

Regional Funding

Fiscal Year 2020 - Partner Funding Application

Rappahannock Council Against Sexual Assault

Agency Information

General Information

Agency Name Rappahannock Council Against Sexual Assault
Physical Address 3331 Shannon Airport Circle, Fredericksburg, VA, 22408, U.S.A.
Mailing Address 3331 Shannon Airport Circle, Fredericksburg, VA 22408
Agency Phone Number (540) 371-6771
Federal Tax ID # 54-1443112
Web Address www.rcasa.org
Agency Email Address christina@rcasa.org

Agency Mission Statement

Our mission is to provide support, treatment, and advocacy to persons whose lives have been affected by sexual violence and to reduce sexual violence in our community through education and awareness.

Number of Years in Operation 32

Main Contact

Main Contact Christina Berben, phone: (540) 371-6771, email: christina@rcasa.org
Job Title Executive & Clinical Director

Localities Served

Please select any/all localities your agency serves.

Caroline
Fredericksburg
King George
Spotsylvania
Stafford

Collaborative Impact

Describe in detail how the community would be impacted if your agency were dissolved or merged with another partner agency.

RCASA is the only agency that provides comprehensive services to adult & child victims of SV in PD16. Were our agency to dissolve, survivors of SV in our community would not have access to a range of services that our agency provides, including trauma-informed individual and group counseling by professionals trained to address SV. Statistically, when an agency focuses solely on SV recovery, levels of care for this specific trauma are greatly increased & victims report greater levels of recovery in PTSD, depression, & suicidality. Should RCASA be merged with another agency, victims would be left with service agencies that have organizational goals that are not focused on victim recovery. For example, victims who do not choose to or are unable to pursue legal remedies for their assault, can still receive services from our agency, without barrier or restriction. Victims who do not choose to pursue legal remedies would be without services from a provider with expertise in SV. Similarly, when receiving medical & mental health services, SV victims are often retraumatized by interactions with uninformed providers, resulting in regression of care.

The presence of trauma-informed advocates while victims utilize other community services results in improved care for victims. With advocate support, victims are more likely to cooperate with law enforcement. Similarly, survivors report less distress after encounters with the legal and medical systems with an advocate to assist & educate them through the experience. Victims provided with trauma-informed care & specialized advocacy report increased feelings of well-being & decreased manifestations of PTSD symptomatology over the course of their care.

Partner agencies have complimentary services for victims of SV. However, they cannot replace RCASA for providing the highly specific services survivors need to recover from their trauma.

Community Impact

Please provide at least 2 examples of how your services have impacted members of our community.

Example 1

At 14 years of age, "Sally", a latinx female, came to RCASA with a history of physical and sexual abuse, along with domestic violence in her home. When she first started receiving services, Sally told staff that she rarely slept, and even then, only when her mom was present. She experienced changes in her eating patterns, increased anxiety, recurrent thoughts, angry outbursts (many times a week), flashbacks, nightmares (daily at first), difficulty concentrating, disinterest in activities, irritability, feelings of detachment, and avoiding thoughts of the trauma. Sally talked about killing herself.

Sally has successfully worked with RCASA counseling staff for two years. Having processed her trauma, Sally can now control both her feelings and behaviors. She has decreased explicit and implicit feelings of shame and guilt, and now affirms that she knows she is not responsible for her abuse. She can discuss her experiences with sexual abuse without being overwhelmed and puts her skills in self-management to use to manage emotional reactions to the trauma and other stressors.

Sally has increased her social circles and expanded the number of friends she has, pointing to increased levels of trust in others. By learning and implementing interpersonal skills, she is able to better manage her relationships, including practicing how to advocate for herself and to set appropriate boundaries. Sally is now engaged in activities that allow her to feel that she is doing something worthwhile, including volunteering in and giving back to her community.

Example 2

“Jane” is a 30-yr-old Caucasian female that received services from RCASA after a sexual assault in her workplace. Upon disclosure of her assault, both Jane and the perpetrator were terminated from their positions. Due to lack of evidence, law enforcement did not charge the perpetrator. Jane pursued services from RCASA to address her PTSD symptoms & help her process her assault. At the time of her intake, Jane reported difficulty sleeping, loss of appetite, & mood swings ranging from irritability to depression. She described overall anxiety at home & the tendency to isolate herself from family & friends. Jane also reported an exaggerated startle response & being hyper alert, as well as feeling disconnected from others. She told RCASA staff that these symptoms interfered with her relationships & general happiness in her life.

Jane participated in a total of six art therapy sessions in order to address her PTSD symptoms & process the trauma as a result of her assault. Over the course of therapy, Jane developed & practiced self-regulation skills & was able to identify positive coping skills & personal strengths. She was able to process her trauma and the thoughts/emotions surrounding her assault. Jane was able to identify support systems, values, and goals. After six sessions, she reported an improvement in PTSD symptoms, an ability to identify and process problematic thinking patterns (self-blame), & noted a decrease in difficult emotions such as guilt and/or shame. Jane also indicated a decrease in anxiety & an increased ability to manage emotions. She expressed an improvement in sleep and appetite, improved connection with family & friends, and a better relationship with her husband as a result of her counseling as well. At the conclusion of her treatment, Jane reported an improved financial situation. She started a new job, and took the initiative to meet with financial experts and resources in the community to address her economic needs.

Example 3 (Optional)

“Sarah” is a 20-year-old female who began receiving services from RCASA after being sexually assaulted by an acquaintance she met at a social gathering. Sarah reported that alcohol was involved & that she did not remember the event, but woke up the next day observing evidence of an assault. RCASA staff accompanied Sarah throughout the forensic exam, providing support and necessary crisis interventions. After the forensic exam, Sarah sought help from the counseling center on her college campus, & was then referred to RCASA for additional services.

Separate from her own assault, Sarah had been called as witness in a military hearing regarding her perpetrator’s involvement in an incident in which he allegedly assaulted a fellow member of the military. Sarah was provided court accompaniment when she gave her testimony. Later, it was determined that Sarah’s own case would also be tried in military court. Sarah will continue to receive court advocacy throughout the legal proceedings yet to come.

Sarah also received counseling services from RCASA to address her PTSD symptoms. When initially assessed, Sarah reported a PTSD Symptom Scale (PSS) of 32 (moderate). Sarah indicated difficulty sleeping, anxiety, disconnection from friends/family, & avoidance of social activities. Through her counseling sessions, Sarah developed & practiced self-regulation skills & identified coping skills & strengths. She was able to process her trauma and the thoughts/emotions surrounding her assault, & was able to identify support systems, values, & goals. After 8 sessions, Sarah reported an improvement in symptoms, scoring 18 on the PSS. Sarah indicated an increase in social activity & more connection in relationships, which were impacted by her sexual assault. She also reported an increase in self-confidence & motivation to explore options in school, including studying abroad.

Rappahannock Council Against Sexual Assault

Agency Budget Narrative

Administrative Expenses

Provide an overview of the administrative costs for your agency.

The Administrative costs for RCASA are those associated with agency expenses that are not allocated to direct service programs. These costs include salary for 1.25 FTE full time employees, along with requisite payroll expenses, as well as overhead expenses necessary for agency operations.

Total agency salaries are \$359,277. Of the total, \$300,095 are program based and \$70,092 are administrative.

Total agency benefits are \$84,663. Of the total, \$76,047 are program based and \$8,616 are administrative. Benefits include payroll taxes, health and dental insurance, and EAP access.

Total agency operating expenses are \$121,218. Of the total, \$100,524 are program based and \$20,694 are administrative. Administrative operating expenses include audits, accountant fees, banking fees, and commercial insurance as well as portions of expenses such as rent, office supplies, telecommunications, and building expenses.

If your agency is requesting an increase or decrease in administrative funding, please describe in detail the reasons for these changes.

In FY19 the Program Coordinator position was re-instituted at RCASA. This position is responsible for establishing accountability measures that address program efficacy, fidelity to established goals, and determining capacity limits of available funds. This position is necessary to ensure accountability to funders, as well as to the community. Direct service staff are able to focus solely on providing necessary services to victims of SV without the burden of compliance duties. As a result, RCASA is able to provide more direct services to a greater number of survivors.

Administrative/overhead positions are not associated with direct service programs, and therefore are not funded by state or federal grants. RCASA is requesting an increase in administrative funding to help defray the expense of this position.

Please provide justification for and specific amounts of administrative costs that are defrayed by locality funds.

Several administrative costs are defrayed by locality funds, including our annual financial audit, which is required for an agency of our size that receives federal funding. Our annual audit costs \$5,000 and only a portion of that fee is allowable under federal grant funding.

Additionally, our agency payroll and finances are managed by an independent accountant, who also acts as a consultant to our agency on budget building. Accountant fees are not allowable under our federal grant funding and cost our agency \$6000 annually.

Finally, our agency purchases Directors and Officers insurance, along with commercial liability insurance for our agency. Those costs are not allowable under our federal grant funding and cost our agency \$2,134 annually.

The total cost for these administrative expenses is \$13,134 and that cost is defrayed by locality funding.

Capital Expenses

Please provide an overview of the capital costs for your agency.

Currently, RCASA does not have any capital costs.

Please provide justification for and specific amounts of capital costs that are defrayed by locality funds.

N/A

Salary & Benefit Expenses

Please provide an overview of any increases or decreases in general personnel expenses for your agency.

The Nonprofit Employment Practices Survey (2017) indicated that direct service staff turnover rates have increased of 19% within nonprofit agencies. Over 50% of nonprofits nationwide anticipate increasing staff size for FY20. This will be the 5th straight year of reported staff increases. RCASA is no exception to this trend. For the 3rd year in a row, there is a wait list for individuals who wish to receive individual and group counseling services. The wait list has steadily grown in length and duration. During FY18, RCASA employed 1.75 FTE resident counselors, which is not enough counselors to provide services to the growing need for trauma-informed counselors in PD16. In an effort to decrease the amount of time victims must wait to receive counseling, RCASA plans to increase the FTE counseling staff to 2.75. Additionally, RCASA must provide competitive compensation packages to existing staff to ensure retention and continuity of care for survivors of sexual violence.

Please provide a description of any changes to agency benefits structure or cost.

For the third consecutive year, RCASA provides 100 percent health and dental insurance benefits to all staff after one year of full-time employment. This benefit helps to ensure staff retention. Additionally, an Employee Assistance Program (EAP) has been implemented for FY19, which will provide employees with three face-to-face counseling visits per year, financial consultation with a Certified Consumer Credit Counselor, legal referrals and discounted fees, and Identity Theft Recovery. The cost of this program is \$255 annually.

Budget Issues

Provide any legislative initiatives or issues that may impact the agency for the upcoming year.

At the end of September, Congress extended the authorization of the Violence Against Women Act (VAWA) until December 7th. This temporary extension, rather than full, long-term reauthorization has left community members and stakeholders with concerns over the impact expiration will have on victims of sexual violence. Many of RCASA's direct service programs are tied inextricably to VAWA funds, and consequently, the agency keeps a watchful eye on the reauthorization process. Staff members have called on Congress to pass a bipartisan reauthorization that will bolster response to sexual assault and reauthorize grant programs for another five years with an increased investment in prevention.

If you are aware of "outside" funding sources that will expire or be reduced on a set cycle or date, please note those below and how you are planning for them.

For FY19, funding from Rappahannock United Way was decreased by \$12,000. These funds were earmarked for prevention education for youth in PD16. A CDC trial found a 50% reduction in the self-

reported frequency of SV perpetration by students that receive prevention education training, demonstrating how necessary prevention programming is to community health. To ensure students in PD16 continue to receive prevention education, RCASA has re-allocated funding from localities to compensate for the decrease in RUW funding in FY19, and this has placed a strain on other budgetary categories, such as funding for staff retention and training. RCASA plans to apply for additional grant funds from both state and private grant-makers to offset these expenses for FY20 and FY21. RCASA will also seek financial support from individual donors to meet this need.

Please detail any identified agency needs or areas of concern that are currently not being addressed in your funding request.

The bulk of RCASA's funding comes from federal and state level grants. These grants are awarded to RCASA to provide direct service to victims of crime; however, they allow for only a fraction of administrative expenses. Training in software such as QuickBooks and Excel, as well as Human Resource compliance training are not allowable under state and federal funding regulations, but would improve RCASA staff's efficiency in maintaining fiscal responsibility and management of RCASA personnel. RCASA is already lean in regards to administrative expenses, ensuring that every dollar possible goes to direct service care and providers. However, developing greater levels of competency will be ensured by training staff on best practices for administrative responsibilities.

Rappahannock Council Against Sexual Assault

Agency Total Budget

In the boxes below provide an overview of the administrative costs associated with your total agency budget.

Expenses

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Salary	292,285.00	382,674.00	295,522.00	326,615.00	359,277.00
Benefits	71,360.00	78,275.00	70,638.00	76,967.00	84,964.00
Operating Expenses	118,933.00	98,049.00	97,217.00	110,198.00	121,218.00
Capital Expenses	0.00	0.00	0.00	0.00	0.00
Other Expenses	50,000.00	7,000.00	10,254.00	7,600.00	8,360.00
Total	532,578.00	565,998.00	473,631.00	521,380.00	573,819.00

Revenues

Please include revenue associated with your entire organization. This section represents the TOTAL revenue your organization is receiving. The revenue associated with specific programs will be listed within your program budgets; this section represents total revenues. (For example if your organization requests funding for multiple programs the total amount requested from each locality or other entities goes within this section)

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Caroline	1,100.00	1,100.00	1,100.00	1,210.00	1,331.00
Fredericksburg	4,140.00	4,140.00	4,140.00	4,554.00	5,010.00
King George	500.00	0.00	0.00	500.00	550.00
Spotsylvania	21,000.00	21,000.00	21,000.00	23,100.00	25,410.00
Stafford	17,460.00	13,380.00	7,410.00	8,151.00	10,559.00
United Way	0.00	22,000.00	10,000.00	11,000.00	12,100.00
Grants	484,378.00	484,378.00	402,372.00	442,609.00	486,870.00
Client Fees	0.00	0.00	0.00	0.00	0.00
Fundraising	4,000.00	20,000.00	17,000.00	18,700.00	19,000.00
Other (Click to itemize)	0.00	0.00	10,609.00	11,556.00	12,989.00
Total	532,578.00	565,998.00	473,631.00	521,380.00	573,819.00

Surplus / Deficit

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Surplus or Deficit	0.00	0.00	0.00	0.00	0.00

Rappahannock Council Against Sexual Assault

Locality Information

Locality Notes

Please use the spaces below to provide any locality specific notes or statements that may be relevant to your application.

Caroline County

Sexually based crimes in rural areas are often under-reported as a result of barriers to service such as transportation & time restrictions. Caroline covers nearly 540 sq miles and the insulated & isolated nature of the community make services neither easy to reach nor easy to deliver. Providing services in Caroline costs more as a result of the time & distance required to reach clients. However, a national study “stress[ed] the positive impact that outreach has in rural areas” in an effort to build confidence in populations that are notoriously hesitant to report sexually based crimes. In FY20, staff is committed to continuing services within Caroline County Public Schools by providing education programming at the high & middle schools. RCASA will also participate in outreach events meant to enable & empower residents to seek services after experiencing SV. RCASA also maintains MOUs with the Sheriff's Dept., Victim/Witness, Commonwealth's Attorneys, DSS, and the public school system.

City of Fredericksburg

While Fredericksburg has the smallest population in PD16, it is home to large portions of high-risk demographics when it comes to SV. Fredericksburg has the highest level of persons living in poverty in PD16. The prevalence of SV victimization among persons living in poverty is higher than that among the general population. 83% of low-income women in national studies indicate having been sexually abused or assaulted during their life-span.

Fredericksburg is also home to UMW. College is a vulnerable time for SV. In national studies, 20% of undergraduate women indicate that they had been victims of SV since beginning college. Countless studies indicate the correlation between alcohol use & sexual assault, specifically on college campuses. RCASA participates in a Coordinated Community Response Team at UMW, with multiple staff members committed to various subcommittees, like victim assistance and prevention education.

King George County

In FY18, nearly half (880 of 1927) of the students in KG middle & high schools received educational programming from RCASA. National evaluations of SV prevention programs support the effectiveness of these programs in increasing knowledge & shifting attitudes regarding SV. By empowering students to acknowledge & define SV within their peer dynamic, foster positive relationships & develop healthy boundaries, positive impacts can begin in the schools & carry over into the community.

Staff members are engaged in a learning collaborative geared toward providing culturally-responsive services to underserved populations such as KG. The goal of participating staff is to create foundational change within the agency & community that will reduce barriers that prevent victims from accessing services. By continuing to enhance existing partnerships with the Commonwealth's Attorney, Sheriff's Office, Victim/Witness & the Dept of Social Services, RASCA strives to provide holistic services in KG.

Spotsylvania County

RCASA is developing strong collaborative care efforts with community partners such as Victim Witness (VW) in Spotsylvania. From offering monthly satellite hours in the VW office, to building an improved referral process between providers, RCASA & VW work diligently to decrease barriers to services for

victims in rural portions of the county.

RCASA staff reached nearly 300 middle & high school students in Spotsylvania last year & are actively pursuing opportunities for increased programming in FY20. Studies report that 66% of boys and 52% of girls have sexually harassed a peer, & nearly 70% of students have been sexually harassed . RCASA's programs educate students to recognize warning signs of unhealthy behaviors & empowers them to make positive choices, translating to a healthier, more productive work-force as students come into adulthood.

Stafford County

The number of RCASA clients that reside in Stafford County has increased exponentially from FY18 to FY9. Agency-wide court accompaniment hours have increased 400% from FY18, and upwards of 40% of those hours are spent in Stafford alone. Calls from Rappahannock Regional Jail on the PREA hotline have also increased, along with other types of advocacy services provided to inmates experiencing sexual violence.

Nearly 350 professionals in Stafford received training on the dynamics and impacts of sexual violence on victims of sexually violent crimes, including 55 law enforcement officers. Community Engagement specialists reached over 600 middle and high school students with educational programming on sexual violence causes, impacts, and prevention. RCASA participates annually in the National Night Out, the Geico Community Fair, and other community outreach events to bring awareness to sexual violence and RCASA's services in Stafford county, reaching nearly 1,000 residents.

Rappahannock Council Against Sexual Assault - Prevention, Education, and Outreach

Program Overview

You may save your work at any time by clicking on the "Save My Work" link/icon at the bottom or top of the page.

When you have completed all questions on the form, select the "Save My Work and Mark as Completed" link/icon at the bottom or top of this page.

You may also SWITCH between forms in this application by using the SWITCH FORMS feature in the upper right corner. When switching forms, any updates to the existing form will automatically be saved.

General Information

Program Name Prevention, Education, and Outreach

Is this a new program? No

Program Contact

Name Christina Berben

Title Executive Director

Email christina@rcasa.org

Phone (540) 371-6771

Program Purpose / Description

Provide an overview of this program

Each year, nearly 3,000 students participate in RCASA's educational programming. Programming is evidence-informed, age-appropriate, & geared toward educating students to recognize warning signs of unhealthy relationships while empowering them to make positive choices. Designed with long-term impacts in mind, program topics include positive relationships, healthy boundaries, consent, & effective bystander intervention techniques. Programs also include training on cyber-related sexual violence, maximizing safety in social media, practicing consent within cyber dynamics of relationships, & understanding resources available to survivors of cyber-related sexual violence.

For professionals in frequent contact with youth, RCASA offers training covering topics such as mandated reporting, how to respond when a minor discloses sexual abuse, & how to refer them to RCASA when they have been hurt. Outside of schools, RCASA provides trauma response & advocacy trainings for law enforcement, medical & educational professionals, churches & civic clubs, & on college campuses.

RCASA also maintains an interactive presence at a variety of community events throughout PD16. Outreach efforts include providing information on the impact of sexual violence in PD 16, powerful messages on how to prevent SV, & services RCASA offers to those impacted already. Community members engaging in outreach events provide invaluable opportunities to energize & expand prevention

efforts throughout the year.

Client Fees

Please describe the fees clients must pay for the services by this program.

There are no fees associated with receiving services from RCASA. All programs are provided at no cost to Planning District 16.

Justification of Need

Please state clearly why this service should be provided to the citizens of the region and why the localities should consider this funding request.

Statistics show that 1 in 4 girls & 1 in 6 boys will be sexually abused before turning 18 years old. In studies of students between 8th & 11th grade, over 80% indicate being sexually harassed at their school. Correlations between childhood victimization & increased risk for sexual victimization as adults are strong. Education programs positively impact the youth by increasing knowledge, shifting attitudes regarding SV, and decreasing the likelihood of becoming perpetrators or victims of SV as they reach adulthood.

SV victims frequently report that post-assault contact with community systems exacerbate their psychological distress due to victim-blaming treatment. Trauma-informed trainings for professionals prevent revictimization and retraumatization of those disclosing SV & assist in ensuring highest levels of care are delivered consistently. Community engagement & outreach services provide resources for those already impacted by SV and prevention messages for the community.

If this is a new program, be sure to include the benefits to the region for funding a new request.

This is not a new program. However, in an effort to ensure highest levels of accountability to community stakeholders and funders, RCASA has redesigned program evaluations for Education, Community Engagement and Outreach Services. By creating new goals that are both tangible and specific to Prevention, Education, and Outreach Services, RCASA is continues to build a case for the sustainability of positive impacts on Planning District 16.

Target Audience and Service Delivery

Describe the program's intended audience or client base and how those clients are served.

The Prevention, Education & Outreach Program audience is three-pronged. First, students in PD16 will receive educational programming on healthy boundaries, consent & effective bystander intervention techniques for both for in-person & digital relationships. This will reduce the likelihood of youth becoming victims or perpetrators of SV as they reach adulthood. It will also reduce the negative impacts of SV on students.

Second, allied professionals (e.g., law enforcement, medical staff, education specialists) with high interaction rates with victims of SV will receive trauma-informed response & advocacy training. This will assist survivors in receiving necessary services without suffering further victimization and retraumatization.

Third, PD16 at large will receive information on the impacts and dynamics of SV in the community.

Through engagement & outreach, SV victims & their loved ones will be made aware of the services available to them & given hope for their healing process.

If your program has specific entry or application criteria, please describe it here.

There is no specific entry or application criteria for this program. RCASA will provide education programming and training to anyone that requests it.

Rappahannock Council Against Sexual Assault - Prevention, Education, and Outreach

Program Budget Narrative

Please indicate in detail reasons for increases or decreases in the amounts you are requesting.

Figures reported for program specific budgets have changed from last year. Numbers given for FY18 Budgeted, Actual & FY19 Budgeted fluctuate drastically across all three programs. This is a result of restructuring & developing 3 distinct service programs, a change from the way programs were defined previously. Had the programs remained structured as they were in FY18, the budget would reflect a 15% increase in budget expenses across all programs. For FY20, budget projections (agency wide & program specific) are increasing by 10%, a rate of growth that under-represents the improvements in agency infrastructure that will translate to improved services for victims of SV. Services offered expand in conjunction with the agency budget & funding increases allow more victims to be served. The Prevention, Education & Outreach expenses include staff dedicated to combining best-practices along with agency-developed curricula tailored to meet specific needs of a variety of audiences within PD16.

If an increase is being requested, please describe the impact not receiving an increase would have on the program.

Currently, RCASA is not requesting an increase for the Prevention, Education, and Outreach Program. However, we would like to emphasize the importance for continued funding for this critical service. Of all the services offered by RCASA, prevention education is the one with the farthest-reaching impact. Society incurs significant costs associated with the long-term consequences of SV. Findings estimate the total cost of SV to be \$4.7 billion, or \$1,580 per resident every year. Advocating for cultural and relational competency, and educating against behavioral patterns of aggression and violence from taking shape in the first place are important parts of achieving community-level reductions in rates of SV. The Prevention, Education, and Outreach program brings imperative information and skill training to schools, work places, and civic groups throughout PD16. Continued funding of this program is critical to the health and safety of PD16.

In particular, please describe in detail if any increase is sought for new positions or personnel.

Currently, RCASA is not seeking to create new positions within the Prevention, Education, and Outreach program.

Rappahannock Council Against Sexual Assault - Prevention, Education, and Outreach

Program Specific Budget

Please provide your program specific budget below.

Expenses

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Personnel			81,153.00	64,480.00	70,928.00
Benefits			6,217.00	10,532.00	11,585.00
Operating Expenses			18,633.00	16,723.00	18,395.00
Capital Expenses			0.00	0.00	0.00
Total	0.00	0.00	106,003.00	91,735.00	100,908.00

Revenues

This section represents revenue specifically associated with your program. Revenue that supports the implementation of your program and the services provided to the community.

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Caroline			246.00	214.00	235.00
Fredericksburg			927.00	807.00	888.00
King George			0.00	105.00	116.00
Spotsylvania			4,704.00	4,092.00	4,501.00
Stafford			1,660.00	1,445.00	2,217.00
United Way			2,240.00	1,949.00	2,145.00
Grants			90,131.00	78,414.00	86,255.00
Client Fees			0.00	0.00	0.00
Fundraising			3,808.00	3,313.00	3,331.00
Other (Click to itemize)	0.00	0.00	2,287.00	1,396.00	1,220.00
Total	0.00	0.00	106,003.00	91,735.00	100,908.00

Surplus / Deficit

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Surplus or Deficit	0.00	0.00	0.00	0.00	0.00

[View Diagram](#) Goals and Objectives

Goals

Goal:

To raise awareness of services available to victims of sexually based crimes, and increase knowledge of how to prevent sexual violence in Planning District 16.

Objectives

		2017 Baseline	2017 Year End	2018 Baseline	2019 Baseline
RCASA staff and volunteers will spend at least 130 hours at community engagement and outreach events throughout Planning District 16.	Total # Clients Served		9,950		13,520
	Total # Clients Achieved/Successful		9,950		13,520
	% Achieved / Successful	0	100	0	100
<p>*This is a new goal and we have previously not measured the number of hours we spend at events.</p>					
RCASA staff and volunteers will attend 45 community engagement and outreach events in Planning District 16.	Total # Clients Served		9,950		13,520
	Total # Clients Achieved/Successful		9,950		13,520
	% Achieved / Successful	0	100	0	100
<p>*This goal is reported in terms of participants at events although our goal is to attend a certain number of events.</p>					
RCASA staff will create 360 posts for the agency social media platforms, educating over 5,000 followers in discussions of causes, impacts, and prevention of sexual violence in Planning District 16 and beyond.	Total # Clients Served		0		5,000
	Total # Clients Achieved/Successful		0		5,000
	% Achieved / Successful	0	0	0	100
<p>*This is a new goal for FY20; therefore, we do not have year end data to report.</p>					

Explanation & Overview

If your outcomes are significantly less than your stated objectives, please note any reasons why this might be the case

Updates for FY2018

Please note any changes you plan to make to the program, or the stated goals and objectives, given the data you have reported

During FY18, RCASA evaluated program goals and objectives more comprehensively. As a result of these evaluations, the agency application for regional funding now reflects three programs rather than two. By creating more specific performance tracking methods and establishing more specific program goals, the Prevention, Education, and Outreach Program will be more effective in measuring service delivery victims of sexual violence as well as providing demonstrable outputs for funders to review in years to come. Fine-tuning program measurables will lead to more efficient and effective evaluation of services, creating a model that will lead to long-term growth and sustainability. RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

If you are restating the goals or objectives for the prior calendar year, please include those here

The changes in goals and objectives for FY20 reflect that RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

Goal:

To increase the knowledge of professionals with high interaction rates with victims of sexual violence of the impact of trauma on the brain, specifically as it relates to victims of sexual violence, in order reduce instances of re-victimization.

Objectives

RCASA staff will provide 30 presentations on the impacts and dynamics of sexual violence to allied professionals.

***This goal is reported in terms of participants at events although our goal is to attend a certain number of events.**

	2017 Baseline	2017 Year End	2018 Baseline	2019 Baseline
Total # Clients Served		200		300
Total # Clients Achieved/Successful		200		300
% Achieved / Successful	0	100	0	100

RCASA staff will provide presentations on the impacts and dynamics of sexual violence 138 allied professionals.	Total # Clients Served	200	300
	Total # Clients Achieved/Successful	200	300
	% Achieved / Successful	0 100	0 100

Explanation & Overview

If your outcomes are significantly less than your stated objectives, please note any reasons why this might be the case

Updates for FY2018

Please note any changes you plan to make to the program, or the stated goals and objectives, given the data you have reported

During FY18, RCASA evaluated program goals and objectives more comprehensively. As a result of these evaluations, the agency application for regional funding now reflects three programs rather than two. By creating more specific performance tracking methods and establishing more specific program goals, the Prevention, Education, and Outreach Program will be more effective in measuring service delivery victims of sexual violence as well as providing demonstrable outputs for funders to review in years to come. Fine-tuning program measurables will lead to more efficient and effective evaluation of services, creating a model that will lead to long-term growth and sustainability. RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

If you are restating the goals or objectives for the prior calendar year, please include those here

The changes in goals and objectives for FY20 reflect that RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

Goal: To reduce the rate of sexual violence among youth in Planning District 16.

Objectives

		2017 Baseline	2017 Year End	2018 Baseline	2019 Baseline
RCASA staff will provide 265 hours of	Total # Clients		900		2,440

evidence-informed and age-appropriate educational programming to youth in PD16 via collaboration with public schools, detention centers & specialized groups (eg: boy and girl scouts, youth groups, etc).	Served				
	Total # Clients Achieved/Successful	900			2,440
	% Achieved / Successful	0	100	0	100
<hr/>					
At least 2450 youth in PD16 will receive educational programming on positive relationships, healthy boundaries, consent, and effective bystander intervention techniques for in-person and cyber relationships.	Total # Clients Served	900			2,440
	Total # Clients Achieved/Successful	900			2,440
	% Achieved / Successful	0	100	0	100
<hr/>					
RCASA staff will provide at least 60 separate educational presentations on topics ranging from positive relationships, healthy boundaries, consent, & effective bystander intervention techniques to cyber-related sexual violence, maximizing safety in social media, practicing consent within cyber dynamics of relationships, & understanding resources available to survivors of cyber-related sexual violence.	Total # Clients Served	900			2,440
	Total # Clients Achieved/Successful	900			2,440
	% Achieved / Successful	0	100	0	100

Explanation & Overview

If your outcomes are significantly less than your stated objectives, please note any reasons why this might be the case

Updates for FY2018

Please note any changes you plan to make to the program, or the stated goals and objectives, given the data you have reported

During FY18, RCASA evaluated program goals and objectives more comprehensively. As a result of these evaluations, the agency application for regional funding now reflects three programs rather than two. By creating more specific performance tracking methods and establishing more specific program goals, the Prevention, Education, and Outreach Program will be more effective in measuring service delivery victims of sexual violence as well as providing demonstrable outputs for funders to review in years to come. Fine-tuning program measurables will lead to more efficient and effective evaluation of services, creating a model that will lead to long-term growth and sustainability. RCASA is

moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

If you are restating the goals or objectives for the prior calendar year, please include those here

The changes in goals and objectives for FY20 reflect that RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

Rappahannock Council Against Sexual Assault - Prevention, Education, and Outreach

Number of Individuals Served

Localities

Please provide the actual numbers of individuals served in this program during FY2017 and FY2018, the estimated numbers of individuals served in FY2019 and the projected numbers of individuals served in FY2020.

Locality	FY2017 (Actual)	FY2018 (Actual)	FY 2019 Estimate	FY 2020 Projected
Fredericksburg City	3,698	13,529	14,882	15,000
Caroline County	2,293	586	645	700
King George County	753	1,960	2,150	2,200
Spotsylvania County	2,208	4,310	4,750	4,900
Stafford County	1,051	1,620	1,782	1,800
Other Localities	0	0	0	0
Total	10,003	22,005	24,209	24,600

Rappahannock Council Against Sexual Assault - Prevention, Education, and Outreach

Collaborative Impact

Efforts and Partnerships

Describe in detail examples of collaborative efforts and key partnerships between your program and the other programs or agencies in the area.

Prevention, Education, and Outreach program has active MOU's with the public-school systems in King George and Caroline Counties, and continues to pursue formal cooperative agreements with Stafford, Spotsylvania, and Fredericksburg City Schools. Community Engagement specialists frequently partner with other community resource agencies such as FAHASS, Empowerhouse, Boys & Girls Club, and RACB to ensure PD16 is made aware of the full range of services available to them. Program staff are active members of the CCRT at UMW, advocating for and empowering SV victims on campus and the community. RCASA staff are also members of a state-wide learning collaborative geared toward underserved populations. By focusing prevention, education, and outreach efforts on populations that are traditionally under represented in dialogs surrounding sexual violence, program staff are working with other agencies to ensure care, services, and education are available to everyone within PD16.

Collaborative Impact

Describe in detail how the community would be impacted if your program were dissolved or merged with another partner agency.

Research shows that those who have been victimized by SV are more likely to be revictimized, and those who have perpetrated are more likely to reoffend, pointing to the increased need to stop SV before it happens. Preventing behavioral patterns of aggression and violence from taking shape in the first place is an important step toward achieving population-level reduction rates of SV. Without the Prevention, Education, and Outreach program, PD16 would lack comprehensive, evidence-based SV prevention programming and training that address changing a culture systemically. Reducing SV requires both increased awareness of the causes of SV, as well as skill building within social-emotional relationships. Changing norms that surround SV and harassment, as well as improving relationship dynamics and communication are cornerstones of the program. By continuing to invest in the Prevention, Education, and Outreach program, PD16 invests in reducing rates of SV at the population level.

Regional Funding

Fiscal Year 2020 - Partner Funding Application

Rappahannock Council Against Sexual Assault

Agency Information

General Information

Agency Name	Rappahannock Council Against Sexual Assault
Physical Address	3331 Shannon Airport Circle, Fredericksburg, VA, 22408, U.S.A.
Mailing Address	3331 Shannon Airport Circle, Fredericksburg, VA 22408
Agency Phone Number	(540) 371-6771
Federal Tax ID #	54-1443112
Web Address	www.rcasa.org
Agency Email Address	christina@rcasa.org

Agency Mission Statement

Our mission is to provide support, treatment, and advocacy to persons whose lives have been affected by sexual violence and to reduce sexual violence in our community through education and awareness.

Number of Years in Operation	32
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Main Contact

Main Contact	Christina Berben, phone: (540) 371-6771, email: christina@rcasa.org
Job Title	Executive & Clinical Director

Localities Served

Please select any/all localities your agency serves.

Caroline	<input checked="" type="checkbox"/>
Fredericksburg	<input checked="" type="checkbox"/>
King George	<input checked="" type="checkbox"/>
Spotsylvania	<input checked="" type="checkbox"/>
Stafford	<input checked="" type="checkbox"/>

Collaborative Impact

Describe in detail how the community would be impacted if your agency were dissolved or merged with another partner agency.

RCASA is the only agency that provides comprehensive services to adult & child victims of SV in PD16. Were our agency to dissolve, survivors of SV in our community would not have access to a range of services that our agency provides, including trauma-informed individual and group counseling by professionals trained to address SV. Statistically, when an agency focuses solely on SV recovery, levels of care for this specific trauma are greatly increased & victims report greater levels of recovery in PTSD, depression, & suicidality. Should RCASA be merged with another agency, victims would be left with service agencies that have organizational goals that are not focused on victim recovery. For example, victims who do not choose to or are unable to pursue legal remedies for their assault, can still receive services from our agency, without barrier or restriction. Victims who do not choose to pursue legal remedies would be without services from a provider with expertise in SV. Similarly, when receiving medical & mental health services, SV victims are often retraumatized by interactions with uninformed providers, resulting in regression of care.

The presence of trauma-informed advocates while victims utilize other community services results in improved care for victims. With advocate support, victims are more likely to cooperate with law enforcement. Similarly, survivors report less distress after encounters with the legal and medical systems with an advocate to assist & educate them through the experience. Victims provided with trauma-informed care & specialized advocacy report increased feelings of well-being & decreased manifestations of PTSD symptomatology over the course of their care.

Partner agencies have complimentary services for victims of SV. However, they cannot replace RCASA for providing the highly specific services survivors need to recover from their trauma.

Community Impact

Please provide at least 2 examples of how your services have impacted members of our community.

Example 1

At 14 years of age, “Sally”, a latinx female, came to RCASA with a history of physical and sexual abuse, along with domestic violence in her home. When she first started receiving services, Sally told staff that she rarely slept, and even then, only when her mom was present. She experienced changes in her eating patterns, increased anxiety, recurrent thoughts, angry outbursts (many times a week), flashbacks, nightmares (daily at first), difficulty concentrating, disinterest in activities, irritability, feelings of detachment, and avoiding thoughts of the trauma. Sally talked about killing herself.

Sally has successfully worked with RCASA counseling staff for two years. Having processed her trauma, Sally can now control both her feelings and behaviors. She has decreased explicit and implicit feelings of shame and guilt, and now affirms that she knows she is not responsible for her abuse. She can discuss her experiences with sexual abuse without being overwhelmed and puts her skills in self-management to use to manage emotional reactions to the trauma and other stressors.

Sally has increased her social circles and expanded the number of friends she has, pointing to increased levels of trust in others. By learning and implementing interpersonal skills, she is able to better manage her relationships, including practicing how to advocate for herself and to set appropriate boundaries. Sally is now engaged in activities that allow her to feel that she is doing something worthwhile, including volunteering in and giving back to her community.

Example 2

“Jane” is a 30-yr-old Caucasian female that received services from RCASA after a sexual assault in her workplace. Upon disclosure of her assault, both Jane and the perpetrator were terminated from their positions. Due to lack of evidence, law enforcement did not charge the perpetrator. Jane pursued services from RCASA to address her PTSD symptoms & help her process her assault. At the time of her intake, Jane reported difficulty sleeping, loss of appetite, & mood swings ranging from irritability to depression. She described overall anxiety at home & the tendency to isolate herself from family & friends. Jane also reported an exaggerated startle response & being hyper alert, as well as feeling disconnected from others. She told RCASA staff that these symptoms interfered with her relationships & general happiness in her life.

Jane participated in a total of six art therapy sessions in order to address her PTSD symptoms & process the trauma as a result of her assault. Over the course of therapy, Jane developed & practiced self-regulation skills & was able to identify positive coping skills & personal strengths. She was able to process her trauma and the thoughts/emotions surrounding her assault. Jane was able to identify support systems, values, and goals. After six sessions, she reported an improvement in PTSD symptoms, an ability to identify and process problematic thinking patterns (self-blame), & noted a decrease in difficult emotions such as guilt and/or shame. Jane also indicated a decrease in anxiety & an increased ability to manage emotions. She expressed an improvement in sleep and appetite, improved connection with family & friends, and a better relationship with her husband as a result of her counseling as well. At the conclusion of her treatment, Jane reported an improved financial situation. She started a new job, and took the initiative to meet with financial experts and resources in the community to address her economic needs.

Example 3 (Optional)

“Sarah” is a 20-year-old female who began receiving services from RCASA after being sexually assaulted by an acquaintance she met at a social gathering. Sarah reported that alcohol was involved & that she did not remember the event, but woke up the next day observing evidence of an assault. RCASA staff accompanied Sarah throughout the forensic exam, providing support and necessary crisis interventions. After the forensic exam, Sarah sought help from the counseling center on her college campus, & was then referred to RCASA for additional services.

Separate from her own assault, Sarah had been called as witness in a military hearing regarding her perpetrator’s involvement in an incident in which he allegedly assaulted a fellow member of the military. Sarah was provided court accompaniment when she gave her testimony. Later, it was determined that Sarah’s own case would also be tried in military court. Sarah will continue to receive court advocacy throughout the legal proceedings yet to come.

Sarah also received counseling services from RCASA to address her PTSD symptoms. When initially assessed, Sarah reported a PTSD Symptom Scale (PSS) of 32 (moderate). Sarah indicated difficulty sleeping, anxiety, disconnection from friends/family, & avoidance of social activities. Through her counseling sessions, Sarah developed & practiced self-regulation skills & identified coping skills & strengths. She was able to process her trauma and the thoughts/emotions surrounding her assault, & was able to identify support systems, values, & goals. After 8 sessions, Sarah reported an improvement in symptoms, scoring 18 on the PSS. Sarah indicated an increase in social activity & more connection in relationships, which were impacted by her sexual assault. She also reported an increase in self-confidence & motivation to explore options in school, including studying abroad.

Rappahannock Council Against Sexual Assault

Agency Budget Narrative

Administrative Expenses

Provide an overview of the administrative costs for your agency.

The Administrative costs for RCASA are those associated with agency expenses that are not allocated to direct service programs. These costs include salary for 1.25 FTE full time employees, along with requisite payroll expenses, as well as overhead expenses necessary for agency operations.

Total agency salaries are \$359,277. Of the total, \$300,095 are program based and \$70,092 are administrative.

Total agency benefits are \$84,663. Of the total, \$76,047 are program based and \$8,616 are administrative. Benefits include payroll taxes, health and dental insurance, and EAP access.

Total agency operating expenses are \$121,218. Of the total, \$100,524 are program based and \$20,694 are administrative. Administrative operating expenses include audits, accountant fees, banking fees, and commercial insurance as well as portions of expenses such as rent, office supplies, telecommunications, and building expenses.

If your agency is requesting an increase or decrease in administrative funding, please describe in detail the reasons for these changes.

In FY19 the Program Coordinator position was re-instituted at RCASA. This position is responsible for establishing accountability measures that address program efficacy, fidelity to established goals, and determining capacity limits of available funds. This position is necessary to ensure accountability to funders, as well as to the community. Direct service staff are able to focus solely on providing necessary services to victims of SV without the burden of compliance duties. As a result, RCASA is able to provide more direct services to a greater number of survivors.

Administrative/overhead positions are not associated with direct service programs, and therefore are not funded by state or federal grants. RCASA is requesting an increase in administrative funding to help defray the expense of this position.

Please provide justification for and specific amounts of administrative costs that are defrayed by locality funds.

Several administrative costs are defrayed by locality funds, including our annual financial audit, which is required for an agency of our size that receives federal funding. Our annual audit costs \$5,000 and only a portion of that fee is allowable under federal grant funding.

Additionally, our agency payroll and finances are managed by an independent accountant, who also acts as a consultant to our agency on budget building. Accountant fees are not allowable under our federal grant funding and cost our agency \$6000 annually.

Finally, our agency purchases Directors and Officers insurance, along with commercial liability insurance for our agency. Those costs are not allowable under our federal grant funding and cost our agency \$2,134 annually.

The total cost for these administrative expenses is \$13,134 and that cost is defrayed by locality funding.

Capital Expenses

Please provide an overview of the capital costs for your agency.

Currently, RCASA does not have any capital costs.

Please provide justification for and specific amounts of capital costs that are defrayed by locality funds.

N/A

Salary & Benefit Expenses

Please provide an overview of any increases or decreases in general personnel expenses for your agency.

The Nonprofit Employment Practices Survey (2017) indicated that direct service staff turnover rates have increased of 19% within nonprofit agencies. Over 50% of nonprofits nationwide anticipate increasing staff size for FY20. This will be the 5th straight year of reported staff increases. RCASA is no exception to this trend. For the 3rd year in a row, there is a wait list for individuals who wish to receive individual and group counseling services. The wait list has steadily grown in length and duration. During FY18, RCASA employed 1.75 FTE resident counselors, which is not enough counselors to provide services to the growing need for trauma-informed counselors in PD16. In an effort to decrease the amount of time victims must wait to receive counseling, RCASA plans to increase the FTE counseling staff to 2.75. Additionally, RCASA must provide competitive compensation packages to existing staff to ensure retention and continuity of care for survivors of sexual violence.

Please provide a description of any changes to agency benefits structure or cost.

For the third consecutive year, RCASA provides 100 percent health and dental insurance benefits to all staff after one year of full-time employment. This benefit helps to ensure staff retention. Additionally, an Employee Assistance Program (EAP) has been implemented for FY19, which will provide employees with three face-to-face counseling visits per year, financial consultation with a Certified Consumer Credit Counselor, legal referrals and discounted fees, and Identity Theft Recovery. The cost of this program is \$255 annually.

Budget Issues

Provide any legislative initiatives or issues that may impact the agency for the upcoming year.

At the end of September, Congress extended the authorization of the Violence Against Women Act (VAWA) until December 7th. This temporary extension, rather than full, long-term reauthorization has left community members and stakeholders with concerns over the impact expiration will have on victims of sexual violence. Many of RCASA's direct service programs are tied inextricably to VAWA funds, and consequently, the agency keeps a watchful eye on the reauthorization process. Staff members have called on Congress to pass a bipartisan reauthorization that will bolster response to sexual assault and reauthorize grant programs for another five years with an increased investment in prevention.

If you are aware of "outside" funding sources that will expire or be reduced on a set cycle or date, please note those below and how you are planning for them.

For FY19, funding from Rappahannock United Way was decreased by \$12,000. These funds were earmarked for prevention education for youth in PD16. A CDC trial found a 50% reduction in the self-

reported frequency of SV perpetration by students that receive prevention education training, demonstrating how necessary prevention programming is to community health. To ensure students in PD16 continue to receive prevention education, RCASA has re-allocated funding from localities to compensate for the decrease in RUW funding in FY19, and this has placed a strain on other budgetary categories, such as funding for staff retention and training. RCASA plans to apply for additional grant funds from both state and private grant-makers to offset these expenses for FY20 and FY21. RCASA will also seek financial support from individual donors to meet this need.

Please detail any identified agency needs or areas of concern that are currently not being addressed in your funding request.

The bulk of RCASA's funding comes from federal and state level grants. These grants are awarded to RCASA to provide direct service to victims of crime; however, they allow for only a fraction of administrative expenses. Training in software such as QuickBooks and Excel, as well as Human Resource compliance training are not allowable under state and federal funding regulations, but would improve RCASA staff's efficiency in maintaining fiscal responsibility and management of RCASA personnel. RCASA is already lean in regards to administrative expenses, ensuring that every dollar possible goes to direct service care and providers. However, developing greater levels of competency will be ensured by training staff on best practices for administrative responsibilities.

Rappahannock Council Against Sexual Assault

Agency Total Budget

In the boxes below provide an overview of the administrative costs associated with your total agency budget.

Expenses

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Salary	292,285.00	382,674.00	295,522.00	326,615.00	359,277.00
Benefits	71,360.00	78,275.00	70,638.00	76,967.00	84,964.00
Operating Expenses	118,933.00	98,049.00	97,217.00	110,198.00	121,218.00
Capital Expenses	0.00	0.00	0.00	0.00	0.00
Other Expenses	50,000.00	7,000.00	10,254.00	7,600.00	8,360.00
Total	532,578.00	565,998.00	473,631.00	521,380.00	573,819.00

Revenues

Please include revenue associated with your entire organization. This section represents the TOTAL revenue your organization is receiving. The revenue associated with specific programs will be listed within your program budgets; this section represents total revenues. (For example if your organization requests funding for multiple programs the total amount requested from each locality or other entities goes within this section)

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Caroline	1,100.00	1,100.00	1,100.00	1,210.00	1,331.00
Fredericksburg	4,140.00	4,140.00	4,140.00	4,554.00	5,010.00
King George	500.00	0.00	0.00	500.00	550.00
Spotsylvania	21,000.00	21,000.00	21,000.00	23,100.00	25,410.00
Stafford	17,460.00	13,380.00	7,410.00	8,151.00	10,559.00
United Way	0.00	22,000.00	10,000.00	11,000.00	12,100.00
Grants	484,378.00	484,378.00	402,372.00	442,609.00	486,870.00
Client Fees	0.00	0.00	0.00	0.00	0.00
Fundraising	4,000.00	20,000.00	17,000.00	18,700.00	19,000.00
Other (Click to itemize)	0.00	0.00	10,609.00	11,556.00	12,989.00
Total	532,578.00	565,998.00	473,631.00	521,380.00	573,819.00

Surplus / Deficit

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Surplus or Deficit	0.00	0.00	0.00	0.00	0.00

Rappahannock Council Against Sexual Assault

Locality Information

Locality Notes

Please use the spaces below to provide any locality specific notes or statements that may be relevant to your application.

Caroline County

Sexually based crimes in rural areas are often under-reported as a result of barriers to service such as transportation & time restrictions. Caroline covers nearly 540 sq miles and the insulated & isolated nature of the community make services neither easy to reach nor easy to deliver. Providing services in Caroline costs more as a result of the time & distance required to reach clients. However, a national study “stress[ed] the positive impact that outreach has in rural areas” in an effort to build confidence in populations that are notoriously hesitant to report sexually based crimes. In FY20, staff is committed to continuing services within Caroline County Public Schools by providing education programming at the high & middle schools. RCASA will also participate in outreach events meant to enable & empower residents to seek services after experiencing SV. RCASA also maintains MOUs with the Sheriff's Dept., Victim/Witness, Commonwealth's Attorneys, DSS, and the public school system.

City of Fredericksburg

While Fredericksburg has the smallest population in PD16, it is home to large portions of high-risk demographics when it comes to SV. Fredericksburg has the highest level of persons living in poverty in PD16. The prevalence of SV victimization among persons living in poverty is higher than that among the general population. 83% of low-income women in national studies indicate having been sexually abused or assaulted during their life-span.

Fredericksburg is also home to UMW. College is a vulnerable time for SV. In national studies, 20% of undergraduate women indicate that they had been victims of SV since beginning college. Countless studies indicate the correlation between alcohol use & sexual assault, specifically on college campuses. RCASA participates in a Coordinated Community Response Team at UMW, with multiple staff members committed to various subcommittees, like victim assistance and prevention education.

King George County

In FY18, nearly half (880 of 1927) of the students in KG middle & high schools received educational programming from RCASA. National evaluations of SV prevention programs support the effectiveness of these programs in increasing knowledge & shifting attitudes regarding SV. By empowering students to acknowledge & define SV within their peer dynamic, foster positive relationships & develop healthy boundaries, positive impacts can begin in the schools & carry over into the community.

Staff members are engaged in a learning collaborative geared toward providing culturally-responsive services to underserved populations such as KG. The goal of participating staff is to create foundational change within the agency & community that will reduce barriers that prevent victims from accessing services. By continuing to enhance existing partnerships with the Commonwealth's Attorney, Sheriff's Office, Victim/Witness & the Dept of Social Services, RASCA strives to provide holistic services in KG.

Spotsylvania County

RCASA is developing strong collaborative care efforts with community partners such as Victim Witness (VW) in Spotsylvania. From offering monthly satellite hours in the VW office, to building an improved referral process between providers, RCASA & VW work diligently to decrease barriers to services for

victims in rural portions of the county.

RCASA staff reached nearly 300 middle & high school students in Spotsylvania last year & are actively pursuing opportunities for increased programming in FY20. Studies report that 66% of boys and 52% of girls have sexually harassed a peer, & nearly 70% of students have been sexually harassed . RCASA's programs educate students to recognize warning signs of unhealthy behaviors & empowers them to make positive choices, translating to a healthier, more productive work-force as students come into adulthood.

Stafford County

The number of RCASA clients that reside in Stafford County has increased exponentially from FY18 to FY9. Agency-wide court accompaniment hours have increased 400% from FY18, and upwards of 40% of those hours are spent in Stafford alone. Calls from Rappahannock Regional Jail on the PREA hotline have also increased, along with other types of advocacy services provided to inmates experiencing sexual violence.

Nearly 350 professionals in Stafford received training on the dynamics and impacts of sexual violence on victims of sexually violent crimes, including 55 law enforcement officers. Community Engagement specialists reached over 600 middle and high school students with educational programming on sexual violence causes, impacts, and prevention. RCASA participates annually in the National Night Out, the Geico Community Fair, and other community outreach events to bring awareness to sexual violence and RCASA's services in Stafford county, reaching nearly 1,000 residents.

Rappahannock Council Against Sexual Assault - Counseling and Case Management

Program Overview

You may save your work at any time by clicking on the "Save My Work" link/icon at the bottom or top of the page.

When you have completed all questions on the form, select the "Save My Work and Mark as Completed" link/icon at the bottom or top of this page.

You may also SWITCH between forms in this application by using the SWITCH FORMS feature in the upper right corner. When switching forms, any updates to the existing form will automatically be saved.

General Information

Program Name Counseling and Case Management

Is this a new program? No

Program Contact

Name Christina Berben

Title Clinical & Executive Director

Email christina@rcasa.org

Phone (540) 371-6771

Program Purpose / Description

Provide an overview of this program

Sexual violence impacts individuals differently based on the array of identities and circumstances unique to them. It is common for sexual violence to interfere with a victim's physical & emotional health as well as their ability to participate fully in their lives -- impacting social interactions as well as interpersonal relationships. The economic impact can also be far reaching, from possible medical bills to lost wages and housing concerns.

The Counseling & Case Management Program provides assessment and intervention on behalf of the survivor's short- and long-term needs. The program consists of 1.75 FTE counselors and one full-time Case Manager.

Our counselors use evidence-based therapeutic approaches, including Cognitive Behavioral Therapy (CBT), Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Cognitive Processing Therapy (CPT), Art Therapy, and Eye Movement Desensitization and Reprocessing (EMDR) in order to help victims mediate symptoms of PTSD and process their trauma. RCASA also offers peer counseling for partners, parents, siblings or significant other relationships to cope with secondary trauma

Case Managers assist victim/survivors with necessities such emergency housing, interpretative services,

and disability accommodations while ensuring that a victim's rights are upheld. Within case management, legal advocates work closely with local Victim Witness offices to prepare victims for court proceedings and protective order petitions.

Client Fees

Please describe the fees clients must pay for the services by this program.

There are no fees associated with receiving services from RCASA. All programs are provided at no cost to survivors of sexual violence in Planning District 16.

Justification of Need

Please state clearly why this service should be provided to the citizens of the region and why the localities should consider this funding request.

1 out of every 6 women and 1 out of every 33 men in the US have been the victim of an attempted or completed rape in their lifetime. Counseling services are critical to survivors of SV in their trauma treatment. Victims of sexually based crimes frequently manifest symptoms of PTSD to include dissociative experiences, sleep problems, isolation, anxiety, fearfulness, rage and anger, and self-destructiveness. Left unaddressed, these symptomatic behaviors can become daily components of the victim's existence, making participation in work, school, and social life impossible. A growing body of research suggests that assistance received by victims of sexually based crimes often leaves the victim feeling blamed, doubted, and revictimized. At RCASA, victims receive care that is trauma-informed and victim-centered. Beyond emotional challenges that SV survivors face, they are also impacted financially by acts of sexual violence, which affects not only the individual, but the community at large.

If this is a new program, be sure to include the benefits to the region for funding a new request.

The services offered by the Counseling Services Program are not new to RCASA; however, the means by which the program's efficacy is tracked and reported is. By creating a more specific performance tracking method and establishing more specific program goals, the Counseling and Case Management Program will be more effective in measuring service delivery victims of sexual violence as well as providing demonstrable outputs for funders to review in years to come. Fine-tuning program measurables will lead to more efficient and effective evaluation of services, creating a model that will lead to long-term growth and sustainability of this program.

Target Audience and Service Delivery

Describe the program's intended audience or client base and how those clients are served.

Counseling and Case Management services are available to anyone, adult or child, impacted by sexual violence in PD16. Whether a victim/survivor was impacted years ago or recently, they can access services from RCASA. Every client receives trauma-informed, supportive services, regardless of the length of their care. Clients develop treatment goals and action plans with their counselor and case manager that encourage forward progress in their path to healing, along with assistance and referrals to community resources as needed. The support systems (partners, parents, family, etc) of the primary victim are also provided with psychoeducational support that ensures understanding of how trauma impacts the brain, caring for the victim, & developing positive coping mechanisms after trauma has occurred. This ensures the care received by the primary victim is sustainable after they have completed their treatment goals

within the agency.

If your program has specific entry or application criteria, please describe it here.

There are no specific application criteria to receive services from RCASA; however, before a victim of sexual violence receives services beyond crisis intervention, they must complete an initial intake appointment. At this appointment, victims are assessed for appropriateness of fit with the agency. After the intake appointment, clients are able to participate in individual counseling, therapeutic support groups, as well as psychoeducational groups.

Rappahannock Council Against Sexual Assault - Counseling and Case Management

Program Budget Narrative

Please indicate in detail reasons for increases or decreases in the amounts you are requesting.

Figures reported for program specific budgets have changed from last year. Numbers given for FY18 Budgeted, Actual & FY19 Budgeted fluctuate drastically across all three programs. This is a result of restructuring & developing 3 distinct service programs, a change from the way programs were defined previously. Had the programs remained structured as they were in FY18, the budget would reflect a 15% increase in budget expenses across all programs. For FY20, budget projections (agency wide & program specific) are increasing by 10%, a rate of growth that under-represents the improvements in agency infrastructure that will translate to improved services for victims of SV.

Counseling & Case Management personnel expenses include therapeutic counselors, group facilitators, & case managers. Salaries reflect high levels of specialized education required to provide this care. Operating expenses include supplies specific to a variety of therapeutic approaches used to help victims.

If an increase is being requested, please describe the impact not receiving an increase would have on the program.

RCASA's holistic approach to trauma-informed recovery includes involving victim's support system (e.g., friends, family, partners) in their care. By ensuring that secondary survivors are informed about the impacts of trauma on the brain as well as equipped with the knowledge of how to support primary survivors as they face the challenges of managing their reactions to the trauma. The Counseling & Case Management Program now offers support sessions designed specifically for secondary survivors.

In an effort to bring services to those who might otherwise face barriers to service such as transportation, RCASA provides support groups held in different locations throughout PD16. Without funding, these groups will not be mobilized, & victims will not be able to benefit from services.

In particular, please describe in detail if any increase is sought for new positions or personnel.

For the 3rd year in a row, there is a wait list for individuals who wish to receive individual counseling services. The wait list has steadily grown in length and duration. During FY18, RCASA employed 1.75 FTE resident counselors, which is insufficient to provide services to the growing need for trauma-informed counselors in PD16. In an effort to decrease the amount of time victims must wait to receive counseling, RCASA would like to increase the FTE counseling staff to 2.75.

Rappahannock Council Against Sexual Assault - Counseling and Case Management

Program Specific Budget

Please provide your program specific budget below.

Expenses

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Personnel	69,555.24	64,480.00	133,740.00	119,323.00	131,255.00
Benefits	16,336.00	17,233.00	31,373.00	32,250.00	35,475.00
Operating Expenses	28,544.00	16,668.00	38,270.00	59,315.00	65,247.00
Capital Expenses	0.00	0.00	0.00	0.00	0.00
Total	114,435.24	98,381.00	203,383.00	210,888.00	231,977.00

Revenues

This section represents revenue specifically associated with your program. Revenue that supports the implementation of your program and the services provided to the community.

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Caroline	264.00	198.00	475.00	503.00	553.00
Fredericksburg	994.00	703.80	1,788.00	930.00	1,023.00
King George	120.00	0.00	0.00	208.00	230.00
Spotsylvania	5,040.00	3,570.00	9,072.00	9,610.00	10,571.00
Stafford	4,190.00	2,274.60	3,201.00	3,390.00	5,280.00
United Way	12,000.00	12,000.00	4,320.00	4,576.00	5,031.00
Grants	85,891.00	79,634.60	173,824.00	184,126.00	202,540.00
Client Fees	0.00	0.00	0.00	0.00	0.00
Fundraising	5,936.24		7,344.00	7,545.00	6,749.00
Other (Click to itemize)	0.00	0.00	3,359.00	0.00	0.00
Total	114,435.24	98,381.00	203,383.00	210,888.00	231,977.00

Surplus / Deficit

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Surplus or Deficit	0.00	0.00	0.00	0.00	0.00

[View Diagram](#) Goals and Objectives

Goals

Goal:

To provide comprehensive case management and counseling services to survivors of sexual violence in Planning District 16.

Objectives

		2017 Baseline	2017 Year End	2018 Baseline	2019 Baseline
<p>RCASA will provide 500 hours of counseling services to survivors of sexual violence, to include short- and long-term, trauma-informed individual and group counseling.</p> <p>*See note below re: reporting hours vs. number of clients. Progress toward goal: 2017 Year End Hours = 486; 2019 Baseline = 530</p>	Total # Clients Served		403		525
	Total # Clients Achieved/Successful		378		494
	% Achieved / Successful	0	93.80	0	94.10
<p>RCASA will provide 250 hours of case management services, to include psychoeducational groups, peer support sessions, and community coordination and referral.</p> <p>*See note below re: reporting hours vs. number of clients. Progress toward goal: 2017 Year End Hours = 221; 2019 Baseline = 325</p>	Total # Clients Served		120		190
	Total # Clients Achieved/Successful		120		190
	% Achieved / Successful	0	100	0	100
<p>RCASA will provide 225 hours of court advocacy services to survivors of sexual violence.</p> <p>*See note below re: reporting hours vs. number of clients. Progress toward goal: 2017 Year End Hours =186; 2019 Baseline = 300</p>	Total # Clients Served		34		36
	Total # Clients Achieved/Successful		34		36
	% Achieved / Successful	0	100	0	100

Explanation & Overview

If your outcomes are significantly less than your stated objectives, please note any reasons why this might be the case

*Note: RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

Updates for FY2018

Please note any changes you plan to make to the program, or the stated goals and objectives, given the data you have reported

During FY18, RCASA evaluated program goals and objectives more comprehensively. As a result of these evaluations, the agency application for regional funding now reflects three programs rather than two. By creating more specific performance tracking methods and establishing more specific program goals, the Counseling and Case Management Program will be more effective in measuring service delivery victims of sexual violence as well as providing demonstrable outputs for funders to review in years to come. Fine-tuning program measurables will lead to more efficient and effective evaluation of services, creating a model that will lead to long-term growth and sustainability. RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

If you are restating the goals or objectives for the prior calendar year, please include those here

The changes in goals and objectives for FY20 reflect that RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

Goal: To help survivors of sexual violence in PD16 improve levels of functioning.

Objectives

	2017 Baseline	2017 Year End	2018 Baseline	2019 Baseline
85% of individual and group counseling clients will report reduced PTSD symptomatology.				
Total # Clients Served		356		390
Total # Clients Achieved/Successful		334		367
% Achieved / Successful		0 93.82	0	94.10

85% of case management recipients will progress toward and/or achieve treatment plan goals.	Total # Clients Served	0			90
	Total # Clients Achieved/Successful	0			76
	% Achieved / Successful	0	0	0	84.44
<hr/>					
85% of counseling clients will progress toward and/or achieve treatment plan goals.	Total # Clients Served	35			55
	Total # Clients Achieved/Successful	35			47
	% Achieved / Successful	0	100	0	85.45

Explanation & Overview

If your outcomes are significantly less than your stated objectives, please note any reasons why this might be the case

Updates for FY2018

Please note any changes you plan to make to the program, or the stated goals and objectives, given the data you have reported

During FY18, RCASA evaluated program goals and objectives more comprehensively. As a result of these evaluations, the agency application for regional funding now reflects three programs rather than two. By creating more specific performance tracking methods and establishing more specific program goals, the Counseling and Case Management Program will be more effective in measuring service delivery victims of sexual violence as well as providing demonstrable outputs for funders to review in years to come. Fine-tuning program measurables will lead to more efficient and effective evaluation of services, creating a model that will lead to long-term growth and sustainability. RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

If you are restating the goals or objectives for the prior calendar year, please include those here

The changes in goals and objectives for FY20 reflect that RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

Rappahannock Council Against Sexual Assault - Counseling and Case Management

Number of Individuals Served

Localities

Please provide the actual numbers of individuals served in this program during FY2017 and FY2018, the estimated numbers of individuals served in FY2019 and the projected numbers of individuals served in FY2020.

Locality	FY2017 (Actual)	FY2018 (Actual)	FY 2019 Estimate	FY 2020 Projected
Fredericksburg City	187	239	180	198
Caroline County	7	12	20	22
King George County	20	7	20	22
Spotsylvania County	59	150	208	228
Stafford County	31	63	144	158
Other Localities	64	74	52	6,057
Total	368	545	624	6,685

Rappahannock Council Against Sexual Assault - Counseling and Case Management

Collaborative Impact

Efforts and Partnerships

Describe in detail examples of collaborative efforts and key partnerships between your program and the other programs or agencies in the area.

The Counseling & Case Management program has current cooperative agreements with numerous community resources. By maintaining effective working relationships with partner agencies, RCASA provides the infrastructure for clients receive comprehensive care concerning issues like health care, financial support, and housing. Collaborative approaches to care ensure that victims receive cohesive and holistic care. Of note, RCASA has standing MOU's with every law enforcement office, commonwealth's attorney, victim witness program, and department of social service in PD16. RCASA also participates in every available SART, CCRT, and MDT available in the service area. Along with core victim's services, RCASA has long-standing relationships, & engages in collaborative community care, with agencies such as Empowerhouse, RACSB, Legal Aid Works, Fredericksburg Counseling Services, Mary Washington Health Care, Rappahannock Area Youth Services & Group Home, & the University of Mary Washington.

Collaborative Impact

Describe in detail how the community would be impacted if your program were dissolved or merged with another partner agency.

Were this program to dissolve, survivors of SV in our community would not have access to a range of counseling and case management services that our program provides, including trauma-informed individual and group counseling by professionals trained to address SV.

Victims of SV often struggle with feelings of shame, guilt, embarrassment and report decreased levels of trust in others. Without a resource dedicated exclusively to recovery from SV, many victims will be hesitant to receive care specific to their trauma. Without treatment, there can be residual and intense emotional responses that can leave the victim debilitated and/or retraumatized.

Comprehensive services increase the victim's confidence in pursuing and maintaining therapy services and accomplishing treatment goals that might otherwise not be achieved.

Regional Funding

Fiscal Year 2020 - Partner Funding Application

Rappahannock Council Against Sexual Assault

Agency Information

General Information

Agency Name	Rappahannock Council Against Sexual Assault
Physical Address	3331 Shannon Airport Circle, Fredericksburg, VA, 22408, U.S.A.
Mailing Address	3331 Shannon Airport Circle, Fredericksburg, VA 22408
Agency Phone Number	(540) 371-6771
Federal Tax ID #	54-1443112
Web Address	www.rcasa.org
Agency Email Address	christina@rcasa.org

Agency Mission Statement

Our mission is to provide support, treatment, and advocacy to persons whose lives have been affected by sexual violence and to reduce sexual violence in our community through education and awareness.

Number of Years in Operation	32
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Main Contact

Main Contact	Christina Berben, phone: (540) 371-6771, email: christina@rcasa.org
Job Title	Executive & Clinical Director

Localities Served

Please select any/all localities your agency serves.

Caroline	<input checked="" type="checkbox"/>
Fredericksburg	<input checked="" type="checkbox"/>
King George	<input checked="" type="checkbox"/>
Spotsylvania	<input checked="" type="checkbox"/>
Stafford	<input checked="" type="checkbox"/>

Collaborative Impact

Describe in detail how the community would be impacted if your agency were dissolved or merged with another partner agency.

RCASA is the only agency that provides comprehensive services to adult & child victims of SV in PD16. Were our agency to dissolve, survivors of SV in our community would not have access to a range of services that our agency provides, including trauma-informed individual and group counseling by professionals trained to address SV. Statistically, when an agency focuses solely on SV recovery, levels of care for this specific trauma are greatly increased & victims report greater levels of recovery in PTSD, depression, & suicidality. Should RCASA be merged with another agency, victims would be left with service agencies that have organizational goals that are not focused on victim recovery. For example, victims who do not choose to or are unable to pursue legal remedies for their assault, can still receive services from our agency, without barrier or restriction. Victims who do not choose to pursue legal remedies would be without services from a provider with expertise in SV. Similarly, when receiving medical & mental health services, SV victims are often retraumatized by interactions with uninformed providers, resulting in regression of care.

The presence of trauma-informed advocates while victims utilize other community services results in improved care for victims. With advocate support, victims are more likely to cooperate with law enforcement. Similarly, survivors report less distress after encounters with the legal and medical systems with an advocate to assist & educate them through the experience. Victims provided with trauma-informed care & specialized advocacy report increased feelings of well-being & decreased manifestations of PTSD symptomatology over the course of their care.

Partner agencies have complimentary services for victims of SV. However, they cannot replace RCASA for providing the highly specific services survivors need to recover from their trauma.

Community Impact

Please provide at least 2 examples of how your services have impacted members of our community.

Example 1

At 14 years of age, "Sally", a latinx female, came to RCASA with a history of physical and sexual abuse, along with domestic violence in her home. When she first started receiving services, Sally told staff that she rarely slept, and even then, only when her mom was present. She experienced changes in her eating patterns, increased anxiety, recurrent thoughts, angry outbursts (many times a week), flashbacks, nightmares (daily at first), difficulty concentrating, disinterest in activities, irritability, feelings of detachment, and avoiding thoughts of the trauma. Sally talked about killing herself.

Sally has successfully worked with RCASA counseling staff for two years. Having processed her trauma, Sally can now control both her feelings and behaviors. She has decreased explicit and implicit feelings of shame and guilt, and now affirms that she knows she is not responsible for her abuse. She can discuss her experiences with sexual abuse without being overwhelmed and puts her skills in self-management to use to manage emotional reactions to the trauma and other stressors.

Sally has increased her social circles and expanded the number of friends she has, pointing to increased levels of trust in others. By learning and implementing interpersonal skills, she is able to better manage her relationships, including practicing how to advocate for herself and to set appropriate boundaries. Sally is now engaged in activities that allow her to feel that she is doing something worthwhile, including volunteering in and giving back to her community.

Example 2

“Jane” is a 30-yr-old Caucasian female that received services from RCASA after a sexual assault in her workplace. Upon disclosure of her assault, both Jane and the perpetrator were terminated from their positions. Due to lack of evidence, law enforcement did not charge the perpetrator. Jane pursued services from RCASA to address her PTSD symptoms & help her process her assault. At the time of her intake, Jane reported difficulty sleeping, loss of appetite, & mood swings ranging from irritability to depression. She described overall anxiety at home & the tendency to isolate herself from family & friends. Jane also reported an exaggerated startle response & being hyper alert, as well as feeling disconnected from others. She told RCASA staff that these symptoms interfered with her relationships & general happiness in her life.

Jane participated in a total of six art therapy sessions in order to address her PTSD symptoms & process the trauma as a result of her assault. Over the course of therapy, Jane developed & practiced self-regulation skills & was able to identify positive coping skills & personal strengths. She was able to process her trauma and the thoughts/emotions surrounding her assault. Jane was able to identify support systems, values, and goals. After six sessions, she reported an improvement in PTSD symptoms, an ability to identify and process problematic thinking patterns (self-blame), & noted a decrease in difficult emotions such as guilt and/or shame. Jane also indicated a decrease in anxiety & an increased ability to manage emotions. She expressed an improvement in sleep and appetite, improved connection with family & friends, and a better relationship with her husband as a result of her counseling as well. At the conclusion of her treatment, Jane reported an improved financial situation. She started a new job, and took the initiative to meet with financial experts and resources in the community to address her economic needs.

Example 3 (Optional)

“Sarah” is a 20-year-old female who began receiving services from RCASA after being sexually assaulted by an acquaintance she met at a social gathering. Sarah reported that alcohol was involved & that she did not remember the event, but woke up the next day observing evidence of an assault. RCASA staff accompanied Sarah throughout the forensic exam, providing support and necessary crisis interventions. After the forensic exam, Sarah sought help from the counseling center on her college campus, & was then referred to RCASA for additional services.

Separate from her own assault, Sarah had been called as witness in a military hearing regarding her perpetrator’s involvement in an incident in which he allegedly assaulted a fellow member of the military. Sarah was provided court accompaniment when she gave her testimony. Later, it was determined that Sarah’s own case would also be tried in military court. Sarah will continue to receive court advocacy throughout the legal proceedings yet to come.

Sarah also received counseling services from RCASA to address her PTSD symptoms. When initially assessed, Sarah reported a PTSD Symptom Scale (PSS) of 32 (moderate). Sarah indicated difficulty sleeping, anxiety, disconnection from friends/family, & avoidance of social activities. Through her counseling sessions, Sarah developed & practiced self-regulation skills & identified coping skills & strengths. She was able to process her trauma and the thoughts/emotions surrounding her assault, & was able to identify support systems, values, & goals. After 8 sessions, Sarah reported an improvement in symptoms, scoring 18 on the PSS. Sarah indicated an increase in social activity & more connection in relationships, which were impacted by her sexual assault. She also reported an increase in self-confidence & motivation to explore options in school, including studying abroad.

Rappahannock Council Against Sexual Assault

Agency Budget Narrative

Administrative Expenses

Provide an overview of the administrative costs for your agency.

The Administrative costs for RCASA are those associated with agency expenses that are not allocated to direct service programs. These costs include salary for 1.25 FTE full time employees, along with requisite payroll expenses, as well as overhead expenses necessary for agency operations.

Total agency salaries are \$359,277. Of the total, \$300,095 are program based and \$70,092 are administrative.

Total agency benefits are \$84,663. Of the total, \$76,047 are program based and \$8,616 are administrative. Benefits include payroll taxes, health and dental insurance, and EAP access.

Total agency operating expenses are \$121,218. Of the total, \$100,524 are program based and \$20,694 are administrative. Administrative operating expenses include audits, accountant fees, banking fees, and commercial insurance as well as portions of expenses such as rent, office supplies, telecommunications, and building expenses.

If your agency is requesting an increase or decrease in administrative funding, please describe in detail the reasons for these changes.

In FY19 the Program Coordinator position was re-instituted at RCASA. This position is responsible for establishing accountability measures that address program efficacy, fidelity to established goals, and determining capacity limits of available funds. This position is necessary to ensure accountability to funders, as well as to the community. Direct service staff are able to focus solely on providing necessary services to victims of SV without the burden of compliance duties. As a result, RCASA is able to provide more direct services to a greater number of survivors.

Administrative/overhead positions are not associated with direct service programs, and therefore are not funded by state or federal grants. RCASA is requesting an increase in administrative funding to help defray the expense of this position.

Please provide justification for and specific amounts of administrative costs that are defrayed by locality funds.

Several administrative costs are defrayed by locality funds, including our annual financial audit, which is required for an agency of our size that receives federal funding. Our annual audit costs \$5,000 and only a portion of that fee is allowable under federal grant funding.

Additionally, our agency payroll and finances are managed by an independent accountant, who also acts as a consultant to our agency on budget building. Accountant fees are not allowable under our federal grant funding and cost our agency \$6000 annually.

Finally, our agency purchases Directors and Officers insurance, along with commercial liability insurance for our agency. Those costs are not allowable under our federal grant funding and cost our agency \$2,134 annually.

The total cost for these administrative expenses is \$13,134 and that cost is defrayed by locality funding.

Capital Expenses

Please provide an overview of the capital costs for your agency.

Currently, RCASA does not have any capital costs.

Please provide justification for and specific amounts of capital costs that are defrayed by locality funds.

N/A

Salary & Benefit Expenses

Please provide an overview of any increases or decreases in general personnel expenses for your agency.

The Nonprofit Employment Practices Survey (2017) indicated that direct service staff turnover rates have increased of 19% within nonprofit agencies. Over 50% of nonprofits nationwide anticipate increasing staff size for FY20. This will be the 5th straight year of reported staff increases. RCASA is no exception to this trend. For the 3rd year in a row, there is a wait list for individuals who wish to receive individual and group counseling services. The wait list has steadily grown in length and duration. During FY18, RCASA employed 1.75 FTE resident counselors, which is not enough counselors to provide services to the growing need for trauma-informed counselors in PD16. In an effort to decrease the amount of time victims must wait to receive counseling, RCASA plans to increase the FTE counseling staff to 2.75. Additionally, RCASA must provide competitive compensation packages to existing staff to ensure retention and continuity of care for survivors of sexual violence.

Please provide a description of any changes to agency benefits structure or cost.

For the third consecutive year, RCASA provides 100 percent health and dental insurance benefits to all staff after one year of full-time employment. This benefit helps to ensure staff retention. Additionally, an Employee Assistance Program (EAP) has been implemented for FY19, which will provide employees with three face-to-face counseling visits per year, financial consultation with a Certified Consumer Credit Counselor, legal referrals and discounted fees, and Identity Theft Recovery. The cost of this program is \$255 annually.

Budget Issues

Provide any legislative initiatives or issues that may impact the agency for the upcoming year.

At the end of September, Congress extended the authorization of the Violence Against Women Act (VAWA) until December 7th. This temporary extension, rather than full, long-term reauthorization has left community members and stakeholders with concerns over the impact expiration will have on victims of sexual violence. Many of RCASA's direct service programs are tied inextricably to VAWA funds, and consequently, the agency keeps a watchful eye on the reauthorization process. Staff members have called on Congress to pass a bipartisan reauthorization that will bolster response to sexual assault and reauthorize grant programs for another five years with an increased investment in prevention.

If you are aware of "outside" funding sources that will expire or be reduced on a set cycle or date, please note those below and how you are planning for them.

For FY19, funding from Rappahannock United Way was decreased by \$12,000. These funds were earmarked for prevention education for youth in PD16. A CDC trial found a 50% reduction in the self-

reported frequency of SV perpetration by students that receive prevention education training, demonstrating how necessary prevention programming is to community health. To ensure students in PD16 continue to receive prevention education, RCASA has re-allocated funding from localities to compensate for the decrease in RUW funding in FY19, and this has placed a strain on other budgetary categories, such as funding for staff retention and training. RCASA plans to apply for additional grant funds from both state and private grant-makers to offset these expenses for FY20 and FY21. RCASA will also seek financial support from individual donors to meet this need.

Please detail any identified agency needs or areas of concern that are currently not being addressed in your funding request.

The bulk of RCASA's funding comes from federal and state level grants. These grants are awarded to RCASA to provide direct service to victims of crime; however, they allow for only a fraction of administrative expenses. Training in software such as QuickBooks and Excel, as well as Human Resource compliance training are not allowable under state and federal funding regulations, but would improve RCASA staff's efficiency in maintaining fiscal responsibility and management of RCASA personnel. RCASA is already lean in regards to administrative expenses, ensuring that every dollar possible goes to direct service care and providers. However, developing greater levels of competency will be ensured by training staff on best practices for administrative responsibilities.

Rappahannock Council Against Sexual Assault

Agency Total Budget

In the boxes below provide an overview of the administrative costs associated with your total agency budget.

Expenses

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Salary	292,285.00	382,674.00	295,522.00	326,615.00	359,277.00
Benefits	71,360.00	78,275.00	70,638.00	76,967.00	84,964.00
Operating Expenses	118,933.00	98,049.00	97,217.00	110,198.00	121,218.00
Capital Expenses	0.00	0.00	0.00	0.00	0.00
Other Expenses	50,000.00	7,000.00	10,254.00	7,600.00	8,360.00
Total	532,578.00	565,998.00	473,631.00	521,380.00	573,819.00

Revenues

Please include revenue associated with your entire organization. This section represents the TOTAL revenue your organization is receiving. The revenue associated with specific programs will be listed within your program budgets; this section represents total revenues. (For example if your organization requests funding for multiple programs the total amount requested from each locality or other entities goes within this section)

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Caroline	1,100.00	1,100.00	1,100.00	1,210.00	1,331.00
Fredericksburg	4,140.00	4,140.00	4,140.00	4,554.00	5,010.00
King George	500.00	0.00	0.00	500.00	550.00
Spotsylvania	21,000.00	21,000.00	21,000.00	23,100.00	25,410.00
Stafford	17,460.00	13,380.00	7,410.00	8,151.00	10,559.00
United Way	0.00	22,000.00	10,000.00	11,000.00	12,100.00
Grants	484,378.00	484,378.00	402,372.00	442,609.00	486,870.00
Client Fees	0.00	0.00	0.00	0.00	0.00
Fundraising	4,000.00	20,000.00	17,000.00	18,700.00	19,000.00
Other (Click to itemize)	0.00	0.00	10,609.00	11,556.00	12,989.00
Total	532,578.00	565,998.00	473,631.00	521,380.00	573,819.00

Surplus / Deficit

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Surplus or Deficit	0.00	0.00	0.00	0.00	0.00

Rappahannock Council Against Sexual Assault

Locality Information

Locality Notes

Please use the spaces below to provide any locality specific notes or statements that may be relevant to your application.

Caroline County

Sexually based crimes in rural areas are often under-reported as a result of barriers to service such as transportation & time restrictions. Caroline covers nearly 540 sq miles and the insulated & isolated nature of the community make services neither easy to reach nor easy to deliver. Providing services in Caroline costs more as a result of the time & distance required to reach clients. However, a national study “stress[ed] the positive impact that outreach has in rural areas” in an effort to build confidence in populations that are notoriously hesitant to report sexually based crimes. In FY20, staff is committed to continuing services within Caroline County Public Schools by providing education programming at the high & middle schools. RCASA will also participate in outreach events meant to enable & empower residents to seek services after experiencing SV. RCASA also maintains MOUs with the Sheriff's Dept., Victim/Witness, Commonwealth's Attorneys, DSS, and the public school system.

City of Fredericksburg

While Fredericksburg has the smallest population in PD16, it is home to large portions of high-risk demographics when it comes to SV. Fredericksburg has the highest level of persons living in poverty in PD16. The prevalence of SV victimization among persons living in poverty is higher than that among the general population. 83% of low-income women in national studies indicate having been sexually abused or assaulted during their life-span.

Fredericksburg is also home to UMW. College is a vulnerable time for SV. In national studies, 20% of undergraduate women indicate that they had been victims of SV since beginning college. Countless studies indicate the correlation between alcohol use & sexual assault, specifically on college campuses. RCASA participates in a Coordinated Community Response Team at UMW, with multiple staff members committed to various subcommittees, like victim assistance and prevention education.

King George County

In FY18, nearly half (880 of 1927) of the students in KG middle & high schools received educational programming from RCASA. National evaluations of SV prevention programs support the effectiveness of these programs in increasing knowledge & shifting attitudes regarding SV. By empowering students to acknowledge & define SV within their peer dynamic, foster positive relationships & develop healthy boundaries, positive impacts can begin in the schools & carry over into the community.

Staff members are engaged in a learning collaborative geared toward providing culturally-responsive services to underserved populations such as KG. The goal of participating staff is to create foundational change within the agency & community that will reduce barriers that prevent victims from accessing services. By continuing to enhance existing partnerships with the Commonwealth's Attorney, Sheriff's Office, Victim/Witness & the Dept of Social Services, RASCA strives to provide holistic services in KG.

Spotsylvania County

RCASA is developing strong collaborative care efforts with community partners such as Victim Witness (VW) in Spotsylvania. From offering monthly satellite hours in the VW office, to building an improved referral process between providers, RCASA & VW work diligently to decrease barriers to services for

victims in rural portions of the county.

RCASA staff reached nearly 300 middle & high school students in Spotsylvania last year & are actively pursuing opportunities for increased programming in FY20. Studies report that 66% of boys and 52% of girls have sexually harassed a peer, & nearly 70% of students have been sexually harassed . RCASA's programs educate students to recognize warning signs of unhealthy behaviors & empowers them to make positive choices, translating to a healthier, more productive work-force as students come into adulthood.

Stafford County

The number of RCASA clients that reside in Stafford County has increased exponentially from FY18 to FY9. Agency-wide court accompaniment hours have increased 400% from FY18, and upwards of 40% of those hours are spent in Stafford alone. Calls from Rappahannock Regional Jail on the PREA hotline have also increased, along with other types of advocacy services provided to inmates experiencing sexual violence.

Nearly 350 professionals in Stafford received training on the dynamics and impacts of sexual violence on victims of sexually violent crimes, including 55 law enforcement officers. Community Engagement specialists reached over 600 middle and high school students with educational programming on sexual violence causes, impacts, and prevention. RCASA participates annually in the National Night Out, the Geico Community Fair, and other community outreach events to bring awareness to sexual violence and RCASA's services in Stafford county, reaching nearly 1,000 residents.

Rappahannock Council Against Sexual Assault - Crisis Services

Program Overview

You may save your work at any time by clicking on the "Save My Work" link/icon at the bottom or top of the page.

When you have completed all questions on the form, select the "Save My Work and Mark as Completed" link/icon at the bottom or top of this page.

You may also SWITCH between forms in this application by using the SWITCH FORMS feature in the upper right corner. When switching forms, any updates to the existing form will automatically be saved.

General Information

Program Name Crisis Services

Is this a new program? No

Program Contact

Name Christina Berben

Title Executive and Clinical Director

Email christina@rcasa.org

Phone (540) 371-6771

Program Purpose / Description

Provide an overview of this program

The Crisis Services Program at RCASA is comprised of several designated paid and volunteer Crisis Responders (CR), who are available to meet the immediate needs of survivors of Sexual Violence (SV). That said, every RCASA staff member is trained in crisis response. CRs man RCASA's 24-hour crisis phone and text line services, provide walk-in crisis intervention during business hours, and accompany SV victim/survivors in the hospital setting.

A CR's top priority is to help clients assess and plan for personal safety. After establishing that a client is safe, a CR introduces, when appropriate, skills to help clients regulate the often intense emotions that follow the trauma of sexual violence. A CR is often a victim/survivor's first interaction with RCASA and with the community systems that are in place to respond to SV. The rapport that they build with victim/survivors leads to increased trust in the process. CRs use a strengths-based approach, empowering clients to make choices based on available resources and options. CR are equipped to assist a victim/survivor in many ways, including explaining how to file a police report, supporting a client through a difficult forensic exam, and providing appropriate community referrals.

CRs model self-advocacy for clients and advocate for victim/survivors, reducing the likelihood of retraumatization that a client might experience.

Client Fees

Please describe the fees clients must pay for the services by this program.

There are no fees associated with receiving services from RCASA. All programs are provided at no cost to Planning District 16.

Justification of Need

Please state clearly why this service should be provided to the citizens of the region and why the localities should consider this funding request.

When a victim/survivor of SV arrives at an area hospital reporting a sexual assault, Crisis Responders (CR) are contacted by hospital staff and arrive at the hospital within 45 minutes. CRs provide information about RCASA services and advocate for victim/survivors during the hospital visit. If a victim/survivor chooses to pursue a forensic exam, a CR's role is critical in the process. The presence of the CR allows Forensic Nurse Examiners (FNE) to focus on collecting evidence while the CR attends to the victim/survivor's emotional needs during an invasive and potentially traumatic experience. Victim/survivors who feel empowered and validated are more cooperative with forensic nurses and law enforcement, which leads to increased apprehension, prosecution, and adjudication of perpetrators, and, ultimately, a safer community.

If this is a new program, be sure to include the benefits to the region for funding a new request.

The services offered by the Crisis Services Program are not new to RCASA; however, the means by which the program's efficacy is tracked and reported is. By creating a more specific performance tracking method and establishing more specific program goals, the Crisis Services Program will be more effective in measuring service delivery victims of sexual violence as well as providing demonstrable outputs for funders to review in years to come. Fine-tuning program measurables will lead to more efficient and effective evaluation of services, creating a model that will lead to long-term growth and sustainability of this program.

Target Audience and Service Delivery

Describe the program's intended audience or client base and how those clients are served.

Crisis services are available to anyone, adult or child, impacted by sexual violence in PD16. Whether a victim/survivor was impacted years ago or recently, they can access crisis services at RCASA.

The crisis hotline is available 24-hours a day, 365 days a year and can be accessed by victims any time they are in crisis. CRs accompany victims in the hospital setting during forensic exams. At the request of victims choosing to file a police report, CRs can also be present during law enforcement interviews. CRs prepare victim/survivors for their next steps of care by teaching self-soothing ("grounding") techniques that can be utilized as they manage the challenging emotions of the trauma. CRs are also available to educate secondary survivors on the impact trauma can have on the brain, and how to support a survivor after an assault.

If your program has specific entry or application criteria, please describe it here.

There are no specific application criteria to receive crisis intervention services from RCASA. Victims of sexual violence can access crisis intervention services at any time, regardless of when their assault occurred.

Rappahannock Council Against Sexual Assault - Crisis Services

Program Budget Narrative

Please indicate in detail reasons for increases or decreases in the amounts you are requesting.

Figures reported for program specific budgets have changed from last year. Numbers given for FY18 Budgeted, Actual & FY19 Budgeted fluctuate drastically across all three programs. This is a result of restructuring & developing 3 distinct service programs, a change from the way programs were defined previously. Had the programs remained structured as they were in FY18, the budget would reflect a 15% increase in budget expenses across all programs. For FY20, budget projections (agency wide & program specific) are increasing by 10%, a rate of growth that under-represents the improvements in agency infrastructure that will translate to improves services for victims of SV.

Crisis Services Program personnel includes trained advocates that are available 24-hrs per day. Salaries reflect the on-call nature of the positions & necessity of staff to be able to reach the hospital on short notice. Operating expenses include software for a new 24-hr crisis text line that RCASA will offer in FY19.

If an increase is being requested, please describe the impact not receiving an increase would have on the program.

Studies show that one third of Americans prefer texting to making phone calls. With this demographic in mind, RCASA is introducing a 24-hour crisis text line in FY19. With the text line, victims of sexual violence will be able to access crisis intervention services in a way that is most comfortable for them. As is the case with the 24-hour crisis hotline, the text line will be staffed year-round by trained crisis responders equipped to provide care to victims of sexual violence. The platform used for the text line is robust, and will allow not only for crisis response, but also for more accurate demographic tracking, training opportunities, and systematic goal and objective evaluations. The cost of iCarol would be prohibitive without program funding, rendering RCASA unable to offer it to PD16.

In particular, please describe in detail if any increase is sought for new positions or personnel.

Currently, RCASA is not seeking to add additional crisis responders.

Rappahannock Council Against Sexual Assault - Crisis Services

Program Specific Budget

Please provide your program specific budget below.

Expenses

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Personnel	61,956.00	83,881.00	39,542.00	79,092.00	87,000.00
Benefits	11,640.00	19,417.00	14,862.00	26,353.00	28,990.00
Operating Expenses	24,975.00	21,570.00	15,442.00	15,347.00	16,882.00
Capital Expenses	0.00	0.00	0.00	0.00	0.00
Total	98,571.00	124,868.00	69,846.00	120,792.00	132,872.00

Revenues

This section represents revenue specifically associated with your program. Revenue that supports the implementation of your program and the services provided to the community.

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Caroline	231.00	231.00	165.00	281.00	309.00
Fredericksburg	870.00	870.00	621.00	1,056.00	1,161.00
King George	105.00	0.00	0.00	116.00	173.00
Spotsylvania	4,410.00	4,410.00	3,150.00	5,360.00	5,896.00
Stafford	3,150.00	2,809.00	1,111.00	1,890.00	3,062.00
United Way	10,000.00	10,000.00	1,500.00	2,552.00	2,807.00
Grants	78,596.00	103,298.00	60,356.00	102,685.00	112,954.00
Client Fees	0.00	0.00	0.00	0.00	0.00
Fundraising	1,209.00	3,250.00	2,550.00	4,338.00	4,281.00
Other (Click to itemize)	0.00	0.00	393.00	2,514.00	2,229.00
Total	98,571.00	124,868.00	69,846.00	120,792.00	132,872.00

Surplus / Deficit

	FY 2017 Actual	FY 2018 Budgeted	FY 2018 Actual	FY 2019 Budgeted	FY 2020
Surplus or Deficit	0.00	0.00	0.00	0.00	0.00

Rappahannock Council Against Sexual Assault - Crisis Services

[View Diagram](#) Goals and Objectives

Goals

Goal:

To provide comprehensive crisis intervention services to victims of sexual violence in Planning District 16.

Objectives

		2017 Baseline	2017 Year End	2018 Baseline	2019 Baseline
RCASA Crisis Responders will spend 550 hours providing crisis intervention to survivors of sexual violence. *Note: RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only. This is a new goal.	Total # Clients Served		355		542
	Total # Clients Achieved/Successful		355		542
	% Achieved / Successful	0	100	0	100
RCASA Crisis Responders will spend 180 hours providing hospital accompaniment to victims of sexual violence. *Note: RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only. This is a new goal.	Total # Clients Served		65		47
	Total # Clients Achieved/Successful		65		47
	% Achieved / Successful	0	100	0	100
Crisis Responders will provide 400 instances of crisis intervention	Total # Clients Served		0		0

support through text messages, via our new 24-Hour Text Crisis Line.

Total # Clients Achieved/Successful	0	0	0	0
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***This is a new goal. Prior to this year, RCASA did not operate a Crisis Text Line.**

% Achieved / Successful	0	0	0	0
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Explanation & Overview

If your outcomes are significantly less than your stated objectives, please note any reasons why this might be the case

*Note: RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

Updates for FY2018

Please note any changes you plan to make to the program, or the stated goals and objectives, given the data you have reported

During FY18, RCASA evaluated program goals and objectives more comprehensively. As a result of these evaluations, the agency application for regional funding now reflects three programs rather than two. By creating more specific performance tracking methods and establishing more specific program goals, Crisis Services Program will be more effective in measuring service delivery victims of sexual violence as well as providing demonstrable outputs for funders to review in years to come. Fine-tuning program measurables will lead to more efficient and effective evaluation of services, creating a model that will lead to long-term growth and sustainability. RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

If you are restating the goals or objectives for the prior calendar year, please include those here

The changes in goals and objectives for FY20 reflect that RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

Goal:

To introduce victims of sexual violence to self-regulatory, grounding techniques that will assist them in processing their trauma.

Objectives

		2017		
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		2017 Baseline	Year End	2018 Baseline	2019 Baseline
RCASA Crisis Responders will educate 90% of appropriate SV victims who use our Crisis Text Line about self-regulating techniques.	Total # Clients Served		0		0
	Total # Clients Achieved/Successful		0		0
	% Achieved / Successful	0	0	0	0
<hr/>					
RCASA Crisis Responders will educate 90% of appropriate SV victims who use our Crisis Phone Line about self-regulating techniques.	Total # Clients Served		0		0
	Total # Clients Achieved/Successful		0		0
	% Achieved / Successful	0	0	0	0
<hr/>					
RCASA Crisis Responders will educate 90% of appropriate SV victims in the hospital setting about self-regulating techniques.	Total # Clients Served		0		0
	Total # Clients Achieved/Successful		0		0
	% Achieved / Successful	0	0	0	0

Explanation & Overview

If your outcomes are significantly less than your stated objectives, please note any reasons why this might be the case

*These are new goals; therefore, we do not have year end or baseline information for these goals.

Updates for FY2018

Please note any changes you plan to make to the program, or the stated goals and objectives, given the data you have reported

During FY19, RCASA evaluated program goals and objectives more comprehensively. As a result of these evaluations, the agency application for regional funding now reflects three programs rather than two. By creating more specific performance tracking methods and establishing more specific program goals, the Crisis Services Program will be more effective in measuring service delivery to

victims of sexual violence as well as providing demonstrable outputs for funders to review in years to come. Fine-tuning program measurables will lead to more efficient and effective evaluation of services, creating a model that will lead to long-term growth and sustainability. RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

If you are restating the goals or objectives for the prior calendar year, please include those here

The changes in goals and objectives for FY20 reflect that RCASA is moving toward measuring service delivery both in the number of clients to which services were provided, as well as the number of hours of services that were provided in total. This serves to highlight the time commitment in service provision that might be missed when counting client numbers only.

Rappahannock Council Against Sexual Assault - Crisis Services

Number of Individuals Served

Localities

Please provide the actual numbers of individuals served in this program during FY2017 and FY2018, the estimated numbers of individuals served in FY2019 and the projected numbers of individuals served in FY2020.

Locality	FY2017 (Actual)	FY2018 (Actual)	FY 2019 Estimate	FY 2020 Projected
Fredericksburg City	151	133	146	160
Caroline County	36	23	25	27
King George County	27	24	26	28
Spotsylvania County	100	100	110	121
Stafford County	41	136	149	163
Other Localities	125	126	138	151
Total	480	542	594	650

Rappahannock Council Against Sexual Assault - Crisis Services

Collaborative Impact

Efforts and Partnerships

Describe in detail examples of collaborative efforts and key partnerships between your program and the other programs or agencies in the area.

The Crisis Intervention program has current cooperative agreements with numerous community resources. By maintaining effective working relationships with partner agencies, victims of sexual violence are empowered to make informed choices regarding their health care, legal options, counseling, mental & emotional well-being. Collaborative approaches to care ensure that victims receive cohesive and holistic care. Of note, RCASA has standing MOU's with every law enforcement office in PD16, as well all major hospitals in the region. By fostering communication of best-practices when interacting with victims of sexual violence, the collaborative efforts between RCASA and community service providers are creating a culture where victims are able to receive necessary services in a way that is not retraumatizing.

Collaborative Impact

Describe in detail how the community would be impacted if your program were dissolved or merged with another partner agency.

Victims of sexual assault often struggle with feelings of shame, guilt, embarrassment, defectiveness & report decreased levels of trust in others. Without a resource dedicated exclusively to the cause of sexual violence recovery, many victims will be hesitant to receive care specific to their trauma, leaving medical & emotional needs unaddressed. This can lead to dissociative and/or self-destructive coping mechanisms that can become autonomous symptoms of PTSD.

By providing crisis intervention care that is trauma-informed & specific to sexual violence, crisis responders create an environment where victims are believed & treated with dignity – experiences that are all too often missing without the presence of advocates specifically trained in sexual violence recovery. By practicing tenants of empathy & empowerment, the Crisis Intervention program helps victims reclaim their autonomy in aftermath of trauma, and educates the community on best-practices for interacting with survivors.