



MARY BYRON
FOUNDATION

“Celebrating Solutions”
Nomination Form

Legal Name of Organization VIP Community Mental Health Center, Inc.

Address 1721 Griffin Avenue, Room 200

City/State/Zip Los Angeles, CA 90031

Contact Person Astrid H. Heger, M.D.

Title Chairperson (Executive Director, Violence Intervention Program)

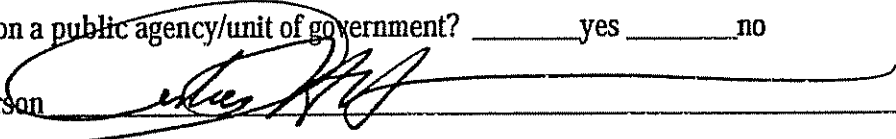
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Description of organization Located in East Los Angeles, the Violence Intervention Program (VIP) provides 24-hour medical, forensic, mental health, legal, advocacy and support services to victims of domestic violence and their children. These services have been built within the context of a Family Advocacy Center, which evaluates and treats all victims of family violence. The VIP's domestic violence services work in partnership with all major systems including health, law enforcement and Geographical area served East Los Angeles the legal system.

Is organization tax-exempt under IRS 501 (c) (3) guidelines? yes no

If no, is your organization a public agency/unit of government? yes no

Signature of contact person 

Date September 13, 2002

Please send Program Outline with Nomination Form to:

Mary Byron Foundation, Inc.
10401 Linn Station Road, Suite 200
Louisville, KY 40223-3842

Or email us at: grants@marybyronfoundation.org

“Celebrating Solutions” for Victims of Domestic Violence and their Children

VIOLENCE INTERVENTION PROGRAM

1. Mission

Intervening to protect and treat all victims of family violence is the mission of the Violence Intervention Program (VIP), which was established in 1984 at the Los Angeles County (LAC) and University of Southern California (USC) Medical Center in East Los Angeles, California. The VIP provides around-the-clock medical, forensic, mental health, legal, advocacy and support services to women and their children impacted by domestic violence. Domestic violence prevention is also provided through outreach to schools, churches and other community organizations.

The VIP, while initially created to evaluate and treat child abuse victims, has grown into the United States' only hospital-based Family Advocacy Center serving all victims of family violence and sexual assault including victims of child abuse and neglect, domestic violence, sexual assault and elder and dependent adult abuse.

2. Innovative Program Aspects

One of the most innovative aspects of the VIP is that its domestic violence services have been built within the context of a Family Advocacy Center, which evaluates and treats all forms of family violence including child abuse and neglect, sexual assault, elder abuse and dependent adult abuse. The VIP remains the only hospital-based and multidisciplinary Family Advocacy Center in the United States. This system of care insures, for example, that when children and families are examined at the VIP's child abuse center, they are also screened for any domestic violence that may be present in the home. When domestic violence is discovered, appropriate services are implemented.

The VIP is a leader in the field of domestic violence because it successfully collaborates with all major systems that impact victims of domestic violence. These systems include health, law enforcement and the legal system. By integrating and developing positive relationships with these systems, victims receive comprehensive expert care. Domestic violence services include:

- Bilingual and culturally sensitive crisis intervention, case management, and individual, family and group mental healthcare. Transportation assistance is provided for therapy appointments.
- Medical and forensic evaluation and treatment.
- Around-the-clock screening, crisis intervention and case management for women who present to LAC+USC Medical Center and who may be victims of domestic violence. Advocates respond 24 hours a day to calls from throughout the medical center. Advocates are also a point

of entry for ongoing domestic violence services long-term individual, family and group counseling, parenting classes, medical care, advocacy and legal assistance.

- Mandated domestic violence screening for all female patients over age fourteen who present to LAC+USC Medical Center.
- Restraining orders, immigration assistance, court accompaniment and related legal guidance through an on-site legal clinic built in partnership with the USC Law School.
- English as a Second Language classes for monolingual Spanish speaking women who are victims of domestic violence. Parenting classes are also provided.
- Individual tutoring and mentoring for children exposed to domestic violence.
- Outreach to schools, churches and other community organizations for the prevention of domestic violence.

The VIP has been selected to participate on several committees, boards and advocacy groups dedicated to the protection and treatment of domestic violence victims. They include:

- Domestic Violence Death Review Team, Los Angeles County
- Los Angeles County Domestic Violence Council, Executive Board (Health Committee)
- Superior Court Domestic Violence Committee

The VIP and its staff have been selected to present domestic violence lectures and trainings at local and national conferences including:

- National Conference on Healthcare and Domestic Violence, Family Violence Prevention Fund
- California Medical Training Center, Advance Training in Domestic Violence for Healthcare Providers (California Office of Criminal Justice Planning)
- International Traumatic Stress Studies: "Interdisciplinary Trauma Treatment for Victims of Violence in a Public Hospital"
- Victimization of Children and Youth: An International Research Conference: "Differential Impact of Exposure to Domestic Violence and Child Sexual Abuse"
- Los Angeles County Department of Mental Health: "Domestic Violence: Assessment and Treatment"
- Annual Office of Criminal Justice: "Vicarious Traumatization: Prevention & Intervention for the Domestic Violence Clinician"
- NEXUS Conference of the Inter-Agency Child Abuse and Neglect: "Meeting the Counseling, Legal and Medical Needs of Family Violence Victims in an Educational Environment" (2001), "Multi-Disciplinary Approach to Family Violence" (2000) and "Model for Integrated Services for Pre-school, Elementary Aged Children and Adolescents of Violent Families: Intersection of Domestic Violence and Child Abuse" (1999)

3. Program Implementation

After several years of evaluating children for abuse and neglect, it became clear that many children were also from homes in which domestic violence was present. In 1996 the VIP staff realized that they could not treat the child without the mother, nor the mother without the child. If real progress was to be made, domestic violence services had to be provided. Domestic violence services soon became one of the fastest growing segments of the VIP.

The VIP had to first rely on private funding sources to support domestic violence services. However, as the County of Los Angeles began to recognize the desperate need for domestic violence services they eventually became an entitlement to the community and permanently funded by the County.

4. A Program that Works

The VIP is a program that works. It provides the means by which victims of domestic violence and their children achieve lives of safety and wellbeing. The program's effectiveness is best illustrated by the real life stories of two women once tormented by violence but who have achieved safety for themselves and their children.

ROSIE: Rosie is a survivor of domestic violence. Rosie's daughters were exposed to the brutal attacks against their mom. Rosie's husband violently beat her over a period of several years. He also sexually abused Rosie's teenage daughter. When Rosie presented to the LAC+USC Medical Center, doctors suspected she was a victim of domestic violence. An advocate from the VIP's 24-Hour Domestic Violence Response Team responded within 30 minutes.

Rosie revealed to the advocate that, yes, her husband beat her on a regular basis. Her children were witnesses to this violence as well. The VIP advocate provided immediate crisis intervention, advocacy and case management services. Meanwhile, Rosie received the medical attention she required. The following day, Rosie and her children came to the VIP Community Mental Health Center where they would begin long-term therapy and find the resources to achieve a violence-free life.

Rosie began individual, family and group therapy for victims of domestic violence. Her eldest daughter was also enrolled in individual, family and group therapy while the youngest daughter began group therapy for children exposed to domestic violence. For one year Rosie and her two daughters have participated in VIP's mental health services and all have shown significant progress in achieving their treatment goals. Rosie also participates in an English as a Second Language class held onsite at the VIP and she has received job training and employment counseling. The VIP also accompanied Rosie to court during the perpetrator's trial.

Rosie required medical attention for the injuries she had sustained as a result of the violence. She had been beaten in the head so many times and with such force that she lost an eye. With no health insurance and no income, Rosie could not afford medical treatment. The VIP advocated on her behalf and through private funding sources, she now has a new eye.

No longer living with the abuser, Rosie had to find safe and decent housing for she and her daughters. The VIP has worked with Rosie to submit an application for a Section 8 housing voucher, which would allow her to pay only 30% of her income toward housing. While the application is pending, the VIP has secured private funding to pay for Rosie and her children to live in an apartment.

Through the VIP's wrap around of services, Rosie and her two daughters are safe. They are no longer in danger of the man who once tormented and abused them. Rosie is regaining her self-esteem and her daughters are learning resources to break the cycle of family violence.

SHAWNA: On an early Friday morning, just three days before Mother's Day, a husband broke the restraining order issued against him and attempted to kill his sleeping wife and their three sleeping children. He stabbed each one to near death. An advocate with the VIP's 24-hour Domestic Violence Response Team immediately responded and was at the family's bedside in the hospital emergency room.

The advocate provided crisis intervention and case management services to the mother Shawna, her three children and their extended family that filled hospital corridors. The advocate was at the hospital throughout the weekend and when Mother's Day came that Sunday she made sure that Shawna and her children (in separate hospital rooms) had the chance to be together.

While the goal is to intervene before such horrific violence erupts, that was not possible in this case. However, as a result of the immediate advocacy services, Shawna and her children are now on the road to physical and emotional recovery. All family members participate in ongoing mental health services at the VIP. In addition to therapy, the family also receives extensive case management and advocacy services. Plastic surgery to help conceal the remaining scars and injuries is also planned. The VIP is working closely with the Victims of Crime Office and other agencies to insure the family receives all necessary resources to guarantee their recovery.

The VIP intends to walk alongside this family as it continues to recover from an unimaginable violence. The husband awaits trial for attempted murder.

5. Key Partners

The VIP is built on partnerships with law enforcement, legal, medical, social service and mental health agencies to ensure that victims of domestic violence receive comprehensive protection and treatment. These partnerships are instrumental to all domestic violence services.

Law Enforcement: The VIP works closely with local law enforcement agencies including the Los Angeles Police Department and Los Angeles Sheriff's Department. These agencies rely on the VIP's 24-hour medical and forensic services. In 1999 the VIP partnered with the Los Angeles Sheriff's Department and its STOP Intervention Team, in which domestic violence advocates accompanied officers to all domestic violence incidents in order to provide immediate services for victims. The VIP is again collaborating with the Los Angeles Sheriff's Department to develop community-based centers where domestic violence victims will receive assistance. Representatives from law enforcement participate on the VIP Community Advisory Board.

Legal: The VIP partners with the USC Law School to provide an on-site legal clinic for victims of domestic violence and their children. The legal clinic provides restraining orders, immigration assistance and other legal assistance for victims. Legal clinic staff, which includes law school students and professors, also accompany victims to court. The clinic works in partnership with the VIP's medical, forensic and mental health services. In addition to the legal clinic, the VIP works closely with local court systems including children, family and criminal courts. The results of the VIP's forensic exams are regularly used as evidence in court.

Medical: Based at LAC+USC Medical Center, one of the nation's largest public hospitals, the VIP works closely with medical partners to insure victims' physical recovery. In addition to operating its own 24-hour medical clinic, the VIP works with plastic surgeons, dentists and orthopedic specialists to insure that victims receive the medical care they require.

Social Service: Through a partnership with the Los Angeles County Department of Children and Family Services (DCFS) two social workers work on-site at the VIP. These social workers are available to families in which domestic violence has occurred. The VIP partners with domestic violence shelters where women and their children may stay when appropriate. The VIP may also arrange for women's pets to be kenneled while they stay in a shelter. The VIP also partners with local community-based programs including food distribution centers, transportation assistance providers, housing programs and job training and employment centers. The VIP is also working to establish a partnership with the Housing Authority of the City of Los Angeles to provide domestic violence victims with affordable housing through Section 8 vouchers.

Mental Health: Through a contract, the VIP partners with the Los Angeles County Department of Mental Health to receive reimbursement funding for mental health services.

6. Program Replication

The Los Angeles County Board of Supervisors has called the VIP a "Center of Excellence" urging replication of the VIP model in all County hospitals. The VIP's Child Advocacy Center, which is a multidisciplinary child abuse center, has been replicated in over 400 centers nationwide.

The VIP's system of protecting and treating victims of domestic violence should be replicated nationwide. Just as the VIP's child abuse services were replicated so too can the domestic violence system of care. Practitioners from around the world train at the VIP and then take those lessons with them when they return to their home community. VIP professionals also lecture around the country advocating for a multidisciplinary response to domestic violence with the hope that this system of care will be replicated throughout the country.

VIP Community Mental Health Center

Response to Questions 1-7

1. What type of domestic violence screening tool is used by medical staff? Is this a standardized tool used by other clinics/hospitals or did you develop it yourself? Please submit a copy if possible.

LAC+USC Medical Center is one of the nation's largest public hospital systems. Its medical staff is provided with a 4¼ inch x 6½ inch pocket-size laminated screening card (enclosed), which the VIP Community Mental Health Center (CMHC) developed. Using this card, medical staff are responsible for screening all female patients age 14 and older for a history of domestic violence. In addition to providing screening questions in both English and Spanish, the card also describes behavioral and physical clues and sample histories that may suggest domestic violence. The card also reminds medical staff of important messages to relay to the victim including that she is believed, help is available and that the violence is not her fault. A ruler along the side of the card allows medical staff to easily and accurately document all injuries.

Mary E. Morahan, VIP CMHC Executive Director, remembers when the screening card was first developed. She and a co-worker spent a Friday night cutting and laminating the black and white cards (they have since been upgraded to a color version) for distribution among medical staff. She remembers, "We made those cards sturdy enough so when doctors forgot to take them out of their coat pockets they would withstand any unexpected clothes washings. Unfortunately though they don't make it through the dryer very well." In conjunction with the pocket-sized screening cards, the VIP CMHC adheres to a Domestic Violence Triage Protocol (enclosed), which was developed in partnership by the VIP and the County of Los Angeles.

When VIP CMHC staff train personnel from other hospitals, the screening cards are distributed so they can be adapted and used in other medical settings. The VIP CMHC has trained doctors, physician assistants, nurses, interns and residents in effective screening protocols. Once trained, they may then return to their own hospital or medical setting and implement the screening process there. VIP CMHC advocates also use the screening card when they respond to patients who may be victims of domestic violence.

2. What percentage of clients come to the clinic and request assistance for domestic violence because they are aware of the services offered, as opposed to being identified by the screening.

Approximately fifty percent of VIP CMHC clients come to the clinic after being identified by the screening process. The remaining fifty percent of clients seek services because they have been referred by another agency or they are self-referred.

The VIP CMHC partners with several other organizations, which refer women who require domestic violence assistance. The Department of Children and Family Services (DCFS), the Los Angeles County department charged with child protection, frequently refers victims of domestic violence and their children who have witnessed the violence for counseling, case management and advocacy services. In addition, the VIP CMHC works closely with domestic violence shelters when women require services not provided by the shelter. Through the VIP CMHC's participation on several local domestic violence boards and committees, the organization is well publicized and respected among service providers who may refer women and children for services. The VIP CMHC also conducts outreach with community-based organizations, schools and churches so that community members are educated about domestic violence and know how to access services from the VIP CMHC.

The VIP's 24-hour child abuse center may also refer women for domestic violence assistance. This usually happens when, during the child abuse evaluation process, it is determined that there is also domestic violence in the home. In this way, the VIP's child abuse and domestic violence services work in coordination to prevent and treat co-occurring forms of family violence.

3. What is the protocol if abuse is suspected but the client will not self-disclose? What services, if any, are offered?

When a client does not self-disclose abuse, the domestic violence advocate will still offer services. Services are always offered. The advocate will also take the opportunity to educate the client about domestic violence. For example, an advocate might tell a client who does not disclose abuse, "I'm glad that you are not being hurt, but would you mind just listening for a few minutes...maybe what I tell you will be helpful for a friend, sister or neighbor." The advocate will explain that domestic violence is not a woman's fault. The advocate will describe the type of help that is available and how to access such assistance. The client will receive a VIP CMHC card with 24-hour contact phone numbers. The client is also given domestic violence literature that is available in Spanish and English (samples enclosed).

An advocate will also always ask, "Is there anything else that I can do for you." An advocate may assist a client in finding transportation to a safe place or getting the client and her children clothing, food or other crisis intervention services. The goal is to help develop a sense of trust between the client and advocate so that the client may feel more comfortable in disclosing any domestic violence.

4. Is documentation of the abuse, or suspected abuse, placed in a client's medical folder to aid if needed in future prosecution? Do you take photos?

Yes, documentation of the abuse or suspected abuse is placed in a client's medical chart. The domestic violence advocate will complete the Domestic Violence Form, which is in triplicate copy (enclosed). Once completed, one copy is added to the client's medical chart. In addition, the medical practitioner (i.e. doctor, nurse practitioner) completes the Body Map Form (enclosed) and puts it in the client's medical chart. The Body Map Form documents all injuries on the victim. The medical provider also completes his/her notes, which are included in the client's medical chart.

The second copy of the Domestic Violence Form is given to the client for her own records and the VIP CMHC sends the third copy to the appropriate law enforcement agency. It is important to note that law enforcement deletes the patient's whereabouts (Domestic Violence Form Question #2) from any report disclosed to the suspect or suspect's attorney.

The Patient's Clinical History Form (enclosed) is also completed by the domestic violence advocate and included in the client's medical chart. This form documents facts surrounding the abuse or suspected abuse (i.e. type of abuse, injuries, relationship history, previous police reports, perpetrator's location, lethality assessment, child involvement). The mental status of the victim is assessed and documented. The advocate and victim discuss her support network, if any, develop a safety plan and determine any other basic needs assistance, i.e. food, shelter, transportation. This is all documented on the Patient's Clinical History Form, which is kept in the client's medical chart. Advocates also complete the VIP Community Mental Health Center Screening Form (enclosed), which is kept by the VIP CMHC for future follow-up services.

Photos of injuries may also be taken. For example, just last night a 32-year old female was brought to the VIP's 24-hour Sexual Assault Center because she her partner had sexually assaulted and physically abused her. As part of the forensic evaluation, photos were taken of her injuries, which included lacerations under her eye. Using a colposcope, a medical instrument that offers the advantage of light, magnification, precise measurement and photographic capability, all of her internal injuries caused by the sexual assault, were also documented with photos. The colposcope and its photographic capabilities make the need for repeat examinations, i.e. by the prosecution and defense, almost obsolete, thereby lessening further trauma to the woman. The VIP was the first to attach a 35 mm camera to the colposcope in order to identify and photo-document sexual assault injuries. This advancement, which was pioneered by the VIP, is now considered the international standard of care.

5. What training is provided to the clinic staff?

Staff training is integral to the VIP CMHC. All staff participate in a California state-mandated 40-hour training program. The program combines lectures, hands-on training and staff shadowing to ensure that all staff members are properly trained and educated about legal issues, medical issues, cultural competency, crisis intervention, mental health treatment, vicarious traumatization and advocacy as they relate to domestic violence. For more information, enclosed is a copy of the slide presentation that is used during the training's lecture series.

Staff also receive ongoing training. Experts from such areas as law enforcement, prosecution and immigration provide trainings to VIP CMHC staff on an ongoing basis. Staff are encouraged to also attend meetings of the Los Angeles County Domestic Violence Council and Los Angeles City Domestic Violence Council in order to keep abreast on current issues impacting services for domestic violence victims. The organization also pays for staff to attend off-site training programs and conferences.

6. What are the hours of the clinic and (if different) when advocacy is available?

The VIP Community Mental Health Center, Inc. (CMHC) is open 8 a.m. to 6 p.m. Monday through Friday. During these hours the VIP CMHC provides ongoing individual, family and group counseling; case management; tutoring; mentoring; parenting classes; English as a Second Language classes; and legal services for women and their children.

The VIP CMHC provides domestic violence advocacy services 24-hours a day seven days a week including all nights, evenings, weekends and holidays.

7. What is the staff/clinic's relationship with the local criminal justice system (police, prosecutors, etc.)?

The VIP CMHC and its staff have an excellent relationship with the local criminal justice system. The VIP CMHC works with several local law enforcement agencies including the Los Angeles Police Department and Los Angeles County Sheriff's Department. For example, the domestic violence program has partnered with the Los Angeles Sheriff's Department in its STOP Violence Ride-Along Program. Under this grant-funded project, the VIP's domestic violence advocates rode along with sheriff deputies and were second responders to all domestic violence calls and provided victims with crisis intervention and advocacy services. Currently, the VIP CMHC is collaborating with the East Los Angeles Sheriff's Department to develop a community-based domestic violence satellite office where women will have access to information and assistance related to domestic violence.

The VIP CMHC also works closely with the legal system including prosecutors and local court systems including children, family and criminal courts. Mary E. Morahan, L.C.S.W., VIP CMHC Executive Director, and Dr. Astrid H. Heger, VIP CMHC Chairperson, are considered expert witnesses and are frequently called to testify on behalf of domestic violence victims.

In 2002, the Los Angeles County Sheriff's Department Family Crime Bureau recognized Dr. Heger with the Mary Ellen McCormick Award for her work with victims. Representatives from law enforcement, juvenile justice and the legal system also serve on the organization's Community Advisory Board, which meets at least twice a year. The VIP CMHC also serves on the Los Angeles County Superior Court Domestic Violence Committee. Through this committee the VIP CMHC Executive Director trains and educates court mediators and also advocates on behalf of children in divorce and custody cases involving domestic violence.

AWARDS, ACCOLADES & GRANTS

The below includes awards, accolades and grants received in recognition of services for domestic violence victims and their children.

AWARDS

Dorothy F. Kirby Award (2002), National Association of Social Workers-California Chapter
Recognized Mary E. Morahan, Executive Director of the VIP CMHC as Outstanding Youth Social Worker for her work with child victims of domestic violence.

Governor's Crime Victims Services Award (2001), California Governor Gray Davis

Bud Cramer Award (1998): National Network of Child Advocacy Centers

Women of Courage Award (1998), Los Angeles Commission on the Status of Women

Award (1998), Foundation for the Improvement of Justice, Inc.

Crime Victim Service Award (1997), United States Department of Justice

Ray E. Helfer, M.D. Award (1996): American Academy of Pediatrics and National Alliance of Children's Trust and Prevention Funds

ACCOLADES

- In 2002 The Royal Society of Medicine named Astrid H. Heger, M.D., Chairperson-VIP CMHC and Executive Director-VIP, as an honorary member for her pioneering work in the medical and forensic evaluation and treatment of victims.
- The Robert Wood Johnson Community Health Leadership Program invited the nomination of Mary E. Morahan, VIP CMHC Executive Director, for the 2003 award program for her work with domestic violence victims. (*application pending*)
- The Los Angeles County Board of Supervisors named the program a "Center of Excellence" while passing a resolution to replicate the program in all Los Angeles County public hospitals.
- The University of Southern California (USC) Law School selected the VIP CMHC to partner in order to develop a Domestic Violence Legal Clinic providing free legal services for domestic violence victims.
- VIP CMHC Executive Director was elected to the Los Angeles County Domestic Violence Council on which she currently serves as Chair for the Health Issues Committee.

- Selected for participation on the Los Angeles County Superior Court Domestic Violence Committee.
- Elected for participation on the Los Angeles County Domestic Violence Death Review Team.
- In 2002 secured a \$2.75 million contract with the Los Angeles County Department of Mental Health to provide children and their mothers who are impacted by domestic violence with ongoing mental health and related services.
- In 2001 students from the USC Keck School of Medicine form the “USC Brothers,” a student group that provides male volunteer mentors to children who have been impacted by domestic violence. This group has since expanded to also include female medical school student and to serve male and female children at the VIP CMHC.

GRANTS

EVERYCHILD FOUNDATION (2003), \$600,000

This foundation’s single grant award for 2003 will be made to the VIP CMHC in support of the capital campaign to renovate the VIP CMHC’s existing building. Renovation will improve the building’s usage as a Family Advocacy Center for families impacted by violence.

S. MARK TAPER FOUNDATION (2002-2003), \$750,000

Largest single contribution in support of the capital campaign to renovate the historic building, which houses the VIP CMHC

WEINGART FOUNDATION (2002), \$100,000

Start-up support for the VIP CMHC’s transition into a separate 501(c)(3) non-profit organization

CALIFORNIA MEDICAL TRAINING CENTER, GOVERNOR’S OFFICE OF CRIMINAL JUSTICE PLANNING, STATE OF CALIFORNIA (2000-2002), \$285,900

Funded “Advanced Training in Domestic Violence for Healthcare Providers” training program for healthcare providers in southern California

THE RALPH M. PARSONS FOUNDATION (1999-2001), \$244,200

Full-time Director of Mental Health Services

STOP VIOLENCE AGAINST WOMEN, OFFICE OF JUSTICE PROGRAMS, UNITED STATES DEPARTMENT OF JUSTICE (1998-2001), \$130,972

To develop a coordinated program to respond to domestic violence and develop treatment curricula and strategies to minimize the long-term impact of domestic violence on children

CHILD AND TEEN COUNSELING PROGRAM-DOMESTIC VIOLENCE EMPHASIS, GOVERNOR'S OFFICE OF CRIMINAL JUSTICE PLANNING, STATE OF CALIFORNIA (2000), \$97,206

To implement school-based mental health counseling for children and adolescents impacted by or at-risk of domestic violence

S. MARK TAPER FOUNDATION (1998-2000), \$250,000

Mental health services targeting victims of domestic violence in order to break the cycle of violence

THE CALIFORNIA ENDOWMENT (1997-1999), \$876,553

Implementation of a prototype Family Advocacy Center to expand the VIP's child abuse center into a service delivery system for victims of domestic violence that is fully integrated with law enforcement, legal systems, social services, shelters and other community-based programs

FIELD GENERATED NATIONAL IMPACT PROJECT, OFFICE FOR VICTIMS OF CRIME, UNITED STATES DEPARTMENT OF JUSTICE (1997), \$100,000

Planning grant to determine activities required to establish a hospital-based shelter for domestic violence victims and their children