

Contract/Leases/Agreements/Grants  
Form

Is this	New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/>
Is this a Grant	Yes <input checked="" type="checkbox"/> (if yes, needs to go to grant review)      No <input type="checkbox"/>
Is this an	Agreement: <input type="checkbox"/> Contract: <input checked="" type="checkbox"/> Lease: <input type="checkbox"/> Other: <input type="checkbox"/>
Name of who Contract/Lease/Agreement/Grant is with	DHHS
Project Name	CRIME VICTIM COMPENSATION NAVIGATOR
Attorney Review	All contracts/leases/agreements/grants must have attorney review and approval through the Commissioners' Office.
Insurance Review	All contracts/leases/agreements/grants must have appropriate insurance coverage per the attached list. It is the Department Head's responsibility to make sure that all requirements are met and listed on the insurance certificate.
Total Amount	\$ 60,000.00
Organization Match	\$ 100%
County's Match	\$ 0

I have reviewed and approved this contract/lease/agreement/grant and attached appropriate insurance:

*Chumppinski*      7/30/21  
Department Head requesting      Date signed

**GRANT REVIEW COMMITTEE APPROVAL:**

*Berni Tuckers*      7/30/21       I am requesting a meeting.  
County Clerk      Date signed

*Kimberly Tullow*      8-2-21       I am requesting a meeting.  
County Treasurer      Date signed

*[Signature]*      8/2/21       I am requesting a meeting.  
Finance Chairman      Date signed

Please do not mark below this line

\*\*\*\*\*

INTEROFFICE USE ONLY

Date received \_\_\_\_\_ Date sent for Attorney Review \_\_\_\_\_

Attorney Approval received \_\_\_\_\_ Insurance received \_\_\_\_\_

**Crime Victim Rights Navigator Pilot Program - 2022**  
**Facesheet**

FOR OFFICE USE ONLY:	Version # _____	APP # 735088
----------------------	-----------------	--------------

**1. Demographic Information**

- a. Demographic Information Name Alpena County of Prosecutors Office
- b. Organizational Unit
- c. Address 719 W Chisholm St Suite
- d. Address 2 Ste #2
- e. City Alpena State MI Zip 48707-2452
- f. Federal ID Number 38-6004834 Reference No. 080351281
- g. Demographic Information fiscal year (beginning month and day) October-01
- h. Agency Type
  - Private, Non-Profit
  - Public

1. Select the appropriate radio button to indicate the agency method of accounting.

- Accrual
- Cash
- Modified Accrual

2. Is your agency currently registered in the 211 database?  Yes  No

**2. Program / Service Information**

- a. Program / Service Information Name Crime Victim Rights Navigator Pilot Program - 2022
- b. Is implementing agency same as Demographic Information  Yes  No
- c. Implementing Agency Name
- d. Project Start Date Oct-01-2021 End Date Sep-30-2022
- e. Amount of Funds Allocated \$60,000.00 Project Cost \$60,000.00

FOR OFFICE USE ONLY: Version # \_\_\_\_\_

APP # 735088

**3. Certification / Contacts Information**

a. Authorized Official

Name Cynthia Muszynski  
Title Prosecuting Attorney  
Mailing Address 719 W. Chisholm St  
City Alpena State MI Zip 49707  
Telephone (989) 354-9738 Fax  
E-mail Address muszynskic@alpenacounty.org

b. Financial Officer

Name Bonnie Friedrichs  
Title Financial Officer  
Mailing Address 720 W. Chisholm St. Ste. #2  
City Alpena State MI Zip 49707  
Telephone (989) 354-9520 Fax (989) 356-9644  
E-mail Address friedrib@alpenacounty.org

c. Project Director

Name William Rings  
Title Other  
Mailing Address 719 W. Chisholm Street, Suite 2  
City Alpena State MI Zip 49707  
Telephone (989) 590-1201 Fax (989) 354-9788  
E-mail Address ringsw@alpenacounty.org

## Certifications

FOR OFFICE USE ONLY:

Version # \_\_\_\_\_

APP # 735088

### 4. Assurances and Certifications

#### A. SPECIAL CERTIFICATIONS

- a  By checking this box, the individual or officer certifies that the individual or officer is authorized to approve this grant application for submission to the Department of Health and Human Services on behalf of the responsible governing board, official or Grantee.
- b  By checking this box, the individual or officer certifies that the individual or officer is authorized to sign the agreement on behalf of the responsible governing board, official or Grantee.

#### B. State of Michigan Information Technology Information Security Policy

1. By checking the following boxes, the Grantee acknowledges compliance with State of Michigan Information Technology Information Security Policy\* and provides the following assurances:
- a.  The Grantee Project Director will be notified within 24 hours when its users are terminated or transferred or immediately if after an unfriendly separation.
- b.  The Grantee Project Director will annually review and certify user accounts to verify the user's access is still required and the user is assigned the appropriate permissions.
- c.  The Grantee Project Director will remove user's access within 48 hours of notification when users are terminated or transferred, or immediately if after an unfriendly separation.
- d.  After 120 days of inactivity, when the user attempts to log into their account they will receive a message stating their account has been deactivated, and the user will have to request the account be reinstated.

\*Policy available at [https://www.michigan.gov/documents/dmb/1340\\_193162\\_7.pdf](https://www.michigan.gov/documents/dmb/1340_193162_7.pdf)



## Narrative

FOR OFFICE USE ONLY:

Version # \_\_\_\_\_

APP # 735088

### 5. Program Synopsis

The Navigator Program, once fully operational, will reach out to Crime Victims who have suffered a physical injury and need assistance paying for: medical and counseling bills, loss of wages and/or support repayment, grief counseling, funeral expenses, crime-scene clean up, and rehabilitative and replacement costs, all of which are a direct result of their physical injury. The Navigator will need to review cases, reach out to victims, explain compensation, and provide help with the application process if needed.

### 6. Program Target Area

#### Counties

Counties project will serve (check all that apply):

- |  |  |                                      |
|--|--|--------------------------------------|
| <input checked="" type="checkbox"/> Alcona | <input type="checkbox"/> Alger                   | <input type="checkbox"/> Allegan     |
| <input checked="" type="checkbox"/> Alpena | <input type="checkbox"/> Antrim                  | <input type="checkbox"/> Arenac      |
| <input type="checkbox"/> Baraga            | <input type="checkbox"/> Barry                   | <input type="checkbox"/> Bay         |
| <input type="checkbox"/> Benzie            | <input type="checkbox"/> Berrien                 | <input type="checkbox"/> Branch      |
| <input type="checkbox"/> Calhoun           | <input type="checkbox"/> Cass                    | <input type="checkbox"/> Charlevoix  |
| <input type="checkbox"/> Cheboygan         | <input type="checkbox"/> Chippewa                | <input type="checkbox"/> Clare       |
| <input type="checkbox"/> Clinton           | <input type="checkbox"/> Crawford                | <input type="checkbox"/> Delta       |
| <input type="checkbox"/> Dickinson         | <input type="checkbox"/> Eaton                   | <input type="checkbox"/> Emmet       |
| <input type="checkbox"/> Genesee           | <input type="checkbox"/> Gladwin                 | <input type="checkbox"/> Gogebic     |
| <input type="checkbox"/> Grand Traverse    | <input type="checkbox"/> Gratiot                 | <input type="checkbox"/> Hillsdale   |
| <input type="checkbox"/> Houghton          | <input type="checkbox"/> Huron                   | <input type="checkbox"/> Ingham      |
| <input type="checkbox"/> Ionia             | <input checked="" type="checkbox"/> Iosco        | <input type="checkbox"/> Iron        |
| <input type="checkbox"/> Isabella          | <input type="checkbox"/> Jackson                 | <input type="checkbox"/> Kalamazoo   |
| <input type="checkbox"/> Kalkaska          | <input type="checkbox"/> Kent                    | <input type="checkbox"/> Keweenaw    |
| <input type="checkbox"/> Lake              | <input type="checkbox"/> Lapeer                  | <input type="checkbox"/> Leelanau    |
| <input type="checkbox"/> Lenawee           | <input type="checkbox"/> Livingston              | <input type="checkbox"/> Luce        |
| <input type="checkbox"/> Mackinac          | <input type="checkbox"/> Macomb                  | <input type="checkbox"/> Manistee    |
| <input type="checkbox"/> Marquette         | <input type="checkbox"/> Mason                   | <input type="checkbox"/> Mecosta     |
| <input type="checkbox"/> Menominee         | <input type="checkbox"/> Midland                 | <input type="checkbox"/> Missaukee   |
| <input type="checkbox"/> Monroe            | <input type="checkbox"/> Montcalm                | <input type="checkbox"/> Montmorency |
| <input type="checkbox"/> Muskegon          | <input type="checkbox"/> Newaygo                 | <input type="checkbox"/> Oakland     |
| <input type="checkbox"/> Oceana            | <input type="checkbox"/> Ogemaw                  | <input type="checkbox"/> Ontonagon   |
| <input type="checkbox"/> Osceola           | <input type="checkbox"/> Oscoda                  | <input type="checkbox"/> Otsego      |
| <input type="checkbox"/> Ottawa            | <input checked="" type="checkbox"/> Presque Isle | <input type="checkbox"/> Roscommon   |
| <input type="checkbox"/> Saginaw           | <input type="checkbox"/> St. Clair               | <input type="checkbox"/> St. Joseph  |
| <input type="checkbox"/> Sanilac           | <input type="checkbox"/> Schoolcraft             | <input type="checkbox"/> Shiawassee  |
| <input type="checkbox"/> Tuscola           | <input type="checkbox"/> Van Buren               | <input type="checkbox"/> Washtenaw   |
| <input type="checkbox"/> Wayne             | <input type="checkbox"/> Wexford                 | <input type="checkbox"/> Out Wayne   |

**U.S. Congressional, State and House Districts**

U.S. Congressional Districts

US Congress District 1

State Senate District

State Senate District 36

State House Districts

State House District 103

State House District 106

**7. Mission Statement**

The Crime Victim Compensation Navigator's (CVCN) role is to assist crime victims with physical injuries with the Crime Victim Compensation Application (CVCA). This person(s) will understand the process of the CVCA and become a specialist at helping crime victims with physical injuries pay for the follow expenses: medical, counseling, loss of wages and/or support, grief counseling, funeral expenses, crime scene clean up, and rehabilitative and replacement services costs. The CVCN's mission is to effectively aid crime victims with physical injuries in applying for the CVC program.

**8. Project Resources**

**Provide a general description of staff needed to implement Victims Rights in your county. Identify the most critical activities that you perform when providing victim rights.**

The Crime Victim Advocate Coordinator from each of the four counties is needed to aid the Navigator in his/her role. The Advocates should keep the Navigator informed as to new cases involving crime victims, and let the Navigator make contact to discuss compensation. The Navigator is listed as purely performing Crime Victim Compensation duties and should refrain from participating in Advocate duties, but should be required to understand said duties in the event a compensation claimant needs additional assistance. The local County Prosecutorial team is also important to providing Victim Rights. The Prosecution directly works with the Victim Advocates and Navigators when discussing the victim's feelings, expenses, and their desired court outcome. The Advocate should also work with the local courts and the Navigator regarding restitution paperwork for compensation purposes.

This position, the Navigator Role, through Alpena County also requires that the Navigator perform front desk/intake activities for the Alpena County Prosecutor's Office. While this tasks adds workload to the Navigator position, it is minimal and Compensation tasks and travel take priority.

The most critical activities performed by the Navigator are: contacting victims, gathering required documents, aiding claimants in acquiring documents, and being the liaison between victims and the Crime Victim Compensation Commission.

**If you utilize the services of volunteers in the provision of Victim Rights, please explain how this is accomplished.**

Volunteers have been utilized in previous years to perform organizational tasks. These tasks include but are not limited to: arranging pre-made brochures into packets for delivery by mail, and reproducing blank or unfilled documents for redistribution.

**9. Michigan Victim Information and Notification Everyday (MI-VINE)**

Does your agency participate in MI-VINE?

Yes  No

Provide the number of victims registered to use MI-VINE in your county for court events during the past calendar year.

1123

To obtain statistics for number of Victims Registered with MI-VINE visit the website

---

<https://www.vinewatch.com/vinewatch/>

**Please describe your programs efforts to utilize MI-VINE.**

The Crime Victim Compensation Navigator utilizes the MI-VINE program as far as the initial Victim Rights packet includes compensation information alongside the MI-VINE registration. MI-VINE is used more frequently by the Advocate than the Navigator.

**10. Community Coordination**

**1. Community Coordination Activity 1 - Describe any community activities, projects, or coordination councils that your office is involved in to promote Victim Rights and services.**

The victim rights team, consisting of the Navigator and Advocate Coordinator, are present for Child Advocacy Center (CAC) meetings for the Alpena county area. This meeting goes over active and upcoming cases involving child victims. It gathers multiple county wide perspectives as to the status and handling of each case.

**2. Community Coordination Activity 2 - Describe any community activities, projects, or coordination councils that your office is involved in to promote Victim Rights and services.**

The Victim Rights team is also present on the Sexual Assault Response Team (SART) meetings, with the navigator being present on Iosco County as well. The Navigator is currently working to be present at each event for all four (4) counties. This meeting discusses the SART activities over a 3 month period and ways to better allocate resources to help victims of sexual violence.

**3. Community Coordination Activity 3 - Describe any community activities, projects, or coordination councils that your office is involved in to promote Victim Rights and services.**

The victim rights team is also present on a Human Trafficking committee comprised of representatives of multiple agencies to help promote awareness and accountability for Human Trafficking and its victims. The Alpena Advocate Coordinator is on the committee, and the Navigator assists when needed.



## Work Plan

FOR OFFICE USE ONLY:

Version # \_\_\_\_\_

APP # \_\_\_\_\_

### 11. Work Plan

**Objective :**

The Navigator will make contact with victims who may qualify for the Crime Victim Compensation Program in the counties of Alpena, Alcona, Iosco, and Presque Isle. The navigator should assess each case/clients and determine their level of assistance in filing a Compensation Application.

**Activity :**

The Navigator will directly contact victims with physical injuries and discuss the Crime Victim Compensation Program and their eligibility. The Navigator will then schedule in-person or telecommunication meetings, or provide communication through other platforms such as text, email, or other innovative platforms with said clients. These meetings will be available in all counties that the Navigator covers and will be used to discuss the CVC application.

**Responsible Staff :**

Crime Victim Compensation Navigator

**Date Range :**

10/01/2021 - 09/30/2022

**Expected Outcome :**

Crime victims will be contacted to determine CVC eligibility and their CVC application will be successfully submitted with all supporting documentation. The client will understand their involvement with the CVC Program.

**Measurement :**

The Navigator's effectiveness will be measured through Microsoft's Excel Spreadsheet, or a comparable system, and through various satisfaction reports developed by MDHHS.



Budget Detail for Crime Victim Rights Navigator Pilot Program - 2022  
 Agency: Alpena County of Prosecutors Office  
 Application: Crime Victim Rights Navigator Pilot Program - 2022

7/21/2021

**Budget**

FOR OFFICE USE ONLY:		Version # _____	APP # 735088				
Line Item	Qty	Rate	Units	UOM	Total	Amount	
<b>DIRECT EXPENSES</b>							
<b>Program Expenses</b>							
<b>1 Salary &amp; Wages</b>							
Compensation Navigator	16.0000	2080.000	0.000	FTE	33,280.00	33,280.00	
<b>2 Fringe Benefits</b>							
FICA	0.0000	7.650	33280.000		2,546.00	2,546.00	
Hospitalization	0.0000	41.300	33280.000		13,745.00	13,745.00	
Life Insurance	0.0000	0.305	33280.000		102.00	102.00	
Retirement	0.0000	7.000	33280.000		2,330.00	2,330.00	
Worker's Compensation	0.0000	0.887	33280.000		295.00	295.00	
Sick and Accident	0.0000	1.376	33280.000		458.00	458.00	
<b>Total for Fringe Benefits</b>					19,476.00	19,476.00	
<b>3 Travel</b>							
Mileage-Travel between counties	0.0000	0.000	0.000		4,500.00	4,500.00	
<b>4 Supplies &amp; Materials</b>							
Computers/Tablets	0.0000	0.000	0.000		1,000.00	1,000.00	
Postage	0.0000	0.000	0.000		1,000.00	1,000.00	
<b>Total for Supplies &amp; Materials</b>					2,000.00	2,000.00	

Budget Detail for Crime Victim Rights Navigator Pilot Program - 2022  
 Agency: Alpena County of Prosecutors Office  
 Application: Crime Victim Rights Navigator Pilot Program - 2022

7/21/2021

Line Item	Qty	Rate	Units	UOM	Total	Amount
5 Contractual						
6 Subawards – Subrecipient Services						
7 Equipment						
8 Other Expense						
Telephone	0.0000	0.000	0.000		744.00	744.00
<b>Total Program Expenses</b>					60,000.00	60,000.00
<b>TOTAL DIRECT EXPENSES</b>					60,000.00	60,000.00
<b>INDIRECT EXPENSES</b>						
<b>Indirect Costs</b>						
1 Indirect Costs						
2 Cost Allocation Plan						
<b>Total Indirect Costs</b>					0.00	0.00
<b>TOTAL INDIRECT EXPENSES</b>					0.00	0.00
<b>TOTAL EXPENDITURES</b>					<b>60,000.00</b>	<b>60,000.00</b>

Budget Summary for Crime Victim Rights Navigator Pilot Program - 2022  
 Agency: Alpena County of Prosecutors Office  
 Application: Crime Victim Rights Navigator Pilot Program - 2022

7/21/2021

	Category	Total	Amount	Narrative
<b>DIRECT EXPENSES</b>				
<b>Program Expenses</b>				
1	Salary & Wages	33,280.00	33,280.00	
2	Fringe Benefits	19,476.00	19,476.00	
3	Travel	4,500.00	4,500.00	
4	Supplies & Materials	2,000.00	2,000.00	
5	Contractual	0.00	0.00	
6	Subawards – Subrecipient Services	0.00	0.00	
7	Equipment	0.00	0.00	
8	Other Expense	744.00	744.00	
<b>Total Program Expenses</b>		<b>60,000.00</b>	<b>60,000.00</b>	
<b>TOTAL DIRECT EXPENSES</b>		<b>60,000.00</b>	<b>60,000.00</b>	
<b>INDIRECT EXPENSES</b>				
<b>Indirect Costs</b>				
1	Indirect Costs	0.00	0.00	
2	Cost Allocation Plan	0.00	0.00	
<b>Total Indirect Costs</b>		<b>0.00</b>	<b>0.00</b>	
<b>TOTAL INDIRECT EXPENSES</b>		<b>0.00</b>	<b>0.00</b>	
<b>TOTAL EXPENDITURES</b>		<b>60,000.00</b>	<b>60,000.00</b>	

Source of Funds

Budget Summary for Crime Victim Rights Navigator Pilot Program - 2022  
 Agency: Alpena County of Prosecutors Office  
 Application: Crime Victim Rights Navigator Pilot Program - 2022

7/21/2021

	Category	Total	Amount	Cash	Inkind	Narrative
<b>1</b>	<b>Source of Funds</b>					
	Fees and Collections	0.00	0.00	0.00	0.00	
	State Agreement	60,000.00	60,000.00	0.00	0.00	
	Local	0.00	0.00	0.00	0.00	
	Federal	0.00	0.00	0.00	0.00	
	Other	0.00	0.00	0.00	0.00	
	<b>Total Source of Funds</b>	60,000.00	60,000.00	0.00	0.00	
	<b>Totals</b>	60,000.00	60,000.00	0.00	0.00	



**Miscellaneous**

FOR OFFICE USE ONLY:	Version # _____	APP # 735088
----------------------	-----------------	--------------

**15. Supporting documentation, if required**

Attachment Title	Attachment

