



COMMUNITY-BASED AND PRISON-BASED BATTERING INTERVENTION PROGRAMS

BIANNUAL REPORT

FY: _____ Grant No.: _____

Program Name: _____

Reporting Period :

Please submit a separate report for a community-based program and a prison-based program. Submit reports as an email attachment to CDVSA.grants@alaska.gov; hard copy reports *will not be accepted*. If a question does not apply or there is no activity to report, please answer “Not Applicable (N/A)”.

- 1. Please indicate the status of your relationships with the following organizations/categories.**
Complete chart once and indicate changes that occur during this reporting period in 3rd column.

	Formal Signed MOA/MOU (indicate date signed)	Informal Partnership	New Partnerships Developed this reporting period (Explain in #2)
Law Enforcement		YES NO	YES NO
Prosecutors		YES NO	YES NO
Court System		YES NO	YES NO
Probation/Parole		YES NO	YES NO
Medical		YES NO	YES NO
Office of Children's Services		YES NO	YES NO
DV Task Force		YES NO	YES NO
Violent Crimes Compensation Board		YES NO	YES NO
Behavioral Health		YES NO	YES NO
Other victim services or BIPs		YES NO	YES NO
Other – Explain (please provide an explanation in question #2)		YES NO	YES NO



Alaska's Council on
Domestic Violence
& Sexual Assault

2. Please describe your successes, challenges and/or changes with community partners this reporting period.

3. Please describe any programmatic changes you have made and/or implemented this reporting period.



4. Identify any BIP-specific training staff received this reporting period.

5. Describe any changes this reporting period in how you are receiving referrals for service (referrals from courts, OCS, DOC, attorneys, diversion programs, other providers, etc.).



6. For those participants who are non-compliant during this reporting period, please describe what issues led to non-compliant status.

7. Did your agency receive any formal complaints and/or grievances this quarter? Who were they against and how were they resolved?



	July 1 st – December 31 st	January 1 st – June 30 th
How many victim safety checks were completed? (count should include new and continuing victims)		
How many victim safety checks were attempted? (victim did not answer, refused, hung up, etc.)		
How many participants are in continual contact with their partner (victim of the abuse)?		
How many participants' partners (victims of the abuse) are receiving support services from a victim service agency? (If the partner/victim was counted as receiving services during the previous reporting period, do not count again.)		

BIP only:

What is the total dollar amount of Battering Intervention Program (BIP) fees collected?

What is the total BIP dollar amount of accounts receivable more than 30 days past due?