

Application Cover Sheet RFA PROCESS

VICTIM/WITNESS ASSISTANCE PROGRAM

Submitted by:

CANDICE HOOPER, DISTRICT ATTORNEY COUNTY OF SAN BENITO 419 4TH STREET

HOLLISTER, CA 95023-3801

TELEPHONE: (831) 636-4120

FAX: (831) 636-4126

		(Cal OES Use Only)		
Cal OES#	FIPS#	VS#	Subaward #	

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES GRANT SUBAWARD FACE SHEET

2016 9. VOCA \$86,852 Select 10. Select 5.0 \$0 \$0. \$0. \$0. \$0. \$0. \$0. \$0. \$0. \$0	The Ca	lifornia Governor	's Office of Emerg	ency Services	(Cal OES), make	es a Grant Suba	ward of funds set f	orth to the follow	wing:
3. Implementing Agency Address: 419 Fourth Street 4. Location of Project: Hollister City City County City County City County County City San Benito City San Benito City San Benito County Zip+4 5. Disaster/Program Title: Victim/Witness Assistance Program 6. Performance Period: 07/01/16 to 06/30/17 7. Indirect Cost Rate: NIA; 310% de minimis; Federally Approved ICR Fund Source A. State B. Federal C. Total D. Cash Match Match F. Total Match Match F. Total Match Match Cost Cost Cost Cost Cost Cost Cost Cost	1. Subr	ecipient: Cou	inty of San Benito)				1a. DUNS	#: 069115202
4. Location of Project: Hollister City County City County City County Title: For and Source A. State B. Federall C. Total Match Match Match F. Total Match Match F. Total Cost Cos	2. Impl	ementing Agend	cy: District Attorn	ey's Office, San	Benito County		_	2a. DUNS#	t: 069115202
4. Location of Project: Hollister City County County Zipr4 5. Disaster/Program Title: Victim/Witness Assistance Program 6. Performance Period: 07/01/16 6. Per	3. Impl	ementing Agend	cy Address: 419	9 Fourth Stree	t		Hollister		95023-3840
5. Disaster/Program Title: Victim/Witness Assistance Program 6. Performance Period: 07/01/16 to 06/30/17 7. Indirect Cost Rate: N/A; 10% de minimis; Federally Approved ICR	376		-					City	D-05-5-022-0.750
7. Indirect Cost Rate: N/A; 10% de minimis; Federally Approved ICR				City	,		C	County	
Fund Source A. State B. Federal C. Total D. Cash Match Match Match Match Match Cost	5. Disa	ster/Program Ti	tle: Victim/Witne	ess Assistance	e Program	6. Pe	rformance Period:	07/01/16	to 06/30/17
Fund Source A. State B. Federal C. Total Match Match Match Cost	7. Indir	ect Cost Rate: [N/A;x10% c	le minimis;	Federally App	roved ICR	%		
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Select 10. Select 10. Select \$0 \$0 \$0 Select 11. Select \$0 \$0 \$0 Select 12. Select \$0 \$0 \$0 Select 13. This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget. 14. Official Authorized to Sign for Subrecipient: 15. Federal Employer ID Number: 946000530 Title: Program Coordinator Telephone: (831)634-1397 FAX: (831)634-1398 Email: jroybal@cosb.us Fayment Mailing Address: 481 Fourth Street City: Hollister Zip+4: 95023-3840 Signature: Usual Royal Date: 5-17-16 For Cal OES USE ONLY] I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.	2016	8. VWA0	\$ 66,017					\$0	\$ 66,017
Select 11. Select \$0 \$0 \$0 Select 12. Select \$0 \$0 \$0 Select 13. This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget. 14. Official Authorized to Sign for Subrecipient: 15. Federal Employer ID Number: 946000530 Title: Program Coordinator Telephone: (831)634-1397 FAX: (831)634-1398 Email: jroybal@cosb.us Grae code) Payment Mailing Address: 481 Fourth Street City: Hollister Zip+4: 95023-3840 Signature: Use Roybal Date: 5-17-16 [FOR Cal OES USE ONLY] I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.	2016	9. VOCA		\$ 86,852				\$ 0	\$ 86,852
Select 12. Select	Select	10, Select						\$ 0	\$0
TOTALS \$ 66,017 \$ 86,852 \$ 152,869 \$ 0 \$ 0 \$ 0 \$ 12. G Total Project Cost 13. This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Boad Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget. 14. Official Authorized to Sign for Subrecipient: 15. Federal Employer ID Number: 946000530 16. Program Coordinator Telephone: (831)634-1397 FAX: (831)634-1398 F	Select	11. Select						\$ 0	\$ 0
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Name: Julie Roybal Title: Program Coordinator Telephone: (831)634-1397 FAX: (831)634-1398 Fax: (831)634-1398 Fax: (831)634-1398 Garea code) Payment Mailing Address: 481 Fourth Street Signature: Date: 5-17-16 For Cal Des Use ONLY] I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.	Assuran Financia received Subawai requiren	ces/Certifications. Officer, City Man pursuant to this a rd and agrees to ac nents, federal prog	I hereby certify I an ager, County Admir agreement will be sp dminister the grant pram guidelines, and	n vested with the histrator, Governi ent exclusively o project in accord I Cal OES policy	authority to enter ing Board Chair, on on the purposes sp ance with the Gran	into this Grant Sur other Approving pecified in the Gra ot Subaward as we	baward, and have the Body. The Subrecipe of Subaward. The See of as all applicable see of the see o	he approval of the pient certifies that ubrecipient acce state and federal	t all funds pts this Grant laws, audit
Telephone: (831)634-1397 FAX: (831)634-1398 Email: jroybal@cosb.us Payment Mailing Address: 481 Fourth Street City: Hollister Zip+4: 95023-3840 Signature: Date: 5-17-16 I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.	14. Offi	cial Authorized	to Sign for Subr	ecipient:	15	i. Federal Empl	oyer ID Number:	946000530)
(area code) Payment Mailing Address: 481 Fourth Street Signature: Date: 5-17-/6 [FOR Cal DES USE ONLY] I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.	Name:	Julie Roybal				Title: Progr	am Coordinator		
Signature: Date: 5-17-16 [FOR Cal DES USE ONLY] I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.	Telepho	,,,,,		FAX: <u>(</u>		Email	jroybal@cosl	b.us	
[FOR Cal OES USE ONLY] I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.	Paymer	nt Mailing Addres	ss: 481 Fourth	Street		City:	Hollister	Zip+	4: 95023-3840
I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.	Signatu	re:	Xulie Ro	up bal		Date:	5-17-16		
			0	V	[FOR Cal OES US	SE ONLY]			
Cal OES Fiscal Officer Date Cal OES Director (or designee) Date	I hereby	certify upon my ov	vn personal knowled	dge that budgeted	d funds are availab	ole for the period a	nd purposes of this	expenditure state	ed above.
	Cal	DES Fiscal Officer	- X		Date	Cal OES	Director (or designe	ee)	Date

PROJECT CONTACT INFORMATION

Subrecipient:	County of San Benito				Subaward #	#: VW16 33 0350				
Provide the name, title, address, telephone number, and e-mail address for the project contacts named below. NOTE: If you use a PO Box address, a street address is also required for package delivery and site visit purposes.										
1. The Project	ct Director for the project:									
Name:	Julie Roybal	200 200		Title:	Program Coc	ordinator				
	(831)634-1397 419 Fourth Street, Hollister				Email Address:	jroybal@cosb.us				
2. The Finance	cial Officer for the project:									
Name:	Joe Paul Gonzalez			Title:	County Auditor					
Telephone #:	(831)636-4090 481 4th Street, Hollister, CA	Fax#:	(831)63		Email Address:	jpgonzalez@cosb.us				
	having Routine Programm			lity for	the project:					
Name:	Julie Roybal			Title:	Program Coord	dinator				
Telephone #:	(831)634-1397 419 Fourth Street, Hollister	Fax#:	(831)63	4-1398	Email Address:	jroybal@cosb.us				
	Section 1988 CHES No. of the Control	F-7895	AND AND COM-	N/M	190 m					
	having Routine Fiscal Res				25					
Name:	Melinda Casillas			Title:	Management A	nalyst-Budget				
	(831)634-4000 481 4th Street, Hollister, CA			5-4010	Email Address:	mc@cosb.us				
5. The Execut		/ Based	d Orgran		or the Chief Ex	ecutive Officer (i.e., chief of police,				
Name:	Candice Hooper			Title:	District Attorne	у				
	2	Fax#	(831)636	6-4120	Email Address:	chooper@cosb.us				
	419 Fourth Street, Hollister,									
or Commun	I Designated by the Governi lity-Based Organization, as st			14 of t	he Grant Subaw	vard Face Sheet:				
Name:	Julie Roybal			Title:	Program Coord	inator				
	(831)634-1397 419 Fourth Street, Hollister,				Email Address:	jroybal@cosb.us				
550 00										
7. The <u>chair</u> o	f the Governing Body of the	subje	cipient.							
Agent	Pohort Divos				Chair Board of	f Suponvisors				
	Robert Rivas (831)636-4000		/004\\05		Chair, Board of	f Supervisors supervisors@cosb.us				

SIGNATURE AUTHORIZATION

	Subawar	rd #: VW 16 33 0350	
Subrecipient:	County of San Benito		
Implementing Agency:	County Administrative Off	fice	
	3		
*The Proj	ect Director and Financial Off	ficer are <i>REQUIRED</i> to sign this	form.
*Project Director: Julie	Roybal	*Financial Officer: Joe Pa	aul Gonzalez
Signature: Julie	Roybal	Signature: Signature:	Harrolley
Date: 5-17-	Ú	Date: 5-18	12016
		Date: 1/ 5/10	V 20115
The following persons are	authorized to sign for the	The following persons are auth	norized to sign for the
Project Director		Financial Officer	1
Canadia IT	1361		
Signature		Signature	
Candice Hooper			
Print Name		Print Name	
Signature		Signature	
Print Name		Print Name	
Signature		Signature	
Print Name		Print Name	
Signature		Signature	
g		3114441.0	
Print Name	5	Print Name	
	.n		
Signature		Signature	
Print Name		Print Name	

CERTIFICATION OF ASSURANCE OF COMPLIANCE Victims of Crime Act (VOCA) Fund

The applicant must complete a Certification of Assurance of Compliance-VOCA (Cal OES 2-104f), which includes details regarding Federal Grant Funds, Equal Employment Opportunity Program, Drug Free Workplace Compliance, California Environmental Quality Act, Lobbying, Debarment and Suspension requirements, Proof of Authority from City Council/Governing Board, Civil Rights Compliance, and the special conditions for Subaward with the above mentioned fund. The applicant is required to submit the necessary assurances and documentation before finalization of the Grant Subaward. In signing the Grant Subaward Face Sheet, the applicant formally notifies Cal OES that the applicant will comply with all pertinent requirements.

Resolutions are no longer required as submission documents. Cal OES has incorporated the resolution into the Certification of Assurance of Compliance, Section VII, entitled, "Proof of Authority from City Council/Governing Board." The Applicant is required to obtain written authorization (original signature) from the City Council/Governing board that the official executing the agreement is, in fact, authorized to do so, and will maintain said written authorization on file and readily available upon demand. This requirement does not apply to state agencies.

CERTIFICATION OF ASSURANCE OF COMPLIANCE Victims of Crime Act (VOCA) Fund

١,	Julie Roybal				hereby certify that
	(official authorize	d to sign Subawa	ard; same person	as Section 14 on Subaward Face Sheet)	=
SUE	BRECIPIENT:	County of Sa	an Benito		
IMP	LEMENTING A	GENCY:	District Attor	ney's Office	
PRO	DJECT TITLE:	Victim/	Witness Assis	stance Program	
is re (sta	esponsible for re te and/or federa	eviewing the S al) as directed	Subrecipient Ha by Cal OES in	andbook and adhering to all of the Social of the Social of the following, but not limited to, the following.	Subaward requirements wing areas:
l.	Federal Gran	t Funds			
	audit pursuan	t to OMB Unif	form Guidance	ore in federal grant funds annually and a CFR Part 200, Subpart F and are See Section 8000 of the Subrecipie	e allowed to utilize federal
	The abo	ve named Sub	brecipient rece	eives \$750,000 or more in federal gr	ant funds annually.
	✓ The above	ve named Sub	precipient does	s not receive \$750,000 or more in fe	ederal grant funds annually.
II.	Equal Employ	ment Oppor	tunity – (Sub	recipient Handbook Section 2151	")
	discrimination ancestry, disal characteristics pregnancy disa	or harassmer bility (mental a i), marital stati ability leave, c and federal r	nt in employme and physical) in us, sex, sexual or age (over 40 equirements i	rnia to promote equal employment of ent because of race, religious creed, ncluding HIV and AIDS, medical con Il orientation, denial of family medica D). Cal OES-funded projects certif regarding equal employment opp	, color, national origin, ndition (cancer and genetic al care leave, denial of by that they will comply
	Please provide	the following	information:	No.	
	Equal Empl	oyment Oppo	rtunity Officer:	Ray Espinosa	
	Title:	County Adm	ninistrative Offic	cer	
	Address:	481 4th Stre	et, Hollister, C	A 95023-3840	
	Phone:	(831)636-40	000		
	Email:	respinosa@	cosb.us	2	

III. Drug-Free Workplace Act of 1990 - (Subrecipient Handbook, Section 2152)

The State of California requires that every person or organization subawarded a grant or contract shall certify it will provide a drug-free workplace.

IV. California Environmental Quality Act (CEQA) – (Subrecipient Handbook, Section 2153)

The California Environmental Quality Act (CEQA) (*Public Resources Code, Section 21000 et seq.*) requires all Cal OES funded projects to certify compliance with CEQA. Projects receiving funding must coordinate with their city or county planning agency to ensure that the project is compliance with CEQA requirements.

V. Lobbying – (Subrecipient Handbook Section 2154)

Cal OES grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to, being paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement.

VI. Debarment and Suspension – (Subrecipient Handbook Section 2155) (This applies to federally funded grants only.)

Cal OES-funded projects must certify that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department of agency.

VII. Proof of Authority from City Council/Governing Board

The above-named organization (Applicant) accepts responsibility for and will comply with the requirement to obtain a signed resolution from the city council/governing board in support of this program. The applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of Cal OES, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Subaward, including civil court actions for damages, shall be the responsibility of the grant Subrecipient and the authorizing agency. The State of California and Cal OES disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from Cal OES shall not be used to supplant expenditures controlled by the city council/governing board.

The applicant is required to obtain written authorization from the city council/governing board that the official executing this agreement is, in fact, authorized to do so. The applicant is also required to maintain said written authorization on file and readily available upon demand.

VIII. Civil Rights Compliance

The Subrecipient complies with all laws that prohibit excluding, denying or discriminating against any person based on actual or perceived race, color, national origin, disability, religion, age, sex, gender identity, and sexual orientation in both the delivery of services and employment practices and does not use federal financial assistance to engage in explicitly religious activities.

IX. Special Condition for Grant Subaward with Victims of Crime Act (VOCA) Funds

- Computer Network Requirement: The recipient understands and agrees that (a)
 No award funds may be used to maintain or establish a computer network unless
 such network blocks the viewing, downloading, and exchanging of pornography,
 and (b) Nothing in subsection (a) limits the use of funds necessary for any federal,
 state, tribal, or local law enforcement agency or any other entity carrying out
 criminal investigations, prosecution, or adjudication activities.
- Prohibit use of funds for ACORN and its subsidiaries: Recipient understands and agrees that it cannot use any federal funds, either directly or indirectly, in support of any contract or subaward to either the Association of Community Organizations for Reform Now (ACORN) or its subsidiaries, without the express prior written approval of OJP.
- Text Messaging Policy: Pursuant to Executive Order 13513, "Federal Leadership on Reducing Text Messaging While Driving," 74 Fed. Reg. 51225 (October 1, 2009), the Department encourages recipients and subrecipients to adopt and enforce policies banning employees from text messaging while driving any vehicle during the course of performing work funded by this grant, and to establish workplace safety policies and conduct education, awareness, and other outreach to decrease crashes caused by distracted drivers.
- Nondiscrimination in programs involving students: The recipient understands and
 agrees that award funds may not be used to discriminate against or denigrate the
 religious or moral beliefs of students who participate in programs for which financial
 assistance is provided from those funds, or of the parents or legal guardians of such
 students.
- Registration with the System for Award Management and Universal Identifier Requirements: The recipient agrees to comply with applicable requirements regarding registration with the System for Award Management (SAM) (or with a successor government-wide system officially designated by OMB and OJP). The recipient also agrees to comply with applicable restrictions on subawards to first-tier subrecipients that do not acquire and provide a Data Universal Numbering System (DUNS) number. The details of recipient obligations are posted on the Office of Justice Programs web site at http://www.ojp.gov/funding/sam.htm (Award condition: Registration with the System for Award Management and Universal Identifier Requirements), and are incorporated by reference here. This special condition does not apply to an award to an individual who received the award as a natural

- person (i.e., unrelated to any business or nonprofit organization that he or she may own or operate in his or her name).
- VA OCFO Access: The Grantee authorizes Office for Victims of Crime (OVC) and/ or the Office of the Chief Financial Officer (OCFO), and its representatives, access to and the right to examine all records, books, paper or documents related to the VOCA grant. The State will further ensure that all VOCA subgrantees will authorize representatives of OVC and OCFO access to and the right to examine all records, books, paper or documents related to the VOCA grant.
- Reporting Potential Fraud, Waste, and Abuse, and Similar Misconduct: The recipient must promptly refer to the DOJ OIG any credible evidence that a principal, employee, agent, contractor, subgrantee, subcontractor, or other person has either 1) submitted a false claim for grant funds under the False Claims Act; or 2) committed a criminal or civil violation of laws pertaining to fraud, conflict of interest, bribery, gratuity, or similar misconduct involving grant funds. This condition also applies to any subrecipients. Potential fraud, waste, abuse, or misconduct should be reported to the OIG by mail: Office of the Inspector General, U.S. Department of Justice Investigations Division, 950 Pennsylvania Avenue, N.W., Room 4706, Washington, DC 20530; email: oig.hotline@usdoi.gov; hotline: (contact information in English and Spanish): 800-869—4499; or hotline fax: 202-616-9881. Additional information is available from the DOJ OIG website at www.usdoj.gov/oig.

All appropriate documentation must be maintained on file by the project and available for Cal OES or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the Subrecipient may be ineligible for subaward of any future grants if the Cal OES determines that any of the following has occurred: (1) the Subrecipient has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

CERTIFICATION								
I, the official named below, am the same individual authorized to sign the Subaward [Section 14 on Grant Subaward Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant Subrecipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.								
Authorized Official's Signature: Julia Rozbel								
Authorized Official's Typed Name: Julie Roybal								
Authorized Official's Title: Program Coordinator								
Date Executed: May 17, 2016								
Federal Employer ID #: 94-6000530 Federal DUNS # 069115202								
Current Central Contractor Registration Expiration Date: 04/12/17								
Executed in the City/County of: City of Hollister/County of San Benito								
AUTHORIZED BY: (not applicable to State agencies)								
 ☐ City Financial Officer ☐ City Manager ☐ Governing Board Chair County Financial Officer County Manager 								
Signature: JOE PAUL GONZALEZ								
Title: COUNTY AUDITOR								

Budget Narrative

Grant funds in the amount of \$141,071 have been allocated to the Personal Services

Category of this program's budget. This will off-set the cost of salaries and OASDI contributions

For three, 1 FTE position, One half time position and one temporary, part-time: Program

Coordinator and two Victim Advocate I positions. These grant funds will be used to provide direct servicers to victims. Grant funds in the amount of \$11,798 have been allocated to the

Operating Expense Category. No grant funds have been allocated in the equipment category.

The V/W coordinator has 8 years' experience in this position. However, she has over 24 years' experience as a Victim Advocate II. The Victim Advocates I have 7 months experience. These positions are part-time positions. The qualifications and experience of all staff members meet or exceed the requirements outline in the job descriptions adopted for these positions by Recipient. One of the Victim Advocates I has completed the Advocate Training I and II. The coordinator has completed both the advanced advocate and coordinator's training. In addition, the coordinator has also completed the 40 hour NOVA Community Crisis response Training and The California Coordinator Academy (VWAC).

Providing direct services to victims take priority over all other duties and responsibilities of staff. All staff members are Hispanic. The program coordinator is certified by Recipient to read, write and translate Spanish. The bilingual/biliterate qualifications are essential if we are to achieve the goals and objectives of the program. Consistently each year, this program services Two Hispanic clients to one Anglo client.

The allocation of grant funds in this manner minimizes administrative costs and supports direct services to victims. No grant funds will be used to clerical support. Program volunteers are used to assist with clerical duties.

BUDGET CATEGORY AND LINE ITEM DETAIL

Subrecipient: County of San Benito		55W 56W 5		Subaward	#: 16 33 03	50	***************************************
A. Personal Services – Salaries/Employee Benefits	VWAO	VOCA	VOCA MATCH		27		COST
PROGRAM COORDINATOR Range 22.7, Step E Salary of 1.0 FTE to oversee day to day activities of the program and supervise program's responsibilities and activities; and provide mandatory and optional services \$6,074@ 100% x 12 months	05.570	\$53,821	\$19,067				\$72,888
OESDI/Medicare: \$6,074 x 7.65% Group health, dental, life & AD&D Insurance \$13,200/year x 1.0 FTE Retirement: \$6,074 x 17.99% Workmen's Comp. Insurance	\$5,576 \$13,200 \$13,116	\$2,250					\$5,576 \$13,200 \$13,116 \$2,250
VICTIM ADVOCATE Salary of one .50 staff person to provide mandatory and optional services \$1,701 x 12 months OESDI/Medicare: \$1,701 x 7.65% Group, health, dental, life & AD&D Retirement: \$20,416 x 17.91 Worker's Comp		\$20,416 \$1,562 \$3,656 \$2,250	\$2,400				\$20,416 \$1,562 \$2,400 \$3,656 \$2,250
VICTIM ADVOCATE Temporary-Part-time 4 hrs/wk x 52 weeks @ 16.78 per hr. OESDI/Medicare \$3,490 x 7.65%	\$3,370 \$267	\$120					\$3,490 \$267
ersonal Section Totals	\$35,529	\$84,075	\$21,467	\$0	\$0	\$0	\$141,071
ERSONAL SECTION TOTAL							\$141,071

BUDGET CATEGORY AND LINE ITEM DETAIL

### TRAVEL EXPENSES Attendance by Program Coordinator at two CaloEs Training Conferences Lodging; \$125/night +tax/4 Per Diem; \$46/day x 8 days Mileage; \$1,200 x .554 Attendance by Advocate to attend Advance Training Training: Lodging, 3 days @ 4104 + Tax/3 Per Diem; \$46/3 days Mileage: 350 miles x \$.54 Misc. mileage for staff to conduct field visits and transport victims to and from court and the District Attorney's Office: 1,200 miles x \$.54 **COMMUNICATIONS** Telephone/fax expenses \$75/mo. X 12 months **DUES** Annual membership dues for California Crime Victims Assistance Association **PINTING** 3,800 V/W brochures @\$.1268 + Tax **POSTAGE** \$100/mo. X 12 months **Destage** \$1,200 **De minimis** **De minimis** **De minimis** **De minimis** **Travel Expenses		COS
TRAVEL EXPENSES Attendance by Program Coordinator at two CalOES Training Conferences Lodging: \$125/night + tax/4 \$500 Per Diem: \$46/day x 8 days \$94 \$90 Mileage: \$1,200 x \$.54 \$402 \$246 Attendance by Advocate to attend Advance Training Training: Lodging, 3 days @ 4104 + Tax/3 Per Diem: \$46/3 days Mileage: 350 miles x \$.54 \$189 Misc. mileage for staff to conduct field visits and transport victims to and from court and the District Attorney's Office: 1,200 miles x \$.54 \$648 COMMUNICATIONS Telephone/fax expenses \$75/mo. X 12 months DUES Annual membership dues for California Crime Victims Assistance Association \$125 OFFICE SUPPLIES \$200/mo. X 12 months \$2,400 PRINTING 3,800 V/W brochures @\$.1268 + Tax \$467 POSTAGE \$100/mo. X 12 months \$1,200 De minimis \$1,200		\$ \$
Attendance by Program Coordinator at two CalOES Training Conferences Lodging; \$125/night + tax/4 Per Diem: \$46/day x 8 days Mileage: \$1,200 x \$.54 Attendance by Advocate to attend Advance Training Training: Lodging, 3 days @ 4104 + Tax/3 Per Diem: \$46/3 days Mileage: 350 miles x \$.54 Misc. mileage for staff to conduct field visits and transport victims to and from court and the District Attorney's Office: 1,200 miles x \$.54 COMMUNICATIONS Telephone/fax expenses \$75/mo. X 12 months DUES Annual membership dues for California Crime Victims Assistance Association \$125 OFFICE SUPPLIES \$200/mo. X 12 months \$2,400 PRINTING 3,800 V/W brochures @ \$.1268 + Tax \$467 POSTAGE \$100/mo. X 12 months \$1,200 De minimis		\$ \$ \$ \$ \$
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transport victims to and from court and the District Attorney's Office: 1,200 miles x \$.54 COMMUNICATIONS Telephone/fax expenses \$75/mo. X 12 months DUES Annual membership dues for California Crime Victims Assistance Association OFFICE SUPPLIES \$200/mo. X 12 months \$2,400 PRINTING 3,800 V/W brochures @\$.1268 + Tax POSTAGE \$100/mo. X 12 months \$1,200 De minimis		\$
Telephone/fax expenses \$75/mo. X 12 months \$900 DUES Annual membership dues for California Crime Victims Assistance Association \$125 OFFICE SUPPLIES \$200/mo. X 12 months \$2,400 PRINTING 3,800 V/W brochures @\$.1268 + Tax \$467 POSTAGE \$100/mo. X 12 months \$1,200 De minimis		\$
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\$200/mo. X 12 months \$2,400 PRINTING 3,800 V/W brochures @\$.1268 + Tax \$467 POSTAGE \$100/mo. X 12 months \$1,200 De minimis		\$
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\$100/mo. X 12 months \$1,200 De minimis		\$
		\$1,:
O%of 102,181 (MTDA)=10,218 x 4% =\$4087 MTDC Modified Total Direct Cost Use of 4% for Executive Director Salary, utilities, storage, and advertising		\$4,0
rating Section Totals \$8,775 \$2,777 \$246 \$0	\$0 \$0	\$11,7

BUDGET CATEGORY AND LINE ITEM DETAIL

Subrecipient: County of San Benito					#: VW 16 33	0350	
. Equipment	VWAO	VOCA	VOCA MATCH				cos
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			74				
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ipment Section Totals	\$0	\$0	\$0	\$0	\$0	\$0	
JIPMENT SECTION TOTAL							60
			**********			***************************************	\$0 *********
Category Totals		***********		************	***********	***************************************	
ame as Section 12G on the Grant Subaward Face Sheet	\$44,304	\$86,852	\$21,713	\$0	\$0	\$0	

Project Narrative

A. Description of the County of San Benito:

San Benito County covers approximately 1396 square miles ranging in elevation from near sea level to over 5,000 feet. San Benito County has a population of approximately 57,784 and is bordered to the north by Santa Clara and Santa Cruz Counties, by Merced and Fresno Counties to the east and by Monterey County to the south and west. Hollister, the county seat, is approximately 50 miles south of San Jose, 45 miles inland from Monterey and 300 miles north of Los Angeles. The County, although still considered largely rural, is now also suburban in some areas due to a significant increase in home construction in the last ten years. The racial makeup of the county is 37.8% White, 56.9% Hispanic and 5.3% other. San Benito County includes the incorporated cities of Hollister and San Juan Bautista and the unincorporated town of Aromas, Paicines, Tres Pinos and New Idria (abandoned).

B. Problem Statement:

The county seat is Hollister, which is two-thirds of the county's population. Hollister continues to grow. This growth has had a major impact on law enforcement. Historically, the number of law enforcement officers on patrol in this service area has remained one of the lowest in the state per capita. A shortage of manpower has resulted in increased incidents of crimes not being investigated. The Hollister Police Department continues to struggle with a backlog of cases to investigate. Because of the manpower shortage, investigators have even had to fill in on patrol. In addition, all law enforcement agencies have shifted focus to quell the rising incidents of gang violence problems specific to San Benito County. As a result, all crime victims in this service area continue to be adversely affected by the system's overload.

Since its inception in 1982, this center has become a viable, and credible, resource to the community; not only to victims of crime, but to the entire criminal justice system as well. A comprehensive service center is essential to this area. Law enforcement personnel and criminal justice agencies do not have the time or the manpower to assist victims facing the aftermath of crime, or to guide them through the criminal justice system, or to help them look for the special services they may require in order to recover. Both the individual and the community suffer a personal or financial loss, physical and/or emotional trauma. Likewise, each member of a victim's immediate family is similarly affected. The community loses a sense of security and trust. Currently, there is only one non-profit organization providing limited services to this service area to sexual assault victims. Project staff has provided services to over 500 new crime victims and their immediate family members each year for the past several years. Only by receiving this funding from California Governor's Office of Emergency Services (Cal OES).

C. Plan and Implementation:

San Benito V/W is centrally located in Hollister, the county seat, from which services are proved to victims of crime countywide. The goals, objectives and activities of San Benito County V/W are consistent with the legislative intent and mandatory and optional services delineated in Penal Code 13835.5 et seq and outlined in the Victim/Witness Program Guidelines. San Benito County V/W serves all types of crime victims although priority is given to victims of violent crime, domestic violence victims, child victims and elderly/dependent adult victims. Services are available to victims in cases where there are no identified suspects and/or no pending criminal case, although the scope of services is limited in the absence of a criminal case. V/W staff is available during normal business hours to respond to crime scenes, law enforcement agencies and other location upon request. The V/W Director is available after hours for homicide response upon law enforcement request. All Victim/Witness crisis and support services are

provided based on a "menu" of services provided by all V/W programs, the identified needs of the victim(s) and the specific circumstances surrounding the case.

V/W works closely with the domestic violence shelter, rape crisis center, and Social Services' child and adult services to minimize duplication of efforts and maximize services.

Staff has working relationships with the personnel of the Hollister Police Departments and San Benito County sheriff, the two main law enforcement agencies in the county. At least 80% of program referrals come from these two agencies. A supply of preprinted cards, in English and Spanish, outlining program services, is provided to all law enforcement personnel. The officers carry these cards to distribute to victims at the time they respond to a call. These cards refer victims to this center for services. The California Highway Patrol (housed out of this county) also utilizes a preprinted form on which officers designate the nearest center for assistance. Often officers refer individuals deemed by them to be "at risk" of becoming victimized to the center in order

to discuss options available to them to reduce that risk. As a division of the District Attorney's Office V/W has access to crime reports submitted by local law enforcement to the DA for filing/charging review and then screens those for victim information. The remainders of our referrals come from social services, probation, behavioral health, and county health department, the courts, school counselors, local physicians, psychotherapists, Emmaus House Domestic Violence Shelter, Community solutions and attorneys. V/W regularly monitors local media reports to keep abreast of new crimes as they occur. In crimes involving serious injury or incidents involving a fatality that may develop into a criminal case, this V/W will reach out to victims while the case is still under investigation by law enforcement to offer information and support. We also receive several "word-of-of mouth" clients each year, along with previous clients with new problems.

Staff is capable of providing legislated special services to victims who are hearing impaired, disabled and/or elderly. The center has access to a list of teachers currently employed by the County Office of Education, who know sign language. An added plus is that these teachers have experience working with the developmentally disabled. If needed, center staff may call on one of these teachers for assistance in assessing a victim's needs. No psychotherapists with sign language capabilities are practicing in this service area. However, staff is prepared to refer clients out of the area to therapist with sign language capabilities.

The center is easily accessible to both victims and other agencies and service providers. The office is handicap accessible. Bus service, which is wheelchair accessible, has a bus stop within half a block. A free parking garage is located on the next block from the center, if parking cannot be found on the street or in the parking lot behind the office. However, if a victim is not capable of coming to the center, staff will conduct a field visit to the victim to assess his/her needs.

Although the majority of contacts with victims is by phone, advocates also make field visits to victims' home, hospitals, law enforcement agencies and other locations as needed.

Additionally, advocates have in-person contact with victims at the V/W office or the courthouse regarding services, including the preparation of Victim Compensation (Cal VCP) claims and to prepare for court and attend proceedings. The Elder Abuse Multidisciplinary Team has been disbanded due to lack of staff at Adult Protective Services. However, staff maintains a working relationship with fellow members of that team. In addition, the senior citizen's center is no more than one block away from the center.

Due to the close working relationship of V/W advocates and assigned prosecutors, advocate frequently arrange pre-trial interview for the deputy district attorneys and provide support for

victims during interviews as well as standardized court support during hearing. After the conclusion of the criminal case, advocates often have continuing contact with victims, especially if there is a pending victim compensation claim, restitution order or if the defendant is sentence to prison. For cases involving state prison and the state juvenile justice system, advocates provide victims with information regarding their rights to information and notification.

Within 24 hours of a referral to V/W, staff will make contact with a victim to assess his/her needs. Contact is usually attempted immediately upon receiving the referral. Subsequent contact with the victim depends on many factors, but most victims are contacted numerous times over the course of a pending criminal case. Some victims of domestic violence and sexual assault are referred to the local women's shelter or the rape crisis center if there is no pending criminal case and their needs are best serve by those community-based agencies. When there is a pending criminal case, V/W staff will work in partnership with prosecutors and other community agencies and groups to provide an array of crisis and support services.

As a criminal-justice based victim service agency, V/W focuses on services related to criminal cases, such as criminal justice orientation, case status update, providing advocate support during district attorney and investigator interviews, court accompaniment and sentencing support/assistance. Other victim needs, such temporary housing and direct counseling may be best provided by other community agencies and groups. Existing Operational Agreements (OA's) with victim service agencies, first responders and other providers are used to define and clarify working relationships. V/W works to foster ongoing collaborations and a victim-focused approach with all partner agencies. Staff member attends the Child Abuse Response Team interviews whenever possible to provide services to victims and any family member having to wait during the interview. Staff also participates on the domestic violence coordinating

Subaward #:

VW 16 33 0350

committee of criminal justice agencies and other interested parties, which meets every other month to discuss service delivery problems.

V/W maintains a small Victims' Emergency Fund (created with donations from local organizations and individuals), which is used to provide financial intervention in response to a victim's immediate, basic need(s). Once a victim's initial needs are met, staff will continue to monitor the victim's physical and/or emotional needs and provide peer counseling regarding all of the problems that arise in the aftermath of a crime. The provision of services by staff is determined by the relative seriousness of the crime, the need(s) of the victim, and that victim's particular capabilities. The needs of a victim will outweigh the seriousness of a crime, unless it is necessary to prioritize the provision of services at that specific point in time.

V/W has been actively using volunteers since 1990. V/W has placed notices in the local newspapers and community college bulletin boards requesting volunteers. In addition, V/W has a continual listing with the Retired Seniors Volunteer Program (RSVP) for clerical/reception assistance. All prospective volunteers must complete a detailed 3-page application form and then be interviewed by the program coordinator. A background check is completed on each new volunteer by an investigator in the district attorney's officer. Volunteers are fingerprinted by San Benito county Sheriff's Office, free of charge.

Volunteers are supervised by the program coordinator and the Victim Advocate. Time sheets are maintained documenting the date, hours and duties performed by each volunteer. The program coordinator has provided formal training session to the volunteers and each volunteer has been given a binder with program information and materials. The most important function which volunteers have provided is general clerical assistance, since V/W has never had any clerical support to assist in this way.

Subrecipient: COUNTY OF SAN BENITO

Subaward #:

VW 16 33 0350

V/W has been working with the county One Stop Center in successfully recruiting volunteers through their agency.

P	ROJEC	TSUMM	ARY							
			V/W16 33	33 0350 ITNES ASSISTANCE PROGRAM			3. PERFORMANCE PERIOD			
			VIÇTIM/WITI				07/0	1/2016	to	06/30/2017
4.	SUBRECI	PIENT COUNTY OF SA	AN BENITO	Phone:	(831)636	6-4000	(this		ame ar	mount as 12G of
	Name: 481 4TH ST., 1ST Floor		Fax #:	(831) 63	6-4010	the Grant Subaward Face Shee			•	
	City:	HOLLISTER,	CA	_ Zip:	95023-38	801				
6.	IMPLEME	NTING AGE	NCY		1500					
	Name:	DISTRICT ATTO	DRNEY'S OFF	ICE	_ Phone:	(831)636-412	0	Fax #:	(831)636-4126
	Address:	419 Fourth Stre	419 Fourth Street		City: Hollister			Zip:	9502	3

7. PROGRAM DESCRIPTION

This center was started in 1982. For the past 32 years, it has been providing direct services to victims of all types of crime. The project staff has one full-time staff member, who has 32 years experience as a victim advocate, and two part-time victim advocates. Along with assistance from volunteers, staff will be available to provide all mandatory and several optional services, pursuant to program guidelines, to crime victims and their family members in an empathetic, culturally sensitive and caring manner. The center is conveniently located within the District Attorney's office, just across the parking lot from the county courthouse, and readily accessible to all segments of the community.

8. PROBLEM STATEMENT

Both the individual and the community suffer when a person falls victim to a crime. The victim suffers a personal or financial loss, physical injury and/or emotional trauma. Likewise, each member of a victim's family is similarly affected. The community loses its sense of security and trust. The criminal justice system is not equipped to meet the immediate and on-going needs of a victim after a crime occurs. In order to reduce trauma and facilitate a faster and more complete recovery from the effects of crime for victims and their families, a comprehensive victim service center, with trained and caring staff, is needed in this community.

9. OBJECTIVES

This center proposes to provide direct services to at least 500 new victims and make at least 500 continuing contacts with those victims during this fiscal year. The majority of contacts will be made at the center or by telephone. However, field visits will be conducted when deemed necessary or appropriate. Priority of services will be given to clients based on the client's trauma-response needs, the capabilities of the client, and to victims serving as witnesses. The center's goal is to provide a comprehensive range of services to anyone requesting assistance. This will require on-going cooperation and coordination with law enforcement agencies and other service providers

10. ACTIVITIES

Based on priority of services as aforementioned, this center will continue to offer and provide all mandatory and several optional services. Coordination of services will be accomplished by continuing to network and cooperate with other agencies and service providers. Presentations will be made upon request or as time allows. The provision of direct services takes priority. However, the coordination of services from other service providers will prevent duplication of assistance and allow staff to assist more victims of other crime types.

11. EVALUATION (if applicable)

The project coordinator will meet and confer with staff and volunteers on a quarterly basis to evaluate performance of center activities. The documentation of service objectives required by Cal OES, as well as other data collected by the center, will be used to determine effectiveness of activities and the need for modifying the provision of services to better serve center clients.

12. NUMBER OF CLIENTS

(if applicable)

500

13. PROJECT BUDGET				
(these are the same amounts as on Budget Pages)	Personal Services	Operating Expenses	Equipment	TOTAL
	\$141,071	\$11,798		\$152,869
				\$0
				\$0
				\$0
				\$0
				\$0
Totals:	\$141,071	\$11,798	\$0	\$152,869

OTHER FUNDING SOURCES

Complete this form to report the total funds available to support the activities related to accomplishing the goals and objectives of the Grant Subaward. In the "Grant Funds" column, report the Cal OES funds requested by category. In the "Other Funds" column, report all other funds available to support the project by category and then calculate the totals by category in the "Program Total" column. Total each column to arrive at the total program funds available.

OTHER FUNDING S	(Enter numbers without \$ or decimal points.)			
BUDGET CATEGORY	GRANT FUNDS (Use only the grant funds identified in the preceding budget pages.)	OTHER FUNDS	PROGRAM TOTAL	
Personal Services	141,071		\$141,071	
Operating Expenses	11,798		\$11,798	
Equipment			\$0	
TOTAL	\$152,869	\$0	\$152,869	

Operational Agreements (OA) Summary Form

List of Agencies/Organizations/Individuals

Date OA Signed Dates of OA

(xx/xx/xxxx) From: 07/01/15To:06/30/18

1.	San Benito County Sheriff	04/30/15	07/01/15	to	06/30/18
2.	Hollister Police Department	04/30/15	07/01/15	to	06/30/18
3.	San Benito County Probation	04/30/15	07/01/15	to	06/30/18
4.	San Benito County Social Services (CPS & APS)	04/30/15	07/01/15	to	06/30/18
5.	Community Solutions	05/30/15	07/01/15	to	06/30/18
6.	Emmaus House	04/30/15	07/01/15	to	06/30/18
7.				to	
8.				to	
9.				to	
10.				to	
11.				to	
12		and		to	
13.				to	
14.				to	
15.				to	
16.				to	
17.				to	
18.				to	
19.				to	
20.				to	

Use additional pages if necessary.



419 Fourth Street Hollister, CA 95023 • (831) 634-1397

OPERATIONAL AGREEMENT

This Operational Agreement (OA) stands as evidence that the San Benito County Victim/Witness Assistance Center and Emmaus House, a shelter to battered women, intend to work together toward the mutual goal of providing maximum available assistance to crime victims residing in San Benito County. Both agencies are committed to advancing the rights of victims and enabling victims of crime to receive the levels of support services deemed necessary or appropriate by either agency's staff.

To this end, each agency agrees to coordinate or provide the following:

- Staff from each agency will be readily available to provide direct services and coordinate activities to avoid duplication of efforts.
- Provide mutual referrals for needed services offered by the respective agencies.
- Provide cross-training to enable staff of each agency to better understand services and goals of the other.
- Meet, as needed, to discuss strategies, resolve any obstacles to inter-agency effectiveness, and refine working relationships.

We the undersigned, as authorized representatives of the San Benito County Victim/Witness Assistance Center and Emmaus House, do hereby approve this agreement.

Julie Roybal, Program Coordinator Victim/Witness Assistance Center

FY 15/16, 16/17, 17/18

Patrice Kuerschner, Executive Director

Emmaus House



419 Fourth Street Hollister, CA 95023 • (831) 634-1397

OPERATIONAL AGREEMENT

This Operational Agreement (OA) stands as evidence that the San Benito County Victim/Witness Assistance Center and San Benito County Health & Human Service Agency's Department of Social Services (CPS and APS), intend to work together toward the mutual goal of providing maximum available assistance to crime victims residing in San Benito County. Both agencies are committed to advancing the rights of victims and enabling victims of crime to receive the levels of support services deemed necessary or appropriate by either agency's staff.

To this end, each agency agrees to coordinate or provide the following:

- Staff from each agency will be readily available to answer any questions regarding case referrals or existing cases, provide necessary information for the purpose of completing Victim of Crime Program applications. In addition, social workers agree to coordinate with V/W staff in obtaining services for child victims involved in the criminal justice system.
- Provide mutual referrals for needed services offered by the respective agencies.
- Provide cross-training to enable staff of each agency to better understand services and goals of the other.
- Work collaboratively through the San Benito County Domestic Violence Council to address service barriers to victims of domestic violence.

We the undersigned, as authorized representatives of the San Benito County Victim/Witness Assistance Center and San Benito County Health & Human Services Agency's Dept. of Social Services (CPS & APS) do hereby approve this agreement.

Julie Roybal, Program Coordinator Victim/Witness Assistance Center

FY 15/16, 16/17, 17/18

James Rydingsword, Director

Health & HSA



419 Fourth Street Hollister, CA 95023 • [831] 634-1397

OPERATIONAL AGREEMENT

This Operational Agreement (OA) stands as evidence that the San Benito County Victim/Witness Assistance Center and The Hollister Police Department, intend to work together toward the mutual goal of providing maximum available assistance to crime victims residing in San Benito County. Both agencies are committed to advancing the rights of victims and enabling victims of crime to receive the levels of support services deemed necessary or appropriate by either agency's staff.

To this end, each agency agrees to coordinate or provide the following:

- Staff from each agency will be readily available to provide direct services and coordinate activities to avoid duplication of efforts.
- Provide mutual referrals for needed services offered by the respective agencies.
- Provide cross-training to enable staff of each agency to better understand services and goals of the other.
- Meet, as needed, to discuss strategies, resolve any obstacles to inter-agency effectiveness, and refine working relationships.

We the undersigned, as authorized representatives of the San Benito County Victim/Witness Assistance Center and The Hollister Police Department, do hereby approve this agreement.

Julie Roybal, Program Coordinator Victim/Witness Assistance Center

FY 15/16, 16/17, 17/18

David Westrick

Chief of Police



419 Fourth Street Hollister, CA 95023 • [831] 634-1397

OPERATIONAL AGREEMENT

This Operational Agreement (OA) stands as evidence that the San Benito County Victim/Witness Assistance Center and San Benito County Probation Department, intend to work together toward the mutual goal of providing maximum available assistance to crime victims residing in San Benito County. Both agencies are committed to advancing the rights of victims and enabling victims of crime to receive the levels of support services deemed necessary or appropriate by either agency's staff.

To this end, each agency agrees to coordinate or provide the following:

- Staff from each agency will be readily available to answer any questions regarding case referrals or existing cases, impact statements and restitution requests.
- Provide mutual referrals for needed services offered by the respective agencies.
- Provide cross-training to enable staff of each agency to better understand services and goals of the other.
- Work collaboratively through the San Benito County Domestic Violence Council to address service barriers to victims of domestic violence.

We the undersigned, as authorized representatives of the San Benito County Victim/Witness Assistance Center and San Benito County Probation Department, do hereby approve this agreement.

Julie Roybal, Program Coordinator Victim/Witness Assistance Center

FY 15/16, 16/17, 17/18

R. Ted Baraan Chief Probation Officer



419 Fourth Street Hollister, CA 95023 • [831] 634-1397

OPERATIONAL AGREEMENT

This Operational Agreement (OA) stands as evidence that the San Benito County Victim/Witness Assistance Center and Community Solutions, intend to work together toward the mutual goal of providing maximum available assistance to crime victims residing in San Benito County. Both agencies are committed to advancing the rights of victims and enabling victims of crime to receive the levels of support services deemed necessary or appropriate by either agency's staff.

To this end, each agency agrees to coordinate or provide the following:

- Staff from each agency will be readily available to provide direct services and coordinate activities to avoid duplication of efforts.
- Provide mutual referrals for needed services offered by the respective agencies.
- Provide cross-training to enable staff of each agency to better understand services and goals of the other.
- Meet, as needed, to discuss strategies, resolve any obstacles to inter-agency effectiveness, and refine working relationships.

We the undersigned, as authorized representatives of the San Benito County Victim/Witness Assistance Center and Community Solutions, do hereby approve this agreement.

June Roybal, Program Coordinator Victim/Witness Assistance Center

FY 15/16, 16/17, 17/18

Erin O'Brien, CEO/President

Community Solutions FY 15/16, 16/17, 17/18



OPERATIONAL AGREEMENT

This Operational Agreement (OA) stands as evidence that the San Benito County Victim/Witness Assistance Center and San Benito County Sheriff's Office, intend to work together toward the mutual goal of providing maximum available assistance to crime victims residing in San Benito County. Both agencies are committed to advancing the rights of victims and enabling victims of crime to receive the levels of support services deemed necessary or appropriate by either agency's staff.

To this end, each agency agrees to coordinate or provide the following:

- Staff from each agency will be readily available to answer any questions regarding case referrals or existing cases.
- Provide mutual referrals for needed services offered by the respective agencies.
- Provide cross-training to enable staff of each agency to better understand services and goals of the other.
- Work collaboratively through the San Benito County Domestic Violence Council to address service barriers to victims of domestic violence.

We the undersigned, as authorized representatives of the San Benito County Victim/Witness Assistance Center and San Benito County Sheriff's Office, do

hereby approve this agreement.

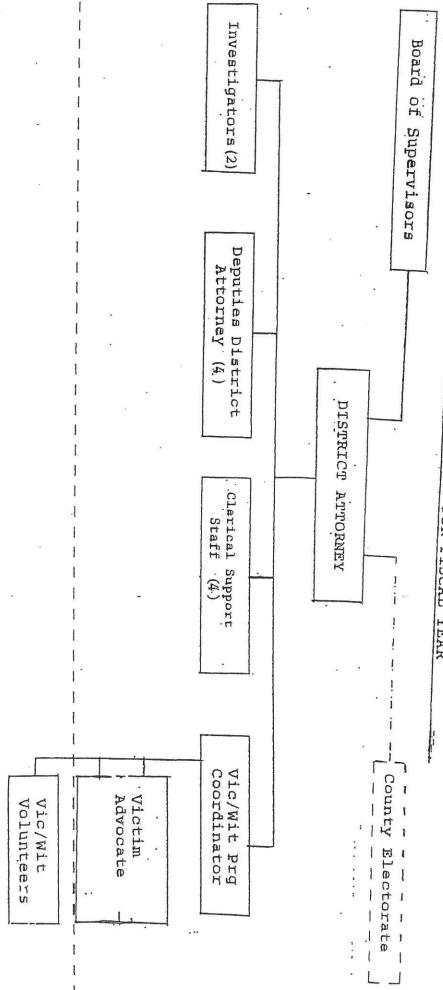
Julie Roybal, Program Coordinator Victim/Witness Assistance Center

FY 15/16, 16/17, 17/18

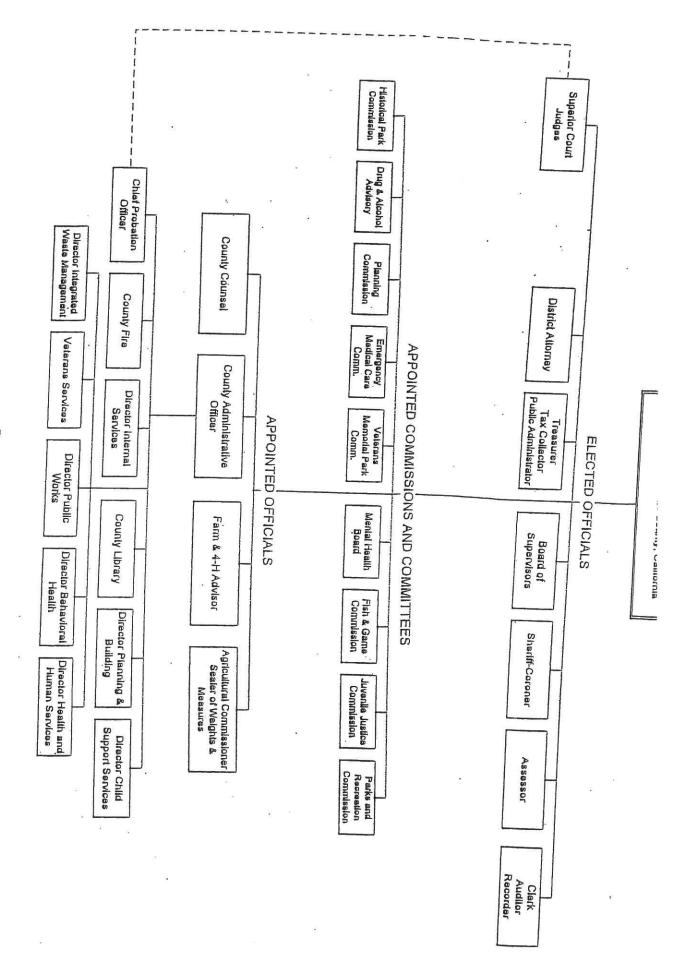
Darren Thompson

Sheriff/Coroner

SAN BENITO COUNTY.
VICTIM/WITNESS ASSISTANCE PROGRAM
ORGANIZATIONAL CHART FOR FISCAL YEAR



Page 1 of 2



Page 7 of 2

PROJECT SERVICE AREA INFORMA. TION

1.	COUNTY OR COUNT	IES SERVED: Enter the name(s) of the county or counties
	served by the project.	Put an asterisk where the project's principal office is
	located.	The second secon

San Benito

2. <u>U.S. CONGRESSIONAL DISTRICT(S)</u>: Enter the number (s) of the U.S. Congressional District(s) which the project serves. Put an asterisk for the district where the project's principal office is located.

SEVENTEETH (17th)

100 W. Alisal Street Salinas, CA 93901

3. <u>STATE ASSEMBLY DISTRICT(S)</u>: Enter the number(s) of the State Assembly District(s) which the project serves. Put an asterisk for the district where the project's principal office is located.

TWENTY-EIGTH (28th)

2105 South Bascom Avenue, Suite 160 Campbell, CA 95008

4. <u>STATE SENATE DISTRICT(S)</u>: Enter the number(s) of the State Senate District(s) that the project serves. Put an asterisk for the district where the project's principal office is located.

TWELTH (12)

369 Main Street Salinas, CA 93901

5. <u>POPULATION OF SERVICE AREA</u>: Enter the total population of the area served by the project.

58,016 (CA DEPT. OF FINANCE 01/01/09 ESTIMATE)



Victim-Witness Program Coordinator

Class Code:

COUNTY OF SAN BENITO Revision Date: Jul 16, 2008 Bargaining Unit: Management

SALARY RANGE

\$25.90 - \$33.07 Hourly \$2,072.31 - \$2,645.54 Biweekly \$4,490.00 - \$5,732.00 Monthly \$53,880.00 - \$68,784.00 Annually

DEFINITION:DEFINITION

Under general direction, to plan, organize, and supervise the work of staff assigned to provide Victim/Witness services in the County District Attorney's Office; to develop community resources for Victim/Witness Program; to represent the Victim/Witness Program with community organizations and agencies; and to do related work as required.

DISTINGUISHING CHARACTERISTICS

This is a single-position class responsible for directing the day-to-day operations of the Victim/Witness Program. Overall program direction and policies are provided by the District Attorney. The position's primary emphasis is on staff supervision, development of community resources, and program administration. The incumbent also provides individual services to victims and witnesses.

REPORTS TO

District Attorney

CLASSIFICATIONS SUPERVISED

Victim/Witness Advocate I, II and Volunteer Workers.

TYPICAL PHYSICAL REQUIREMENTS

Sit for extended periods; frequently stand and walk; normal manual dexterity and eye-hand coordination; lift and move objects weighing up to 25 lbs.; corrected hearing and vision to normal range; verbal communication; use of office equipment, including computer, telephone, calculator, copiers, and FAX.

TYPICAL WORKING CONDITIONS

Work is performed in an office environment; may occasionally work outside; continuous contact with other staff and the public.

EXAMPLES OF DUTIES:

(The following is used as a partial description and is not restrictive as to duties required.)

Plans, organizes, coordinates, and oversees the Victim/Witness Program

Ensures that legislative mandates are achieved

Works with the District Attorney in the development of policies and guidelines

Supervises Victim/Witness Program personnel

Evaluates training needs and plans training activities

Works with community organizations to develop resources and appropriate referral services for victims and witnesses

Develops methods for explaining and promoting services

Maintains liaison with law enforcement agencies

Provides professional and technical consultation on program matters

Has responsibility for the development and monitoring of grant monies

Ensures proper expenditure controls

Provides individual services to victims and witnesses of crimes

Assesses victim and witnesses needs and provides referrals to support agencies for further assistance Performs a variety of Victim/Witness administration and support functions

TYPICAL QUALIFICATIONS- TRAINING & EXPERIENCE:

Any combination of training and experience which would likely provide the required knowledge and abilities is qualifying. A typical way to obtain the required knowledge and abilities would be:

Two years of progressively responsible work experience in dealing with victims and witnesses of crimes, or within the criminal justice system.

Advanced training in social or behavioral science, criminology, or public administration is desirable.

KNOWLEDGE OF/ABILITY TO:

Knowledge of:

Rules and regulations governing victim/witness services and programs.

Functions of public law enforcement agencies and the criminal justice system.

Principles of providing assistance to victims and witnesses of crimes.

Client problems requiring referral to other organizations and support services.

Interviewing and record keeping techniques.

Community needs for victim/witness services.

Program development, monitoring, and evaluation.

Public personnel administration.

Principles of supervision, training, and staff development.

Ability to:

Plan, organize, and direct the functions of the Victim/Witness Program.

Analyze case problems, evaluate the effectiveness of staff efforts, and provide consultation to staff in solving problems.

Interview people, identify needs, and make appropriate referrals.

Analyze and interpret laws and regulations related to Victim/Witness services.

Gather, organize, analyze, and present a variety of data and information.

Prepare, clear, concise and accurate records and reports.

Communicate with others from diverse socio-economic and cultural backgrounds.

Elicit factual information from applicants and recipients in difficult circumstances of deprivation or emotional disturbance.

Develop community referral resources for the Victim/Witness Program.

Effectively represent the Victim/Witness Program in contacts with service providers, the public, community organizations, and other government agencies.

Establish and maintain cooperative working relationships.

SPECIAL REQUIREMENTS:

Possession of, or ability to obtain, an appropriate valid California Driver's License.



COUNTY OF SAN BENITO Revision Date: Jul 16, 2008

Victim-Witness Advocate I

Class Code:

Bargaining Unit: General

SALARY RANGE

\$16.77 - \$21.41 Hourly \$1,341.69 - \$1,712.77 Biweekly \$2,907.00 - \$3,711.00 Monthly \$34,884.00 - \$44,532.00 Annually

DEFINITION: DEFINITION

Under supervision, to provide a variety of services to viotims and witnesses of crimes in accordance with the Victim/Witness Program in the County District Attorney's Office; to learn to interview victims and witnesses, assessing needs and making referrals; to assist with the development of community resources for victim/witness assistance; to represent the Victim/Witness Program with community organizations and agencies; and to do related work as required.

DISTINGUISHING CHARACTERISTICS

This is the entry and first working level in the Victim/Witness Advocate class series. Incumbents learn and perform a variety of basic victim/witness and program support services for the Victim/Witness Program. This class is distinguished from the Victim/Witness Advocate II in that incumbents perform a lesser scope of assignments which do not require the same level of knowledge of the Victim/Witness Program. When an incumbent becomes familiar with department and the Victim/Witness Program policies and demonstrates good sustained work performance, they may be promoted to the Victim/Witness Advocate II level.

REPORTS TO

Victim/Witness Program Coordinator

TYPICAL PHYSICAL REQUIREMENTS

Sit for extended periods; frequently stand and walk; normal manual dexterity and eye-hand coordination; lift and move objects weighing up to 25 lbs.; corrected hearing and vision to normal range; verbal communication; use of office equipment, including computer, telephone, calculator, copiers, and FAX.

TYPICAL WORKING CONDITIONS

Work is performed in an office environment; may occasionally work outside; continuous contact with other staff and the public.

EXAMPLES OF DUTIES:

(The following is used as a partial description and is not restrictive as to duties required.)

Learns to interview victims and witnesses of crimes, advising them of restitution rights and the availability of services

Learns to assess client's needs and make referrals to appropriate community resources and organizations

Keeps program clients aware of the status and disposition of cases Provides transportation for persons unable to get to court

Explains program procedures, policies, and services

Learns to work with community organizations to develop resources and appropriate referral services for victims and witnesses

Learns to make presentations as necessary

Maintains liaison with law enforcement agencies

May provide some basic counseling and crisis intervention support for Program clients Maintains program records and enters data into a computer system performs a variety of Victim/Witness Program administrative and support functions.

Other duties as assigned.

TYPICAL OUALIFICATIONS- TRAINING & EXPERIENCE:

Any combination of training and experience which would likely provide the required knowledge and abilities is qualifying. A typical way to obtain the required knowledge and abilities would be:

Previous responsible work experience in a social service/public assistance, criminal justice, or law enforcement agency.

Advanced training in social or behavioral science, criminology, or public administration is desirable.

KNOWLEDGE OF/ABILITY TO:

Knowledge of:

Basic knowledge of rules and regulations governing victim/witness services and programs. Basic knowledge of the functions of public law enforcement agencies and the criminal justice system. Interviewing and record keeping techniques.

Ability to:

Learn to provide a variety of client and program support services for the Victim/Witness Program. Learn to interview people, identify needs, and make appropriate referrals.

Learn to analyze and interpret laws and regulations related to victim/witness services.

Gather, organize, analyze, and present a variety of data and information.

Prepare, clear, concise and accurate records and reports.

Communicate with others from diverse socio-economic and cultural backgrounds.

Elicit factual information from applicants and recipients in difficult circumstances of deprivation or emotional disturbance.

Assist with development of community referral resources for the Victim/Witness Program.

Learn to effectively represent the Victim/Witness Program in contacts with service providers, the public, community organizations, and other government agencies.

Establish and maintain cooperative working relationships.

SPECIAL REQUIREMENTS:

Possession of, or ability to obtain, an appropriate valid California Driver's License.

Bilingual/Biliterate in Spanish preferred



COUNTY OF SAN BENITO Revision Date: Jul 16, 2008

Victim-Witness Advocate II

Class Code:

Bargaining Unit: General

SALARY RANGE

\$18.40 - \$23.49 Hourly \$1,471.85 - \$1,879.38 Biweekly \$3,189.00 - \$4,072.00 Monthly \$38,268.00 - \$48,864.00 Annually

DEFINITION: DEFINITION

Under general supervision, to provide a variety of services to victims and witnesses of crimes in accordance with the Victim/Witness Program in the County District Attorney's Office; to interview victims and witnesses, assessing needs and making referrals; to assist with the development of community resources for Victim/Witness assistance; to represent the Victim/Witness Program with community organizations and agencies; and to do related work as required.

DISTINGUISHING CHARACTERISTICS

This is the second working level in the Victim/Witness Advocate class series. Incumbents have responsibility for performing a variety of victim/witness and program support services for the Victim/Witness Program. This class is distinguished from the Victim/Witness Advocate I by requiring comprehensive knowledge of program services and policies.

REPORTS TO

Victim/Witness Program Coordinator

CLASSIFICATIONS SUPERVISED

This is not a supervisory class.

TYPICAL PHYSICAL REQUIREMENTS

Sit for extended periods; frequently stand and walk; normal manual dexterity and eye-hand coordination; lift and move objects weighing up to 25 lbs.; corrected hearing and vision to normal range; verbal communication; use of office equipment, including computer, telephone, calculator, copiers, and FAX.

TYPICAL WORKING CONDITIONS

Work is performed in an office environment; may occasionally work outside; continuous contact with other staff and the public.

EXAMPLES OF DUTIES:

(The following is used as a partial description and is not restrictive as to duties required.)

Interviews victims and witnesses of crimes, advising them of restitution rights and the availability of services

Assesses needs and makes referrals to appropriate community resources and organizations Keeps program clients aware of the status and disposition of cases

Provides transportation for persons unable to get to court

Explains program procedures, policies, and services

Works with community organizations to develop resources and appropriate referral services for victims and witnesses

Makes presentations as necessary

Maintains liaison with law enforcement agencies

Provides basic counseling and crisis intervention support for Program clients

Maintains program records and enters data into a computer system

Performs a variety of Victim/Witness administrative and support functions

Other duties as assigned

TYPICAL QUALIFICATIONS- TRAINING & EXPERIENCE:

Any combination of training and experience which would likely provide the required knowledge and abilities is qualifying. A typical way to obtain the required knowledge and abilities would be:

One year of responsible work experience in dealing with victims and witness of crimes, or performing criminal justice work comparable to that of a Victim/Witness Advocate I with San Benito County.

Advanced training in social or behavioral science, criminology, or public administration is desirable.

KNOWLEDGE OF/ABILITY TO:

Knowledge of:

Rules and regulations governing victim/witness services and programs.

Functions of public law enforcement agencies and the criminal justice system.

Principles of providing assistance to victims and witnesses of crimes.

Client problems requiring referral to other organizations and support services.

Interviewing and record keeping.

Ability to:

Provide a variety of client and program support services for the Victim/Witness Program.

Interview people, identify needs, and make appropriate referrals.

Analyze and interpret laws and regulations related to victim/witness services.

Gather, organize, analyze, and present a variety of data and information.

Prepare, clear, concise and accurate records and reports.

Communicate with others from diverse socio-economic and cultural backgrounds.

Elicit factual information from applicants and recipients in difficult circumstances of deprivation or emotional disturbance.

Assist with development of community referral resources for the Victim/Witness Program.

Effectively represent the Victim/Witness Program in contacts with service providers, the public, community organizations, and other government agencies.

Establish and maintain cooperative working relationships.

SPECIAL REQUIREMENTS:

Possession of, or ability to obtain, an appropriate valid California Driver's License