can be found on the SA Field report

**Applicability:** If your agency does not provide Sexual Assault Services, or if you did not report any applicable services during the reporting period, this report will be blank.

# SEXUAL ASSAULT SYSTEM COORDINATION REPORT

## System Coordination Report For X Testing

REPORT PERIOD: 01/01/2009 TO 12/31/2009

X Testing					
Date	Title	Type of Activity	Audience	No Of Participants	Hour Of Service
6/14/2009	Meeting with medical staff	Develop accountability process	Child Protective Services, Emergency services, Medical facilities/practitioners, Mental health services	26	2.5
8/13/2009	Example #2	Assess gaps in service	Law enforcement, Social service (private and public)	8	1.25
1/14/2009	Judicial Committee	Increase Collaboration	Judiciary, Law enforcement, Prosecutors	6	2.5
Total:				40	6.25

This report is designed for agencies receiving funding for Sexual Assault System Coordination Activities. This is typically community sexual assault programs (CSAPs.) If you are unsure whether your sexual assault funding covers system coordination activities, please contact the person that administers your sexual assault grant.

The report is a count of the number of activities and participants in Sexual Assault System Coordination activities during the reporting period. This reflects the data as it was entered on the SA System Coordination page.

**Applicability:** If your agency does not provide Sexual Assault System Coordination activities, or if you did not report any prevention activities during this reporting period, this report will be blank.

## STOP GRANT REPORT

### DEPARTMENT OF COMMUNITY, TRADE AND ECONOMIC DEVELOPMENT OFFICE OF CRIME VICTIMS ADVOCACY

#### STOP Grant report

##### A. General Information

###### A1. Grant information

All subgrantees must complete this section.

1. Date of report: 08/13/2009
2. Current reporting period : 01/01/2008 TO 12/31/2008
3. Subgrantee name : X Testing
4. Contract number under which activities were supported during the current reporting period.
- 08-31103-190,

###### 5. Agency

Agency/organization name X Testing

Address 999 Main Street

City Olympia State WA Zip code 98502

Telephone (360) 555-1212 Facsimile (360) 586-7176

Email xtesting@example.com

The STOP Grant report is, as the name implies, only for agencies that receive STOP grant funding. It is modeled after the sections in the much longer federal report that contain information which can be collected in InfoNet. If your agency does not receive STOP grant funding, the report will be blank.

The STOP grant report is 10 pages long, and contains information from a variety of sections. The report includes victim services data, with the data being pulled for the report being filtered and/or combined to meet the federal funder's requirements. It may look very different from the data you see on your agency's Client Intake and Service Summary reports.

The STOP grant report's count of clients who are served, for example, are counted based only on the clients who received eligible services from your agency's STOP specific staff. If your agency has not indicated STOP specific staff, there will be a red error message when you pull the report:

###### 4. Contract number under which activities were supported during the current reporting period.

08-31103-190,

No STOP Grant staff designated

If your STOP grant advocate is funded only partially through STOP grant, as indicated in the Staff Allocation section in the Admin Utility (see page 2-7 for details on staff allocation) the clients counted on this report will be reduced accordingly. For example:

If your agency has an advocate who served 24 people during the report period, and 50% of her salary is paid for through STOP and 50% through other sources, then only 12 of those clients will be counted on the STOP grant report, because that is the proportion of the advocate's clients that were "paid for" via STOP grant funds.

If the advocate is only 50% FTE, but ALL of her 20 hour week is devoted to STOP grant, you should allocate her STOP grant time "100%" so that all of her clients are counted on the report.

The STOP Grant report also includes information from the Coordinated Community Response page, the STOP Grant Narrative Questions page, and pages such as hotline, Protection Orders, and other sections.

If you have questions about the STOP grant program reporting requirements, please contact the person that administers your STOP grant.

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## PARAMETER REPORTS

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There are four additional reports that allow users to input parameters to filter the report data:

- CASE BREAKDOWN
- ROLLUP FOR CLIENTS
- SERVICES FOR CLIENTS
- SERVICE DETAILS REPORT

These four reports are the first of many that involve more flexibility in InfoNet reporting: the use of Parameters. When one of these three reports is selected, you will notice a new option, “Add Parameters” on the title bar:

Return to InfoNet

# Reports

Office of Crime Victims Advocacy

Washington State Department of Social & Health Services  
CA Children's Administration

Reports: Cases Breakdown Adobe View Report

First Contact Date: [ ] to [ ]

[Add Parameters](#)

Without Adding Parameters, the reports are very simple. The Cases Breakdown will offer a simple list of clients and cases with a first contact date between those selected. The Rollup for Clients report will show an aggregate count of the same clients, very similar to what is shown on the Client Intake Summary. The Services for Clients report will show similar demographics for clients served between report dates.

However, once you select the Add Parameters link, a variety of additional options for filters becomes available:

Return to InfoNet

# Reports

Office of Crime Victims Advocacy

Washington State Department of Social & Health Services  
CA Children's Administration

Reports: Cases Breakdown Adobe View Report

First Contact Date: [ ] to [ ]

[Remove Parameters](#)

Staff Member	<input checked="" type="checkbox"/> Select All <input type="checkbox"/> No Chosen Advocate <input type="checkbox"/> Cross, Marcia <input type="checkbox"/> Hatcher, Terri	Program Type	<input checked="" type="checkbox"/> Select All <input type="checkbox"/> Sexual Assault <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Victims of Crime	County	<input checked="" type="checkbox"/> Select All <input type="checkbox"/> Adams <input type="checkbox"/> Asotin <input type="checkbox"/> Benton
Age	<input checked="" type="checkbox"/> Select All <input type="checkbox"/> 0 - 6 <input type="checkbox"/> 7 - 12 <input type="checkbox"/> 13 - 17	Ethnicity	<input checked="" type="checkbox"/> Select All <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Non-Latino <input type="checkbox"/> Not Reported	Race	<input checked="" type="checkbox"/> Select All <input type="checkbox"/> African American, Black <input type="checkbox"/> Asian <input type="checkbox"/> Native American/Alaska Native
Disability	<input checked="" type="checkbox"/> Select All <input type="checkbox"/> None <input type="checkbox"/> Physical Disability <input type="checkbox"/> Mental Disability	Gender	<input checked="" type="checkbox"/> Select All <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other	Homeless	<input checked="" type="checkbox"/> Select All <input type="checkbox"/> No <input type="checkbox"/> Not Reported <input type="checkbox"/> Not Applicable

If an agency wanted to run a report for a subset of their clients, they are able to do so with these parameters. For example, if an agency wanted to know how many of their client intakes were for Hispanic/Latino clients under 18, for example, they would change the Parameters for both Age and Ethnicity, as shown below:

**OCVA - Reports - Windows Internet Explorer**  
 https://test-fortress.wa.gov/cted/qz2ocvainfonet/ReportView.aspx

**Reports** | [Return to InfoNet](#)

Office of Crime Victims Advocacy  
 Washington State Department of Social & Health Services  
 CA Children's Administration

**Reports** | Rollup For Clients | Adobe | View Report

First Contact Date: 1/1/2006 to 12/31/2007  
[Remove Parameters](#)

**Staff Member** ☒ Select All  
☐ No Chosen Advocate  
☐ Cross, Marcia  
☐ Hatcher, Terri

**Age** ☐ Select All  
☒ 0 - 6  
☒ 7 - 12  
☒ 13 - 17

**Disability** ☒ Select All  
☐ None  
☐ Physical Disability  
☐ Mental Disability

**Program Type** ☒ Select All  
☐ Sexual Assault  
☐ Domestic Violence

**Ethnicity** ☐ Select All  
☒ Hispanic/Latino  
☐ Non-Hispanic/Non-Latino

**Gender** ☒ Select All  
☐ Male  
☐ Female  
☐ Other

**Race** ☒ Select All  
☐ African American, Black  
☐ Asian  
☐ Native American/Alaska

**Homeless** ☒ Select All  
☐ No  
☐ Not Reported  
☐ Not Applicable

**TO ACTIVATE A SET OF PARAMETERS, "UNCHECK" THE "SELECT ALL" CHECKBOX. THE PAGE WILL REFRESH, AT WHICH POINT YOU CAN THEN SELECT AS MANY OF THE OPTIONS WITHIN THAT PARAMETER AS YOU WOULD LIKE.**

The parameters used for a report will always be displayed at the top of the report, as shown below.

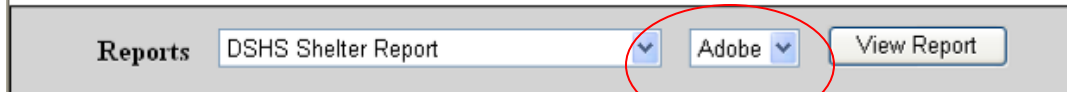
**Rollup for Clients**

Agency: X Testing  
 Program Types: All  
 Staff Members: All  
 Age: 0 - 6; 7 - 12; 13 - 17  
 Ethnicity: Hispanic/Latino  
 Race: All  
 Disability: All  
 Gender: All  
 Homeless: All  
 1/1/2006 through 12/31/2007

**Total Cases** 0

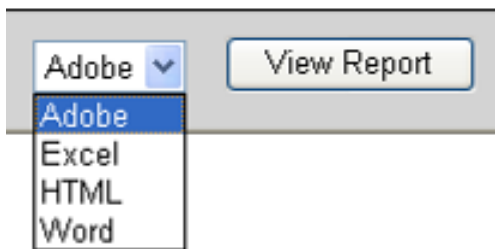
## REPORT FORMAT

For each report, you may select the type of format you would like your report in:



A screenshot of a web interface for selecting a report format. It features a label "Reports" followed by a text input field containing "DSHS Shelter Report". To the right of this field is a small blue downward arrow icon. Further right is a dropdown menu currently displaying "Adobe" with another blue downward arrow icon. To the right of the dropdown is a button labeled "View Report". A red circle is drawn around the "Adobe" dropdown menu.

There are several types of formats available for reports. These can be selected from the pull down menu to the right of the report list:



A close-up screenshot of the dropdown menu from the previous image. The menu is open, showing a list of four options: "Adobe", "Excel", "HTML", and "Word". The "Adobe" option is highlighted with a blue background. To the right of the dropdown menu is a button labeled "View Report".

The four formats available are Adobe PDF file, Microsoft Excel, HTML format, or Microsoft Word. If you do not select a format, the Adobe PDF format will be chosen as default. Reports in various formats are discussed in depth in later sections of this manual.

To view PDF files, you can download the Adobe Reader free of charge from the Adobe website:  
<http://www.adobe.com/products/acrobat/>.



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## REPORT TIME PERIOD:

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Once you have selected the type of report you wish to view, you will see two additional fields appear that allow you to select the time period for your report. Enter the dates between which you would like to view your report. Report start and end dates are inclusive, meaning they are included in your report period.

For example:

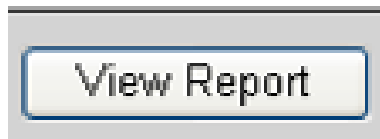
- If you wish to view a report for State Fiscal Year 2009, Quarter 1, enter “7/1/2008” for the start date and “9/30/2008” for the end date.
- If you wish to view a report for October, 2007, enter “10/1/2007” for the start date and “10/31/2007” for the end date.
- If you wish to view a report for all of calendar year 2007, enter “1/1/2007” for the start date and “12/31/2007” for the end date.

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## VIEWING YOUR REPORT

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Once you have selected the type of report you wish to view, the format, and the time period, you can now view your report. To do so, just click the View Report button on the menu bar:



Depending on the report format that you select, the report will be viewed in the applicable program. What that looks like for each format is detailed in the following pages.

After viewing a report, if you change the criteria of your report you will need to select the View Report button again to refresh the report. For example, after viewing a report for Quarter 1, you can select Quarter 2 and click View Report again to view the next report.

For most reports, the default view will be in the lower part of your screen. If you prefer to view the report in a separate window, **hold down the SHIFT key** while clicking the View Report button and the report will open in a separate window.

## REPORTS IN ADOBE

Depending on your computer's configuration, reports in Adobe format will open in the lower half of your screen, as shown below:

**Reports**

Client Intake Summary Adobe View Report

State Fiscal Year 2007

Quarter Quarter 1

Save a Copy Search Select 47% Sign

**Client Intake Summary**

Agency Name: X Testing  
FY 2007, Quarter 1: July 1, 2006 THROUGH September 30, 2006

Program Type	Clients
Sexual Assault	3
Domestic Violence	13
General Crimes	11

Domestic Violence					
Gender	Count	Race	Count	Ethnicity	Count
Female	10	African American, Black	2	Hispanic/Latino	3
Male	1	Asian	1	Non-Hispanic/Non-Latino	10
Not Reported	2	Native American/Alaska Native	0	Not Reported	0
Other	0	Pacific Islander/Native Hawaiian	0		
		Multi Racial	0		
		Not Reported	0		
		Other	0		
		Unspecified	0		
		White	10		

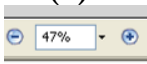
General Crimes					
Gender	Count	Race	Count	Ethnicity	Count
Female	8	African American, Black	1	Hispanic/Latino	3
Male	1	Asian	1	Non-Hispanic/Non-Latino	8
Not Reported	2	Native American/Alaska Native	0	Not Reported	0
Other	0	Pacific Islander/Native Hawaiian	0		
		Multi Racial	0		
		Not Reported	0		
		Other	0		
		Unspecified	0		
		White	9		

4/25/2007 4:11:31 PM Page 1 of 2

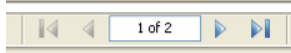
### Navigating, Saving, and Printing Your Report:

- To save an Adobe report, select the **Save A Copy** button  **Save a Copy** from the Adobe menu bar.

- To print the report, select the **print** icon. 

- To zoom in or zoom out on the report, select the **plus (+)** or **minus (-)** icon on your toolbar, or select the magnifying glass and click on your document. 

- To view additional pages of your report, click the page selector **arrows** at the bottom of the screen.



- If you would prefer to view the report in a separate window, hold down the SHIFT key and click the View Report button again.

Different versions of Adobe Reader or Acrobat may have these tools in a different location.

## REPORTS IN HTML

[Return to InfoNet](#)

# Reports

Office of Crime Victims Advocacy

Washington State Department of Social & Health Services  
CA Children's Administration

**Reports** Client Intake Summary HTML View Report

State Fiscal Year 2007

Quarter Quarter 1

## Client Intake Summary

**Agency Name: X Testing**  
FY 2007, Quarter 1: July 1, 2006 THROUGH September 30, 2006

Program Type	Clients
Sexual Assault	3
Domestic Violence	13
General Crimes	11

Domestic Violence					
Gender	Count	Race	Count	Ethnicity	Count
Female	10	African American, Black	2	Hispanic/Latino	3
Male	1	Asian	1	Non-Hispanic/Non-Latino	10
Not Reported	2	Native American/Alaska Native	0	Not Reported	0
Other	0	Pacific Islander/Native Hawaiian	0		
		Multi Racial	0		
		Not Reported	0		
		Other	0		
		Unspecified	0		
		White	10		

General Crimes					
Gender	Count	Race	Count	Ethnicity	Count
Female	8	African American, Black	1	Hispanic/Latino	3

**MENU BAR**

**HTML REPORT**

HTML is webpage format. This is a great tool for if you just wish to view a variety of reports quickly and do not need to save or print them. Depending on your computer's configuration, this report will default to being shown on the lower part of your screen.

### Navigating, Saving, and Printing Your Report:

HTML reports cannot be saved or printed except as any other webpage would be, using the menu bar of your internet browser. HTML reports are viewed as one long page, and may be navigated by scrolling down with the scrollbar.

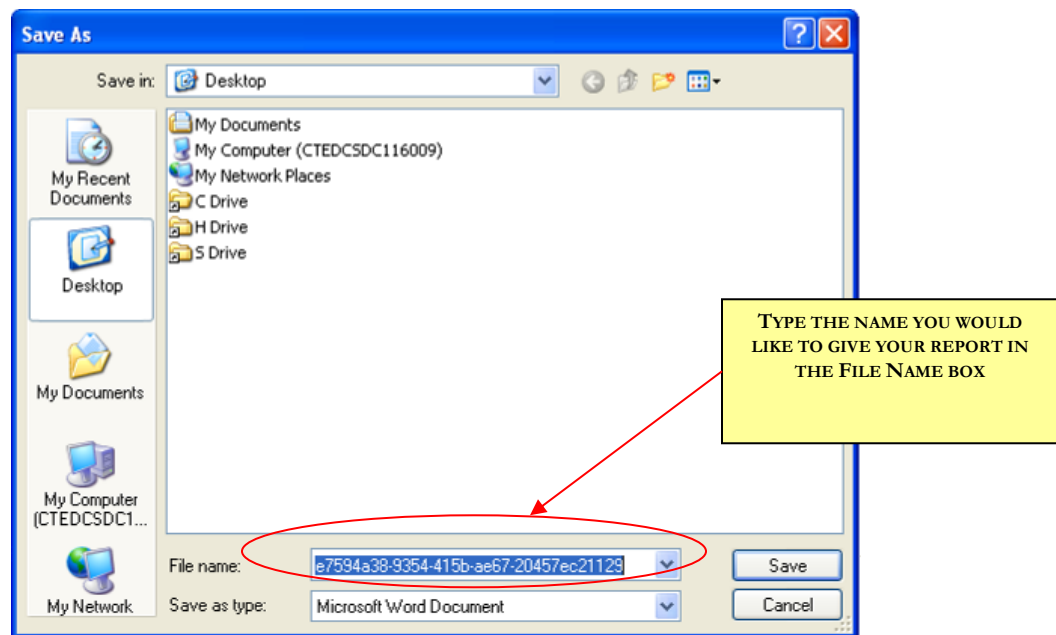
## REPORTS IN WORD

Depending on your computer's configuration, after selecting Word a message box will appear that looks similar to this one:

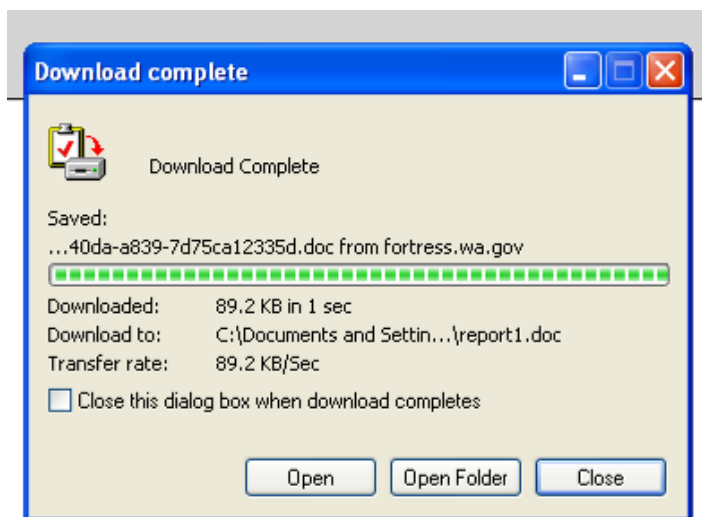


This message is just letting you know that InfoNet is trying to open the report you requested. Since this is an expected operation, and because InfoNet is a site that you are familiar with, it is okay to select either Open or Save.

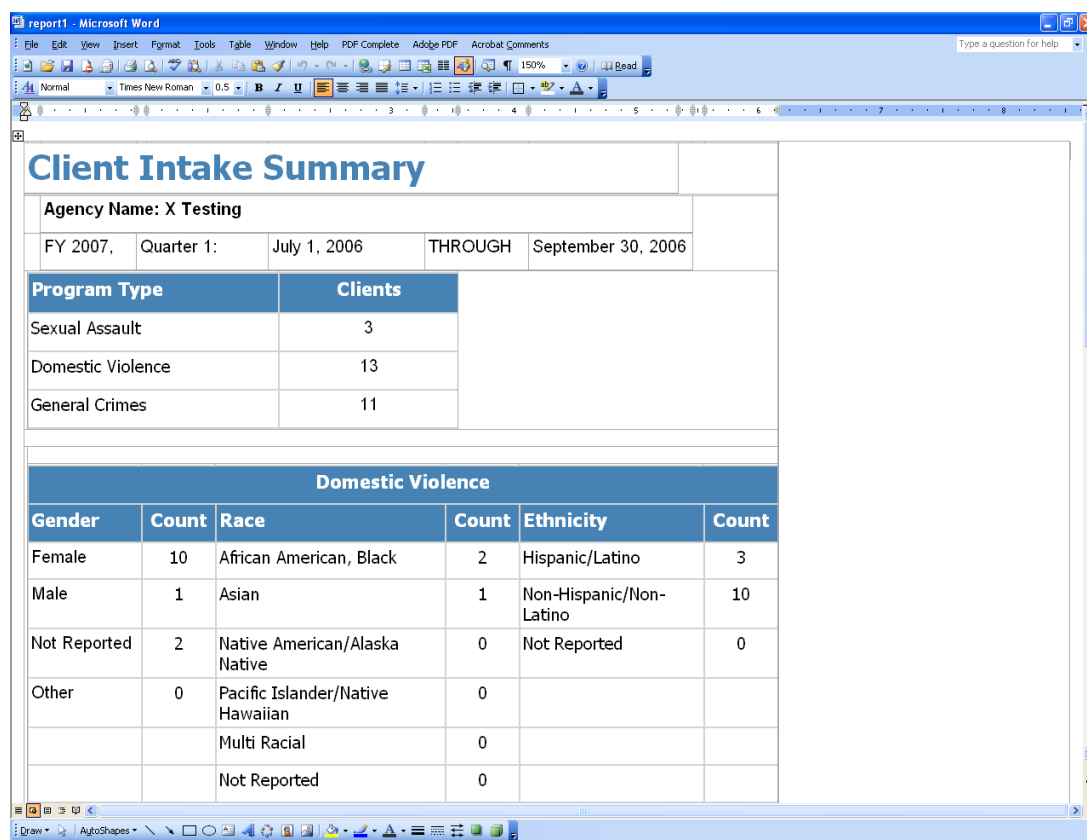
It is recommended that you select **Save** if you would like to use the report in Word. When you select Save, you will be prompted to select a file name. InfoNet will generate a name that is not very user friendly, comprised of a long series of letters and numbers, so it's a great idea to overwrite that file name with a name of your own choosing!



Once the document is saved, you may be prompted about whether or not you wish to open the document:



Select Open if you wish to view the document, or you can select Close and return to open the document in Word at a later time.



### Navigating, Saving, and Printing Your Report:

Once you have saved your report as a Word document, you can navigate, save, and print your report as you would any other Word document.

## REPORTS IN EXCEL

Depending on your computer's configuration, after selecting Word a message box will appear that looks similar to this one:




Much like downloading a report using Word, this message is just letting you know that InfoNet is trying to open the report you requested. It is okay to select either Open or Save.

When you select Open, the report will open as an Excel document in the lower half of your screen:

[Return to infonet](#)

# Reports

 **Office of Crime Victims Advocacy**

 **Washington State Department of Social & Health Services**  
**CA Children's Administration**

**Reports** Client Intake Summary **Excel** **View Report**

State Fiscal Year: 2007  
Quarter: Quarter 1

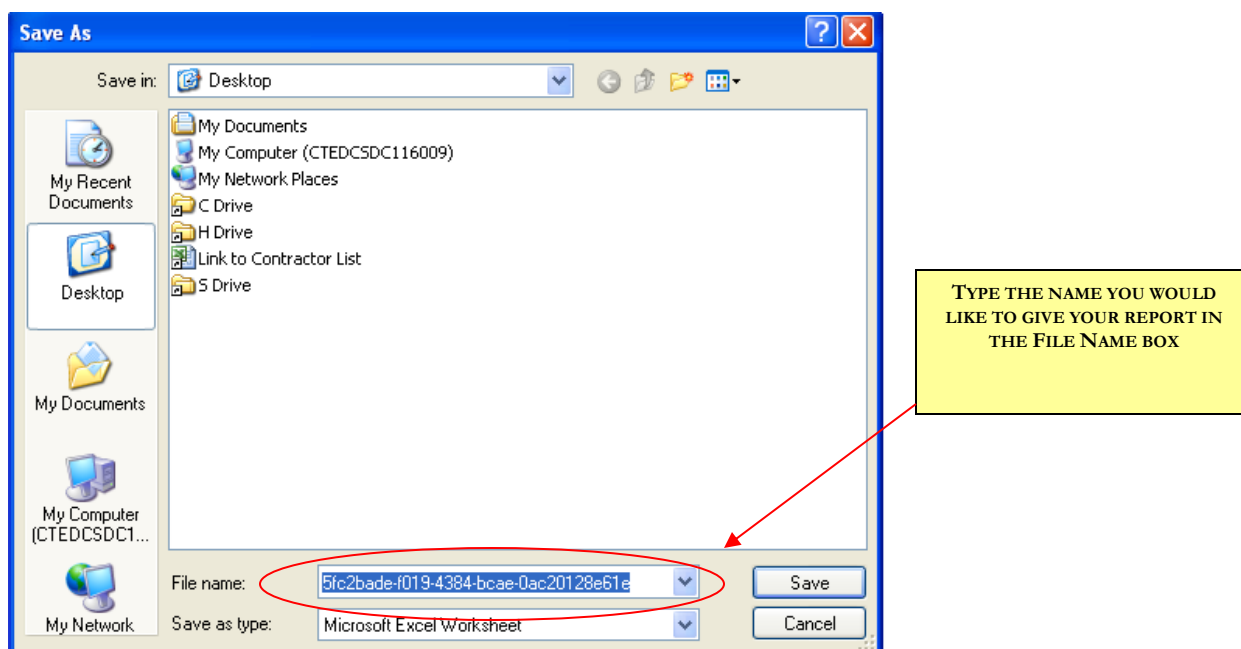
Client Intake Summary					
Agency Name: X Testing					
FY 2007, Quarter 1: July 1, 2006 THROUGH September 30, 2006					
Program Type	Clients				
Sexual Assault	3				
Domestic Violence	13				
General Crimes	11				
Domestic Violence					
Gender	Count	Race	Count	Ethnicity	Count
Female	10	African American, Black	2	Hispanic/Latino	3
Male	1	Asian	1	Non-Hispanic/Non-Latino	10
Not Reported	2	Native American/Alaska Native	0	Not Reported	0
Other	0	Pacific Islander/Native Hawaiian	0		
		Multi Racial	0		
		Not Reported	0		
		Other	0		
		Unspecified	0		
		White	10		
General Crimes					
Gender	Count	Race	Count	Ethnicity	Count
Female	0	African American, Black	1	Hispanic/Latino	0

Done

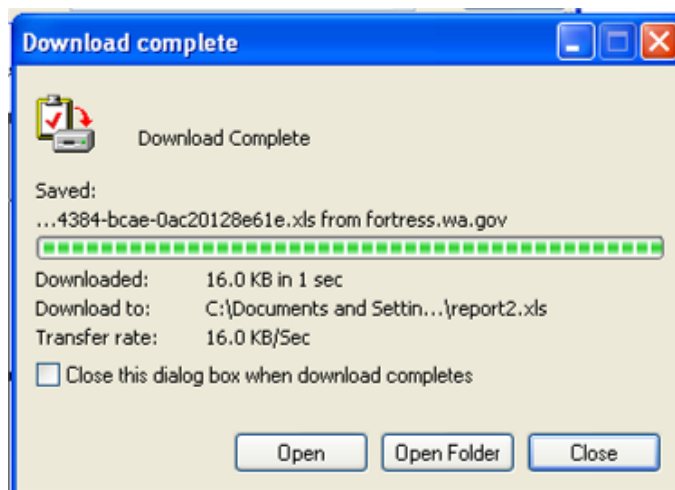
Trusted sites

This option is best if you wish to view what the report looks like, but does not give you the same options as saving the report as a separate file. If you wish to save or print the report, the easiest way to do that is to select Save from that message box. If you have already opened the report, simply click the View Report button again to receive that earlier message.

Just like when using the Word format, when you select Save, you will be prompted to select a file name. InfoNet will generate a name that is not very user friendly, comprised of a long series of letters and numbers, so it's a great idea to overwrite that file name with a name of your own choosing!



Once the document is saved, you may be prompted about whether or not you wish to open the document:



Select Open if you wish to view the report now, or you can select Close and return to open the report in Excel at a later time.



**Client Intake Summary**

Agency Name: Safeplace  
 FY 2007, Quarter 1: July 1, 2006 THROUGH September 30, 2006

Program Type	Clients
Domestic Violence	387
Sexual Assault	48

Gender	Count	Race	Count	Ethnicity	Count
Female	376	African American, Black	15	Hispanic/Latino	26
Male	6	Asian	19	Non-Hispanic/Non-Latino	345
Not Reported	4	Native American/Alaska Native	10	Not Reported	16
Other	1	Pacific Islander/Native Hawaiian	8		
		Multi Racial	8		
		Not Reported	13		
		Other	38		
		Unspecified	0		
		White	276		

Gender	Count	Race	Count	Ethnicity	Count
Female	40	African American, Black	0	Hispanic/Latino	1
Male	2	Asian	0	Non-Hispanic/Non-Latino	36
Not Reported	6	Native American/Alaska Native	0	Not Reported	11
Other	0	Pacific Islander/Native Hawaiian	0		
		Multi Racial	2		
		Not Reported	11		
		Other	2		
		Unspecified	0		
		White	33		

### Navigating, Saving, and Printing Your Report:

Once you have saved your report as an Excel document, you can navigate, save, and print your report as you would any other Excel document.

### A Note on Excel Format:

Currently, selecting Excel format will provide you with a report that is formatted similarly to the Adobe and Word versions. Our intention with this is to ultimately provide the Excel option for reporting raw data that your agency can then process into your own reports. While the full feature was not ready in time for the report roll-out, it will eventually provide a table of data that can be manipulated with other Excel features to create charts and graphs, or even imported into another database at your agency. This could be extremely useful for agencies that need to enter similar data into multiple sources.

---

## ANATOMY OF A REPORT: A FEW USEFUL FEATURES

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There are a few common features to every report that can be really useful.

### Client Intake Summary

Agency Name: X Testing

FY 2007, Quarter 1: July 1, 2006 THROUGH September 30, 2006

Program Type	Clients
Sexual Assault	3
Domestic Violence	13
General Crimes	11

Domestic Violence					
Gender	Count	Race	Count	Ethnicity	Count
Female	10	African American, Black	2	Hispanic/Latino	3
Male	1	Asian	1	Non-Hispanic/Non-Latino	10
Not Reported	2	Native American/Alaska Native	0	Not Reported	0
Other	0	Pacific Islander/Native Hawaiian	0		
		Multi Racial	0		
		Not Reported	0		
		Other	0		
		Unspecified	0		
		White	10		

General Crimes					
Gender	Count	Race	Count	Ethnicity	Count
Female	8	African American, Black	1	Hispanic/Latino	3
Male	1	Asian	1	Non-Hispanic/Non-Latino	8
Not Reported	2	Native American/Alaska Native	0	Not Reported	0
Other	0	Pacific Islander/Native Hawaiian	0		
		Multi Racial	0		
		Not Reported	0		
		Other	0		
		Unspecified	0		
		White	9		

4/25/2007 4:52:11 PM

Page 1 of 2

EVERY REPORT WILL SHOW THE DATES OF THE DATA IN THE REPORT AT OR NEAR THE TOP. THIS INFORMATION WILL LET YOU KNOW WHAT DATES WERE INCLUDED IN THE REPORT'S QUERY. THESE DATES ARE ALWAYS **INCLUSIVE**, MEANING THAT THEY INCLUDE BOTH THE FIRST AND LAST DATE OF THE TIME PERIOD IN THE QUERY.

AN EXTREMELY USEFUL FEATURE AT THE BOTTOM OF EVERY REPORT IS DATE AND TIME INFORMATION TO LET YOU KNOW WHEN THE REPORT WAS GENERATED.

INFO.NET REPORTS UPDATE AUTOMATICALLY AS SOON AS DATA IS ENTERED OR CHANGED. CONSEQUENTLY, YOUR REPORT INFORMATION CAN CHANGE DEPENDING ON WHEN THAT REPORT WAS DRAWN.

MANY REPORTS HAVE MORE THAN ONE PAGE OF INFORMATION. CHECK THE BOTTOM OF THE REPORT TO SEE HOW MANY PAGES YOUR REPORT INCLUDES.

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## ADMINISTRATIVE LEVEL REPORTS

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For Administrative users (users whose passwords allow you access to the Administrative Utility) there are two additional reports currently available in InfoNet. These are Administrative Level Reports, and are reports designed for information entered into the Administrative Utility. Currently, there are three basic reports available – a Staff Report, a Staff Training Report, and a Staff Services report.

To access the Administrative Level Reports, you must log into InfoNet and enter the Administrative Utility. Unlike the other InfoNet Reports, this can only be accomplished by users with an Administrative Password – users who are normally not able to enter the Administrative Utility cannot view Administrative Reports.

Washington State InfoNet System

Agency Name: X Testing

Program Type: Administrative Utility

User Name:

Password:

Enter

ENTER INFONET VIA THE ADMINISTRATIVE UTILITY TO VIEW ADMIN REPORTS.

Once in the Administrative Utility, select the link on the left hand side which says “Administrative Level Reports.”

domestic violence > victims of crime > sexual assault > welcome, Marcia Cross logout >

### Administrative Utility

Data Entry Administrative Utility Reports

Office of Crime Victims Advocacy

Washington State Department of Social & Health Services

CA Children's Administration

Agency Information

Staff Information

Funding for Staff

Contract/Grant Information

**Administrative Level Reports**

User Administration

Manage Client Records

Fields marked with an \* are required

\*Agency Name: X Testing

Address: 999 Main Street

City: Olympia

State: WA

ZIP: 98502

Telephone: (360) 555-1212

Fax Number: (360) 586-7176

Email: xttesting@example.

Number of FTEs: 6

Agency Annual Budget: \$586789

Program Annual Budget: \$189752

Number of Board Members: 12

Federal Employer ID: 99-9999999

Service Area:

Counties Served: Thurston

Legislative Districts: 14

Congressional Districts: 25

Judicial Districts: 36

VOCA Regions: 1

Select a County

Hide The Agency List

Add Service Region(s)

Submit Clear Cancel

SELECT THE ADMINISTRATIVE LEVEL REPORTS LINK TO VIEW ADMIN REPORTS

The Administrative Level Reports section looks very similar to the regular Report interface except there are only three reports to choose from: Staff Report, Staff Training Report, and Staff Services report. Select the type of report you wish to view, dates if appropriate, and the format and click the View Report button.

## STAFF REPORT

The Staff Report is just a quick list of information on all of the staff members you have entered into the system. It is simply a way to print out all of your staff information in one place without having to flip between individual staff records.

Staff Report for X Testing			
<b>Marcia Cross</b>			
<b>Personnel Type:</b>	Staff, Direct Service	<b>Department:</b>	Domestic Violence
<b>Title:</b>	Program Coordinator	<b>Start Date</b>	4/1/2006
<b>Address:</b>	100 Main Street Olympia WA 98502		
<b>Work Phone:</b>	360-555-1016	<b>Email:</b>	marciac@xtesting.org
<b>Terri Hatcher</b>			
<b>Personnel Type:</b>	Staff, Direct Service	<b>Department:</b>	Sexual Assault
<b>Title:</b>	Therapist	<b>Start Date</b>	8/5/2006
<b>Address:</b>	100 Main Street Olympia WA 98502		
<b>Work Phone:</b>	360-555-1717	<b>Email:</b>	terrih@xtesting.org
<b>Felicity Huffman</b>			
<b>Personnel Type:</b>	Staff, Direct Service	<b>Department:</b>	Sexual Assault
<b>Title:</b>	Program Advocate	<b>Start Date</b>	7/1/2003
<b>Address:</b>	100 Main St. Olympia WA 98502		
<b>Work Phone:</b>	360-555-1014	<b>Email:</b>	felicityh@xtesting.org
<b>Eva Longoria</b>			
<b>Personnel Type:</b>	Staff, Direct Service	<b>Department:</b>	Domestic Violence
<b>Title:</b>	Legal Advocacy Director	<b>Start Date</b>	7/1/2004
<b>Address:</b>	100 Main Street Olympia WA 98502		
<b>Work Phone:</b>	360-555-1017	<b>Email:</b>	eval@xtesting.org

5/3/2007 2:29:47 PM

Page 1 of 1

## STAFF TRAINING REPORT

The Staff Training Report provides you with a printable, formatted report of each staff member's trainings as they have been entered into InfoNet. Each staff or volunteer is shown on a separate page.

**Staff Training Report for X Testing**

**Eva Longoria**

**Title: Legal Advocacy Director**

<u>Training Date</u>	<u>Training Name</u>	<u>Training Type</u>	<u>Training Description</u>	<u>Training Hours</u>
7/1/2004	Legal Advocacy 101	Training	Legal Advocacy	16
7/15/2004	Advocacy Training	Training	Advocacy	24
7/31/2004	Protection Orders and You	Workshop	Legal Advocacy	6
8/16/2004	Police Interviewing Techniques Pros and Cons	Workshop	Legal Advocacy	4
9/14/2004	Disturbing Trends in Probation	Training	Legal Advocacy	16
<b>Total Training Hours For Eva Longoria:</b>				<b>66</b>

1 of 4

TO FLIP TO THE NEXT PAGE IN ADOBE FORMAT, CLICK THE ARROWS AT THE BOTTOM OF THE SCREEN.

## STAFF SERVICES REPORT

The Staff Services Report provides you with the most data of the three administrative level reports. This report shows all services, secondary services, and hotline calls within a designated time period, and splits those services out by staff member or volunteer. This way, agencies can review which staff members provided how many services in a given time period.

Services By Staff Report  
1/1/2009 through 12/31/2009

**Marcia Cross**

Primary Client Services

Program	Service	Entries	Hours	Clients
Domestic Violence	Civil Legal Advocacy	1	25	1
Domestic Violence	Crisis Counseling/Intervention	2	2.75	2
Domestic Violence	CVC Assistance	1	2	1
Domestic Violence	Emergency DV Shelter--DV Shelter Home	1	2	1
Domestic Violence	Hospital Response	1	1.25	1
Domestic Violence	Other (please specify)	1	1	1
Domestic Violence	TANF/Welfare Assistance	1	2.25	1

Current staff members/volunteers who provided no services will be shown with a message indicating “No services provided.” Staff members/volunteers who had not started with the agency during the report period, or who left the agency prior to the report period, will not be shown on the report.

## CUSTOM REPORTS

The report feature currently is relatively limited. We plan to roll out many more report features, including more fields and more detailed information, as enhancements to InfoNet are added. As you use this reporting feature, please let us know as you come up with your own ideas of what types of reports would be most useful to your agency, or what changes you would like to see to the report interface, the types of reports available, or anything else about InfoNet.

Until the expanded report function is available, please contact Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov) if you need more detailed or specific data, and she will be happy to work with you to provide you with a wide variety of customized reports on your data.

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## FREQUENTLY ASKED QUESTIONS ABOUT REPORTS

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1. **My DVLA report shows all zeroes and says “No DVLA Advocate Designated.” Why is that, and how do I fix it?**

The DVLA report contains information based on the services provided and clients assisted by **your agency’s specified DVLA staff**. If you have not designated who your DVLA staff member is, the report will not contain data. To correct this, indicate in the Administrative Utility which staff members are paid out of your DVLA contract using the Staff Allocation feature. Instructions for this can be found on page 2-5 of the InfoNet User’s Manual.

2. **Why don’t all of my agency’s legal advocacy services show up on our DVLA report?**

DVLA reports show only the services “paid for” by DVLA funds. This is determined based on staff members whose salary is funded by your DVLA contract. If you wish to view all of your legal advocacy services, including those services not funded solely by DVLA, you can view this in the Client Service Summary report.

3. **Where is the report for my DSHS DV Services to Marginalized Communities Report?**

Unfortunately, not all reports were available when we rolled out the Report Feature. While there is not currently an automated report for DSHS DV Services to Marginalized Communities, entering your data into InfoNet still fulfills your reporting requirement for that program. Data is pulled quarterly through a manual process and is submitted to your contract coordinator. We anticipate that a DSHS DV Services to Marginalized Communities report will be added to the InfoNet Report Feature within the next few months when we roll out enhancements.

4. **Do reports replace the financial reports and vouchers I submit to my contract coordinator?**

InfoNet reports are for victim services reports only. They do not replace financial reports, invoices, billings, or vouchers. If you are unsure whether a report you previously submitted on paper is still required, please contact your contract coordinator.

5. **How can I get InfoNet to generate data for my United Way or private funder?**

Other funders require different sets of data, so the first step would be to view the Client Intake Summary and Client Service Summary reports to see if this provides you with the information you need for your United Way or other funders’ reports. If these reports do not include the information you need, contact Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov) and she would be happy to work with you to do a custom query on your data for other funders’ reports.

6. **Can other agencies view my data? Can I view data belonging to other agencies?**

Each agency only has access to reports on their own data. This is also true for agencies that hold subcontracts with other agencies. Unless you have access to an agency’s data via password, you cannot view their reports without their permission. Once a reporting deadline has passed, data may be made available to other agencies through official reports, but data will never be made available at the record level to any agency other than your own.

7. **My DSHS Emergency Shelter report shows 100 clients, but I know only 30 women stayed in shelter. What’s going on?**



DSHS Emergency Shelter Reports refers to the contract that you receive from DSHS, not strictly to clients that stay in Shelter. Several “non-shelter” services are eligible for DSHS Emergency Shelter funding, such as Advocacy Based Counseling. If a client received eligible services, they are shown on this report regardless of if they physically stayed in shelter during the report period. If you have additional questions about the DSHS Emergency Shelter report, please contact your contract coordinator.

- 8. I ran a report this morning and ran the same report an hour later, and the numbers have changed. How could that happen?**

One of the great things about the InfoNet reporting system is that it automatically updates your reports as soon as your data is entered. Many agencies have multiple InfoNet users, and if someone is entering data for the same time period you are trying to view reports for, you may notice your report numbers changing over time. This is why report deadlines are still important; OCVA and DSHS will pull quarterly reports after a designated date to allow agencies to enter all of their data prior to the report being pulled.

- 9. Why do numbers for certain DV services, such as “Advocacy Based Counseling” appear different on different reports?**

**Why do the service categories on the DVLA report look different than the services shown in InfoNet?**

**Why doesn’t Safety Planning appear on the DSHS Emergency DV Shelter report?**

One of the things we encountered when building the InfoNet system was that many programs have different terminology for different services, particularly with Domestic Violence programs and contracts. The services listed on DVLA reports are different than those listed on DSHS Emergency Shelter reports, and both of those reports have different services than those listed on STOP grant reports.

To make InfoNet as user friendly as possible, the InfoNet User Group, in collaboration with OCVA and DSHS staff, determined a list of services that users could enter into InfoNet. The results of those services could then be combined to match the criteria for various reports. An example would be the service Safety Planning. While this is counted as a separate service for DVLA reports, it is considered part of “Advocacy Based Counseling” for DSHS Emergency DV Shelter reports. Therefore, the results are added together for the latter, but shown separately for the former. If you wish to see individual services listed out and the amounts for each, you can always do so by viewing the Client Service Summary.

- 10. I ran a report that said our agency had 25 clients during the quarter in the demographic section of my report, but shows over 50 clients in the services section in the same report. How could I serve more clients than I had?**

Many program reports ask for the number of “new” clients in a report period. The number of “new” clients is generated based on the client’s First Contact Date. Only new clients are counted so that client counts don’t get duplicated from quarter to quarter – if only new clients are counted, then no client gets counted twice. However, services may be provided to both “new” clients and “continuing” clients, or clients whose First Contact Date was prior to the report period. Because the first is a count of “new” clients, and the second may also include “continuing” clients, you may end up with reports that show more clients being served than are counted as “new.” This is perfectly appropriate.

**11. Why is my report blank?**

The main reason reports are blank is that there is no data entered for that report. This may be because you are trying to view a report for a program your agency doesn't have (such as Crime Victim Service Centers) or because you are viewing a time period for which no data has been entered.

**12. I know my agency has entered more services than are showing up on my reports. What might have gone wrong?**

One big reason services may not show up on a given report is if the service entries were dated incorrectly. InfoNet looks at the date of the service entry to determine which report it should be shown on. If you entered services that occurred on "3/1/2007" on the 15<sup>th</sup> of April, entering a service date of "4/15/2007" would place those services on the April report, not the March report where they belong.

If this happens, you may always go back and change the dates on service entries yourself. If you are unsure which entries have the incorrect dates, please contact Mary Baldwin and she will be happy to pull a list of services and dates for your InfoNet data so that you can go back and make corrections.

**13. My Client Intake report shows that we had 100 clients this quarter, but our Service Report shows we only served 25. How is that possible?**

As you probably know, Direct Services must always be connected to an existing Client. Consequently, users enter Intakes before they enter Services. However, if you do not go back and enter services provided to that client, the Intake alone does not indicate the client was served. If you see that you have large numbers of Client Intakes and small numbers of services, you most likely have clients entered into the system with no services attached. You can go back and enter those services to make your reports more accurate. If you need a list of the Client Intakes your agency has entered that do not have services attached, please e-mail Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov) and she would be happy to send you such a list.

**14. The number of bednights shown on my DSHS Emergency DV Shelter report is much, much too high. What has gone wrong, and how do I correct it?**

Bednights are calculated by InfoNet using the Shelter Began and Shelter Ended dates for primary and secondary clients. When a client enters shelter, and the Shelter Began date is entered, you may leave the Shelter Ended date blank while the client is still in shelter, and InfoNet will calculate the number of bednights the client has stayed to date (or until the end of the report period for the report you are looking at!) However, if you forget to go back and enter that Shelter Ended date, InfoNet continues to assume the client is still in shelter. Over time, as this happens to more clients, you will begin to see dramatically inflated bednight totals. If you suspect this could be the case, you can always contact Mary Baldwin and have her send you a list of the shelter clients for your agency that have no Shelter Ended date listed, so that you can check it for accuracy and enter any exit dates that may have been forgotten.

**15. How can I print a list of the Client ID numbers in the InfoNet system?**

E-mail Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov) and she would be happy to send you a list of the Client ID numbers for your agency. A query of this nature can usually be accomplished very quickly, and can help enormously in finding a client whose ID number was entered incorrectly, or in determining if data entry on intakes is up-to-date.

**16. Are reports confidential? Can my contract coordinator view my report?**

Contract coordinators may view your aggregate data via reports. However, these reports are not considered “official” until after your official reporting deadline, as outlined in your contract or grant. It is understood that your data may be incomplete up until the date the report is due. Your contract coordinator may view your report to follow up with you about a particular technical assistance issue, or for purposes of discussion, but other than that, your data is not used by anyone outside your agency until after the report deadline.

**17. Many of these reports look the same. What’s the difference, and why do we need so many variations on the same thing?**

Many of the reports available in the Report Feature are based off of pre-existing reports from various data collection systems that were in place prior to InfoNet rollout. Some of these reports continue to be available in the same format, and may look redundant in places, but the purpose of these is to be able to continue to have an unbroken chain of comparative data across the years.

**18. When will new features be rolled out?**

New features will be rolled out to InfoNet on a quarterly basis. We schedule roll outs so that they happen after major reporting deadlines, so as not to interfere with the system during the heaviest traffic times. Enhancements for state fiscal year 2010 are scheduled for:

- August, 2009
- October, 2009
- December, 2009
- April, 2010
- June, 2010

If you have additional questions about the Report Feature, please contact Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov).

## 9. TROUBLESHOOTING

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### CONTACT INFORMATION

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Need help with logging into InfoNet, finding a record, printing a report, or navigating through the system?  
For assistance with the technical elements of InfoNet, please contact:

TECHNOLOGY, SYSTEM USE AND NAVIGATION QUESTIONS:

**Mary Baldwin**  
**Office of Crime Victims Advocacy**  
**E-mail: [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov)**  
**Phone: (360) 725-2887**

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### PROGRAM AND POLICY QUESTIONS

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Need help with service definitions, identifying which choice to select from a pull-down menu, whether a client counts as a DV Shelter client, or understanding your cost allocation of staff member's time? Please contact the appropriate program contact for policy questions about InfoNet:

#### **DV EMERGENCY SHELTER FUNDS**

**Susan Hannibal**  
**DSHS Children's Administration**  
**E-Mail: [hsus300@dshs.wa.gov](mailto:hsus300@dshs.wa.gov)**  
**Phone: (206) 923-4910**

#### **DV MARGINALIZED SERVICES**

**Maureen Kelly**  
**DSHS Children's Administration**  
**E-mail: [kelm300@dshs.wa.gov](mailto:kelm300@dshs.wa.gov)**  
**Phone: (360) 902-7901**

#### **SEXUAL ASSAULT, VICTIMS OF CRIME, STOP GRANT, AND DVLA**

**Please contact your program coordinator at**  
**Office of Crime Victims Advocacy**  
**E-mail: [ocva@cted.wa.gov](mailto:ocva@cted.wa.gov)**  
**Phone: 1-866-857-9889**

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## I CAN'T LOG INTO INFO.NET

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If you have received your User Name and Password via e-mail from Mary Baldwin, first double check to make sure you are entering the information correctly. If you have misplaced or lost your User ID and Password information, please e-mail [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov) and she can resend your information to your e-mail address. For security purposes, password information will not be given out over the telephone.

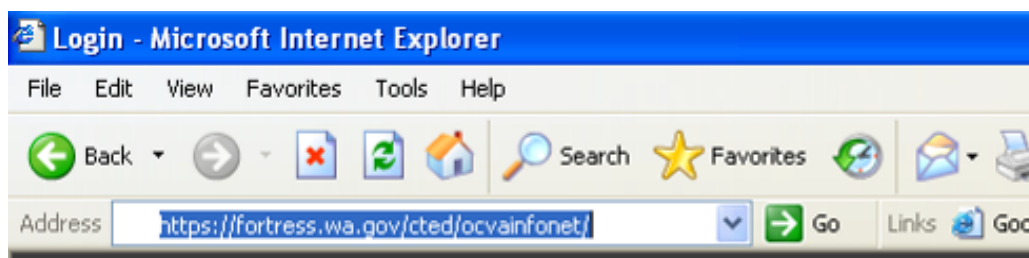
If you have your User ID and Password and they do not appear to be working, try the following troubleshooting tips:

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## FINDING THE INFO.NET WEBSITE

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The InfoNet website is <https://fortress.wa.gov/cted/ocvainfonet>. This was sent in a link format with your confirmation e-mail, and most people will be able to click on the link and be taken directly to the InfoNet site. If your e-mail program/browser does not allow you to click on the link, try copying and pasting the link directly into the address bar of your browser, like so:



If you receive a message for “results not found” or “Your search did not match any documents,” you may be entering the information into a search engine like Google or Yahoo rather than into the address bar. The address bar is located at the top of your browser.

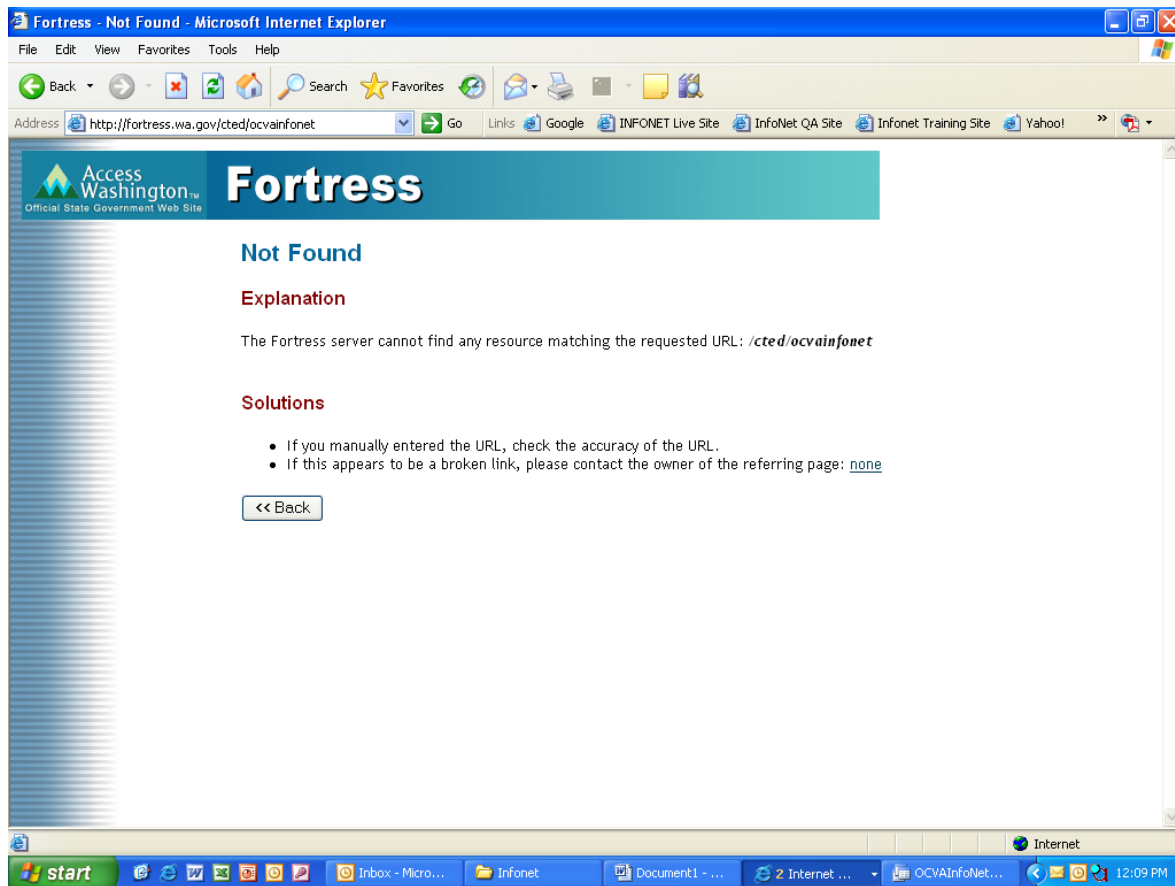
Please note: InfoNet is taken offline four times a year for maintenance and uploading enhancements and new features. All users are notified via e-mails both the day before and the day of system outage. However, if you have not updated your e-mail address with the InfoNet Administrator, you may not receive these notices, and the outage may appear unexpectedly. Be sure that the InfoNet Administrator has your most up-to-date e-mail so that you can receive these notices and explanations of new InfoNet features and upgrades by e-mail Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov).

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## FORTRESS NOT FOUND

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If you manually enter the address and receive the following message:



If you receive the message above, you may have left the “s” out of the first part of the website address. The correct address is exactly as follows:

<https://fortress.wa.gov/cted/ocvainfonet>

If you are still unable to find the website, check to make sure that your computer has internet access and that there is no problem connecting to the internet.

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## COMMON LOG-IN MISTAKES

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Once you have found the InfoNet site, you may still experience some problems logging on. Below are several common problems people encounter when trying to log in to InfoNet:

### SELECTING YOUR AGENCY NAME

If you've determined that you are on the correct site (you see many, many agency names listed in the Agency Name box) double check that you are entering your correct Agency Name in that box. Many users forget to select their agency name when entering their User ID and Password.

### SELECTING THE CORRECT PROGRAM TYPE

Not every user is authorized for every program type. In the e-mail that you received your User Name and Password, you will see which program types your account is authorized for. If you try to use your User ID and Password for another program type, you cannot log on. If you need to upgrade your account to include additional program types, contact Mary at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov) and she can set this up for you.

### ENTER YOUR USER ID AND PASSWORD IN THE CORRECT ORDER

Some users have accidentally entered their password as their User ID and their User ID as their password. If you do this, the system will not let you log in. Double check your original confirmation e-mail to make sure that your user ID and password are correct.

### ENTER YOUR PASSWORD IN THE CORRECT CASE

Passwords in InfoNet are case sensitive. This means that if your password is "Safety" with a capital S, and you type in SAFETY or safety or SAFeTy, the system will not let you log on. Double check to make sure that your password is being entered in the correct case, and that your CAPS LOCK key is not on.

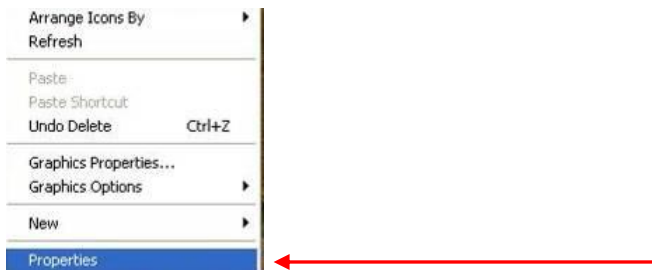
If none of these troubleshooting tips solve your problem, please contact Mary Baldwin at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov) or at 360/725.2887 and she will be happy to help you.

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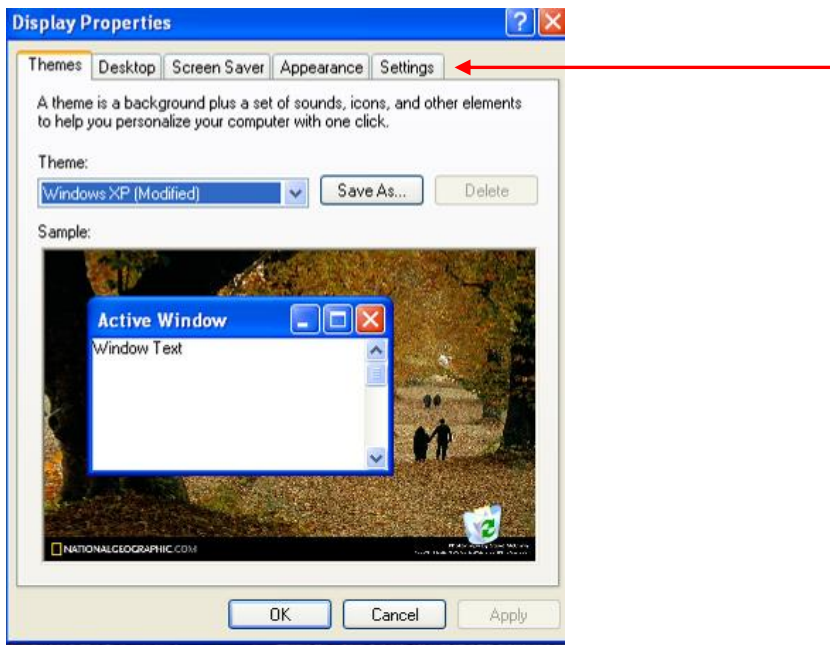
## TOO MUCH SCROLLING?

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If you have to scroll across the screen to see all of the fields in InfoNet, you may be able to resolve the issue by **adjusting your display resolution**. To do this, close or minimize any open programs, then right click your mouse on your desktop. You should see the following box appear:

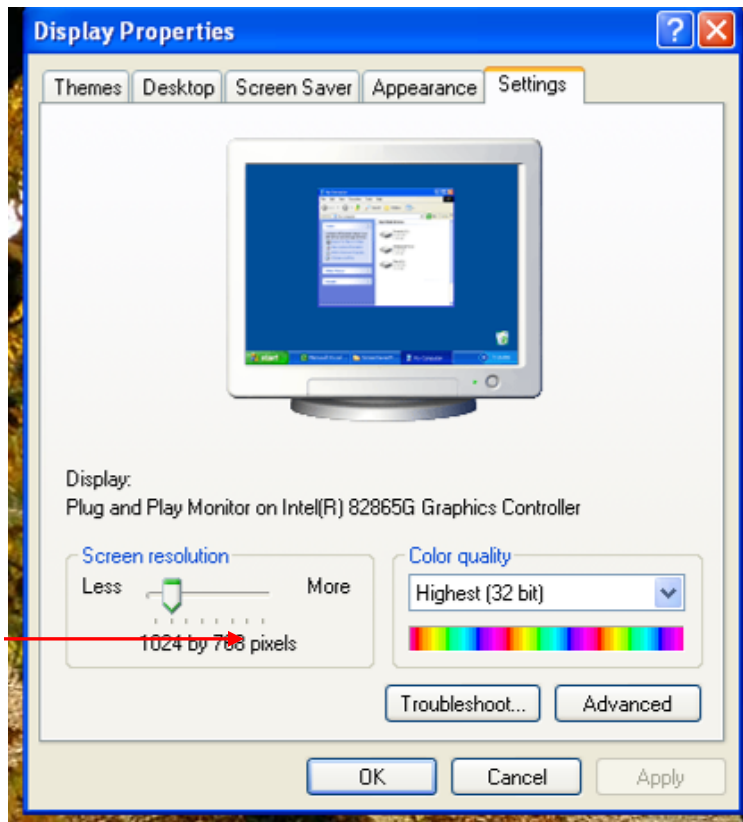


Select Properties. The following window appears:



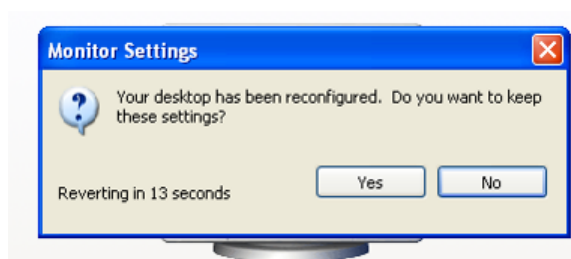
Select the Settings Tab at the top.





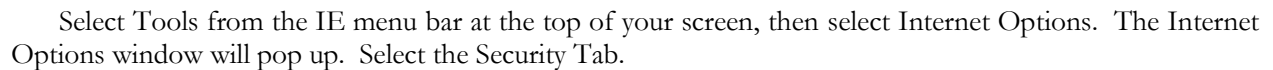
On the left hand side of the Settings page, you should see a slider bar for Screen Resolution. Adjust the slider bar by moving it to the right until the resolution is approximately 1024 by 768. (The specific numbers may vary according to your monitor type and dimensions)

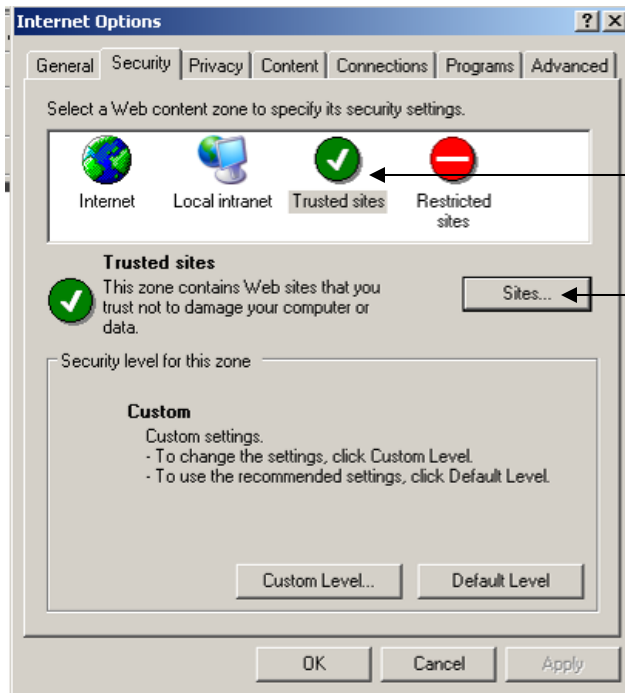
Click Apply to apply the changes. Your monitor may go black for a moment as the changes take effect, and then you will see the following prompt:



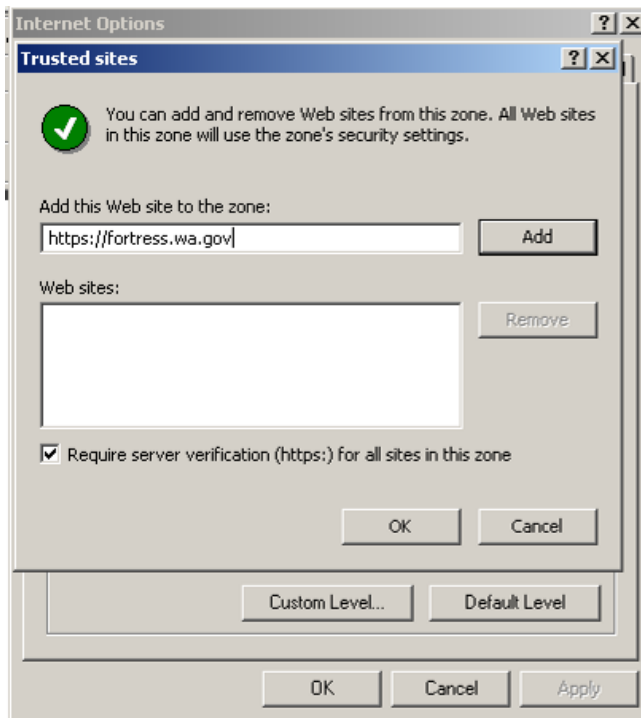
Select Yes to keep the changes. You may go back and undo these changes or adjust them to your preference, at any time.

If you receive frequent and unexplained Runtime errors, your internet browser may be blocking some of the script InfoNet uses to do its internal functions. To prevent these errors, you may need to add InfoNet to your browser's list of trusted sites.





(2) Select Trusted Sites and then click the Sites button.



(3) Enter <https://fortress.wa.gov> in the space to “Add web site to this zone” and click the Add button. When you’re done, click OK., and OK to exit.

# 10. INDEX

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- Advocacy-Based Counseling..... 2-13, 11-22  
Bednights .....6-4, 8-61, 8-96  
Cases... 1-1, 1-4, 1-6, 2-3, 2-5, 3-1, 3-3, 3-4, 4-9, 4-10,  
4-13, 4-18, 4-23, 4-35, 5-7, 5-9, 6-22, 6-24, 7-3,  
7-9, 7-13, 7-18, 7-30, 7-36, 7-40, 7-42, 7-44, 8-  
54, 8-96, 11-4, 11-5, 11-6, 11-7, 11-14, 11-15,  
11-17, 11-18, 11-19  
Child Care..... 2-13, 11-20  
Children .. 4-11, 4-21, 4-25, 4-31, 4-32, 4-33, 5-3, 9-1,  
11-4, 11-5, 11-6, 11-7, 11-9, 11-11, 11-14, 11-15,  
11-19  
Client ID..... 3-1, 3-3, 3-4, 4-1, 4-6, 4-9, 4-14, 8-96  
Client Intake..1-6, 1-10, 3-2, 3-3, 3-4, 3-6, 4-1, 4-2, 4-  
3, 4-4, 4-5, 4-9, 4-10, 4-20, 4-21, 6-1, 6-4, 6-19,  
6-23, 6-25, 7-1, 7-2, 8-56, 8-59, 8-61, 8-69, 8-70,  
8-94, 8-96, 1  
Client Type .....3-5, 4-7, **4-23**, 8-69, 8-70  
Clients.1-1, 1-3, 1-6, 1-10, 1-11, 1-12, 1-13, 2-1, 2-13,  
3-1, 3-2, 3-3, 3-4, 3-5, 3-6, 4-1, 4-2, 4-3, 4-4, 4-5,  
4-6, 4-7, 4-8, 4-9, 4-10, 4-11, 4-12, 4-13, 4-15, 4-  
16, 4-17, 4-18, 4-20, 4-21, **4-22**, **4-23**, 4-24, 4-25,  
4-26, 4-28, 4-29, 4-31, 4-32, 4-33, 4-35, 5-1, 5-2,  
5-3, 5-4, 5-5, 5-6, 5-7, 5-9, 5-10, 5-11, 5-12, 6-1,  
6-2, 6-3, 6-4, 6-5, 6-6, 6-18, 6-19, 6-20, 6-21, 6-  
22, 6-23, 6-24, 6-25, 7-1, 7-2, 7-4, 7-5, 7-11, 7-  
15, 7-20, 7-30, 7-36, 7-40, 7-42, 7-44, 8-56, 8-57,  
8-59, 8-61, 8-62, 8-68, 8-69, 8-70, 8-72, 8-94, 8-  
95, 8-96, 9-1, 11-3, 11-5, 11-6, 11-7, 11-8, 11-20,  
1  
Contracts. 1-8, 1-9, 2-1, 2-8, 2-10, 2-11, 2-12, 2-13, 3-  
4, 4-7, 4-15, 4-33, 6-1, 7-1, 8-56, 8-57, 8-58, 8-  
59, 8-61, 8-62, 8-64, 8-94, 8-95, 8-97  
Coordinated Community Response.....1-11, 7-1, 7-22  
Core Services.....11-1, 11-2  
Crime Type.....3-5, 4-7, 4-11, 4-19  
Crime Victim Service Center.....8-59, 8-96  
Crisis Counseling.....11-20  
Crisis Intervention 1-10, 6-1, 7-2, 7-4, 7-9, 7-10, 7-12,  
7-13, 7-14, 7-16, 7-18, 7-19, 7-21, 8-70, 8-72, 11-  
1, 11-2, 11-4, 11-5  
CSAPs ..... 1-10, 2-13, 6-18, 7-30, 8-69, 8-72, 11-15  
Culturally/Linguistically Appropriate Techniques...8-  
68  
CVC .....2-13, 11-7, 11-15, 11-20  
Delete... 1-6, 1-7, 2-3, 2-8, 2-9, 2-12, 4-13, **4-22**, 5-12,  
6-21, 7-32, 7-35, 7-38, 7-39, 7-41, 7-43  
Direct Services.....2-8, 6-1, 6-2, 6-3, 6-6, 6-22, 6-24, 7-  
33, 8-56, 8-68, 8-96  
Domestic Violence ...1-4, 1-8, 1-9, 1-11, 2-1, 3-3, 3-4,  
3-5, 4-3, 4-7, 4-10, 4-20, 4-26, 4-31, 6-1, 6-2, 7-  
22, 7-24, 8-53, 8-56, 8-57, 8-61, 8-62, 8-95, 11-  
17, 11-18, 11-20, 11-21, 11-22  
DSHS... 1-9, 2-3, 2-8, 2-11, 2-12, 2-13, 3-4, 4-7, 4-15,  
6-1, 8-61, 8-94, 8-95, 8-96, 9-1  
DVLA ..... 8-62, 8-94, 8-95, 9-1  
Editing ...4-22, 4-28, 4-29, 4-30, 4-32, 4-33, 4-34, 5-9,  
5-11, 5-12, 7-32, 7-38, 7-39, 7-41, 7-43  
Emergency DV Shelter..... 6-1, 6-4, 8-61, 8-95, 8-96  
Employment Assistance ..... 11-21  
Error Messages..1-4, 1-7, 2-3, 2-8, 2-9, 4-6, 4-9, 4-30,  
4-34, 5-12, 6-21, 7-3, 7-10, 7-14, 7-19, 7-32, 7-  
38, 7-39, 7-41, 7-43, 8-62  
Ethnicity ..... 3-4, 3-6, 4-7, 4-20, 4-28, 4-32  
Excel ..... 8-78, 8-85, 8-86, 8-87  
Forms. 1-6, 2-3, 3-1, 4-6, 4-10, 4-20, **4-22**, 4-29, 4-32,  
6-1, 6-4, 6-19, 6-23, 6-25, 7-2, 7-3, 7-9, 7-13, 7-  
18, 7-30, 7-40, 7-42, 7-44, 8-69, 11-20, 1  
General Advocacy.....2-13, 6-18, 6-19, 11-1, 11-2  
Grants 1-9, 2-1, 2-11, 2-12, 2-13, 3-4, 3-5, 4-12, 4-26,  
5-10, 5-11, 6-1, 7-22, 7-24, 7-28, 8-95, 9-1  
Homeless..... 3-5, 4-8  
Hotline. 1-11, 1-12, 1-13, 2-13, 6-1, 7-1, 7-2, 7-3, 7-5,  
7-9, 7-10, 7-12, 7-13, 7-14, 7-16, 7-18, 7-19, 7-21  
Hours of Service ..... 4-29, 4-33, 7-34, 8-57  
Housing Assistance ..... 11-21  
HTML..... 8-78, 8-82  
Income..... 2-12, 4-2, 4-3, 4-4, 4-15, 4-16  
Information and Referral. 1-11, 1-12, 1-13, 4-17, 7-2,  
7-3, 7-4, 7-9, 7-10, 7-12, 7-13, 7-14, 7-16, 7-18,  
7-19, 7-21, 8-70, 8-72, 11-1, 11-2, 11-5, 11-6, 11-  
7  
Interface1-8, 1-9, 1-10, 1-11, 1-12, 1-13, 2-1, 4-3, 4-4,  
4-5, 4-6, 4-7, 4-10, 4-15, 4-17, 4-19, 4-20, 4-21,

4-23, 4-25, 4-26, 4-27, 4-31, 5-1, 6-2, 6-18, 6-20, 7-2, 7-22, 7-24, 7-30, 7-33, 7-40, 7-42, 7-44, 8- 53, 8-56, 8-90, 8-93	88, 8-89, 8-90, 8-91, 8-93, 8-94, 8-95, 8-96, 8-97, 9-1, 11-1, 11-14, 11-19
Legal Advocacy...2-13, 5-9, 8-94, 11-1, 11-2, 11-7, 11- 22	SA History..... 4-2, <b>4-23</b> , 4-24
Mandatory Data 1-7, 1-9, 2-2, 2-4, 2-11, 3-4, 3-5, 3-6, 4-1, 4-6, 4-7, 4-9, 4-10, 4-15, 5-3, 7-2, 7-3, 7-4, 7-9, 7-10, 7-13, 7-14, 7-18, 7-19, 7-24, 8-94, 11- 3, 11-4, 11-5, 11-6, 11-7, 11-13, 11-14, 11-17, 11-19, 11-20, 11-21, 1	Safe Home ..... 6-4, 11-21
Marginalized Communities..6-20, 6-21, 8-67, 8-68, 8- 69, 8-94, 9-1, 11-1, 11-16, 11-17, 11-18	Safety Planning..... 8-95, 11-20
Medical Advocacy ... 2-13, 6-1, 8-72, 11-1, 11-2, 11-4, 11-6, 11-22	Search.. 1-6, 3-3, 6-22, 6-24, 7-30, 7-36, 7-40, 7-42, 7- 44
Not Applicable..... 3-6, 4-8, 4-11, 4-12	Secondary Victims 3-6, 4-2, 4-27, 4-29, 4-30, 8-69, 8- 70, 8-72, 11-13
Not Reported... 3-4, 3-5, 3-6, 4-7, 4-10, 4-11, 4-12, 4- 21, 4-28, 4-32	Service Definitions ..... 9-1, 11-1, 11-20, 11-23
Offenders.... 3-3, 3-6, 4-2, 4-3, 4-4, 4-5, 4-12, 4-19, 4- 20, 4-21, <b>4-22</b> , 5-5, 5-9, 5-12, 11-3, 11-14, 11-19	Sexual Assault1-4, 1-8, 1-9, 1-10, 2-1, 3-3, 3-5, 4-2, 4- 3, 4-7, 4-10, 4-15, 4-17, 4-20, 4-21, 4-23, 4-25, 4- 26, 4-27, 5-1, 5-3, 6-1, 6-2, 6-18, 6-20, 7-9, 7-13, 7-18, 7-22, 7-30, 7-33, 7-40, 7-42, 7-44, 8-53, 8- 55, 8-56, 8-57, 8-67, 8-68, 8-69, 8-70, 8-71, 8-72, 8-73, 9-1, 11-1, 11-2, 11-3, 11-4, 11-5, 11-6, 11- 7, 11-8, 11-9, 11-10, 11-11, 11-13, 11-15, 11-17, 11-18
Optional Data 2-4, 2-9, 2-12, 3-4, 4-10, 4-11, 4-12, 4- 13, 4-15, 4-21, 4-25, 4-27, 4-28, 5-1, 5-2, 5-4, 5- 6, 5-9, 5-10, 6-3, 6-18, 6-22, 6-25, 7-3, 7-4, 7-10, 7-14, 7-19, 1	Shelter. 2-13, 4-25, 4-33, 6-4, 6-5, 8-61, 8-94, 8-95, 8- 96, 9-1, 11-21
Passwords ..... 1-1, 1-3, 1-4, 1-5, 2-2, 8-89, 8-94	Shelter Home..... 6-4, 11-21
Peer Support Group ..... 8-68, 11-17	Specialized Services .. 1-10, 6-18, 6-20, 8-72, 11-1, 11- 12
Police ..... 5-3, 5-4, 5-5, 5-12, 11-7	Staff Information1-3, 2-1, 2-4, 2-5, 2-8, 4-29, 4-33, 6- 3, 6-19, 6-21, 6-23, 6-25, 7-25, 7-29, 7-34, 8-90
Presenting Issues ..... 4-3, 4-25	Staff Report..... 8-89, 8-90
Prevention1-10, 2-13, 6-1, 7-1, 7-30, 7-31, 7-32, 7-36, 7-37, 7-38, 7-40, 7-41, 7-42, 7-43, 7-45, 7-47, 8- 71, 8-73, 11-1, 11-2, 11-9, 11-10, 11-11, 11-18	Staff Training..... 1-9, 2-9, 8-89, 8-90, 8-91
Program Support.....1-10, 7-33, 7-34	Staff/Volunteer field4-29, 4-33, 6-3, 6-19, 6-21, 6-23, 6-25, 7-3, 7-9, 7-13, 7-18, 7-34
Prosecution..... 5-6, 5-7, 5-8, 5-9	Stalking..... 4-7, <b>4-23</b> , 4-25
Protection Orders ..... 5-10, 5-11, 5-12	STOP Grant ...2-11, 3-5, 4-12, 4-26, 5-10, 7-22, 7-24, 7-26, 7-27, 7-28, 8-95, 9-1
Publications .....1-11, 7-1, 7-24, 7-28, 7-29	System Coordination 7-33, 7-34, 7-35, 11-1, 11-2, 11- 10
Race ..... 3-4, 3-6, 4-6, 4-7, 4-20, 4-28, 4-32	Therapy.4-23, 6-1, 6-19, 6-19, 11-1, 11-12, 11-14, 11- 15, 11-16, 11-19
Referrals. 1-10, 4-2, 4-3, 4-4, 4-5, 4-17, 4-18, 7-2, 7-3, 7-4, 7-9, 7-13, 7-18, 7-22, 7-23, 11-3, 11-6, 11-15	Trainings1-1, 1-11, 2-1, 2-9, 7-24, 7-25, 7-26, 7-27, 7- 28, 8-90, 11-3, 11-4, 11-5, 11-6, 11-7, 11-13, 11- 14, 11-19
Reports... 1-1, 1-8, 2-3, 3-4, 3-5, 4-7, 4-16, 4-21, 4-26, 5-2, 5-4, 5-6, 5-10, 5-11, 5-12, 6-1, 7-1, 7-24, 7- 28, 7-29, 7-39, 8-53, 8-54, 8-55, 8-56, 8-57, 8-58, 8-59, 8-60, 8-61, 8-62, 8-63, 8-64, 8-65, 8-66, 8- 67, 8-68, 8-69, 8-70, 8-71, 8-72, 8-73, 8-78, 8-79, 8-80, 8-81, 8-82, 8-83, 8-84, 8-85, 8-86, 8-87, 8- 88, 8-89, 8-90, 8-91, 8-93, 8-94, 8-95, 8-96, 8-97, 9-1, 11-1, 11-14, 11-19	Troubleshooting..... 9-1
	Unspecified.3-4, 3-5, 3-6, 4-6, 4-7, 4-8, 4-10, 4-11, 4- 12, 4-21, 4-28, 4-32
	VOCA.....1-9, 2-3, 4-4, 9-1
	Word .....8-78, 8-83, 8-84, 8-85, 8-86, 8-87, 1

# 11. SERVICE DEFINITIONS

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Washington State  
Department of Community Trade and Economic Development  
Office of Crime Victims Advocacy

## State of Washington Sexual Abuse/Assault Services Standards

FOR

### **Core Services for Community Sexual Assault Programs Only \***

Information and Referral  
Crisis Intervention  
Legal Advocacy  
Medical Advocacy  
General Advocacy  
System Coordination

Prevention: Social Change  
Prevention: Information and  
Awareness  
Prevention: Building Skills

### **Specialized Services\***

Support Group  
Therapy  
Medical Social Work

### **Services for Marginalized Communities**

Community Organizing  
Community Responding  
Therapy

Fiscal year 2007

\*From the Final Report of the Washington State Sexual Assault Services Advisory Committee, June 1995  
March 1999, February 2002, July 2003, January 2004

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## **SEXUAL ASSAULT CORE SERVICES**

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*Provided by Accredited Community Sexual Assault Programs*

**Information and Referral**

**Crisis Intervention**

**General Advocacy**

**Medical Advocacy**

**Legal Advocacy**

**System Coordination**

**Prevention: Social Change**

**Prevention: Information and Awareness**

**Prevention: Building Skills**

	INFORMATION AND REFERRAL
<b>Definition</b>	Responding 24 hours a day in person or by phone to direct requests for information or assistance related to sexual abuse/assault.
<b>Goal</b>	To provide sexual abuse/assault related information and resources.
<b>Duration</b>	Usually one time.
<b>Activities</b>	Assist caller/client in evaluating what is needed Provide information verbally or in writing about available resources/services
<b>Service Recipients</b>	Any caller, but typically, <ul style="list-style-type: none"> <li>• Non-offending parents of child victims</li> <li>• Victims</li> <li>• Significant others who require assistance in order to address their own reactions to the victimization and to effectively support the victim</li> <li>• Those whose work brings them into contact with people who have been victimized: health care, mental health, education, law enforcement, legal, social service personnel</li> <li>• Offenders or their families</li> </ul>
<b>Qualifications</b>	All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.  Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.

March 1999



	CRISIS INTERVENTION
<b>Definition</b>	An immediately available 24-hour personal response provided in a variety of settings to an individual presenting a crisis related to sexual abuse/assault.
<b>Goal</b>	To alleviate acute distress of sexual abuse/assault, to begin stabilization, and assist in determining the next steps.
<b>Duration</b>	Short term. May be episodic.
<b>Activities</b>	<p>Activities to alleviate acute stress including:</p> <ul style="list-style-type: none"> <li>• Information about the effects of victimization</li> <li>• General information about medical and legal issues (Case specific information – see Legal/Medical Advocacy)</li> <li>• Information on services available in the community</li> </ul>
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Child sexual abuse/assault victims</li> <li>• Adult or adolescent sexual abuse/assault victims</li> <li>• Non-offending parents whose children are sexual abuse/assault victims</li> <li>• Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim</li> </ul>
<b>Qualifications</b>	<p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, which must include at least four hours of crisis intervention, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p>

March 1999

	GENERAL ADVOCACY
<b>Definition</b>	Personal support and/or assistance in accessing sexual abuse/assault related services.
<b>Goal</b>	To ensure needed services and adequate support to enhance recovery from sexual abuse/assault
<b>Duration</b>	Generally, 1 to 4 times per month; 3 months to a year
<b>Activities</b>	<p>All activities and services are client-focused and case specific.</p> <ul style="list-style-type: none"> <li>• Ongoing personal support, including outreach calls/visits (including in-patient or residential care settings)</li> <li>• Practical help as needed; information and referrals which are case specific and client focused</li> <li>• Ongoing, repetitive crisis intervention</li> <li>• Arranging for services to enhance recovery (e.g., health, financial, housing)</li> <li>• Consulting with others (such as CPS, APS, Indian Child Welfare) regarding an individual case</li> </ul>
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Adult/adolescent sexual abuse/assault victims</li> <li>• Non-offending parents whose children are sexual abuse/assault victims</li> <li>• Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim</li> </ul>
<b>Qualifications</b>	<p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p>

March 1999

	MEDICAL ADVOCACY
<b>Definition</b>	Acting on behalf of and in support of victims of sexual abuse/assault on a 24-hour basis to ensure their interests are represented and their rights upheld.
<b>Goal</b>	To assist the victim to regain personal power and control as s/he makes decisions regarding medical care and to promote an appropriate response from individual service providers.
<b>Duration</b>	May vary significantly depending upon client's medical needs as related to the sexual assault.
<b>Activities</b>	<p>All activities and services are client-focused and case specific. For general information regarding medical advocacy, see Information &amp; Referral.</p> <ul style="list-style-type: none"> <li>• Assistance in making informed decisions about medical care and the preparations needed, including referral for possible forensic exam</li> <li>• Information about medical care/concerns, including assistance with needed follow-up</li> <li>• Support at medical exams and appointments</li> <li>• Information and/or assistance with Crime Victim Compensation applications</li> </ul>
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Child sexual abuse/assault victims</li> <li>• Adult/adolescent sexual abuse/assault victims</li> <li>• Non-offending parents whose children are sexual abuse/assault victims</li> <li>• Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim</li> </ul>
<b>Qualifications</b>	<p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, which must include at least four hours of medical advocacy, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p>

March 1999

	LEGAL ADVOCACY
<b>Definition</b>	Acting on behalf of and in support of victims of sexual abuse/assault on a 24-hour basis to ensure their interests are represented and their rights upheld.
<b>Goal</b>	To assist gaining knowledge of the criminal justice system, gain access to all avenues of participation in the legal system and to promote the responsiveness of individual legal system participants.
<b>Duration</b>	Up to several years
<b>Activities</b>	<p>All activities and services are client-focused and case specific. For general information regarding legal advocacy, see Information &amp; Referral.</p> <ul style="list-style-type: none"> <li>• Assistance in making informed decisions about police reporting and the preparations needed, including the possibility of CVC benefits</li> <li>• Information about the criminal justice systems, civil remedies, and Dependency, Family and Juvenile Courts, including follow-up</li> <li>• Support at interviews, trial and sentencing</li> <li>• Assistance in preparing for court; informing the victim of her/his rights in legal settings</li> <li>• Active monitoring of case through the legal system</li> <li>• Assistance with protective/no-contact/anti-harassment orders</li> </ul>
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Child sexual abuse/assault victims</li> <li>• Adult/adolescent sexual abuse/assault victims</li> <li>• Non-offending parents whose children are sexual abuse/assault victims</li> <li>• Significant others who require help/assistance in order to address their own reactions to the victimization and to effectively support the victim</li> </ul>
<b>Qualifications</b>	<p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, which must include at least four hours of legal advocacy, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience.</p>

March 1999

	SYSTEM COORDINATION
<b>Definition</b>	Coordination of the service system entails the development of working relationships and agreements (formal and informal) among programs and services with a role in the array of sexual abuse/assault service provision with the goal of improving service delivery
<b>Goal</b>	To operate a permanent, client-centered system which offers, or assures access to, a comprehensive continuum of specialized sexual abuse/assault services, which is mutually accountable despite individual changes over time in regulations, procedures or people who provide service.
<b>Duration</b>	An on-going process
<b>Eligible Activities</b>	<ul style="list-style-type: none"> <li>• Develop partnerships</li> <li>• Increase collaboration</li> <li>• Assess gaps in service</li> <li>• Foster cooperation</li> <li>• Develop accountability process</li> <li>• Develop new ways of delivering services</li> <li>• Develop new sources of funding</li> </ul>
<b>Potential Participants</b>	<ul style="list-style-type: none"> <li>• Law enforcement</li> <li>• Prosecutors</li> <li>• Judiciary</li> <li>• Child Protective Services (CPS)</li> <li>• Schools</li> <li>• Social services (private and public)</li> <li>• Mental health services</li> <li>• Medical facilities/practitioners</li> <li>• Emergency services</li> <li>• Other relevant groups, task forces, networks and individuals</li> </ul>
<b>Qualifications</b>	<p>System coordination should be initiated and led by a Community Sexual Assault Program.</p> <p>The staff and volunteers representing the Community Sexual Assault Program should represent the issues of sexual abuse/assault to the community accurately, fairly and regularly. They should understand the public policy-making process; build coalitions and articulate opinion to shape public policies that are beneficial for the organization and victims of sexual abuse/assault.</p> <p>They should commit to building community around sexual abuse/assault issues; promote effective relations among diverse agencies working with victims of sexual abuse/assault; facilitate cooperation between all of the agencies/organizations involved with victims of sexual abuse/assault.</p> <p>They also should encourage cooperation and collaboration with other organizations, seeking ways to improve services and/or reduce costs through cooperative efforts; share expertise with others to achieve partnerships; and organize and operate partnerships effectively.</p>

March 1999

	PREVENTION: SOCIAL CHANGE	
<b>Definition</b>	Promoting attitudes, behaviors and social conditions that will reduce and ultimately eliminate factors that cause or contribute to sexual violence.*	
<b>Goal</b>	Impact the underlying causes of sexual violence through the shifting of ownership of solutions from social services to the community using a community development approach.	
<b>Duration</b>	Varies with activities and opportunities.	
<b>Eligible Activities</b>	<p>Any activities chosen from among the following must be part of a comprehensive community development plan for the prevention of sexual violence.</p> <ul style="list-style-type: none"> <li>• Establish relationships within communities, including underserved communities</li> <li>• Convene a community development process within a community you define and participate in its implementation.**</li> <li>• Community networking</li> <li>• Legislation/policy development</li> </ul>	<ul style="list-style-type: none"> <li>• Training</li> <li>• Technical assistance</li> <li>• Focus group meetings</li> <li>• Community events</li> <li>• Public speaking/speaker's bureau</li> <li>• Stakeholder recruitment</li> <li>• Advisory group formation</li> <li>• Distribution of materials</li> </ul>
<b>Service Recipients</b>	<p><b>Stakeholders:</b> Community stakeholders, inclusive across systems and networks within the chosen community</p>	
<b>Qualifications</b>	<p>Social change efforts should be initiated and led by a Community Sexual Assault Program. All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, plus 12 hours of on-going training annually. All training must be approved by the Washington Coalition of Sexual Assault Programs. Additionally all Prevention providers must complete the 5-hour WCSAP-approved prevention orientation or equivalent. The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must have an understanding of the causes of sexual violence, prevention and social change theory, community development techniques and have demonstrated experience in educational techniques appropriate to their audience. They must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience. The supervisor should observe the provider's training on a periodic basis.</p>	

\*Sexual Violence is physical, emotional, social economic, cultural, spiritual, and/or political acts and/or behaviors that use sex and/or sexuality as tools of violence and oppression against children, youth, women and men.

\*\*See Sexual Assault Prevention Plan for Washington State, August 1997; Page 16, section "Accomplishing Change" for a description of principles central to community development.

July 2003

	PREVENTION: INFORMATION AND AWARENESS
<b>Definition</b>	Informing the community and increasing the awareness of and knowledge about sexual abuse/assault.
<b>Goal</b>	To increase the willingness and ability of the community to take responsibility for the prevention of sexual abuse/assault.
<b>Duration</b>	Varies with activities and opportunities.
<b>Eligible Activities</b>	<ul style="list-style-type: none"> <li>• Outreach to underserved communities</li> <li>• Community education events</li> <li>• Public speaking/presentations</li> <li>• Distribution of materials</li> <li>• In-service training to staff, volunteers (See also System Coordination Standard)</li> </ul>
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Community groups</li> <li>• Service providers or groups from related systems</li> <li>• Underserved communities</li> </ul>
<b>Qualifications</b>	<p>Prevention efforts are best provided by, or under the auspices of, a Community Sexual Assault Program.</p> <p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, plus 12 hours of on-going training annually. All training must be approved by the Washington Coalition of Sexual Assault Programs. Additionally all Prevention providers must complete the 5-hour WCSAP approved prevention orientation or equivalent. The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must have an understanding of the causes of sexual violence, prevention and social change theory, community development techniques and have demonstrated experience in educational techniques appropriate to their audience. They must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience. The supervisor should observe the provider's training on a periodic basis.</p>

July 2003

	PREVENTION: BUILDING SKILLS
<b>Definition</b>	Programs and presentations focused on building skills within the community to prevent sexual abuse/assault.
<b>Goal</b>	To build skills and develop strategies within the community to prevent sexual abuse/assault.
<b>Duration</b>	Varies with activities and opportunities.
<b>Eligible Activities</b>	<ul style="list-style-type: none"> <li>• Physical self-defense training</li> <li>• Personal safety skills</li> <li>• Skills to promote non-violent behavior</li> </ul>
<b>Service Recipients</b>	<p>Individuals and groups in schools, faith communities, the general community such as:</p> <ul style="list-style-type: none"> <li>• Children</li> <li>• Teens</li> <li>• Parents</li> <li>• Community members</li> <li>• Service providers</li> </ul>
<b>Qualifications</b>	<p>Prevention efforts are best provided by, or under the auspices of, a Community Sexual Assault Program.</p> <p>All volunteer and paid staff must complete 30 hours of initial sexual abuse/assault training, plus 12 hours of on-going training annually. All training must be approved by the Washington Coalition of Sexual Assault Programs. Additionally all Prevention providers must complete the 5-hour WCSAP approved prevention orientation or equivalent. The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault.</p> <p>Providers must have an understanding of the causes of sexual violence, prevention and social change theory, community development techniques and have demonstrated experience in educational techniques appropriate to their audience. They must be supervised by a paid staff person who has completed the 30 hours of initial sexual abuse/assault training and has two years of relevant experience. The supervisor should observe the provider's training on a periodic basis.</p>

July 2003



**Support Group**

**Therapy**

**Medical Social Work**

	SUPPORT GROUP
<b>Definition</b>	Regular facilitated meetings of victims and/or secondary victims of sexual abuse/assault with a supportive and educational focus.
<b>Goal</b>	To provide emotional stability and promote the understanding of the impact of sexual abuse/assault.
<b>Duration</b>	1 to 2 hour average length of time per session; 1 to 4 sessions per month; 3 months to a year
<b>Activities</b>	Group meetings with a planned beginning and ending date and an outcome-based, structured agenda with a primary focus on sexual abuse/assault issues.
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Adult or adolescent sexual abuse/assault victims</li> <li>• Non-offending parents of child sexual abuse/assault victims</li> <li>• Significant others who require help/assistance in order to address their own reactions to victimization and to effectively support the victim</li> </ul>
<b>Qualifications</b>	<p>The facilitator must complete 30 hours of initial sexual abuse/assault training, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault. The facilitator must also have training in group process and interpersonal dynamics, and experience as a facilitator or co-facilitator.</p> <p>The facilitator must be supervised by a paid staff person with a minimum of a BA degree in Human Services or a related field plus two years of relevant experience <b>or</b> a combination of six years of relevant experience, education and training. The facilitator must be, or receive consultation on group process from, a Masters level therapist.</p>

March 1999

	THERAPY	
<b>Definition</b>	A professional relationship within a theoretical framework that involves a specified helper gathering, systematizing and evaluating information and using techniques to address the effects of sexual abuse/assault.	
<b>Goal</b>	To identify, understand and ameliorate the effects of sexual abuse/assault; to promote healing and to integrate the sexual abuse/assault experience.	
<b>Duration</b>	1 hour average length of time per session; 1 to 4 sessions per month; 3 months to several years; additional therapy could be indicated, depending on the individual case.	
<b>Activities</b>	<b>Assessment:</b> <ul style="list-style-type: none"> <li>• Psychosocial history taking</li> <li>• Psychological testing, or psychiatric evaluation</li> <li>• (including mental status exam)</li> <li>• In-person interviews with victims and/or family members</li> <li>• Collateral contacts, including review of relevant documents, telephone/in-person contact with other providers</li> <li>• Report writing</li> </ul>	<b>Therapy:</b> <ul style="list-style-type: none"> <li>• Individual, group or family therapy, based on current clinical therapeutic principles generally accepted as being appropriate to sexual abuse/assault</li> <li>• In-person visits in the office, on location or by phone</li> <li>• Family therapy can include a <u>treated</u> sexual offender in the course of reunification</li> <li>• Interpretation of findings and other expert testimony</li> <li>• Consultation to other disciplines/systems</li> </ul>
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Child sexual abuse/assault victims</li> <li>• Adult or adolescent sexual abuse/assault victims with acute or past history of sexual abuse/assault</li> <li>• Non-offending parents whose children are sexual abuse/assault victims</li> <li>• Significant others who require help/assistance in order to address their own reactions to victimization and to effectively support the victim</li> </ul>	
<b>Qualifications</b>	<p>Practitioners must complete 23 hours of initial sexual abuse/assault training, plus 6 hours of ongoing sexual abuse/assault training annually. All trainings must be consistent with the OCVA therapist training standard. The practitioner must be knowledgeable about the principles of sound therapeutic practices with victims of sexual abuse/assault, including working with the continuum of sexual abuse/assault services and must understand victimization and demonstrate practices sensitive to sexual abuse/assault issues in therapy.</p> <p>Practitioners must be licensed psychiatrists or psychologists or be registered or certified professionals in the State of Washington and have a minimum of a master's degree in one or more of the following: mental health counseling, marriage and family therapy, social work or related field. Practitioners who are completing an internship for a master's degree in any of the fields listed above and have completed the 23 hours of initial sexual abuse/assault training are also eligible providers, as long as they are receiving supervision from a person who meets the qualifications above. Interns must also complete 6 hours of ongoing sexual abuse/assault training annually. For practitioners conducting assessments of children, refer to the guidelines from the American Professional Society on the Abuse of Children.</p> <p>Therapists, as well as individuals conducting assessments, must have regular supervision, consultation and/or review of cases, preferably by a Washington State licensed psychiatrist, psychologist or certified therapist.</p>	

February 2002

	SOCIAL WORK FOR MEDICAL EVALUATIONS OF CHILDREN & VULNERABLE ADULTS
<b>Definition</b>	Preparing victim for medical evaluation; preparing and passing on a complete case history for purposes of contributing to investigation.
<b>Goal</b>	To complete the medical evaluation in a manner that minimizes the traumatization of the victim and caregivers.
<b>Duration</b>	Generally one hour by phone for intake with parent/caretaker; brief calls between intake and evaluation to prepare a victim for and reduce her/his anxiety about the evaluation and investigation; one hour in-person during evaluation; and subsequent contacts, usually by phone, as needed.
<b>Activities</b>	<ul style="list-style-type: none"> <li>• Psychosocial history-taking, including assessment of parental protectiveness and parental coping, documentation of family structure, family dynamics, and dynamics of abuse/assault as related by parent/caretaker.</li> <li>• Interpretation of stages of child physical and psychosexual development, signs of stress and of child sexual assault.</li> <li>• Interpretation of medical evaluation process, indications for doing lab work, and meaning of possible physical findings.</li> <li>• Interpretation of law enforcement investigation process and parent/caretaker role in same, including compliance with mandated reporting.</li> <li>• Interpretation of child protective services functions and parent/caretaker role in same, including compliance with mandated reporting.</li> <li>• Referral to appropriate CSAP for advocacy.</li> <li>• Referral to therapy resources, including explanation of and assistance with Crime Victims Compensation application.</li> <li>• When appropriate, communicate directly with child or adolescent victim to allay anxiety about medical evaluation.</li> <li>• Crisis counseling for the purposes of preparing victim for the medical evaluation and to pass on a complete case history for purposes of investigation.</li> </ul>
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Non-offending parent/caretakers of child and adolescent victims of sexual abuse/assault.</li> <li>• Child and adolescent victims.</li> <li>• Vulnerable adult victims and their caretakers or care managers.</li> </ul>
<b>Qualifications</b>	Master's degree in social work or related field or licensure as a Registered Nurse, Nurse Practitioner, Medical Doctor or Physician's Assistant. Employed by or contracted with a licensed medical institution or provider. Twelve hours of initial sexual assault/abuse training, plus twelve hours per year ongoing training. Practitioners who are completing an internship for any of the fields listed above and have completed the 12 hours of initial sexual abuse/assault training are also eligible providers, as long as they are receiving supervision from a person who meets the qualifications above.

February 2002

**Community Responding**  
**Community Organizing**  
**Therapy**

	COMMUNITY RESPONDING	
<b>Definition</b>	Culturally and linguistically appropriate personal support and/or assistance in accessing services and addressing sexual abuse/assault related issues for victims in marginalized and underserved communities.	
<b>Goal</b>	To ensure access to services and support that enhances recovery from sexual abuse/assault.	
<b>Activities</b>	<ul style="list-style-type: none"> <li>• Sexual assault training and consultation to other professionals and institutions (e.g. law enforcement, mental health, community sexual assault programs) on appropriate sexual assault service delivery.</li> <li>• Culturally and linguistically appropriate techniques to respond to the effects of sexual abuse/assault.</li> <li>• Strategies and support or accompaniment to navigate through service delivery and criminal justice systems.</li> <li>• Peer Support Groups for adults or adolescents, facilitated/led by an advocate. The group must have a planned beginning and ending date and an outcome-based structured agenda with a primary focus on sexual abuse/assault issues.</li> <li>• Educational Groups for adults or adolescents, facilitated/led by an advocate. The group must have an agenda with a primary focus on sexual abuse/assault issues. These issues can be presented in cycles so that membership may begin at any point in the cycle.</li> </ul>	
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Adult, adolescent or child victims of sexual abuse/assault.</li> <li>• Non-offending parents or caregivers of child sexual abuse/assault victims.</li> <li>• Significant others who require help/assistance in order to address their own reactions to victimization and to effectively support the victim.</li> </ul>	
<b>Qualifications</b>	<p><b><u>Direct Service Provider</u></b></p> <p><b>Initial Training:</b></p> <ul style="list-style-type: none"> <li>• 15 hours OCVA approved initial sexual assault training.</li> <li>• 15 hours culturally and/or linguistically appropriate initial sexual assault training.</li> </ul> <p><b>Annual Training:</b></p> <ul style="list-style-type: none"> <li>• 12 hours OCVA approved ongoing sexual assault training annually.</li> </ul>	<p><b><u>Supervisor</u></b></p> <p><b>Initial Training:</b></p> <ul style="list-style-type: none"> <li>• 15 hours OCVA approved initial sexual assault training.</li> <li>• 15 hours culturally and/or linguistically appropriate initial sexual assault training.</li> </ul> <p><b>Annual Training:</b></p> <ul style="list-style-type: none"> <li>• 12 hours OCVA approved ongoing sexual assault training annually.</li> </ul> <p><b>Education/Experience:</b></p> <ul style="list-style-type: none"> <li>• Two years of demonstrated experience in culturally and linguistically appropriate sexual assault advocacy, support, or treatment</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>• Two years of demonstrated experience in culturally and linguistically appropriate domestic violence advocacy and support.</li> </ul> <p>Other direct human service experience will be considered on a case-by-case basis.</p>

January 2004

	COMMUNITY ORGANIZING	
<b>Definition</b>	Culturally and linguistically appropriate activities to promote attitudes, behaviors and social conditions that will reduce or eliminate factors that cause or contribute to sexual violence in marginalized and underserved communities.	
<b>Goal</b>	To increase the willingness and capacity of the community to impact the underlying causes of sexual violence and respond to sexual abuse/assault.	
<b>Activities</b>	<ul style="list-style-type: none"> <li>• Sexual assault training and consultation to other professionals and institutions (e.g., law enforcement, mental health, and community sexual assault programs) on culturally and linguistically appropriate sexual assault prevention and/or education.</li> <li>• Community events focused on raising awareness of sexual violence, its underlying conditions, and available services for the community, potential service recipients and interrelated systems.</li> <li>• Public speaking/presentations within the community focused on raising awareness of sexual violence, its underlying conditions, and available services for the community, potential service recipients and interrelated systems.</li> <li>• Distribution of sexual assault materials focused on raising awareness of sexual violence, its underlying conditions, and available services for the community, potential service recipients and interrelated systems.</li> </ul>	
<b>Service Recipients</b>	Community individuals and groups, service providers, schools and faith communities.	
<b>Qualifications</b>	<u><b>Direct Service Provider</b></u>  <b>Initial Training:</b> <ul style="list-style-type: none"> <li>• 15 hours OCVA approved initial sexual assault training.</li> <li>• 15 hours culturally and/or linguistically appropriate initial sexual assault training.</li> </ul> <b>Annual Training:</b> <ul style="list-style-type: none"> <li>• 12 hours OCVA approved ongoing sexual assault training annually.</li> </ul>	<u><b>Supervisor</b></u>  <b>Initial Training:</b> <ul style="list-style-type: none"> <li>• 15 hours OCVA approved initial sexual assault training.</li> <li>• 15 hours culturally and/or linguistically appropriate initial sexual assault training.</li> </ul> <b>Annual Training:</b> <ul style="list-style-type: none"> <li>• 12 hours OCVA approved ongoing sexual assault training annually.</li> </ul> <b>Education/Experience:</b> <ul style="list-style-type: none"> <li>• Two years of demonstrated experience in culturally and linguistically appropriate sexual assault advocacy, support, or treatment,</li> </ul> <p style="text-align: center;"><b>OR</b></p> <ul style="list-style-type: none"> <li>• Two years of demonstrated experience in culturally and linguistically appropriate domestic violence advocacy and support.</li> </ul> <p>Other direct human service experience will be considered on a case-by-case basis.</p>

January 2004

	THERAPY	
<b>Definition</b>	A professional relationship within a theoretical framework that involves a specified helper gathering, systematizing and evaluating information and using techniques to address the effects of sexual abuse/assault.	
<b>Goal</b>	To identify, understand and ameliorate the effects of sexual abuse/assault; to promote healing and to integrate the sexual abuse/assault experience.	
<b>Duration</b>	1 hour average length of time per session; 1 to 4 sessions per month; 3 months to several years; additional therapy could be indicated, depending on the individual case.	
<b>Activities</b>	<b>Assessment:</b> <ul style="list-style-type: none"> <li>• Psychosocial history taking</li> <li>• Psychological testing, or psychiatric evaluation (including mental status exam)</li> <li>• In-person interviews with victims and/or family members</li> <li>• Collateral contacts, including review of relevant documents, telephone/in-person contact with other providers</li> <li>• Report writing</li> </ul>	<b>Therapy:</b> <ul style="list-style-type: none"> <li>• Individual, group or family therapy, based on current clinical therapeutic principles generally accepted as being appropriate to sexual abuse/assault</li> <li>• In-person visits in the office, on location or by phone</li> <li>• Family therapy can include a <u>treated</u> sexual offender in the course of reunification</li> <li>• Interpretation of findings and expert testimony</li> <li>• Consultation to other disciplines/systems</li> </ul>
<b>Service Recipients</b>	<ul style="list-style-type: none"> <li>• Child sexual abuse/assault victims</li> <li>• Adult or adolescent sexual abuse/assault victims with acute or past history of sexual abuse/assault</li> <li>• Non-offending parents whose children are sexual abuse/assault victims</li> <li>• Significant others who require help/assistance in order to address their own reactions to victimization and to effectively support the victim</li> </ul>	
<b>Qualifications</b>	<p>Practitioners must complete 23 hours of initial sexual abuse/assault training, plus 6 hours of ongoing sexual abuse/assault training annually. All trainings must be consistent with the OCVA therapist-training standard. The practitioner must be knowledgeable about the principles of sound therapeutic practices with victims of sexual abuse/assault, including working with the continuum of sexual abuse/assault services and must understand victimization and demonstrate practices sensitive to sexual abuse/assault issues in therapy.</p> <p>Practitioners must be licensed psychiatrists or psychologists or be registered or certified professionals in the State of Washington and have a minimum of a master's degree in one or more the following: mental health counseling, marriage and family therapy, social work or related field. Practitioners who are completing an internship for a master's degree in any of the fields listed above and have completed the 23 hours of initial sexual abuse/assault training are also eligible providers, as long as they are receiving supervision from a person who meets the qualifications above. Interns must also complete 6 hours of ongoing sexual abuse/assault training annually. For practitioners conducting assessments of children, refer to the guidelines from the American Professional Society on the Abuse of Children.</p> <p>Therapists, as well as individuals conducting assessments, must have regular supervision, consultation and/or review of cases, preferably by a Washington State licensed psychiatrist, psychologist or certified therapist.</p>	

February 2002



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## DOMESTIC VIOLENCE SERVICE DEFINITIONS

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*These Service Definitions are still under development.*

### ADVOCACY BASED COUNSELING

The involvement of a client with an advocate counselor in an individual, family, or group session with the primary focus on safety planning and on empowerment of the client through reinforcing the client's autonomy and self-determination. Advocacy-based counseling uses non-victim blaming problem-solving methods and includes:

- (a) Identifying the barriers to safety;
- (b) Developing safety checking and planning skills;
- (c) Clarifying issues;
- (d) Providing options;
- (e) Solving problems;
- (f) Increasing self-esteem and self-awareness; and
- (g) Improving and implementing skills in decision-making, parenting, self-help, and self-care.

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### CHILD CARE

Child care is provided by the domestic violence program while the adult victim is obtaining services. Child care means that no structured interaction is taking place between the child and the child care provider. An example of this would be a group play time that is supervised by the provider, but is not counseling of the child(ren).

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### CRIME VICTIM COMPENSATION (CVC) ASSISTANCE

Includes making the adult domestic violence victim aware of the availability of crime victim compensation, assisting the victim in completing the required forms, gathering the needed documentation, etc. It may also include follow-up contact with the Crime Victim Compensation office on behalf of the victim.

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### CRISIS COUNSELING/INTERVENTION

A process by which a person identifies, and intervenes with an individual in crisis so as to reduce the effects of the crisis.

#### EMERGENCY DOMESTIC VIOLENCE SHELTER: DV SHELTER HOME

Bed space is provided at a residential domestic violence program that has three or more lodging units.

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#### EMERGENCY DOMESTIC VIOLENCE SHELTER: DOMESTIC VIOLENCE SAFE HOME

Bed space is provided in a facility that has two or less lodging units and has a written working agreement with a domestic violence service.

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#### EMERGENCY DOMESTIC VIOLENCE SHELTER: HOTEL/MOTEL

Bed space is provided at a hotel/motel by an emergency domestic violence service. [Note: The domestic violence service can use hotel/motel when appropriate, but it must also have either a shelter home or safe home as part of its program]

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#### EMERGENCY FINANCIAL ASSISTANCE

Includes financial vouchers, coupons, transportation or other passes or tokens, and other emergency needs of the victim of domestic violence that require financial assistance.

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#### EMPLOYMENT ASSISTANCE

Providing assistance to the adult victim of domestic violence with any aspect of employment.

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#### HOUSING ASSISTANCE

Providing assistance to the adult domestic violence victim in applying for and securing housing. Examples include applications for public housing, Section 8, transitional housing, and private housing.

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#### LEGAL ADVOCACY

Providing information, assistance, and support to victims of domestic violence to ensure their interests are represented and their rights upheld. Legal advocacy is provided in the context of advocacy-based counseling principles.

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#### MEDICAL ADVOCACY

Assisting a domestic violence victim in securing emergency or non-crisis health care. Medical advocacy is provided in the context of advocacy-based counseling principles.

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#### OTHER

Any other advocacy or service on behalf of the adult victim of domestic violence and their child(ren) that is not specifically defined.

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#### SUPPORT GROUP

Facilitated group sessions for adult victims of domestic violence with a supportive and educational focus. Ratio of 1 facilitator for each 8 group participants.

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#### TANF/WELFARE ADVOCACY

Assisting a domestic violence victim in accessing and securing public benefits, including advocacy in the context of requests for waivers from work requirements, and good cause waivers for child support enforcement actions. TANF/Welfare advocacy is provided in the context of advocacy-based counseling principles.

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#### TRANSPORTATION ASSISTANCE

Providing, or securing assistance for the provision of, transportation for the benefit of the victim of domestic violence.

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## VICTIMS OF CRIME SERVICE STANDARDS AND DEFINITIONS

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Office of Crime Victims Advocacy  
Victims of Crime Program  
July 2007

### **Advisory Committee Members**

The Advisory Group was made up of individuals who represent each Crime Victim Service Center region, victim/survivors, and other experts working with victims of crime.

Shannon Meyer, F.B.I.  
Nikki Finkbonner, Lummi Nation  
Patty Strange, Children's Home Society of Washington  
Arwen Bird, Crime Survivors for Community Safety  
Cindy Fulton, Community Member  
Dave Johnson, Washington Coalition of Crime Victim Advocates  
Emma Catague, Community Voices, Asian Pacific Islander Women and Family Safety  
Glenda Tanner, Community Voices, Proud African American Youth Society  
Fanny Correa, Region One, Separation and Loss Services  
Alan Lai, Region Two, Chinese Information and Service Center  
Melissa Cilley, Region Three, Lutheran Community Services Northwest  
Carla Hackett, Region Four, Families and Friends of Violent Crime Victims  
  
Sherrie Tinoco, Region Five, Emergency Support Services  
Courtney Langner, Region Five, Ethic Support Council  
Cody Francis, Region Six, Family Crisis Network  
  
JoDee Garretson, Region Seven, Sexual Assault Response Center  
Ken Sterner, Region Eight, North Columbia County Action Council  
Robin Jones, Region Nine, Domestic and Sexual Violence Crisis Center of Chelan and Douglas  
Maria Verdin, Region Ten, Consejo Counseling and Referral  
  
Dalya Perez, Region Eleven, Stonewall Youth  
Holly Diaz, Region Twelve, Families and Friends of Violent Crime Victims  
Martha Wescott, Region Thirteen, Kitsap Sexual Assault Center

### **OCVA staff participants**

Bev Emery  
Pearl Gipson-Collier  
Anita Granbois  
Chris Fenno  
Grace Call

## **Background**

The Washington State Strategic Plan for Victim Services outlines strategies for creating crime victim services that are high quality, culturally appropriate, and victim-centered.

In July of 2005, the Washington State Strategic Plan for Victim Services was released. The Strategic Plan for Victim Services provides a framework to guide both public and private investment in services for victims of crime, such as assault, robbery, child abuse, vehicular assault, vehicular homicide, property crime, trafficking, hate crimes, kidnapping, and survivors of homicide victims. The Plan has been developed with input from victims of crime, law enforcement, the courts, the corrections system, and both system-based and community-based victim service providers.

The Plan is built upon the underlying belief that all crime victims should have access to high quality, culturally appropriate, victim-centered services. To achieve this, it is necessary to support and facilitate the development of services that are accessible, effective, and victim-centered for all crime victims.

This Plan outlined numerous outcomes and strategies to be implemented by the Office of Crime Victims Advocacy. Specifically, these outcomes were:

Comprehensive services are available for all victims of crime

Standards for victim service providers are developed and implemented

All victims of crime have access to information about rights and resources

Culturally appropriate services are available for victims of crime in marginalized or underreported groups.

In order to ensure that comprehensive service are available for all victims of crime, the Plan further recommended the creation of Crime Victim Service Centers (CVSC). A CVSC is envisioned as a coalition of service providers who link resources to make comprehensive, culturally appropriate services available to crime victims statewide. The Center is not necessarily a physical location. Instead, it is a collaborative effort among service providers to provide comprehensive services to victims of all crimes.

## **Executive Summary**

The Office of Crime Victims Advocacy (OCVA) serves as a voice within government for the needs of crime victims in Washington State. OCVA's philosophy is that it is in the best interest of all citizens of Washington State that victims of crime are provided the opportunities and resources necessary to recover and return to being productive, contributing members of the community. As a funding agency, it is our responsibility to work with service providers and experts statewide to develop and implement service standards and definitions to ensure high-quality, accessible, and appropriate services to all victims of crime in Washington.

In May 2006, OCVA assembled an advisory group that was tasked with creating service standards and definitions for victim advocates and volunteers working with victims of assault, burglary, child abuse, drunk and drugged driving, homicide, identity theft, trafficking, hate crimes, kidnapping, property crimes, and others.

### **Victim-Centered**

It cannot be said enough that all services to victims of crime must be victim-centered, culturally appropriate, and accessible. The words “victim-centered, culturally appropriate, and accessible” are the mantra and philosophy that feed each service standard and definition. At the root of each service definition is accessibility and appropriateness for every individual we work with. At the heart of every service is an approach that is victim-centered.

When services are victim-centered, the victim's needs take precedent over any system needs. Services are specific, focused, and driven by the individuals impacted by crime and violence.

### **Culturally Appropriate and Accessible**

Historically, individuals and groups of people have experienced a lack of access to systems and institutions established to provide services and resources. It is the intent that victims of crime in Washington have access to equitable, culturally competent, and linguistically appropriate services. OCVA seeks to support the provision of services for victims from marginalized communities that are provided by community members and organizations who work with and represent marginalized communities.

When services are culturally appropriate and accessible, those working with victims of crime are aware of cultural, individual, and role differences including those related to race/ethnicity, language, sex, gender, age, sexual orientation, (dis)Ability, social class, economic status, education, marital status, religious affiliation, residency, and HIV status. We try to identify our own biases and to limit the effect of these biases on our work. We do not knowingly participate in or condone unfair discriminatory practices. Advocates and volunteers value justice and equity in service provision and use initiative and commitment to ensure that services are extended to populations in need. Victim service providers use flexibility, innovation, and persistence to promote fair access and benefits of service—no matter the barriers and challenges that must be addressed and overcome to achieve this.<sup>1</sup>

A coordinated community response to victims of crime includes meaningful contributions from individuals, organizations, and agencies representing different cultures, backgrounds, and experiences. Leaders in the

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<sup>1</sup> DeHart, D.D. (2003) *National Victim Assistance Standards Consortium: Standards for Victim Assistance Programs and Providers*. Columbia, SC: Center for Child and Family Studies, University of South Carolina.

victims of crime movement will constantly assess group participation levels and ask, “Whose voice is missing from our table?”

### **Availability of Services**

It is the expectation of OCVA that every victim of crime have access to information and referral, crisis intervention, and all advocacy services twenty-four hours a day through a Crime Victim Service Center. While some services may be delivered over the telephone, it is an expectation that during regular hours of operation in-person services will be available.

### **Qualifications**

#### **Summary**

The course will build advocacy skills and provide tools for professionals and volunteers who work with victims of crime.

Each individual working with victims of crime must complete the training requirements as described below in order to perform services as defined in these standards.

#### **30 Hour Pre-Service Advocacy Course**

The 30 Hour Pre-Service Advocacy Training must be completed before a staff member or volunteer responds to a victim of crime. The course may contain content adapted from the: OCVA Advocacy Curriculum, 2006 Victims of Crime Advocate Training, Standards for Victim Assistance Programs and Providers (National Victim Assistance Standards Consortium), and other curriculum, articles, research, and experience-based information. This content will focus on the fundamental skills of advocacy and working with victims of crime, saving crime-specific advocacy tips and other advanced topics for training during the first year of service.

The Office of Crime Victims Advocacy will contract with the Washington Coalition of Crime Victim Advocates to coordinate this required training regularly and regionally.

Graduating from the Office of Crime Victims Advocacy’s State Victims Assistance Academy satisfies the requirement for the 30 Hour Pre-Service Advocacy Course.

This course consists of 30 hours of classroom learning. These 30 hours include the following cluster topics:

Victimology/Empowerment (4 hours)  
Post Traumatic Stress Disorder (PTSD)  
Victim trauma, grief, and loss  
Re-victimization

Advocacy (3 hours)  
Definition of advocacy  
Philosophy of advocacy  
History of victim's movement  
Victim's state and federal rights

Values Clarification (3 hours)  
Confidentiality  
Privilege  
Victim assistance ethics  
Outreach and social change advocacy

Cultural Competency (3 hours)  
Individual biases  
Anti-oppression  
Barriers to access

Listening Skills (4 hours)  
Active listening skills  
Communication skills  
Modes of communication

Crisis Intervention (4 hours)  
Definition of crisis  
Signs and symptoms of crisis  
Appropriate interventions

Resources (3 hours)  
Overview of the community's victim service programs  
Current state of the victims' movement  
Accessing resources  
Compensation, restitution, and civil reparations

Legal Justice Systems (4 hours)  
System limits and expectations  
Victim notification  
Sentencing guidelines  
Criminal legal system  
Civil legal system  
Tribal justice systems  
Juvenile legal systems  
Federal justice system  
Immigration system  
Medical and healthcare systems

Secondary Trauma (2 hours)



Boundaries

Burnout, compassion fatigue, and vicarious trauma

### **10 Hours Training in First Year of Service**

An additional 10 hours of training in the first year (based on anniversary date of hire) is required of all staff and volunteers providing direct services. This requirement is flexible enough so that each organization can build the first year of service training hours to meet the specific regional crime victim needs. It is expected that more than one topic will be covered in the 10 hours of training. The topics covered must contain learning objectives and include specific skill building and knowledge based tools relating to working with victims of crime. As a grant requirement, organization staff will be required to outline a training plan for staff and volunteers. Each organizing receiving funds from OCVA to serve victims of crime will also be required to allocate money in their budget to meet this requirement.

The 10 hours of classroom training in the first year of service may be provided on a local organizational or regional basis. Articles, books, training manuals, videos, and web-based training that are specifically focused on service delivery to victims of crime may be used to satisfy 50% of the required 10 hours of training. The remaining 5 hours of training are expected to be satisfied through in person, classroom training or conferences.

The 10 hours of classroom training in the first year of service may include:

Burglary

Fraud

Identity Theft

Child Abuse and Neglect

Elder Abuse

Kidnapping/Missing Persons

Trafficking

Assault

Homicide

Robbery

Hate and Bias Crimes

Gang Violence

Death Notification

### **12 Hours of Continuing Education**

After the first year of service, staff and volunteers are required to complete 12 hours of continued education through state, local, national, or regional trainings related to victims of crime. Each year of services is based on the anniversary date of hire. Articles, books, training manuals, videos, and web-based training that are specifically focused on service delivery to victims of crime may be used to satisfy 50% of the required 12 hours of continuing education. The remaining 6 hours of training are expected to be satisfied through in person, classroom training or conferences.

## **Training Requirements for Supervisors**

Individuals supervising advocates or volunteers must have two years of direct advocacy service experience. In addition, a supervisor must participate in a six-hour OCVA training specifically designed for those supervising victims of crime staff and volunteers.

## **Requirements for Therapists**

Individuals providing therapy services as defined in this document must be licensed psychiatrists or psychologists or be registered or certified professionals in the State of Washington and have a minimum of a master's degree in one or more of the following: mental health counseling, marriage, and family therapy, social work, or related field. Practitioners who are completing an internship for a master's degree in any of the fields listed above and have completed the ten hours of victims of crime training are also eligible providers, as long as they are receiving supervision from a person who meets the qualifications above. Therapists, as well as individuals conducting assessments, must have regular supervision, consultation and/or review of cases, preferably by a Washington State licensed psychiatrist, psychologist, or certified therapist.

Therapists must also complete the 10 hours of training specific to working with crime victims, trauma, grief, or loss annually, including the first year of providing services.

## **Training for Domestic Violence and/or Sexual Assault Advocates**

Staff and volunteers who are already trained as domestic violence or sexual assault advocates and who wish to work with victims of assault, burglary, child abuse, drunk and drugged driving, homicide, identity theft, trafficking, hate crimes, kidnapping, property crimes, and others will need to complete the 10 hours training in the first year of service as explained in this document. After the first year of service, they are required to meet the continuing education requirements.

## CRIME VICTIM SERVICE CENTER

### **Definition:**

A Crime Victim Service Center is a coalition of service providers who link resources to make comprehensive, culturally appropriate services available to crime victims within each region of the state. The Crime Victim Service Center ensures the availability of both immediate and sustained support for adult, child, and juvenile victims of assault, burglary, child abuse, drunk and drugged driving, homicide, identity theft, trafficking, hate crimes, kidnapping, property crimes, and others.

The Center may not be a physical location. Instead it may be a collaborative effort among service providers within a region to provide comprehensive victims services to victims of crimes. The idea behind calling these collaborative relationships a Center is to build an identity and structure for service delivery to crime victims.

### **Goal**

Provide comprehensive, culturally appropriate, and accessible services to victims of assault, burglary, child abuse, drunk and drugged driving, homicide, identity theft, trafficking, hate crimes, kidnapping, property crimes, and others.

### **Rationale**

It is more desirable for Washington to have services in all regions of the state, for all types of crime, than to provide in-depth services for certain types of crime, in certain areas of the state.

The regional concept provides an infrastructure to deliver services for victims of all crime.

The regional concept encompasses the values of continuity, preserving resources within a community, and providing predictable funding.

### **Funding and distribution of available resources**

Initial funding will come from federal VOCA funds allocated for services to Victims of Crime victims with a goal of increasing available funds to meet identified needs.

Funds will be distributed using a formula that assigns a base amount to each region along with an add-on amount that takes into consideration population and geographic area.

To the extent possible, regional boundaries will follow existing collaborative and working relationships among service providers and will consider the benefits and challenges of including urban population centers and rural areas within a region.

### **Activities**

- Crisis Intervention
- Information and Referral
- Advocacy
- Legal Advocacy

- Medical advocacy
- Outreach and Awareness

### **Availability of Services**

The Crime Victim Service Center must ensure that crisis intervention, information and referral, advocacy, legal advocacy, and medical advocacy are available 24 hours a day seven days a week. While some services may be delivered over the telephone, it is an expectation that during regular hours of operation in person services will be available. Likewise, it is the expectation that medical advocacy will be in person.

## COMMUNITY ORGANIZING

### **Definition:**

Culturally and linguistically appropriate activities by marginalized communities to promote attitudes, behaviors and social conditions that will reduce or eliminate factors that cause or contribute to violence and/or crime in marginalized communities.

### **Goal**

Increase the willingness and capacity of the community to address the underlying causes of violence and/or crime and respond to victims and others impacted by violence and/or crime.

### **Activities**

- Community events focused on raising awareness of criminal victimization, its underlying conditions, available services for the community, and potential service recipients and interrelated systems
- Public speaking/presentations within the community focused on raising awareness of criminal victimization, its underlying conditions, available services for the community, and potential service recipients and interrelated systems
- Development and distribution of materials focused on raising awareness of criminal victimization, its underlying conditions, available services for the community, and potential service recipients and interrelated systems

## COMMUNITY OUTREACH

### **Definition:**

An intentional process of organizations created by and for marginalized populations reaching out, contacting, engaging, and involving individuals and communities in order to increase access to services for victims of crime by organizations created by and for marginalized populations.

### **Goal**

Outreach is specifically designed by and for marginalized populations to ensure equitable and culturally relevant access to services that support individuals in recovery from victimization.

### **Activities**

- Community events
- Relationship building
- Developing partnerships
- Provide information on existing service delivery

## COMMUNITY RESPONDING

### **Definition:**

Culturally and linguistically appropriate personal support and/or assistance in accessing services and addressing violence and/or crime related issues by marginalized communities for victims and others impacted by violence and/or crime in marginalized communities.

### **Goal**

Ensure access to services and support that enhances recovery from violence and/or crime.

### **Activities**

- Assess the effects of crime with an individual
- Provide appropriate healing techniques to respond to the effects of crime
- Support Groups with a primary focus on victim issues
- Educational Groups with a primary focus on victim issues

## CRISIS INTERVENTION

### **Definition:**

A personal response to an individual impacted by crime, provided in a variety of settings.

### **Goal**

Alleviate acute distress resulting from the impact of a crime, to begin stabilization, and assist in determining the next steps.

### **Activities**

- Assess immediate needs and concerns
- Facilitate emotional stabilization
- Provide information regarding resources and referrals
- Help victim identify and plan the next steps



## EMERGENCY FINANCIAL ASSISTANCE

### **Definition:**

Providing short-term, immediate funds to crime victims.

### **Goal**

Provide emergency financial assistance for victims of crimes who, as a result of the crime, have no other resources available to meet basic needs for health and safety.

### **Activities**

- Provide financial assistance for emergency needs resulting from the crime when no other resources are available. (Emergency needs can include but are not limited to, emergency shelter, telephone card, lock replacement, window replacement or cover up, food, clothing, transportation, gas voucher, short-term nursing home shelter for elder abuse victims, and costs related to crime scene clean-up).

## ADVOCACY

### **Definition:**

Personal support and/or assistance with issues resulting from victimization.

### **Goal**

Ensure adequate support to enhance recovery from victimization and/or reduce the risk of re-victimization.

### **Activities**

- Ongoing personal support, including outreach calls and/or visits
- Assistance in obtaining services to enhance healing and recovery
- Advocating for victim choices and rights with individuals and service providers
- Speaking on behalf of victims if requested or needed
- Assistance in obtaining benefits or restoring basic needs
- Assist caller/client in identifying and prioritizing the emergency needs

## INFORMATION AND REFERRAL

### **Definition:**

Connecting victims of crime and others impacted by violence and/or crime to appropriate resources.

### **Goal**

Respond, as appropriate, to requests for information, assistance, and/or referrals related to crimes specific to the individual's needs.

### **Activities**

- Assist caller/client in identifying and prioritizing what is needed
- Provide information about available resources/services
- Provide referrals to appropriate resources/services

## OUTREACH AND AWARENESS

### **Definition:**

Provide information and knowledge about violence, crime victimization, and available services.

### **Goal**

Increase the community's ability to respond to violence and crime victimization, access services, and improve community safety.

### **Activities**

- Outreach with emphasis on underserved and marginalized communities
- Community education events
- Public speaking/presentations
- Distribution of materials
- Development of curricula, training materials, and educational tools

## LEGAL ADVOCACY

### **Definition:**

Personal support and assistance with victims of crime to ensure their interests are represented and their rights upheld within the civil and criminal justice systems.

### **Goal**

Educate and assist victims in navigating the civil and criminal justice systems; assist victims in evaluating advantages and disadvantages of participating in legal processes; facilitate victims' access and participation in the legal systems; and promote victims' choices and rights to individuals within the legal system.

### **Activities**

- Assert and advance a victim's choices and rights
- Provide assistance in making informed choices and decisions about police reporting
- Provide information about the local, state, federal and tribal justice systems, civil remedies, and victim rights
- Provide support during investigative and legal processes
- Actively monitor case through the legal system
- Provide assistance in obtaining criminal and civil orders
- Provide information about civil remedies
- Provide information and advocacy related to immigration status
- Provide referrals to legal resources as appropriate

## MEDICAL ADVOCACY

### **Definition:**

Personal support and assistance for victims of crime to ensure healthcare needs are addressed and rights are upheld.

### **Goal**

Assist victims to regain personal power and control in making decisions regarding medical care and to promote an appropriate response from individual service providers.

### **Activities**

- Assert and advance a victim's choices and rights
- Provide support in obtaining health related information and care
- Provide assistance in making informed decisions about medical procedures for the purpose of collection and preservation of evidence
- Provide support at medical exams and appointments
- Provide information and assistance in obtaining relevant benefits

## SUPPORT GROUP

### **Definition:**

Regularly scheduled meetings of victims of crime and/or others impacted by crime.

### **Goal**

Promote emotional stability, education, and support to assist in recovery from crime victimization.

### **Activities**

- Intake and ongoing assessment for participation
- Facilitation of group
- Curriculum development and evaluation
- Consultation for facilitators

## THERAPY

### **Definition:**

Treatment provided by a mental health professional for victims and/or others impacted by crime.

### **Goal**

Promote healthy coping strategies, healing, and recovery subsequent to victimization.

### **Activities**

- Intake and ongoing assessment for participation
- Treatment session(s) with individuals, groups and/or families
- Consultation with other service providers about a specific client
- Develop a treatment plan



## SYSTEM COORDINATION

### **Definition:**

Developing collaborative relationships and partnerships with entities to better meet the needs of crime victims.

### **Goal**

Promote coordination and collaboration, in order to improve the effectiveness of institutions, systems, and services for crime victims.

### **Activities**

- Develop and maintain partnerships
- Participate in the development of policy
- Participate in task forces, committees, work groups
- Create and maintain collaborative relationships
- Foster cooperation
- Develop new ways of delivering services
- Strategize to leverage existing/available resources
- Assess and work to address gaps in services

## PREVENTION

### **Definition:**

Strengthening the ability of individuals and communities to eliminate violence.

### **Goal**

Further exploration of harm reduction can be found at: [www.harmredux.org](http://www.harmredux.org)

You may also find information about primary prevention strategies (although not specific to this particular group of crime victims) at: <http://www.cdc.gov/ncipc/DELTA/default.htm>

Increase awareness, skill building, and safety within individuals and communities to prevent violence and crimes.

### **Activities**

- Provide information and education regarding personal and community safety planning
- Teaching skills to promote non-violent behavior
- Community education
- Harm reduction
- Risk reduction
- Primary prevention
- Community mobilization to change the social norms that promote and/or contribute to crime

## 12. SAMPLE FORMS

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InfoNet was designed to offer the maximum amount of flexibility to agencies. Each agency can decide what optional data they wish to collect, and also determine the way your agency would like to enter data into InfoNet. Some agencies will prefer to collect paper forms and entering the data every week, every month, or even every quarter. Some agencies may prefer to have advocates enter client intakes directly into the InfoNet system as they ask the client for information. Whatever works best for your agency is the most important factor.

However, with any new system, the process of determining what combination of factors works best is difficult before you've had a chance to use the system. Because of this, we've prepared examples of Intake forms your agency can use. These forms are also available on the OCVA website at [www.ocva.wa.gov](http://www.ocva.wa.gov), and are available in Word format for agencies that would like to modify the form for their own use.

The forms in the next section are intended only as examples. If your agency finds these forms useful, please feel free to use them. If your agency already has an Intake form you are comfortable with, make sure the information you currently collect matches the InfoNet data – especially the mandatory variables – and if so, feel free to continue to use your existing form. Or, your agency may decide to create an entirely different version of the form, or perhaps no form at all and advocates will enter data directly into the system while interviewing a client.

If you have questions about these forms, or if you need assistance, please contact Mary Baldwin at OCVA at [mary.baldwin@commerce.wa.gov](mailto:mary.baldwin@commerce.wa.gov).

## EXAMPLE CLIENT INTAKE FORM

*The following is an example intake form for DV clients. Additional sample intake forms for SA and CVSC can be found on the OCVVA website.*

a n d a t o r y  f i e l d s	<b>Client ID #:</b> _____	<b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Does not identify with female or male
	<b>First Contact Date:</b> _____	<b>Year of Birth:</b> _____
	<b>Race:</b> <input type="checkbox"/> African American, Black <input type="checkbox"/> Asian <input type="checkbox"/> Native American/Alaska Native <input type="checkbox"/> Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Multi Racial <input type="checkbox"/> Other	<b>Disability:</b> <input type="checkbox"/> None <input type="checkbox"/> Physical Disability <input type="checkbox"/> Mental Disability <input type="checkbox"/> Sensory Disability <input type="checkbox"/> Other Disability <input type="checkbox"/> Multiple Disabilities
	<b>Ethnicity:</b> <input type="checkbox"/> Non-Hispanic/Non-Latino <input type="checkbox"/> Hispanic/Latino	<b>Homeless?:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not reported

### When incident occurred for which client sought services:

- ☐ 12 hours or less before intake
- ☐ 12 - 24 hours
- ☐ 24 - 48 hours
- ☐ 2 - 7 days
- ☐ 7 - 14 days
- ☐ 14 days - 1 month
- ☐ More than one month before intake
- ☐ Not reported

### Primary Offense Location:

- ☐ Victim's Home
- ☐ Offender's Home
- ☐ Third Party's Home
- ☐ Car
- ☐ Street
- ☐ School
- ☐ Park
- ☐ Faith facility (e.g. church, synagogue)
- ☐ Other Private Location
- ☐ Other Public Location

### Client's County of Residence:

\_\_\_\_\_

### Health Insurance:

- ☐ Medicare
- ☐ Private
- ☐ None
- ☐ Medicaid, No Cash Grant
- ☐ Medicaid, Cash Grant
- ☐ Not Reported

### Employment:

- ☐ Full Time
- ☐ Part Time
- ☐ Not Employed
- ☐ Not Reported

### Education:

- ☐ No High school
- ☐ Some High school
- ☐ High School Grad
- ☐ Some College
- ☐ College Grad or More

☐ Not reported

**Marital Status:**

- ☐ Single  
☐ Married  
☐ Divorced  
☐ Legally Separated  
☐ Widowed  
☐ Common Law Marriage  
☐ Living With Partner  
☐ Not Reported

**Pregnant?**

- ☐ Yes  
☐ No  
☐ Not reported

**Did Crime Occur On A Reservation?**

- ☐ Yes  
☐ No

**Refugee/Immigrant/Asylum Seeker?**

- ☐ Yes  
☐ No  
☐ Not reported

**Limited English proficiency?**

- ☐ Yes  
☐ No  
☐ Not reported

IF SO, FIRST LANGUAGE?

\_\_\_\_\_

**Veteran's Status?**

- ☐ Yes  
☐ No  
☐ Not reported

**CHILDREN** *(for additional children, use back of sheet)*

CHILD #1	CHILD #2	CHILD #3	CHILD #4
<b>Age:</b> _____	<b>Age:</b> _____	<b>Age:</b> _____	<b>Age:</b> _____
<b>Race:</b>	<b>Race:</b>	<b>Race:</b>	<b>Race:</b>
<input type="checkbox"/> African American, Black	<input type="checkbox"/> African American, Black	<input type="checkbox"/> African American, Black	<input type="checkbox"/> African American, Black
<input type="checkbox"/> Asian	<input type="checkbox"/> Asian	<input type="checkbox"/> Asian	<input type="checkbox"/> Asian
<input type="checkbox"/> Native American/Alaska Native	<input type="checkbox"/> Native American/Alaska Native	<input type="checkbox"/> Native American/Alaska Native	<input type="checkbox"/> Native American/Alaska Native
<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Pacific Islander
<input type="checkbox"/> White	<input type="checkbox"/> White	<input type="checkbox"/> White	<input type="checkbox"/> White
<input type="checkbox"/> Multi Racial	<input type="checkbox"/> Multi Racial	<input type="checkbox"/> Multi Racial	<input type="checkbox"/> Multi Racial
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<b>Ethnicity:</b>	<b>Ethnicity:</b>	<b>Ethnicity:</b>	<b>Ethnicity:</b>
<input type="checkbox"/> Non-Hispanic/Non-Latino	<input type="checkbox"/> Non-Hispanic/Non-Latino	<input type="checkbox"/> Non-Hispanic/Non-Latino	<input type="checkbox"/> Non-Hispanic/Non-Latino
<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Hispanic/Latino
<b>Gender:</b>	<b>Gender:</b>	<b>Gender:</b>	<b>Gender:</b>
<input type="checkbox"/> Female	<input type="checkbox"/> Female	<input type="checkbox"/> Female	<input type="checkbox"/> Female
<input type="checkbox"/> Male	<input type="checkbox"/> Male	<input type="checkbox"/> Male	<input type="checkbox"/> Male
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

## INCOME

### Primary Income Source (check only one):

- |  |  |
|--|--|
| <input type="checkbox"/> Alimony/Child Support   | <input type="checkbox"/> Employment      |
| <input type="checkbox"/> General Assistance      | <input type="checkbox"/> Social Security |
| <input type="checkbox"/> Spouse/Partner's Income | <input type="checkbox"/> SSI             |
| <input type="checkbox"/> TANF/AFDC               | <input type="checkbox"/> Other Income    |
| <input type="checkbox"/> None                    | <input type="checkbox"/> Not Reported    |

Monthly Income: \$ \_\_\_\_\_

### Other income sources, check as many as apply:

- |  |  |
|--|--|
| <input type="checkbox"/> Alimony/Child Support | <input type="checkbox"/> Employment      |
| <input type="checkbox"/> General Assistance    | <input type="checkbox"/> Social Security |
| <input type="checkbox"/> Spouse's Income       | <input type="checkbox"/> SSI             |
| <input type="checkbox"/> TANF/AFDC             | <input type="checkbox"/> Other Income    |
| <input type="checkbox"/> None                  | <input type="checkbox"/> Not Reported    |

## REFERRALS

### Referred From:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Police         | <input type="checkbox"/> DCFS                     | <input type="checkbox"/> Medical Advocacy Program  |
| <input type="checkbox"/> Hospital       | <input type="checkbox"/> Education System         | <input type="checkbox"/> Other Project/Crisis Line |
| <input type="checkbox"/> Clergy         | <input type="checkbox"/> Legal System/ Prosecutor | <input type="checkbox"/> Telephone                 |
| <input type="checkbox"/> Media          | <input type="checkbox"/> Other Medical            | <input type="checkbox"/> Legal Aid Attorney        |
| <input type="checkbox"/> Friend         | <input type="checkbox"/> Private Attorney         | <input type="checkbox"/> Court                     |
| <input type="checkbox"/> Relative       | <input type="checkbox"/> Public Health            | <input type="checkbox"/> Other (please specify)    |
| <input type="checkbox"/> Center Hotline | <input type="checkbox"/> Social Services Program  | _____  |

### Referred To:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Police                   | <input type="checkbox"/> Other Medical            | <input type="checkbox"/> Other Project/Crisis Line |
| <input type="checkbox"/> Hospital                 | <input type="checkbox"/> Private Attorney         | <input type="checkbox"/> Legal Aid Attorney        |
| <input type="checkbox"/> Clergy                   | <input type="checkbox"/> Public Health            | <input type="checkbox"/> Court                     |
| <input type="checkbox"/> DCFS                     | <input type="checkbox"/> Social Services Program  | <input type="checkbox"/> Other (please specify)    |
| <input type="checkbox"/> Education System         | <input type="checkbox"/> Medical Advocacy Program | _____  |
| <input type="checkbox"/> Legal System/ Prosecutor |   |  |

## Other Issues Reported

### Other issues reported for client:

- ☐ Stalking
- ☐ Harassment
- ☐ Adult Survivor of Incest/Child Sexual Assault
- ☐ Rape or Sexual Assault
- ☐ Other
- ☐ Human Trafficking/Exploitation

### Other issues reported for client's children

- ☐ Child Sexual Assault
- ☐ Child Physical Abuse
- ☐ Child Neglect





**ABUSER****Relationship to Victim**

- ☐ Spouse
- ☐ Partner
- ☐ Ex-spouse
- ☐ Ex-partner
- ☐ Parent/Stepparent
- ☐ Other relative
- ☐ Other non-relative
- ☐ Not Reported

**Gender:**

- ☐ Male
- ☐ Female
- ☐ Other
- ☐ Not Reported

**Race:**

- ☐ African American, Black
- ☐ Asian
- ☐ Native American/Alaska Native
- ☐ Pacific Islander
- ☐ White
- ☐ Multi Racial
- ☐ Other
- ☐ Not Reported

**Ethnicity:**

- ☐ Non-Hispanic/Latino
- ☐ Hispanic/Latino
- ☐ Not Reported

**County of Residence****Visitation issues**

- ☐ Supervised Visitation
- ☐ Unsupervised Visitation
- ☐ Visitation Not An Issue
- ☐ Not Reported

**Age at intake \_\_\_\_  
OR select age range below:**

- ☐ 12 - 17 years
- ☐ 18 - 29 years
- ☐ 30 - 59 years
- ☐ 59 or older
- ☐ Unknown
- ☐ Not Reported

**SERVICES NEEDED/RECEIVED (Specific services will be entered on a separate form.)**

**Service Needs at Intake:**

- ☐ Advocacy-Based Counseling
- ☐ Child Care
- ☐ Civil Legal Advocacy
- ☐ Criminal Justice Advocacy
- ☐ Crisis Counseling/Intervention
- ☐ CVC Assistance
- ☐ Emergency DV Shelter
- ☐ Employment Assistance
- ☐ Hospital Response
- ☐ Housing Assistance
- ☐ Immigration Assistance
- ☐ Medical Advocacy
- ☐ Referrals
- ☐ Safety Planning
- ☐ Support Groups
- ☐ TANF/Welfare Assistance
- ☐ Transitional Shelter
- ☐ Transportation Assistance
- ☐ Victim/Witness Notification

**Service Received:**

- ☐ Advocacy-Based Counseling
- ☐ Child Care
- ☐ Civil Legal Advocacy
- ☐ Criminal Justice Advocacy
- ☐ Crisis Counseling/Intervention
- ☐ CVC Assistance
- ☐ Emergency DV Shelter
- ☐ Employment Assistance
- ☐ Hospital Response
- ☐ Housing Assistance
- ☐ Immigration Assistance
- ☐ Medical Advocacy
- ☐ Referrals
- ☐ Safety Planning
- ☐ Support Groups
- ☐ TANF/Welfare Assistance
- ☐ Transitional Shelter
- ☐ Transportation Assistance
- ☐ Victim/Witness Notification

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### EXAMPLE SERVICE SUMMARY FORM

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The following is one example of the many ways an agency might choose to collect direct service information. For more examples of service summary forms, visit the OCVA website at [www.ocva.wa.gov](http://www.ocva.wa.gov).

Client ID#	Case #	Date:	Service Performed:	Hours:	Staff Member:

## BATCH HOTLINE CALL FORM EXAMPLE #1

*(Unmet Needs for Shelter Included)*

Hotline Report for Staff Member: \_\_\_\_\_

*Instructions: Mark the date and type of call received on the hotline.*

Date	Type of Intervention	Shelter Turnaway?
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Not an unmet shelter request <input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Not an unmet shelter request <input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Not an unmet shelter request <input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Not an unmet shelter request <input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Not an unmet shelter request <input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Not an unmet shelter request <input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Not an unmet shelter request <input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Not an unmet shelter request <input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Not an unmet shelter request <input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter

Total Calculations for Staff Member: \_\_\_\_\_

**Instructions:** Use this sheet to total the calls collected for each date. Once the totals on this page are complete, this information may be entered into InfoNet as batched calls. If your agency doesn't provide shelter, or if you prefer to enter Unmet Shelter Request contacts separately, please see Example 2 on the following pages.

	CRISIS INTERVENTION	INFORMATION AND REFERRAL	BOTH
<b>DATE:</b> _____			
NO UNMET SHELTER REQUEST			
SHELTER AT CAPACITY			
NOT ELIGIBLE FOR SHELTER			
OTHER REASON UNABLE TO SHELTER			
<b>DATE:</b> _____			
NO UNMET SHELTER REQUEST			
SHELTER AT CAPACITY			
NOT ELIGIBLE FOR SHELTER			
OTHER REASON UNABLE TO SHELTER			
<b>DATE:</b> _____			
NO UNMET SHELTER REQUEST			
SHELTER AT CAPACITY			
NOT ELIGIBLE FOR SHELTER			
OTHER REASON UNABLE TO SHELTER			
<b>DATE:</b> _____			
NO UNMET SHELTER REQUEST			
SHELTER AT CAPACITY			
NOT ELIGIBLE FOR SHELTER			
OTHER REASON UNABLE TO SHELTER			
<b>DATE:</b> _____			
NO UNMET SHELTER REQUEST			
SHELTER AT CAPACITY			
NOT ELIGIBLE FOR SHELTER			
OTHER REASON UNABLE TO SHELTER			

## Batch Hotline Call Form Example #2

*(Unmet Needs for Shelter Noted Separately)*

*Instructions: Mark the date and type of call received on the hotline. When page is completed, count the number of each type of call for each date. If the call involves a shelter turnaway, record individually on second page.*

Staff Member: \_\_\_\_\_

DATE	CRISIS INTERVENTION	INFORMATION AND REFERRAL	BOTH
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Totals:</b>	<b>CRISIS INTERVENTION</b>	<b>INFORMATION AND REFERRAL</b>	<b>BOTH</b>

## Calls including Unmet requests for Shelter

*Instructions: Use this sheet to collect individual data on Unmet Shelter Request contacts. These may then be entered individually into InfoNet.*

Staff Member: \_\_\_\_\_

Date	Type of Intervention	Reason for Unmet Request for Shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter
	<input type="checkbox"/> Crisis Intervention <input type="checkbox"/> Information & Referral <input type="checkbox"/> Both	<input type="checkbox"/> Shelter At Capacity <input type="checkbox"/> Not eligible <input type="checkbox"/> Other reason unable to shelter