



The author(s) shown below used Federal funding provided by the U.S. Department of Justice to prepare the following resource:

Document Title: What Constitutes Success? Evaluating Legal Services for Victims of Crime, Final Site Report: Arizona Voice for Crime Victims

Author(s): Kristina Lugo-Graulich, Karen Souza, Susan S. Howley, Susannah N. Tapp, Meg Garvin

Document Number: 304982

Date Received: July 2022

Award Number: 2018-ZD-CX-0004

This resource has not been published by the U.S. Department of Justice. This resource is being made publicly available through the Office of Justice Programs' National Criminal Justice Reference Service.

Opinions or points of view expressed are those of the author(s) and do not necessarily reflect the official position or policies of the U.S. Department of Justice.



**What Constitutes Success?
Evaluating Legal Services for Victims of
Crime
Final Site Report: Arizona Voice for Crime Victims**

Authors:

Kristina Lugo-Graulich, Principal Investigator

Karen Souza

Susan S. Howley

Susannah N. Tapp

Meg Garvin

September 2021

This report was supported by Grant No. 2018-ZD-CX-0005, awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice to the Justice Research and Statistics Association. The opinions, findings, and conclusions or recommendations expressed are those of the authors and do not necessarily represent the official positions or policies of the U.S. Department of Justice.

What Constitutes Success? Evaluating Legal Services for Victims of Crime Final Site Report: Arizona Voice for Crime Victims

Purposes of this Report

This report has three purposes:

1. To report back out to AVCV the results from the formative evaluation.
2. To frame how this work can be used and how it fits into the next phases of evaluation:
 - a. how data will be used and can be useful to AVCV, and
 - b. how the formative evaluation fits into the larger project, which is as a test to scope out what is possible/needed to set up the next phases for success.
3. To ensure that information about AVCV in the final report is factually accurate. The versions of the program/process description, process flow, logic model, and the customized conceptual model in this report all contain adjustments based on lessons learned during the pilot test and feedback from the post-pilot focus group.

Table of Contents

Project Purpose.....	3
The Conceptual Model	4
Formative Evaluation Process	4
Site Context	6
Process Flow and Logic Model	7
Final Data Collection and Analysis Plan.....	13
Pilot Test Experience.....	13
Data Quality Assessment.....	14
Fidelity Assessment.....	19
Evaluability Assessment.....	23
Discussion and Recommendations for Next Phase	27
Final Measures Recommended for Next Phase.....	27
Process Evaluation	30
Outcome Evaluation Research Design	30
Usefulness of this Research.....	32
References	34

Project Purpose

This National Institute of Justice (NIJ)-funded project is a researcher-practitioner collaboration between the Justice Research and Statistics Association (JRSA), the National Crime Victims' Law Institute (NCVLI), national experts, and three local programs. These programs include Arizona Voice for Crime Victims (AVCV), Maryland Crime Victims' Resource Center (MCVRC), and Oregon Crime Victims Law Center (OCVLC).

The purpose of this project for the field is to establish a foundation for future rigorous evaluation that can inform and support excellence in victims' rights enforcement work and other legal services for victims. The first component was the development of a conceptual model for victim legal services. A preliminary version of the model was adapted to fit AVCV's services. After the pilot test, refinements were made, and a finalized AVCV-specific version of the model was created (described below).

The rest of this project comprised a *formative evaluation*, which is a rigorous assessment to determine AVCV's readiness for formal evaluation. This was carried out by collecting key program documentation, interviewing stakeholders, collaborating to design a pilot data collection, and executing a six-month pilot test of it. The goal was to determine which data will be most useful for AVCV's purposes on an ongoing basis and to inform the two phases of formal evaluation. These phases consist of a *process evaluation*, during which the evaluation team will collect more detailed data on *how* services are delivered while working with AVCV to complete ongoing improvements to the client satisfaction survey and implementation (services) data collection launched during the pilot test. These activities will be used to prepare AVCV for Phase III, the *outcome evaluation*.

An important point raised during the post-pilot test focus groups was that it can be difficult to see how data can be used to inform practice—especially numerical data—when the true impact of services is most easily seen in one-on-one interactions with clients rather than number of services delivered and scale measures that may seem abstract. Even in client satisfaction surveys, staff said that the most useful feedback they receive is not from questions that involve “ticking boxes,” but open-ended questions where respondents can express their feelings via written responses. Nevertheless, stakeholders also want to know about overall trends in service delivery, victim outcomes, and aspects of service delivery that are most associated with improved outcomes. Fostering an environment of continuous improvement can have a number of benefits for AVCV and other legal clinics, such as:

- Standardizing collection of performance data (numbers of activities performed, such as reported for VOCA), but adjusting them to provide more detail on desired outcomes from the conceptual model. Then, by comparing them against AVCV's carefully designed procedures and assessing real-life fidelity (faithfulness) to those procedures, AVCV can identify where deviation from best practices may be occurring and self-correct.
- Re-designing and standardizing some survey questions to generate more variety in responses. Doing this can generate useful information about overall trends in victim outcomes to supplement the free-text responses that AVCV values. The ability to measure these trends and tie them to program activities can inform internal program

design and increase AVCV's ability to demonstrate its value to funders, boards of directors, criminal justice and victim services partners, legislators, and the community.

- By basing data collection and measurement on a conceptual model of best practices and a logic model based on the goals and theory of change defined in the conceptual model, AVCV can meaningfully measure progress against its stated mission and goals.

These benefits can be of value not only to AVCV, but to the field of victims' rights enforcement across the country.

The Conceptual Model

The purpose of a program and its expected outcomes and impacts must be outlined in detail before evaluation occurs (Black, 2016). This conceptual model for victim legal services was developed via collaboration with the OCVLC, AVCV, MCVRC, interviews with 17 other subject matter experts, a further survey that targeted 104 subject matter experts (77 responded), and supported by an extensive literature review.

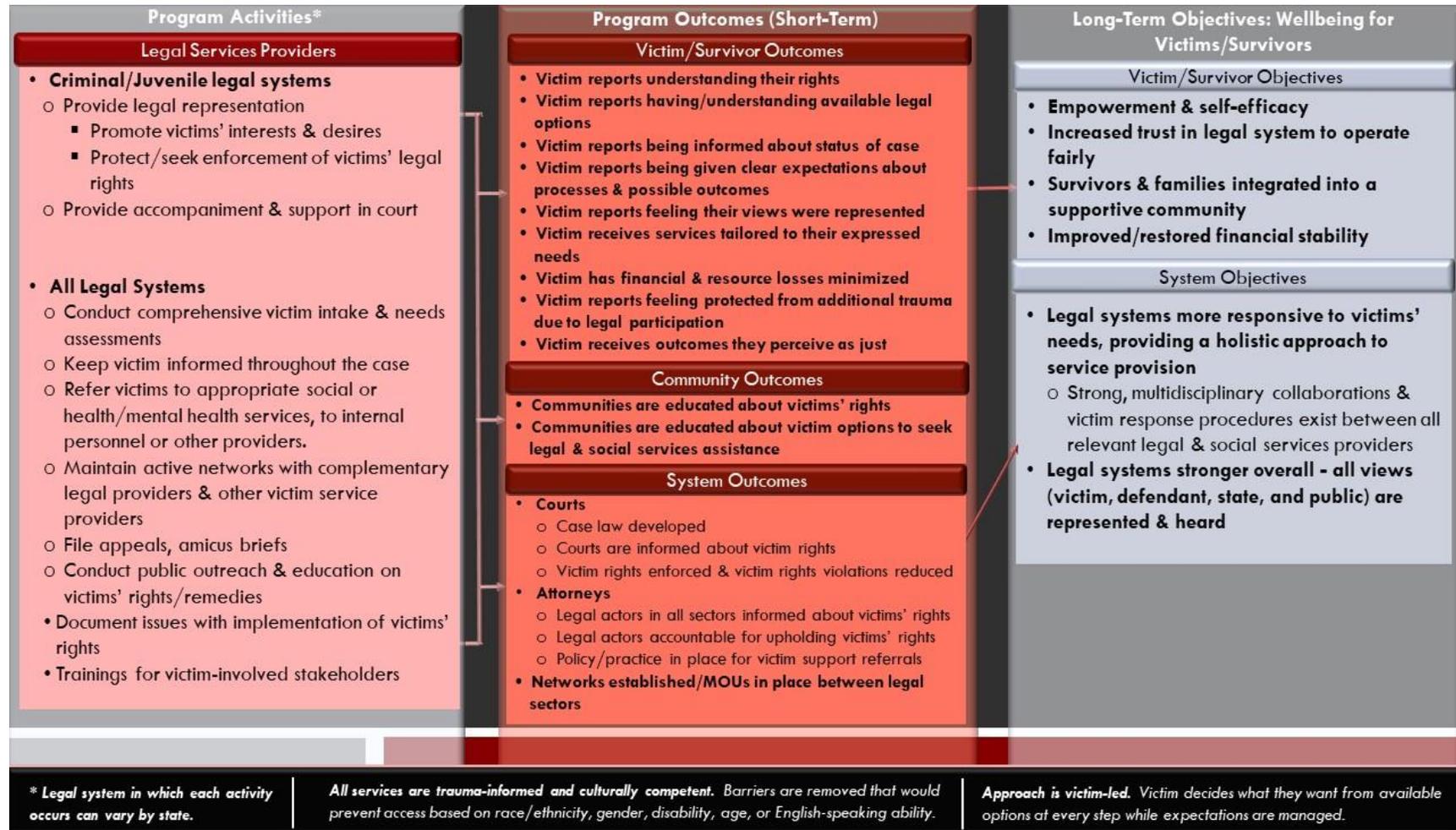
The *conceptual model* guided the selection of measures to be pilot tested (see AVCV's Implementation Guide from this project). After the pilot test concluded and data were analyzed, the overall and AVCV-specific conceptual models were revised. AVCV's model was further pared down to only include activities that AVCV performs, and the final conceptual model for future use in evaluation of AVCV services is shown in Figure 1.

Formative Evaluation Process

The purpose of a formative evaluation is to do an assessment of a program's readiness, resources, and capabilities to participate in a formal evaluation. The JRSA/NCVLI research team began this formative evaluation by conducting a site visit with AVCV in January 2020, during which we reviewed program documentation, conducted staff interviews, and received a detailed "tour" of CaseFramework (AVCV's case management system, or CMS). Based on this information, the project team began working with AVCV to design the pilot data collection.

However, in March 2020, the COVID-19 pandemic derailed plans, not only for this formative evaluation, but for the entire victim legal services field. After agreeing to pause the project temporarily, JRSA conducted interviews with three AVCV staff in August 2020 to ascertain the impact of COVID-19 on Arizona's criminal justice system, on legal services, and on their internal operations. Work resumed to design the pilot data collection and pilot test in September 2020. During this time, the evaluation team worked collaboratively with AVCV to select measures and draft and finalize the logic model, data collection instruments (survey and CaseFramework data), and the implementation guide used to guide the data collection and reporting processes. Training was conducted in January 2021 and pilot data were reported covering the six-month period from December 1, 2020, through May 31, 2021 (reported quarterly on March 15 and June 15, 2021). After the pilot test was completed, a post-pilot focus group was held with all AVCV staff to gather feedback about the pilot test experience, and the data were analyzed for their utility in future evaluation.

Figure 1. Post-Pilot Customized Conceptual Model: AVCV



Site Context

History. Arizona Voice for Crime Victims (AVCV) was founded in 1996 by Mr. Steven J. Twist and Sen. Jon Kyl (ret.) to provide pro bono legal representation and social services to victims of crime across the state of Arizona. AVCV is unique in that it was the first organization of its type in the country to address both the legal and emotional needs of victims. AVCV collaborates with the Sandra Day O’ Connor College of Law at Arizona State University to allow law students to volunteer at the clinic, engaging in tasks ranging from accompanying victims to court, researching issues related to victims’ trauma, researching legal issues, and drafting legal pleadings. Since its inception, AVCV’s attorneys have been counsel of record for numerous victims in state and federal courts and have successfully litigated victims’ rights issues, creating case law that preserves and protects, defines, and implements the constitutional and statutory rights of victims. AVCV has established partnerships with prosecuting agencies. In recent years, AVCV has formed a groundbreaking partnership with the Arizona Department of Child Safety (DCS). Its partnership with DCS allows child-victims, who are in custody of the state and may not have an appropriate legal representative to ensure they have an opportunity to exercise their rights, to have their own counsel for the purpose of asserting rights guaranteed to them under the Arizona Victims’ Bill of Rights.

Mission. AVCV’s mission statement is as follows: “AVCV’s mission is to ensure that crime victims receive their rights to justice, due process and dignified treatment throughout the criminal justice process. To achieve this purpose, AVCV provides pro bono legal representation, social services, training and education, and technical assistance. AVCV’s vision is to establish a compassionate justice system in which crime victims are informed of their rights, fully understand those rights, know how to assert their rights, have a meaningful way to enforce those rights, and know how to seek immediate crisis intervention when they become victims of crime.”¹

Staff. At the time of the pilot test, AVCV staff to carry out this mission included their Chief Counsel, eight attorneys, one legal assistant, one notification clerk staff member, two social workers, and volunteers/law students from the law school in which they are housed. The notification clerk and legal assistant are bilingual in Spanish. Financial resources come from their VOCA grants and other state and federal grants, and private donations. Technology and data management resources include their CaseFramework case management system, their intake assessment and exit survey instruments, a language line for further interpreter services, and other records and financial management platforms. Figure 2 shows an illustration of AVCV’s case flow process, which is described in detail below. The full logic model can be found in Figure 3.

Client Referrals. Clients come to AVCV either through self-referral, an external referral, or via outreach; initial intake and screening are provided primarily by AVCV’s legal assistant and social workers, who also helps attorneys with file maintenance. Sources of self-referral include internet searches, business cards, and clients calling to seek services. Most referrals occur by word-of-mouth, e.g., through family/friends, former clients, DCS referrals, victim

¹ <https://www.arizonavoiceforvictims.org/>

advocates at County Attorney's Offices, other victim organizations such as Parents of Murdered Children (POMC), police, and other legal actors (e.g., prosecution, defense). ACVC does outreach and provides training to these organizations, as well as to child advocacy centers. AVCV does not advertise or solicit victims, but will conduct direct outreach to victims at the request of various victim support groups such as POMC.

Service Eligibility. To be eligible for services at AVCV, the person must be a victim as defined by Arizona's Victims' Bill of Rights, its implementing legislation, or the federal Crime Victims' Rights Act. AVCV will take cases that involve a victims' rights violation and cases where a crime victim needs support or assistance in navigating the system. Eligibility is not limited by type of crime, although most cases are homicide or sexual assault cases. AVCV does not represent civil or protective order cases. If the client requires services outside the scope of AVCV, he/she is referred to external support services either from lists of resources compiled by the social work staff and/or the state bar's referral network. For example, if a client wishes to seek civil damages in addition to restitution, they are referred to a civil legal services provider as AVCV can only address restitution.

Case Management. In general, the social workers at AVCV perform case management. Social work staff work together with the attorneys that provide legal representation to support clients throughout the process. They help to explain the legal process to clients, liaise with attorneys to get answers to questions that clients are uncomfortable asking themselves, provide court accompaniment, assist with victim impact statements (VISs), assist with emotional de-escalation, refer clients to resources, and help clients build up community supports. Social workers provide informational and emotional support, but do not provide counseling in house (clients with counseling needs are referred externally). Social Workers also assist with restitution, victim compensation, and safety planning. The following sections will first describe social work case processes and then the attorney case processes.

Social Worker and Support Staff Case Processes. An intake assessment is completed for all victims who contact AVCV, usually over the telephone. A prescreen intake is typically carried out by AVCV's legal assistant, but may occasionally be conducted by the notification clerk if the legal assistant or a social worker is unavailable. The legal assistant carries out the initial prescreening, which includes collecting information on the clients' demographics, the case (type of crime, whether it has been charged, and judge), client status (new or returning), and about victims' rights issues identified. The legal assistant also gathers case information from public sources (e.g., public court docket), which is used along with the intake information to determine whether the client is eligible for services at AVCV. 90% of AVCV's cases involve a defendant who has been charged. For the other 10%, AVCV provides non-legal assistance, such as help with applying for victim compensation, and emotional support.

Once the prescreen intake is complete, the legal assistant forwards the case to the chief/assistant chief counsel and social work staff for review and attorney assignment. A social worker first completes a fuller needs assessment to identify any social service issues and determine if/how AVCV can help. The chief/assistant chief counsel then assigns the case to an attorney based on caseloads/availability. A letter of retention (LOR) is then completed, typically on the same day as intake. In emergency situations, social workers will move quickly to get the victim assigned to an attorney and arrange an immediate meeting with the victim.

Formal client representation begins when the LOR is signed and returned. Then, a Notice of Appearance is filed with the courts on the victims' behalf and AVCV will reach out to the victim advocate to get the next court dates. The notification clerk saves this information in AVCV's shared calendar and assists with obtaining police records on behalf of victims.

For the initial client consultation, the social worker will contact the client by telephone to introduce him/herself and schedule a home visit or meeting at another convenient location. The purpose of this meeting is to go over the charges; to explain and answer questions about the legal process, confidentiality, victims' rights, services available, and AVCV's role; and to conduct a fuller needs assessment. If the client has questions that raise to the level of seeking legal advice, the social worker will defer to AVCV's attorneys. If the client is a child, depending on the child's age/maturity and interest in the case, the social worker may speak with the parents/guardians who are asserting rights on behalf of the child-victim instead. How often social workers meet with clients subsequently is determined by client preference and case status; most meetings are centered around the hearings and trial so the social worker can prepare them for court. More generally, social workers update clients on their case statuses at least monthly to ensure that clients know what is coming in the process and to make sure clients feel supported, empowered, and heard.

Social workers liaise with the victim advocates from the prosecuting agency and the Department of Child Services (DCS, if applicable), and to ensure that they are aware of victims' rights. They spend around 10% of their time either accompanying clients to court or attending court on their behalf and relaying information back. Some examples of social worker support in court include helping to prevent any unwanted contact between their client and family members who may be defendants; ensuring that clients have headphones to be able to hear what's happening in court; and if the client cannot be in the courtroom, pursuing the option to view the proceedings on the television in the victim room.

The social workers' role at the end of a case is to debrief clients and provide support post-conviction. The decision for AVCV to move a client's case to closed status is based on whether the client has any further needs that AVCV can provide services for. When a case is closed, clients are told that they can call back if anything comes up later on, and a client satisfaction survey is sent to the client by the legal assistant. Responses to these surveys are handled by AVCV's grant coordinator, and AVCV takes measures to ensure the integrity of the survey process and to protect anonymity. Around 20% of surveys sent are returned.

Attorney Case Processes. In addition to the social worker's initial contact with a client, the attorney first carries out a client conflict check using AVCV's CMS and then conducts an initial consultation in person or by telephone. The attorney introduces him/herself and provides his/her background. The process for attorneys to establish the clients' goals and needs happens organically. The attorney allows the client to speak and just listens and validates his/her feelings. If the client is a child, the attorney may spend the first meeting building rapport, rather than diving straight into the case. Sometimes the child's victim representative/legal guardian who is asserting victims' rights on behalf of the child have more detailed ideas of how they think the case should be resolved. With clients who have disabilities, the attorney researches the disability as much as possible and figures out the best way to communicate with the client and meet their needs. Generally, the attorney asks the client what their understanding is of the case and what

concerns they have, explains the legal process (e.g., that they are not the state and cannot direct charges), and answers any questions. The timing of this call/meeting varies.

Sometimes, in emergency cases or if the client lives out of town, the attorney may not get a chance to meet the client in person before the hearing. The attorney will confer with the client or their victim representative/legal guardian via telephone or through a virtual meeting. The attorney compiles questions for the prosecutor if there are any issues that only the prosecutor can answer (e.g., plea agreement terms that were negotiated). The attorney can also arrange a meeting, in person, telephonic, or virtual, between the client and prosecutor to get answers to the client's questions.

In general, the attorney's role is to attend court and stay on top of criminal proceedings on behalf of victims. The victim advocate from the county's office sends AVCV hearing notifications. For active cases, the attorney goes to every hearing and may see the client every 30-45 days. Both the attorney and social worker may attend court together and debrief afterwards. Status conferences are held every 30-45 days to review case progress with the judge because of the complexities of many cases. Clients have a right to attend these conferences as well if they wish.

The criminal justice system culture in Maricopa County is generally accepting of the idea of victims' rights and their enforcement (which is not universal in all jurisdictions), so the attorney works to develop a good relationship with the prosecutor. Common rights issues that come up at AVCV are enforcement of the victim's rights to a speedy trial, to not be interviewed or deposed by the defense or others, and the right to restitution. The attorney also assists with victim impact statements and may read the VIS for victims in court at their request (social workers also assist victims with preparing VIS).

When a violation of victim's rights occurs, depending on the type of violation and who the violator is, the attorney first reaches out directly to the other party to educate them on victims' rights and statutes. AVCV typically is not involved when the violator is law enforcement because cases generally come to them only after they have been charged and filed in court.

If the violation occurs in court, the attorney makes the objection on record either in person or in writing. The attorney may act by, filing a memorandum of law or filing a motion for a reexamination hearing (which is the statutory remedy for victims' rights violations; e.g., if a victim was not notified of a plea hearing, the attorney would seek to have the plea agreement reexamined to allow the victim an opportunity to confer with the prosecutor). If the rights violation was by defense counsel (e.g., the defense wants to interview the victim, subpoena the victim's private records, postpone the trial, or modify bond conditions), the attorney will speak with the defense attorney directly to inform them of the victims' rights and will file a motion to stop the action or respond to the defense attorney's motion that implicates victims' rights.

In general, if when victims' rights are violated, the attorney then consults with AVCV's chief or assistant chief counsel to determine whether to petition for special action in the court of appeals. Special actions are often useful for establishing case law that will help future victims.. The required procedures in the court of appeals are more complex than in standard criminal

court. The attorneys also assist each other with research, brainstorming, drafting arguments, and moot courts for these cases.

For clients who do not wish to pursue legal action into the appeals stage (decides not to have their rights enforced), the attorney reviews all options with them, lays out the pros and cons of (dis)continuing with proceedings, and gives clients time to think it over before making a final decision. The attorney explains that criminal proceedings cannot be stopped, but if the client has other unmet needs, the attorney offers them other resource referrals (*note*: AVCV has a broad network of social service providers for housing, emergency assistance, etc.). If safety is a concern, the attorney counsels the client on how he/she can help with safety planning.

Attorney contact with clients varies based on what is happening with the case at the time. Attorneys meet or speak by telephone with clients weekly or monthly depending on client preference and what is happening in the case. Some clients want to be consulted at every step of the case, while others do not want to be involved at all unless a victims' rights issue arises. If events are urgent the attorney may speak to clients weekly with the social worker on the call as well. Most often, attorneys meet clients before or after the court proceedings. During the post-conviction appellate process, attorneys may only meet clients around two to three times a year because the timeline for appeals is so lengthy. This is because most of the action is related to filing briefs and there are fewer court room events.

If clients stop communicating with AVCV, the attorney reaches out by telephone, email, and text to try to find out why and consults with the chief counsel about what to do. If the client continues not to respond to AVCV's attempts at contact, there is a point in which AVCV will withdraw representation. These communication attempts are documented in the client's file, and the file is closed out.

End of Services. Cases are typically closed by social work staff. The social worker may ensure that clients have whatever additional services they may need and will provide assistance, at the client's request, opting in for post-conviction notification. At case closure, clients are sent a letter of disengagement, reviewed and signed by the attorney, that states that they are no longer being represented by AVCV and how to get a copy of their client file; this letter is mailed by the legal assistant along with the client satisfaction survey.

Process Flow and Logic Model

Figure 2 shows an illustration of AVCV's case flow process as described above. Figure 3 shows the finalized logic model that breaks down AVCV's inputs, activities, outputs, short term outcomes, and long term objectives as guided by the conceptual model. These versions contain revisions made post-pilot to improve its accuracy before this project moves into the process evaluation phase.

Figure 2. AVCV Case Processing Flow Chart

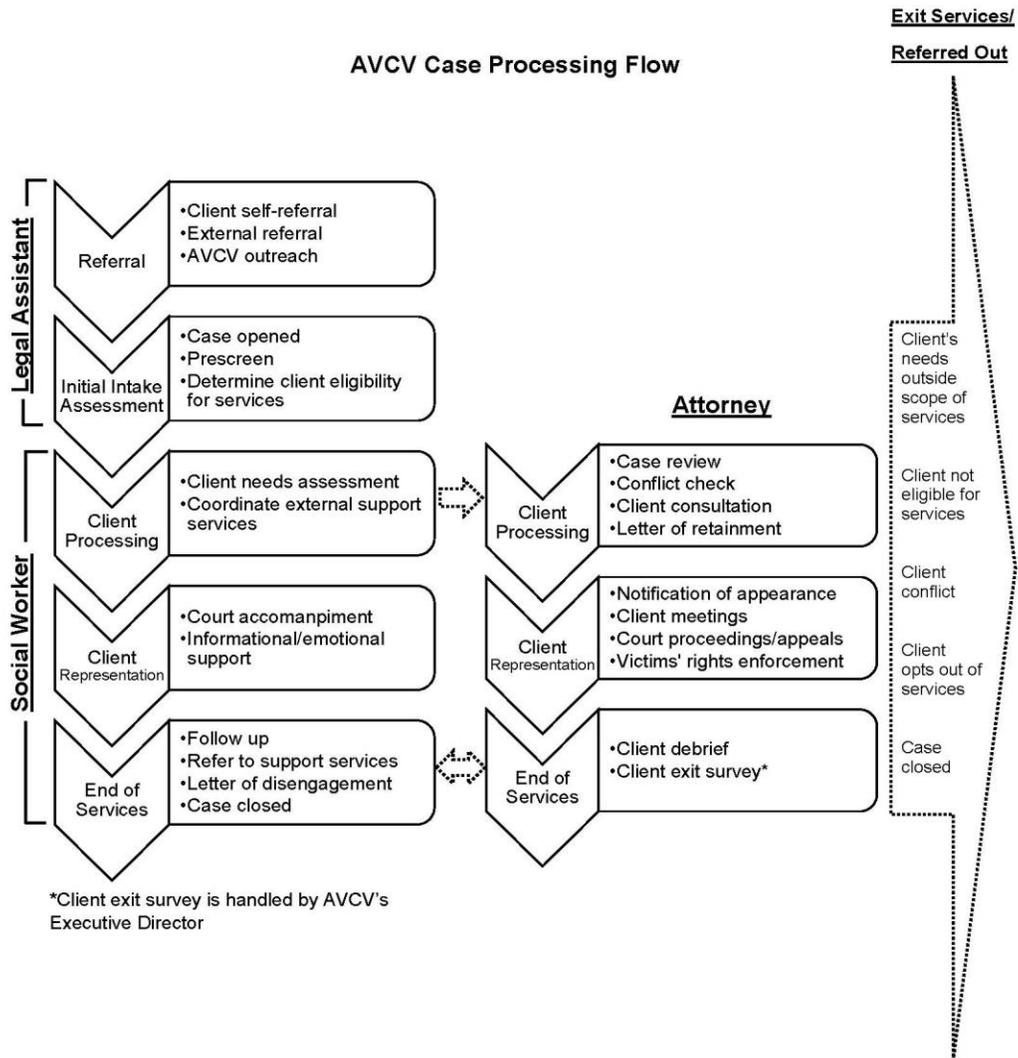


Figure 3: AVCV Final Logic Model

Inputs	Activities	Outputs	Short term Outcomes	Long-term Outcomes
People <ul style="list-style-type: none"> Executive director Staff attorneys Social workers Bilingual staff Notification clerk Volunteers/law school students Victim/survivor/clients (V/S/C) 	Intake assessments Inform of options/possible outcomes Legal representation <ul style="list-style-type: none"> Rights enforcement Support/accompaniment Information/Notice <ul style="list-style-type: none"> Case events Rights and options File appeals, amicus briefs Maintain provider networks <ul style="list-style-type: none"> Referrals Social services 	# victims served # victims notified # each service provided <ul style="list-style-type: none"> #of times Dosage level # referrals Amount of damages recovered # appeals/amicus briefs filed # clients obtaining benefits such as housing	Victim needs met <ul style="list-style-type: none"> Informed of rights Rights enforced Know options Informed about case status Social service benefits Resources recovered Trauma reduced Feel heard Financial situation improved Case law developed	Empowerment and self-efficacy Improved trust in legal system V/S/C and family supported Improved financial stability Improved mental health Legislative and case law changes Community supports victims
Financial resources <ul style="list-style-type: none"> Donations VOCA grants Other state/federal grants 	Write grant reports/proposals Solicit donations Budgeting	# grant proposals submitted Donations received Budgets produced	Total funding received Resources available to provide legal and social services	Able to continue serving victims Increased # victims served Increased # services offered
Technology/data management <ul style="list-style-type: none"> Intake assessment tool CaseFramework software Other records management Exit survey tool 	Enter data <ul style="list-style-type: none"> Update case status Maintain database Survey clients <ul style="list-style-type: none"> Enter survey data Determine victim eligibility and needs	Active database maintained # completed surveys processed/analyzed	Grant reports produced Data used to improve services/support grant applications	Continued/increased funding Data provides evidence of the value of victim legal services Data supports use of TIC & culturally sensitive practices
Knowledge/skills/abilities <ul style="list-style-type: none"> Understanding of rights laws (state and federal) Training/TA expertise Mental health Social welfare Cultural sensitivity Trauma informed care 	CLE <ul style="list-style-type: none"> On current law changes Case law changes Provide training <ul style="list-style-type: none"> Legal community Outreach <ul style="list-style-type: none"> To legal professionals To social service professionals Trainings on cultural sensitivity and TIC	# professionals trained <ul style="list-style-type: none"> # of each type Number or hours of CLE attended # outreach contacts # interdisciplinary meetings # non-legal trainings attended	Greater knowledge about victims' rights and needs <ul style="list-style-type: none"> Prosecutors Defense Attys. Judges Law enforcement Victim Service Providers MOUs/MDTs in place Greater understanding of TIC and cultural sensitivity	Acknowledgement of importance of victim rights All legal professionals informed about victims' rights Culturally sensitive and TIC provided system-wide Collaboration occurs between all victim service providers All populations have access to services

Final Data Collection and Analysis Plan

The data collection instruments (revised survey, activities/CMS data recording template, and instructions for collection and reporting) are contained in AVCV's Implementation Guide from the pilot test. After final data were received, and questions clarifying the data were answered, the evaluation team conducted the following analyses:

- Percent of cases for which reporting on each data point was complete;
- Percent of cases for which data reported consisted of valid responses (within range for numerical responses, responses entered matched what was asked for on other items);
- For survey questions, whether sufficient range in responses was received (to determine whether a particular question would generate useful information, or whether another option would work better); and
- Fidelity assessment: whether ongoing collection of these data during process evaluation will be useful to measure faithfulness of activities observed to processes defined.

These analyses, along with the post-pilot focus group, were used to assess AVCV's readiness for future evaluation, to identify issues for resolution during the process evaluation, and to make initial recommendations for possible outcome evaluation designs.

Pilot Test Experience

AVCV did not report many issues with the data collection process, although it was somewhat manual because they decided to wait until process evaluation funding was confirmed before investing in permanent changes to CaseFramework. AVCV engaged the notification clerk/IT specialist (dual role) to extract the data from CaseFramework and SurveyMonkey for reporting. Because AVCV's CMS is designed to produce only aggregate-level reports, the individual case-level reports for the pilot test had to be completed manually by extracting the data from the CMS and entering it by hand into the template spreadsheet, which was reported as very time-consuming. In addition, because the pilot test tool required staff to record time spent performing activities in minutes, but this information is typically recorded by staff in hours, this added an extra step of data transformation for pilot reporting. Based on feedback from AVCV's IT person during the post-pilot test focus group, this was the most effective and efficient way to extract and report the pilot test data because permanent changes to CaseFramework would have been much more costly and time-consuming.

Case data for a total of 164 cases were submitted for the pilot period. Survey data was extracted from SurveyMonkey and submitted to the evaluation team. AVCV is not able to match surveys to cases due to privacy concerns, but both CMS and survey data can be grouped by crime type. During the process evaluation, JRSA will work with AVCV on tying case information to outcomes within this framework, without violating client privacy. Table 1 shows statistics describe the case sample submitted from CaseFramework data. The right at issue in each case was not extracted for reporting by AVCV.

Impacts of COVID-19. One confounding factor that was not foreseen was the COVID-19 pandemic and the impacts that lockdowns and safety measures would have on courts, criminal

Table 1: Descriptive Statistics on Cases Reported during Pilot Test

	AVCV (N = 164)	# of Rights Enforcement Cases
Total active cases opened prior to pilot test period (i.e., before 12/1/2020)	148	148
Total cases opened/new during pilot period (12/1/2020-5/31/2021)	16	16
Total cases closed during pilot period (12/1/2020-5/31/2021)	1	1
Victimization type:		
Homicide (includes attempted and survivors)	110	NS = 110
Rape/sexual assault (includes minors)	22	NS = 22
Adult physical abuse/assault	20	NS = 20
Family/Domestic Violence (including child abuse/neglect)	14	NS = 14
Kidnapping	8	NS = 8
Robbery	8	NS = 8
Vehicular (includes auto theft, DUI/DWI, hit and run)	6	NS = 6
Property crimes (includes theft, B&E, burglary, vandalism)	5	NS = 8
Fraud/identity theft	4	NS = 4
Stalking/harassment	3	NS = 3
Elder abuse	0	--
Other	0	--

Key to rights abbreviations:

RD = Right to refuse discovery	RH = Right to be heard
RN = Right to information/notification	RP = Right to be present
RPr = Right to protection	RR = Right to restitution
RS = Right to speedy trial	NS = Right at issue not specified

justice, and methods and capacity for service delivery. Crude measures that we attempted to capture at the case level included number of days delay in proceedings or provision of services and changes in methods of service delivery. Mixed success was achieved in measuring these impacts. COVID-19 impacts in terms of number of days delayed and methods of service delivery (in person, virtually, by phone) as well as burden of reporting the data for evaluation (time spent recording activities data) could not be assessed for AVCV or MCVRC because neither site reported usable COVID-19-related data (proceeding formats) or time burden data in their data submissions as extracted from their CMS's. However, some level of burden is estimated below as best as possible based on analysis of time invoiced by each site for time spent on the evaluation, and solutions to the reporting difficulties during the pilot test have been identified for completion during the process evaluation.

Data Quality Assessment

Assessment of the Pilot Data Completeness, Validity, and Internal Consistency. An assessment of data quality was performed by examining data completeness, validity, and internal consistency. *Data completeness* refers to the degree to which all critical data points were reported, measured by calculating the percentage of cases with completed data for each activity and survey question. Next, *data validity* was assessed by verifying that the data submitted for each item were in the correct type (e.g., numeric, text), values within range, uniqueness (e.g., no duplicate case ID numbers), and consistent expressions/use of abbreviations (e.g., hour, h). Part of data validity included an assessment of logical *internal consistency* (e.g., a site reported providing services 5 times total but indicated that they provided it 5 times in person and 3 times by phone (i.e., $5 \neq 5 + 3$), or whether activities reported were consistent with the type of case).

Note: All data presented reflect analysis of how useful these data will be for a future outcome evaluation and are not an assessment of service delivery during the pilot period.

Pilot Data Quality Assessment: CMS Data

AVCV had high overall data completion rates of between 87% to 100% across both quarters of the pilot test. There were seven areas in which no data were reported (reason for contacting, nonlegal advocacy, client remained engaged, client ceased participation, reason for ceasing participation, other loss prevented, other loss mitigated amount).

Of the data available, AVCV's data validity ratings were between 39% and 100% overall. Issues and solutions were identified for three items:

- 'Reason for contacting' (string variable) and 'representation issue' (categorical variable) both had 0% validity because the data were entered as 'not asked' or 'not applicable,' which were invalid response options. The validity ratings for these items can be improved with continued training of staff on valid entries and by assessing whether modification is necessary in CaseFramework to make this information easier to extract; AVCV stated that this information is currently recorded in free-text case notes, making the process of extracting this data a manual one. AVCV's IT staff mentioned that CaseFramework could be modified in future to create new fields to make reporting easier; they just wanted to wait until they knew whether this project would move into the process evaluation phase before investing those resources.
- In the first quarter, 'time taken to record data' (an assessment of burden) had 0% validity because the data entered reflected time spent performing the activities instead. This issue was self-corrected in the second quarter to achieve 100% validity. However, for now, estimations of time burden for the pilot test data collection (discussed later) are reliant on time invoiced by AVCV and will not be possible to break down to the level of individual measures at this stage. Time spent performing activities may be included in future outcome evaluation designs as part of a measure of dosage, alongside how many times a given service was provided. Additionally, AVCV is accustomed to recording time spent on activities in hours instead of minutes, so the reporting template can be modified during the next stage to comport with their usual practice.

- Occasionally, the number of times an activity was performed in person, virtually, and by telephone did not correctly sum to the total number of times the activity was performed. This may have resulted from manual transcribing errors, given that this information is stored in free-text fields in CaseFramework and is not easily extracted. This could be corrected by automating the summing of these variables once recorded (e.g., using Excel's AutoSum feature in the reporting spreadsheet), although AVCV's IT staff also stated that additional fields could be added to CaseFramework to automate this when the process evaluation begins.

Pilot Data Quality Assessment: Client Survey Data

AVCV did not record how many surveys were sent in their CMS data submission file, although 28 surveys were received (10 from individual with closed cases and 18 from individuals whose cases were still active). Two factors are important here: (1) the new survey was sent to individuals whose cases may have closed just prior to the pilot period, and (2) AVCV uses case-length representation agreements, meaning that a case may remain active with them for years as they follow it from trial through sentencing through appeals and later parole hearings. In future, it will be necessary to know how many surveys were sent in total to calculate and track improvements in response rates. Various options using survey collectors available in SurveyMonkey will be explored to facilitate this process; currently, a general link is emailed to clients at case closing or included in their termination letter.

Conceptual Validity. Conceptual validity refers to whether a measure is capturing the desired information we want to know. Conceptual validity across survey items was assessed, both in terms of interpretation of measures and in how much variation was received in the different measures to make them useful for outcome evaluation. A common point made during the site visit interviews was that surveys received tended to skew toward the positive, and clients who felt more negatively or were simply “ready for their case to be over” tended not to return their surveys. Knowing that this response bias can be a problem, the evaluation team first attempted to increase the number of responses by having sites that were previously using paper surveys (AVCV and OCVLC) try offering an electronic version of the survey, as described above. We also tested new survey questions to try to elicit more variation in responses than sites reported receiving to their previous surveys to try to address the skew toward the positive—or at least to collect more detail from those that do respond.

Table 2 shows the variety in responses received to survey questions intended to capture short-term and long-term outcomes defined in the conceptual model and agreed upon by the sites. The table contains results for OCVLC and MCVRC as well, for comparison, as each site's survey questions were slightly different. Each conceptual model outcome is noted in bold font, and if there was more than one measure used to capture the outcome, it is listed below the outcome in question. In some cases, two measures to capture the same outcome were tested to assess which performed better (that is, elicited more variety and/or garnered more responses). Generally speaking, responses received for AVCV and MCVRC showed a good amount of variation. This suggests that most of the measures above will provide the nuance desired for an outcome evaluation.

Table 2: Variation in Outcome Measures Captured in Client Satisfaction Surveys

OUTCOME MEASURES FROM CLIENT SURVEY	Min-Max Possible	AVCV Min-Max (N=28)	MCVRC Min-Max (N=24)	OCVLC Min-Max (N=8)
Short Term Outcomes: Client Perceptions				
Victim Reports Understanding their Rights	1-5	4-5	1-5	5-5
Victim Reports Understanding Available Legal Options	1-5	3-5	1-5	4-5
Victim Reports Being Informed of Case Status	1-5	N/A	1-5	5-5
Victim Reports Being Given Clear Expectations about Processes and Possible Outcomes	1-5	N/A	N/A	4-5
Victim Reports Feeling Views were Represented	1-5	3-5	1-5	5-5
Victim Reports Receiving Services Tailored to their Needs				
Did you understand the services available to you?	1-5	3-5	1-5	N/A
Did the services/referrals you received meet the needs you expressed?	1-5	1-5	1-5	3-5
Victim Has Financial Loss Minimized				
Did you receive help requesting Victim Compensation?	1-5	2-5	N/A	N/A
Did you receive help requesting Restitution?	1-5	2-5	N/A	N/A
Victim Receives Outcome They Perceive as Just	1-5	2-5	1-5	3-5
Longer-Term Outcomes: Client Perceptions				
Empowerment and Self Efficacy				
Given enough info to make your own decisions?	1-5	3-5	1-5	5-5
Safety Questions:				
Did you receive help with safety planning?	1-5	3-5	N/A	N/A
Are you confident you can continue to plan for your safety?	1-5	3-5	N/A	N/A
Did our services increase your ability to stay safe?	1-5	2-5	1-5	N/A
Self-Efficacy Scale				
I will achieve most of the goals I set	1-5	3-5	2-5	N/A
Am certain I can accomplish difficult tasks	1-5	2-5	2-5	N/A
In general, I can obtain outcomes important to me	1-5	3-5	3-5	N/A
I will successfully overcome many challenges	1-5	3-5	3-5	N/A
Do you feel more self-sufficient? (single question)	1-5	N/A	1-5	4-5
Increased Trust in Legal System to Operate Fairly				
Are you more likely to report crime? (single question)	1-5	3-5	N/A	N/A
Increased participation in justice system	1-5	2-5	N/A	N/A
Court Empowerment Scale				
I believe the courts will consider my rights	1-5	1-5	2-5	2-5
I believe the courts will treat me fairly	1-5	1-5	3-5	3-5
I would encourage others to report crime	1-5	1-5	5-5	5-5
I will be forced to accept an outcome I do not want	1-5	1-5	1-5	1-5
I will be forced to do things I don't want to do in court	1-5	1-5	1-5	1-5
Survivors/Families integrated into Supportive Community				
Do you have an improved support system? (single question)	1-5	3-5	N/A	N/A
Social Support Scale				
There is someone with whom I can share joys & sorrows	1-5	4-5	3-5	N/A
I have someone who really tries to help me.	1-5	4-5	2-5	N/A
There is someone I can go to for emotional help/support	1-5	4-5	3-5	N/A
I have someone I can count on when things go wrong	1-5	2-5	3-5	N/A
Are you interested in volunteering to help others?	Y-N	N/A	N/A	Y-N

Comparisons between different measures tested to capture the same concept were also made by assessing each one for variation and per-item response rates, by examining responses to free-text fields for additional detail on client interpretation, and via discussion with the post-pilot focus groups about staff interpretations. Recommendations for specific measures going forward, based on these analyses, follow later in Tables 7 and 8, particularly for different measures assessed for their ability to capture the same concept.

Pilot Data Quality Assessment: Organizational Outcome Data

Some organization-level data were also collected to gain a sense of whether basic system and community outcomes could also be measured. Data were collected in three categories: Networks Established/MOUs in Place with Legal Actors and Other Partners; Legal Actors Informed about Victims’ Rights; and Communities Educated about Victims’ Rights. Data

Table 3: Organizational Outcomes

Activity	AVCV	Outcome category
MOUs in place to provide/receive client referrals	Yes	Networks Established/MOUs in Place with Legal Actors and Other Partners
# of MOUs with legal providers	0	
# of MOUs with social services providers	1	
# of MOUs with criminal justice system partners	3	
Names of organizations with MOUs	Child Svcs, APAAC, POMC, NCVLI	
Conduct trainings	Yes	Legal Actors Informed about Victims' Rights
Number of trainings conducted	2	
List trainings and audiences	AZ Prosecutors, NCVLI	
Outcome: Number of referrals resulting from each training and from whom (List each separately)	N/A, stopped taking new cases 3/2021 when we learned of funding cuts	
Conduct outreach activities	Yes	Communities educated about victims' rights
Number of outreach activities	2	
List trainings and audiences	POMC leadership	
Outcome: Number of referrals resulting from each outreach activity (List each separately)	N/A, stopped taking new cases 3/2021 when we learned of funding cuts	
COVID-19 Impacts?	Trainings conducted Remotely; attendees less engaged.	

collected about MOUs, professional trainings, and community outreach activities are shown in Table 3. Arizona reported MOUs established with Child Services, Arizona Prosecuting Attorneys Advisory Council (APAAC), Parents of Murdered Children (POMC), and NCVLI. AVCV conducted two trainings with other legal actors during the pilot period to inform them

about victims' rights; however, due to the COVID-19 pandemic, all training and outreach were conducted remotely; AVCV reported that sometimes participants were less engaged due to the virtual format. AVCV also reported conducting two outreach sessions with POMC leadership. During the pilot test, we attempted to use the 'referrals in' variable as an outcome measure for both training and outreach activities (the assumption is that successful training should result in an increase in referrals from that source).

While 'referrals in' could be tracked, CaseFramework was not modified to add specific training *events* as options in the referrals field. During the formative stage, pilot sites were more heavily focused on the client-level CMS and survey data collection implementation. The ability to better capture these organizational outcomes in the future (referrals resulting from specific system actor training and community outreach events) will be explored further during the process evaluation, as will the ability to measure impact by combining the name of the group trained with the case start date on the back end to tie the increase in referrals to a specific effort.

Fidelity Assessment

Fidelity (faithfulness) to program design may be assessed using three types of implementation measures: Context, Compliance (also called Adherence²), and Competence (definitions below). The implementation/CMS data collected will provide preliminary/formative stage information on compliance measures that were based on the process flow in Figure 2 above, whereas Context and Competence information will come from the document review, site visit interviews, and post-pilot focus groups. Results from this section will be used to determine whether the data collection as pilot tested in this phase will be sufficient to conduct the formal fidelity assessment in the process evaluation.

Context Fidelity

Context fidelity measures pertain to the *prerequisites* for high-fidelity implementation, including items such as job qualifications, training, and having the resources needed to properly deliver services as designed. Table 4 shows the prerequisites AVCV has in place to deliver services; information to assess adequate presence of these resources came from the document review and site visit interviews, with additional context about statuses that may have changed during the formative evaluation period provided by the post-pilot focus groups.

In terms of staff competencies, legal staff possess the required knowledge of victims' rights and related laws, have experience providing training/technical assistance to partners, and have access to a language line for interpretation services as needed. AVCV also has at least two staff members who are bilingual in Spanish. Access to interpretation is a crude measure of fidelity to the principle of cultural sensitivity in service delivery. This concept will be examined in greater detail during the qualitative portion of the process evaluation. Among victim advocacy staff providing non-legal representation support (connection to social services, emotional

² www.ndsu.edu/vpsa/assessment

support/accompaniment, non-legal victim advocacy, etc.), AVCV’s social workers are required to have a BSW or MSW or degree in another social service related field.

Table 4: Context Fidelity Measurement

INPUTS/RESOURCES (FROM LOGIC MODELS)	AVCV
Legal Staff Competencies	
• Understanding of victims’ rights laws (state and federal)	X
• Expertise in DV and laws re. Protective Orders	N/A
• Training and TA expertise	X
• Cultural sensitivity (measured by access to language interpretation resources on staff or via language line)	X
Social Work/Advocate Staff Competencies	
• Social work degree	X
• Victim advocacy training	X
Trauma Informed Care Competencies	X
• Formal training (e.g., neurobiology of trauma)	Some staff
• Informal training (sensitivity to clients’ situations)	X
Sufficient Financial Resources	X*
Sufficient I.T. Resources	
• Adequate CMS	X
• Ability to Modify CMS	X
• Ability to Match Cases between Survey and CMS data	N/A
Formal Policies, Procedures, and Mechanisms	
• Intake/Needs Assessments	X
• Policies/Procedures for Service Delivery (formal/written or informal)	Some/In progress
• Client Satisfaction Surveys (client feedback mechanism)	X
MOUs or Informal Agreements with Criminal Justice System Partners and other Victim Service Providers	X

All three project sites indicated that, during the pilot test period, they experienced cuts in grant funding. This loss of financial resources (indicated with the * next to the X in the Financial Resources line) has resulted in reductions in staff size. All sites have a CMS in place to manage case data that is adequate for supporting victim services. However, there is variation across sites in the ability to modify them with ease for evaluation and reporting. AVCV has an I.T. staff member in place who can make modifications, though with some difficulty.

AVCV has intake/needs assessment mechanisms, policies and procedures, and client satisfaction surveys. Written policies and procedures manuals exist in various stages of formality. However, even where formal manuals may not exist, regular weekly and monthly meetings are held among staff to discuss case handling and ensure service consistency and quality, and staff consult closely with the executive director on all cases where there may be a question.

All sites keep detailed lists of partners at other victim services organizations and within criminal justice system partners for use in collaborating/advocating on behalf of victims and/or to whom they can refer victims for additional services, whether agreements with such partners involve formal MOUs or not. A crude measure of the presence such formal/informal arrangements can be found in the referral source (referrals in)/external referrals (referrals out) measures discussed above. None of our sites track the details of whom external referrals were made to in an easily-extractable way in their CMSs, but the referral source measure will provide a record of partner organizations that provide the most referrals in.

Compliance Fidelity Testing

Compliance fidelity focuses on adherence to design elements and protocols, including proper level of client exposure to each step in services (called *dosage*; Mihalic et. al. 2004). Based on the pilot data collected, we assessed the *reporting* of whether key steps in the specified process flows for each site were consistently completed (basic compliance fidelity in preparation for the process evaluation), but true assessment of compliance/adherence and dosage will continue during the process evaluation as refinements to the data reporting processes continue.

Please note: for compliance fidelity assessment, it is important to recognize that the numbers of activities reported for each case were limited to those that occurred during the pilot test period itself. Therefore, these analyses should not be construed to mean that an activity in a case was not conducted if it simply occurred outside of the pilot test period.

To preliminarily assess the data collected and its usefulness for evaluating the consistency with which each clinic implements each step in their service provision process flow, Table 5 presents the percentages of cases in which each step was reported performed by staff. Table 5 provides additional explanations of the pandemic's effects on service delivery in each site based on the COVID-19 impact interviews. While these results are true to the data provided by AVCV, they should be interpreted with caution for two additional reasons: (1) the COVID-19 pandemic has severely impacted the clinics' operations in the past year, and (2) the pilot test was also being used to test new data collection and reporting procedures. During this process, difficulties in reporting various measures were identified for resolution during the next phase (one of the purposes of doing a pilot test).

Of the 164 cases on which AVCV compliance rates are calculated in Table 5, 16 were new cases accepted during the first quarter, before funding cuts. As with the other sites, needs assessments and other early steps in the case processing flow for the remaining cases that would have occurred prior to the pilot period are not included in these numbers; referrals in and steps that occur during the intake and needs assessment step are reported for roughly 25% of cases. Provision of external referrals to complementary victim services were impeded by pandemic closures and reductions, and client notifications of events were hampered by a pandemic-related reduction in notices provided by the courts. Assistance with compensation, restitution, and victim impact statements occur on an as-needed basis, so would not be expected to be performed in every case. Finally, pandemic measures impacted how many people could be present in the courtroom at once, which sometimes resulted in victim or victim attorney exclusion and many

proceedings were postponed or vacated altogether, which reduce numbers reported for victim accompaniment or representation in court.

Nevertheless, more emphasis is clearly placed on the core steps in the process flow and less on the steps that do not apply to all clients, and this early information is useful to inform which process steps require a more detailed look when we continue to assess AVCV’s process fidelity during the process evaluation.

Table 5: AVCV Pilot Period Compliance Fidelity Based on Reported Data³

AVCV Activity/Service	AVCV (N=164)	AVCV Process Flow	COVID-19 Impact on Service Delivery
Referral In Received	55%	X	Referrals initially decreased (normally average 2-5 per week).
Intake/Needs Assessment Performed	9%	X	
Informed of Rights	31%	(needs assessment)	
Informed of Legal Option	21%	(needs assessment)	
Provided External Referrals	3%	(needs assessment)	Decrease in external referrals due to limited options; many services closed/ operated under reduced capacity. Outreach activities were rescheduled.
Notified of Case Events	43%	X	More comms between attorneys/ judges by email; however, victims/ social workers not notified re. nonappearance hearings and court date changes.
Followed up with Client	61%	X	
Compensation Application Help	4%	Part of Rights Enf.	
Compensation Appeal Help	0%		
Assist with Victim Impact Statement	6%	Part of Rights Enf.	
Survey Sent (recorded in CMS)	0%	X	
Criminal Court Accompaniment	22%	X	Strict enforcement of # of people allowed in court and lack of clarity about whether restrictions included victim advocates/social workers.
Criminal Appearance Legal Rep.	32%	X	Court schedules/ format of proceedings severely impacted due to court closures. Trials vacated/ postponed indefinitely when courts closed.

³ AVCV’s cases are all limited in scope to victims’ rights enforcement.

All in all, AVCV reported sufficient data for a preliminary assessment of compliance fidelity. These data collections can be continued for the formal fidelity assessment during the process evaluation.

Competence Fidelity

Competence fidelity focuses on quality of service delivery, including whether staff deliver services with buy-in and skill, and whether clients were engaged and responsive to service efforts. Data to assess potential for a formal competence fidelity assessment came from document review and the site visits, and collection of an additional implementation measure was also attempted in the pilot test (whether clients remained engaged through the conclusions of their cases).

All staff exhibited an enthusiastic commitment to quality victim representation and service provision during their site visit interviews as they described the detailed processes each organization has developed to advocate effectively on clients' behalf. The executive director was highly engaged during development of each site's process flow and the selection of outcome measures. These individuals participated in multiple rounds of collaborative phone calls, providing active feedback in preparation for the pilot test. Using engagement with the pilot test as a crude proxy for staff commitment to service quality, AVCV staff were less vocally engaged during pilot test trainings than during the in-person site visits, though perhaps this was because of the virtual training format. On the other hand, AVCV's line staff were very engaged during the post-pilot focus group and provided a lot of input for moving forward in the evaluation process, which may also be an indicator of their commitment to providing high-quality services.

There was an attempt to collect data from each site on whether clients remained engaged throughout their cases and, if they ceased participation before case conclusion, why. AVCV and MCVRC did not report on this variable, stating that this is not information they track in an easily extractable way in their CMS. Alternate and more practical ways to capture sustained client engagement will be explored during the process evaluation, since two out of the three sites had difficulty reporting on this measure during the pilot test. Additional measures of the resulting quality of services may be gleaned from the client satisfaction surveys, discussed earlier.

Additional information was also gathered about the impacts of COVID on the quality of service delivery. Staff across the three sites mentioned that the shift of many proceedings and meetings to a virtual format has resulted in the ability to provide a more personal level of services to some clients located in parts of the state that are farther from the office. Furthermore, virtual proceedings enabled some clients who may have had difficulty traveling to court to participate more easily. While postponements and other criminal justice system difficulties during COVID-19 created frustration among some clients, staff reported that the forced changes enabled them to be creative in pursuing quality in service delivery.

Evaluability Assessment

Evaluability assessment (JRSA 2003) is used to determine whether a formal evaluation will be helpful for an organization. To make this determination, several practical questions must

be answered. These include whether a number of key components will be possible to execute, a final assessment of available data (or potential available data), and what research designs might be possible using it. Answers to these questions are below.

1. ***Whether clinics can obtain outcome measures for existing clients.*** Outcome measures for existing clients may be obtained via client satisfaction surveys and, for outcomes tracked in the CMS (e.g., restitution secured), it may be possible to collect these data depending on how far back we can go after system modifications are made. In order to reduce burden, we do not recommend going back further than the pilot period.
2. ***Assess the ability to survey or interview clients at 1, 3, or 6 months after case completion.*** At this time, it is recommended to proceed with the normal post-case closure survey schedule due to sensitivity to client trauma. By the time a case concludes, most clients do not want to maintain further contact as it reminds them of their case. However, additional options will continue to be explored during the process evaluation.
3. ***Assess the ability to capture outcome variables tracked in case files or CMS.*** While most outcome measures tested came from the client survey, some outcome data were possible to extract from the CMS pertaining to compensation or restitution. Without the ability to search text fields in CaseFramework, however, even the ability to track those amounts was limited. This is further complicated by the fact that none of the sites receive outcome information from those petitions routinely. It may be possible to start tracking judgments, even if it is not possible to track whether the client received the payment.
4. ***Assess the ability to capture outcomes via staff interviews, focus groups, or questionnaires.*** This was possible during the formative evaluation and will continue.
5. ***Assess the agency burden to collect and report data and the feasibility of implementing such additional data collection.*** It is feasible for AVCV to continue collecting and reporting evaluation data, with some modifications during the process evaluation period to measures collected and to process and reporting mechanisms.
 - a. AVCV did not consistently report minutes per case reporting each data point. However, the solution to this issue was resolved halfway through the pilot, and will be adjusted to reflect hours, the way AVCV normally tracks their time.
 - b. However, the financial burden gives more information about the potential burden of continued data collection implementation: AVCV billed for 57 hours of time for a total of \$4,662.53 cost to participate in the formative evaluation, out of the \$24,050 available in their project budget. This likely reflects some under-reporting, but still indicates that ongoing data collection is feasible. AVCV's data were collected for reporting by their I.T. staff, who are able to assemble such data quickly and efficiently. Nevertheless, the project team will work with AVCV to track hours spent on the evaluation work more closely during the process evaluation.
6. ***Whether informed consent procedures and structures could be put in place to obtain outcome data immediately following services and at some future point in time, such as 3 months or six months later.*** Informed consent language was implemented for the client satisfaction surveys. The ability to track longer-term outcomes is still in question, as sites do not want to lengthen the potential for re-traumatization for clients whose cases are

completed. Organizational outcomes such as increased referrals as a result of a training or new partnership, or increases in success with certain types of motions based on case law established, may be possible over a longer period.

7. ***Whether a cost-benefit analysis would be feasible to conduct as part of a full evaluation.*** Initial burden related to the pilot test is noted above in item 5. Conducting a cost-benefit analysis of doing an outcome evaluation will be explored in the next phase.
8. ***Whether clinics are aware of other sources of data that can be used to measure outcomes.*** AVCV was not immediately aware of any additional sources of data on victim outcomes that could be incorporated into an evaluation. Initial project team explorations of external datasets that might provide supplemental or contextual data to expand the analyses possible in an outcome evaluation were not fruitful, but will continue during the process evaluation. The difficulties lie in the ability to isolate legal services outcomes from general victim services outcomes in standard datasets such as the NCVS and similar collections.
9. ***Whether baseline measures may be collected.*** Baseline measurement will be a challenge, given that this is a well-established program that is not implementing new programming. That said, it may be possible to use data from the pilot period as a baseline for assessing practices before and after the pandemic forced adaptations in service delivery, such as changes in client meeting and court proceeding formats. Initial survey and CMS outcome data collected during the pilot may have the potential to serve as baseline measures for an outcome evaluation in the future.
10. ***Data Assessment:*** The details of the data assessment for each site were presented above, including the data they currently track, the format the data are in, whether/how much data the clinics can share for evaluation purposes given attorney-client privilege, and capacity to track additional data (tested via the pilot). Here, we discuss how the information learned might be applied to select a future outcome evaluation design.
 - a. We know that AVCV has the ability to expand their data collection capability in CaseFramework in the future.
 - b. The burden that implementing new data collection would impose on the agency can be measured via time billed to the project for data collection activities and, secondarily, gathering information on the amount of time it takes each agency to report on individual data points.

Will an evaluation be useful at this time? Table 6 shows the completed Evaluability Assessment Checklist used to determine readiness of AVCV, OCVLC, and MCVRC for outcome evaluation. Items are divided into three categories: *Program Design*, *Information Availability*, and *Agency Context*. All items were marked as adequate (with a large “X”) if they are present now, or will be after resolution of identified issues during the process evaluation phase. Others for which there is some evidence, but that require further exploration, are marked with a small “x.” Items for which no evidence is yet present are left blank. The average standard across the sources used to create this matrix (see footnote) was that over 80% of criteria should be present for a site to be able to move profitably into a full evaluation.

Eight items are listed in the *program design* category. All but whether program targets are informed by baseline data are indicated to be present. As to item 3, the programs have

Table 6. Evaluability Assessment Checklist⁴

Program Design	AVCV	OCVLC	MCVRC
1. Does the program have a theory of change?	X	X	X
2. Do the organization’s program documents consistently describe the theory of change?	x	x	x
3. Does the program have identified targets and steps to achieve desired outcomes?	x	x	x
4. Are the program targets informed by baseline data or other evidence?			
5. Do the program targets include indicators of success?	X	X	X
6. Do views of program targets vary among different stakeholders?	X	X	X
7. Does the program design include a method for collecting views of stakeholders?	X	X	X
8. Is the program serving its intended population(s)?	X	X	X
Information Availability	AVCV	OCVLC	MCVRC
9. Is a complete set of program documents available?	x	x	x
10. Do baseline measures exist?			
11. Are there data on a control group?			
12. Is there a data collection process for program targets and indicators?	X	X	X
13. Are disaggregated data available?	X	X	X
14. Are interim reports collected?	X	X	X
Agency Context	AVCV	OCVLC	MCVRC
15. Are there sufficient resources (time, fiscal, personnel, IT, partnerships) for the program duration?	x	x	x
16. Is there opportunity for the evaluation to influence program implementation?	X	X	x
17. Are key stakeholders available to provide input?	X	X	X
18. Is there a process for using stakeholder input to inform program implementation?	X	X	X
19. Can external factors (political, climate, security, etc.) impact the evaluation?	X	X	X

X (Capital X) = Present and sufficient

x (Lower case X) = Present, but requires further exploration during the process evaluation to determine sufficiency for outcome evaluation.

Blank entry = Not yet identified, but will be explored further during the process evaluation.

⁴ Adapted from May (2021), the United Nations Programme Development (UNDP) Independent Evaluation Office (2019), the Department for International Development (Davies, 2013), and Jones (2013).

identified steps to achieve desired outcomes as indicated by the conceptual model and the process flows, but it is not clear that they have numerical targets, such as numbers of clients served annually, as part of their program planning; therefore, this item is marked with a small “x.” Whether the theory of change is consistently described in program documents is also marked with a small “x” because, while the *spirit* of the theory of change is reflected, the theory of change itself was elucidated via the conceptual model process and is not yet incorporated into documentation. Sites may decide to do this after the process or outcome evaluation is completed.

The second category in the evaluability assessment checklist is *information availability*. All three sites have a data collection process in place for program targets and indicators, though it is being refined. Disaggregated data are available for all three sites, and reporting is set up that, by the end of the six month pilot test, all three sites could submit quarterly interim reports. These reports require further modification and resolving of some issues, but the capability is there. Data for baseline measures or control groups have not been identified, but possibilities for rigorous evaluation designs being explored are discussed above. Whether there is a complete set of program documents available is marked with a small “x” for all three sites, as some documents were undergoing revisions at the time of this writing.

The final category in the evaluability assessment checklist is *agency context*. The opportunity for the evaluation to influence program implementation is present in all three sites. Focus group participants from each site expressed enthusiasm for the potential of the new measures from the pilot test to inform their work. All sites had at least partial buy-in, and the project team plans to implement more frequent one-on-one conversations with line staff to build this buy-in during the quarterly fieldwork visits that will be central to the process evaluation. Key stakeholders are available to provide input and their collaborative approaches to victim service indicate that there is a process for stakeholder input to inform service delivery. External factors can impact the evaluation, as the COVID-19 pandemic impacted this formative evaluation, and as funding reductions can also impact capacity to provide services and participate fully in the evaluation. For example, AVCV has temporarily stopped taking new clients until lost funding is replaced. For that reason, “adequate resources” is marked with a small “x” for all three sites and resource levels will be monitored throughout the process evaluation.

As all sites met at least 85% of the criteria identified with either full or partial affirmative classifications, all three sites are recommended to move forward into the process evaluation and into preparation for outcome evaluation.

Discussion and Recommendations for Next Phase

Final Measures Recommended for Next Phase

As a result of the pilot test, a number of recommendations for measures that worked well and revisions to others rose to the surface. Tables 7 and 8 below summarize the implementation (CMS) and outcome (mostly survey) measures recommended for ongoing use in the process evaluation. Whether analyses can be conducted at the case level, particularly related to matching surveys to cases in each site’s CMS, or solely by crime type will continue to be explored during the process evaluation. Case matching can be important to analyzing whether clients receiving

different levels or quality of service may tend to have different outcomes; however, aggregate outcomes across subgroups can also provide rich information about program success.

These are the recommendations made across all three sites; solutions may be individualized to AVCV’s environment as needed.

Table 7: Recommended Implementation Measures for Next Evaluation Phase

Implementation/CMS Measures	Proposed Changes/Improvements
Reason for Contacting	Add'l training/Modify CMS to capture, reduce error, and eliminate need to manually extract from free-text case notes.
Type of Victimization	Add'l training/Modify CMS as above.
Referral Source	Add'l training/Modify CMS as above.
Representation Issue	Add'l training/Modify CMS as above.
If rights enforcement, which right?	Add'l training/Modify CMS (radio buttons for multi-select option)
Conduct thorough victim intake and needs assessment	Separate Intakes from Needs Assessments
Client remained engaged throughout case	Change language: "Did clients cease participation before the case was concluded?"
Inform about rights	No change
Inform about legal options	No change
Provide external referrals	Investigate ability to track where clients are referred
Notification about case events (pretrial, trial/ plea, sentencing, appeals, release)	Examine usefulness/feasibility of disaggregating by type across sites.
Criminal court appearance	No change
Civil court appearance	No change
Protective order filed	No change
Protective order appealed/ extended	No change
Protective order enforced	No change, but add "Protective Order Modified" as new item
Criminal court accompaniment	No change
Civil court accompaniment	No change
Follow-up/check in	No change
Compensation claim filed	No change
Compensation claim appealed	Omit for OCVLC
Help with claiming restitution	No change
Assist with impact statement	No change
Survey sent	Improve ability to capture from SurveyMonkey or CMS, depending on method of survey recruitment (customized or generic link, depending on site)
Survey response collected	Drop unless full case matching possible

Implementation/CMS Measures	Proposed Changes/Improvements
Activities to Add:	Discuss feasibility of adding some or all of the following, suggested by OCVLC: drafting and filing legal documents, legal reviews, protecting clients' records, proactive litigation, providing emotional support to clients, communicating with other legal parties (e.g., defense, prosecution), and conducting case-specific research.
For all Implementation Measures:	
Format (Virtual, Phone, In-Person)	Add auto-sum function to reporting spreadsheet (for those transcribing numbers) to reduce error <u>or</u> have IT add these fields to CMS to facilitate automation.
Time Spent recording data/on activity	Add hours spent providing each service to future data collections for sites where practical (AVCV collects, OCVLC does not). Convert from minutes to hours for easier integration with current practice.

Table 8: Recommended Outcome Measures for Next Evaluation Phase

Conceptual Model Concept	Proposed Changes/Improvements
New Outcome Measures	
Victim reports feeling their views were represented	No change
Victim has financial & resource losses minimized	Add measures to collect data on activities related to assisting with applications and addressing issues (e.g., filing memos, attending restitution hearings). Knowing the amounts actually collected is rare; perhaps ask in survey instead of extracting from CMS.
Increased trust in legal system to operate fairly	The Court Empowerment Scale performed better than asking simply, "Are you more likely to report crime?" Implement the scale going forward.
Victim reports having/understanding available legal options	No change
Survivors and families reintegrated into the community and feel supported	Asking "Do you have an improved support system?" performed better than the Social Support Scale in the survey. Keep single question, drop the scale.
Modified Outcome Measures	
Empowerment & self-efficacy	Cut the Self-Efficacy scale and go with the single question, "Do you feel more self-sufficient?" Safety questions also performed well, with MCRVC's single safety question performing better than AVCV's series of three questions.
Victim reports understanding their rights	No change
Victim receives services tailored to their expressed needs	Add measures to better inform improvements in service delivery (e.g., reason for dissatisfaction, how

	staff could have better assisted, what a better experience would have looked like for that client) for MCVRC
Victim receives outcome they perceive as just	No change
Policy/practice in place among partners for victim support referrals	Evidence of networks in place via reporting of referrals in/referrals out and formal MOUs/Informal agreements. More detailed information needed on MOUs. Organizations to whom a client was referred are not easy to extract from CMSs as they are in non-searchable free-text files, if recorded.
Communities are educated about victims' rights and options to seek assistance	Information collected on trainings and outreach; modify "referrals in" variable, if possible, to be able to attribute referrals to a specific training or outreach event.

Process Evaluation

Results from this formative evaluation will be used to inform the next two phases of evaluation. The process evaluation, which is the next phase, will consist of deep, qualitative data collection entailing two main parts: in-person direct observation of services where attorney-client privilege is not an issue (observing public proceedings), and detailed activities journals provided by the attorneys (for information where attorney-client privilege prevents direct observation). It will also include continued refinement and implementation of the data reporting launched in the pilot test.

Proposed Outcome Evaluation Research Design

After the process evaluation is completed, the results of the formative and process evaluations will be used to create an outcome evaluation design with the greatest chance of success for the three programs. It is understood that random assignment of crime victims into different service tracks is not considered ethically possible in many victim services environments. This is true for the rights enforcement clinic environment as well; no site felt comfortable denying a service to a client in crisis if the client needs it for the sake of research or random assignment. All sites also communicated the difficulties that might be involved with collecting outcome data for clients who may have been referred to their clinics, but opted not to contact them, such as the availability of data from prosecutors' offices, the ability to survey non-users of services, and the fact that those clients might not be comparable to each other (self-selection bias). Furthermore, there can be difficulties maintaining the integrity of the evaluation design in a randomized control trial (RCT) when there are possibilities for differential attrition (one type of client may be more likely to cease participating in their case through conclusion than another) or cross-group contamination (individuals in one treatment group may influence the behavior of individuals in another treatment group).

These are well-established clinics for many years that are not implementing a program from scratch. That said, the COVID-19 pandemic presented an external shock to the way services are provided, and to the criminal justice system itself, that could not have been predicted

at the outset of this project. Adaptations have resulted in a greater shift, for example, to more frequent use of virtual proceedings and technological adaptations to client meetings, or to innovations that ensure confidential conversations between victims' attorneys and clients may still occur during otherwise public Zoom hearings. Besides simply creating challenges, the shift to virtual formats also provided benefits, such as greater access for some clients that might otherwise have difficulty traveling to an in-person hearing.

The ability to examine the effects of these changes over a longer period of time will be explored during the process evaluation. While the pilot tests had to be implemented after clinics had a chance to move past the first shock of nationwide lockdowns, the ability to use VOCA reports and other previously-collected grant data to retroactively construct baselines on at least some measures will be explored.

Therefore, careful assessment to determine the most rigorous quasi-experimental evaluation design possible is the next step. Alternatives under consideration include, but are not limited to:

1. *Quasi-experimental designs using procedures that can achieve a high degree of equivalency without random assignment.* Propensity score matching may be one such option if the unit of analysis is the individual, or matched comparison groups may be used if client privacy concerns necessitate grouping of victims by crime type. All clinics report client demographic information for their VOCA grants that we could use for matching purposes.

Options in this category may be explored using each rights enforcement clinic as a comparison site for the others; AVCV and OCVLC might be compared in a most similar design on their rights enforcement services, even if their non-legal advocacy functions are structured differently, whereas MCVRC might be used as a contrasting, most-different case given their larger size and their larger emphasis on holistic victim services. Because each site's environment, approach, and scope of services is different, outcomes could be evaluated to generate information on common service elements that generate the greatest increases in key performance metrics after accounting for differences in environment and populations served.

2. *Interrupted time series designs*, where aggregate outcomes are examined before and after implementation of any change to services, such as COVID-related adaptations. Given some of the data limitations with our sites, such as limits to the ability to match all surveys received to their corresponding cases in the CMS data, this may be a good option. Within an interrupted time series design, procedures such as propensity score matching or matched comparison groups and use of the three sites as comparisons for each other would also be employed as described above under quasi-experimental designs. A difference-in-difference approach within the interrupted time series framework might be used to facilitate those comparisons.

3. *Pre-test, post-test designs.* If neither of the above evaluation designs are feasible, a simple pre-test/post-test design may be explored in which individuals whose cases began before implementation of a change in service provision (such as COVID adaptations) are compared to those that began afterward.

Usefulness of this Research

For AVCV

The most important use of evaluation data is to inform practice, and it can be difficult to make the connection between data collected and reported—especially numerical data—and practice, when the true impact of services is more easily seen in one-on-one interactions with victims than in information collected by ‘ticking boxes.’ Through the pilot test process with the new measures, it is hoped that the data collection implemented can help AVCV provide additional important information to stakeholders about trends in service delivery, victim outcomes, and achievement of meaningful objectives, as well as be of use to AVCV in its efforts to foster an environment of continuous improvement. Such benefits include:

- Adjusting standard performance measures data (numbers of activities performed, as reported for VOCA) to provide more detail on desired outcomes from the conceptual model. Then, by comparing them against AVCV’s carefully designed procedures and assessing real-life fidelity (faithfulness) to those procedures; via the initial fidelity measurement conducted here that will continue during the formal process evaluation, this fidelity measurement should provide AVCV a tool by which areas where deviation from best practices may be identified and corrected.
- Re-designing some survey questions to generate more variety in responses. Doing this can generate useful information about trends in victim outcomes that can supplement the free-text responses that AVCV values. The ability to measure these trends and tie them to program activities can inform internal program design and increase the ability to demonstrate AVCV’s value to funders, boards of directors, criminal justice and victim services partners, legislators, and the community. AVCV may wish to explore keeping its survey shorter, but more strategically focused; average per-question response rates to later questions decreased as the survey went on. The evaluation team can continue to work with AVCV to refine the survey for even greater utility and higher response rates (survey and per-question).
- By basing data collection and measurement on a conceptual model of best practices and a logic model based on the goals and theory of change defined in the conceptual model, AVCV can meaningfully measure progress against its stated mission and goals, and provide further evidence to stakeholders of this progress.
- And, as demonstrated during the pilot test, measuring progress against that model can serve as a guide when external factors may disrupt “business as usual” (e.g., the COVID-19 pandemic). When the methods and strategies of service delivery must change, remaining focused on defined goals and the metrics to measure them can guide those

adaptations to ensure continual progress, even if that progress is met with challenges along the way.

These benefits can be of value not only to AVCV, but to the field of victims' rights enforcement across the country.

Theoretical Contributions

This project synthesized previous research and input from a variety of legal service provider and crime survivor stakeholders to create a needed conceptual model and theory of change for victim legal services that has so far been lacking in the field. Like Cris Sullivan's (2016; 2018) conceptual model for domestic violence victim services, our conceptual model for victim legal services provides a framework that researchers and practitioners can use to test hypotheses (in general research) and program effectiveness (in evaluation), where only more general studies about the impact of legal services for victims existed before. While the "road test" of this model for victims' rights enforcement clinics is still set to continue during the process and outcome evaluations, this research demonstrated how the conceptual model can be operationalized for specific programs, built out into a logic model, and implemented in practice.

Contributions to Evaluation

Through the creation and application of the conceptual model through this formative evaluation, several issues were identified that evaluators should be mindful of when evaluating any victim legal services clinic. These include legal privacy concerns, such as how to collect data for program evaluation at the client level while still maintaining attorney-client privilege, which may be less of a concern in other victim services fields. Other issues common to all formative evaluations include the need to assess the cultural readiness of an organization to make use of, and participate in, an evaluation; having available staffing and resources to do so; and IT issues.

Lastly, since March 2020, almost every facet of life has been touched by the COVID-19 pandemic; the clinics in this project, the evaluation, and the criminal justice system writ large are no exceptions. Additional external factors to be mindful of are related to ongoing criminal justice reforms. For instance, efforts to reduce prison populations, such as via compassionate releases of offenders, should not ignore victims' rights. In an effort to protect victims in these circumstances, advocacy work, amicus briefs, and even filing for injunctions may become more prevalent in the work of rights enforcement clinics.

However, despite such external disruptions that were not thought of at the time it was created, the conceptual model provides a basis for creating logic models, programs, and evaluation designs—even during challenging and changing circumstances. In this project, it provided the bellwether for charting how to measure impacts in the new COVID and criminal justice reform environments: do the same outcomes and objectives still apply, and how do organizations go about achieving the same objectives for clients in radically changed or changing systems? All three clinics emphatically declared that their desired victim, community, and system outcomes did not change; the challenges were related to how they needed to adapt to achieve them. Hence, the model still held during times of difficulty.

References

- Black, K. (2016). *Preparing for Evaluation: Lessons from the Evaluability Assessment of the Teagle Foundation's College-Community Connections Initiative*. Retrieved from: http://steinhardt.nyu.edu/research_alliance/publications/preparing_for_evaluation.
- Davies, R. (2013). *Planning evaluability assessments: A synthesis of the literature with recommendations*. Cambridge, for UK Department for International Development https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/248656/wp40-planning-eval-assessments.pdf.
- Jones, G.J. (2013). *Integrating evaluability assessment in after school and youth programming research* [Unpublished thesis]. Temple University, p. 36.
- Justice Research and Statistics Association (JRSA). (2003). "Evaluability Assessment: Examining the Readiness of a Program for Evaluation." *Program Evaluation Briefing Series #6*. A report of the Juvenile Justice Evaluation Center, for the Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice.
- Mihalic, S., Irwin, K., Fagan, A., Ballard, D., & Elliott, D. (2004). Successful program implementation: Lessons from blueprints. *Juvenile Justice Bulletin*, 2004(July), 1-12.
- Sullivan, C. M. (2016). *Examining the work of domestic violence programs within a "social and emotional well-being promotion" conceptual framework*. National Resource Center on Domestic Violence. Retrieved from <https://www.dvevidenceproject.org/wp-content/uploads/DVEvidence-Services-ConceptualFramework-2016.pdf>
- Sullivan, C. M. (2018). Understanding how domestic violence support services promote survivor well-being: A conceptual model. *Journal of Family Violence*, 33(2), 123–131. <https://doi.org/10.1007/s10896-017-9931-6>
- United Nations Development Programme, Independent Evaluation Office. (2019). *UNDP Evaluation Guidelines*. Retrieved from: http://web.undp.org/evaluation/guideline/documents/PDF/UNDP_Evaluation_Guidelines.pdf