

# **Law Enforcement-Based Victim Specialist Program (LEV Program)**

## **Technical Assistance Introduction Packets**

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# Law Enforcement-Based Victim Specialist Program (LEV Program)

## Agency, Program, and Services Overview

### Agency Overview

Agency Name: \_\_\_\_\_ City, State: \_\_\_\_\_

Number of Personnel at Agency: \_\_\_\_\_ Sworn \_\_\_\_\_ Professional/Civilian

Please list personnel attending the Introduction Call:

Name	Title	Email	Phone Number

### Personnel

Does your agency have personnel dedicated to Victim Services?      Yes      No

*If yes, which of the following best describes these personnel?*

**Law Enforcement-Based Victim Services Personnel** – These personnel are employed by the law enforcement agency to provide services to victims of crime and non-criminal events. These personnel do NOT have other job duties.

How many Victim Services personnel are employed by your agency? \_\_\_\_\_

How many are full-time? \_\_\_\_\_ How many are part-time? \_\_\_\_\_

Please describe the organizational chart and reporting structure for personnel dedicated to Victim Services.

## Law Enforcement-Based Victim Specialist Program (LEV Program)

Please describe the job duties of personnel dedicated to Victim Services.

**Hybrid Community-Based Victim Services Personnel** – These personnel are employed by a community-based agency, and the community-based agency is engaged in a formal agreement with the law enforcement agency to jointly dictate the role and activities of victim services personnel.

What type of agreement(s) have been established between law enforcement agency and community-based agency (e.g., contract, memorandum of understanding)?

How many hybrid community-based victim services personnel serve your agency? \_\_\_\_\_

Please provide the name and description of the agency that employ these personnel.

## Law Enforcement-Based Victim Specialist Program (LEV Program)

Please describe the proposed supervisory structure for these personnel (both at the law enforcement agency and the community-based agency that employs them, if applicable).

***Community-Based Victim Services Personnel*** – These personnel are employed by a community-based agency and the community-based agency may or may not have a formal agreement with law enforcement agency dictating partnership parameters.

Please describe the partnership between your agency and the community-based agency (e.g., MOU):

Please provide the name and description of the agency that employ these personnel.

## Law Enforcement-Based Victim Specialist Program (LEV Program)

### Jurisdiction Demographics:

Does your jurisdiction include a high poverty area(s)?                      Yes              No

Does your jurisdiction include a persistent poverty county?                      Yes              No

Do you have Qualified Opportunity Zones (QOZ) in your jurisdiction?                      Yes              No

What is the size of the population you serve? \_\_\_\_\_

Please describe key demographics about the population in your jurisdiction (e.g., race/ethnicity, economic makeup, age, full-time resident/part-year residents, poverty rate)

Please describe any unique aspects of your jurisdiction.

### Interns and Volunteers:

Do you have an Internship Program with Victim Services?                      Yes              No

If yes, how many Intern positions does your agency have? \_\_\_\_\_

Please describe duties assigned to interns:

## Law Enforcement-Based Victim Specialist Program (LEV Program)

Do you have a Volunteer Program within Victim Services?                      Yes                      No

If yes, how many Volunteers does your agency have? \_\_\_\_\_

Please describe duties assigned to Volunteers:

### Funding Support:

What types of funding support your Victim Services (Please identify specific grants and estimate percentages for each funding source)?

Federal Grants	State Grants	Agency Budget	Other
_____%	_____%	_____%	_____%

Please describe specific grants and other funding sources that support Victim Services (e.g., type, duration of funding, scope of work).

**Law Enforcement-Based Victim Specialist Program (LEV Program)**

**Victim Services Personnel Support:**

Please describe training provided to personnel dedicated to Victim Services:

Please describe wellness/resiliency resources available to personnel dedicated to Victim Services:

**Partnerships:**

Does your agency have formalized partnerships with community-based agencies that serve victims?

Yes      No

Please describe those partnerships:

Do you have any specific technical assistance requests? If yes, please explain.



## Document Submission Checklist

Instructions: Please attach the documents listed below. If you do not attach a particular document(s), please explain why (ex: policy not yet developed).

<b>Document(s)</b>	<b>Attached</b>
1. Key Personnel document	
2. FY 20 LEV Grant Program Narrative	
3. Victims' Rights Information/Policy	
4. Sample Position Descriptions for All Current Program Positions (Paid and Unpaid)	
5. Written Policies, Practices and Documents for Victim Services	
6. Sample Resources for Victims of All Crime Types Served (e.g., brochures)	
7. Training Documents for Victim Services Personnel	
8. Other OVC Model Standards Documents	
9. Written Policies, Practices and Agreements for Collaborative Relationships with Community-Based Agencies	



**International Association of Chiefs of Police**

44 Canal Center Plaza, Suite 200  
Alexandria, VA 22314

Direct: 703-836-6767  
Main Line: 800-THE-IACP  
Fax: 703-836-4543

**[www.theIACP.org](http://www.theIACP.org)**