



**CHICAGO DEPARTMENT OF FAMILY AND SUPPORT SERVICES  
DIVISION ON GENDER-BASED VIOLENCE**

**CHICAGO CHILDREN’S ADVOCACY SERVICES  
2024 SCOPE OF SERVICES – January 1, 2024, through December 31, 2024**

**INSTRUCTIONS:** Agency receiving an award by the City of Chicago Department of Family and Support Services (DFSS) Division on Domestic Violence must complete and submit all required documents as requested in the DFSS Award Notice letter.

Submit completed forms to

Program Manager:

1. Scope of Services
2. Budget
3. Indirect Letter, if applicable.
4. Program staff documentation, if not already submitted during application.

Submit completed forms to

Contract Liaison:

1. Agreement Signature Page
2. Current Certificate of Insurance
3. Economic Disclosure Statement (EDS) Certificate of Filing

**SECTION ONE – AGENCY INFORMATION**

Agency Name:			
Project Name:			
Project Name(s) in InfoNet:			
Administrative Agency Address:			
Phone:		Ward:	
Agency website:			

**Budget Allocation**

PO Number	Award Amount	Funding Source

**Executive Director**

Name:	
Phone:	
Email	

**Program Director**

Name:	
Phone:	
Email	



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**Fiscal Contact**

Name:	
Phone:	
Email	

**Data/Reporting Contact**

Name:	
Phone:	
Email	

**Other Project Funding Sources**

Please list all funding sources for your total program budget.

Match Funding Source	Amount
<b>TOTAL PROGRAM BUDGET</b>	\$

**Program Site Location(s), Hours, Languages and Survivors Served**

Please provide the required information by corresponding Site number.

**Location(s)**

Site No.	Project Site Name	Address	Phone	Ward	Community Area
1					
2					
3					
4					
5					



**Hours of Operation in English**

Site No.	SUN [From-To]	MON [From-To]	TUES [From-To]	WED [From-To]	THUR [From-To]	FRI [From-To]	SAT [From-To]
1							
2							
3							
4							
5							

**Hours of Operation in Spanish**

Site No.	SUN [From-To]	MON [From-To]	TUES [From-To]	WED [From-To]	THUR [From-To]	FRI [From-To]	SAT [From-To]
1							
2							
3							
4							
5							

**Program Staffing**

For each site number, list the staff titles budgeted to the grant. For additional lines, please attach addendum.

Site No.	Staff Title Budgeted to Grant	Number of Staff



**Community Areas and Wards Survivors Served Residency**

Please provide the number of survivors served per site and Community Area(s) or Ward(s) survivors served at the location are from or their residency.

Site No.	Total No. Survivors To Be Served in 2024 per site	Survivor Community Area(s) Served	Survivor Ward(s) Served
1			
2			
3			
4			
5			

Provide the languages spoken by staff available to survivors at site.

Site No.	Languages Services Provided at Site other than English and Spanish
1	
2	
3	
4	
5	

**SECTION TWO – DFSS PROGRAM DESCRIPTION**

**A. Program Goals**

Child Advocacy Services increases the self-determination and safety of child victims of sexual abuse/sexual assault.

As mandated by protocol, DCFS policy and procedure, and Chicago Police Department (CPD) orders, all children, ages 0-17, who are reported in the City of Chicago as suspected victims of sexual abuse/assault. This includes services to the alleged victim and their non-offending family members. Upon request, children who are alleged victims of physical abuse, witnesses to violence (including domestic violence), witness to physical abuse of other children, victims of commercial sexual exploitation and/or sex or labor trafficking, and/or are identified as at risk of harm.



**B. Target Population**

Any child who has been the victim of sexual assault/abuse, witness to violence, sexual exploitation or risk of harm and their non-offending family members violence is eligible for services. Delegates must be able to offer services to undocumented victims, those whose do not speak English, male victims, those who are disabled, and LGBTQIA victims.

**SECTION THREE – REQUIRED CORE PROGRAM ELEMENTS**

Delegates must deliver the following services:

**Referral & Case Intake**

Following reports of sexual abuse, witness to violence, sexual exploitation or risk of harm, case intake staff will contact families and work with members of the Multi-Disciplinary Team (MDT) to schedule forensic interviews and forensic medical exams, if needed. Prior to the forensic interview/medical exam, staff will contact families and gather reports and information about the case for the MDT, including Child Abuse and Neglect Tracking System (CANTS) forms, police reports and results of medical exams, if already performed. They will also screen families for special needs (mental health diagnoses, disabilities, etc.) and prepare the MDT for each family's unique needs. In order to prepare the MDT and other Chicago CAC staff for potential crisis interventions, intake staff will pre-screen clients for extreme stress, anxiety or acute psychiatric needs before they come to the center. High priority cases will be referred to the Director of Advocacy and the Director of MDT Coordination. Intake staff are also responsible for opening new cases in Chicago CAC's client management system.

**Forensic Interviewing**

Forensic interviews are performed for referred children and adolescents. Forensic Interviewers are highly trained to speak with children in a psychologically and developmentally appropriate manner while simultaneously maintaining the evidential integrity of a criminal investigation. During forensic interviews, child protection, law enforcement and prosecutors observe from behind a one-way mirror. Forensic interviews are digitally recorded (video and audio).

Chicago CAC must have the capacity to ensure that forensic interviews in both English and Spanish are available seven days per week, if necessary. Forensic interviews are also performed for witnesses to sexual and physical abuse and other violent crimes, as requested by investigators. In addition, forensic interviews will be provided for child abuse investigations from jurisdictions outside of Chicago upon request and when adequate staff are available. If requested, Forensic Interviewers will also interview adults with intellectual and developmental disabilities.



## Advocacy

Family Advocates will work to minimize the physical, psychological, and emotional impact of the abuse for the children and non-offending family members who come to the ChicagoCAC. Family Advocates will provide education about the investigative and legal processes and the roles of the different agencies; conduct a thorough social and mental health assessment with each family; provide emotional support and crisis counseling; refer children and caretakers to mental health and other needed services; and provide follow up. Using the program's Family Screening Tool, staff comprehensively assesses each family's social stability as well as the (a) severity of the alleged abuse, (b) child's past trauma history, and (c) presenting mental health symptoms. The family's motivation to engage in treatment and the child's access to supportive relationships are also assessed. This assessment is then used by staff to assign a triage rating of high, moderate or low priority for mental health services

## SECTION FOUR – PERFORMANCE MEASURES

To track progress towards achieving the stated program goals in Section Two and to assess success of the program, DFSS will monitor a set of performance indicators that may include, but are not limited to:

- Number of case intakes provided for children who are referred for coordinated child abuse investigations and come into the center for services.
- Number of forensic interviews performed.
- Number of new children and their non-offending family members provided with education about the investigation and legal processed and screening for family's needs and priority for mental health services.
- Number of children provided with crisis interventions.
- Number of children provided with referrals to mental health services.
- Number of caregivers/families provided with referrals to social service (e.g., housing, clothing, food, financial assistance, legal assistance, medical, domestic violence survivor support, etc.).

## Data Reporting

Delegate agency will be expected to collect and share data with DFSS according to the format, frequency, and submission protocol specified by DFSS. The parties recognize that reliable and relevant data is necessary to create a common understanding of performance trends, ensure compliance, evaluate program results and performance, and drive program improvements and policy decisions. As such, DFSS reserves the right to request/collect other key data and metrics from delegate agencies including client-level demographic, performance, and service data from a format specified by DFSS.

Delegate agency agrees to the following reporting requirements:

- Quarterly Reports detailing services provided. Data provided will include work plan services funded through this contract and all other funding sources. Format will be provided.



- InfoNet data detailing services provided. Data provided will include work plan services funded through this contract and all other funding sources. Format is the InfoNet database.
- Narratives in the quarterly report that may highlight a particular case or services provided to victim of sexual assault/abuse, witness to violence, sexual exploitation or risk of harm and their non-offending family members that demonstrate value in the ongoing services or a gap in services.

**Uses of Data**

DFSS reserves the right to use data related to delegate agency performance, including but not limited to data submitted by the delegate agency for the following:

- a) In periodic meetings described below to review program performance and develop strategies to improve program quality throughout the term of the contract; and
- b) To guide DFSS program development, evaluate programs, inform policies, and inform contract decisions such as payment rates, contract extensions or renewals, and evaluation of proposals by the delegate agency in response to any future solicitations by DFSS for goods or services.



### **Meetings**

Regular reviews of and conversations around program performances, program results and program data, particularly related to the goals outlined in this agreement, will allow DFSS and the delegate agency to employ real-time information to track performance, identify good practices, and swiftly, collaboratively, and effectively address any challenges experienced by the target population.

At such meetings, the data will be reviewed to:

- a) Monitor progress, highlight accomplishments, and identify concerns.
- b) Collaboratively design and implement operational changes to continuously improve processes and outcomes; and
- c) Develop strategies to broader system changes to improve service delivery and coordination between services.

Meetings shall include at a minimum the Supervisor for the Division on Domestic Violence, or designee, and the delegate agency's executive director, or designee. Delegate agency or DFSS may be represented by additional representatives as each party deems appropriate. DFSS may request the attendance of additional parties as it deems appropriate. Representatives from the delegate agency will attend all meetings as requested by DFSS.





**SECTION FIVE –PLANNED ACTIVITIES**

Please complete the following tables to indicate the program’s planned activities for the contract period. For those planned activities that are not applicable to your program, please enter zero.

A. Number of Intakes for Child Abuse investigations						
		Q1	Q2	Q3	Q4	Total
1a.	Number of forensic interviews performed.					
1b.	Number of child victims of sexual assault/abuse carried over from Q4 2023 to Q1 2024					
1c.	Number of non-offending family members receiving services					
2a.	Number of child victims of sexual assault/abuse newly enrolled in 2024					
2b.	Number of non-offending family members newly enrolled in 2024					
3.	Total number <b>carried over</b>					
4.	Total number <b>newly enrolled</b>					
5.	Total number of <b>adults</b> served					
6.	Total number of <b>children</b> served					
7.	<b>Total</b> number served					

PERFORMANCE MEASURE						
60% of clients who develop a service plan will show progress towards at least one goal listed on the service plan						
B.	PROVIDE ADVOCACY to minimize the impact of the abuse for the child & non-offending family member	Q1	Q2	Q3	Q4	Total
1.						
2.						



**DFSS**

Department of Family  
and Support Services

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Please review the **Required Core Program Elements in Section 3** and **Performance Measures in Section 4**. Please describe activities to be performed to address the needs of the target population and achieve Performance Measures, focusing on activities not captured in the listed Core Elements.

Empty response area for describing activities to address the needs of the target population and achieve Performance Measures.



## SECTION SIX – REQUIRED ADDITIONAL DOCUMENTATION

The Division on Gender-Based Violence requires the following documentation ***that was not submitted in 2023 or has since been updated*** to be submitted to [adriana.camarda@cityofchicago.org](mailto:adriana.camarda@cityofchicago.org) within the first 30 days of the contract start date:

1. Current **job description** for every staff person providing services to victims of domestic violence in this program. A job description should be provided for every staff person providing services to victims of domestic violence in this program, regardless of whether this grant pays the staff's salary.
2. Current **resume** for every staff person providing services to victims in this program. A resume or job description should be provided for every staff person providing services to victims of domestic violence in this program, regardless of whether this grant pays the staff's salary.

**Failure to have these documents on file will result in an audit finding against the program.**



**SECTION SEVEN – SUBMITTAL AND APPROVAL**

**CERTIFICATIONS:**

By checking this box, your agency certifies that all information provided in the Scope of Services is correct and that the agency will comply with the requirements listed in the Scope of Services. Your agency certifies that documentation described in Section 6 of this Scope of Services not provided during the application process or that has been updated since will be submitted within 30 days of this contract or update.

Authorized agency signature:	
Name typed:	
Title:	
Date of signature:	
PO #	

DFSS Approval (to be completed by DFSS):	
Authorized DDV signature:	
Name typed:	
Title:	
Date approved:	