

LOUISIANA COMMISSION ON LAW ENFORCEMENT
AND ADMINISTRATION OF CRIMINAL JUSTICE

APPLICATION AND REVIEW
SUMMARY

APPLICATION NUMBER: C11-5-007

APPLICANT: Baton Rouge Children's Advocacy Center

PROJECT TITLE: Child Advocacy Program

PROJECT FUNDS :

FUND: \$ 17,000 80.00%

MATCH: \$ 4,250 20.00%

TOTAL: \$ 21,250 100.00%

PROJECT DURATION: 12 months

START DATE: 07/01/2011

END DATE: 06/30/2012

Continuation of C07-5-021

PROJECT SUMMARY:

The BRCAC lessens the trauma experienced by child victims when abuse allegations are investigated by facilitating a collaborative partnership of child protective services, law enforcement, prosecution, medical and mental health professionals in a child-friendly setting.

RECOMMENDATION: FUND DENY

SPECIAL CONDITIONS :

1. NO RELEASE OF 10% TOTAL FEDERAL FUNDS BY LCLE UNTIL MONITORING REVIEW IS RECEIVED BY LCLE.
2. NO DRAWDOWN OF FUNDS (AWARD) UNTIL APPLICATION IS REVIEWED AND APPROVED BY LCLE STAFF.



**LOUISIANA COMMISSION
ON LAW ENFORCEMENT
AND THE ADMINISTRATION
OF CRIMINAL JUSTICE**

**CRIME VICTIM ASSISTANCE
FORMULA GRANT PROGRAM**

CFDA #16.575

FOR LCLE USE ONLY:

Project ID: C11-5-007 CVA Purpose Area:

1. TITLE OF PROJECT Child Advocacy Program		2. <input type="checkbox"/> NEW PROJECT <input checked="" type="checkbox"/> CONTINUATION PROJECT OF: C10-5-007	
3. PROJECT DURATION Total Length: 12 Months (Not to exceed 12 Months) Desired Start Date: 3/7/2011 07/01/11 Desired End Date: 2/28/2012 06/30/12		4. PROJECT FUNDS Federal Funds: \$17,000 Cash Match: \$4,250 In-Kind Match: Total Project: \$21,250	
5A. APPLICANT AGENCY INFORMATION Agency Name: Baton Rouge Children's Advocacy Physical Address: 626 E. Blvd. City: Baton Rouge Zip: 70802- Mailing Address: 626 E. Blvd City: Baton Rouge Zip: 70802- Phone: (225) 343-1984 FAX: (225) 343-1987 Email: Sharon@batonrougecac.org		5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY Authorized Official: Sharon Pol Title: Executive Director Agency Name: Baton Rouge Children's Advocacy Center Address: 626 E. Blvd. City: Baton Rouge Zip: 70802- Phone: (225) 343-1984 FAX: (225) 343-1987 Email: Sharon@batonrougecac.org	
Fed Employer Tax Id: 26 - 0028918 DUNS: 791013555 - CCR CAGE/NCAGE: 5K2Z5 CCR Expiration Date: 3/7/2012			
6. IMPLEMENTING AGENCY Name: Sharon Pol Title: Executive Director Agency: Baton Rouge Children's Advocacy Address: 626 E. Blvd. City: Baton Rouge Zip: 70802- Phone: (225) 343-1984 FAX: (225) 343-1987 Email: Sharon@batonrougecac.org		7. PROJECT DIRECTOR Name: LaTonia Dunbar Title: Family Advocate Agency: Baton Rouge Children's Advocacy Address: 626 E. Blvd. City: Baton Rouge Zip: 70802- Phone: (225) 343-1984 FAX: (225) 343-1987 Email: Latonia@batonrougecac.org	
		8. FINANCIAL OFFICER Name: Luke Myers Title: CPA Agency: Postlewaite & Netterville Address: 8550 United Plaza Dr. Suite 1001 City: Baton Rouge Zip: 70809- Phone: (225) 408-4791 FAX: (225) 922-4611 Email: lmyers@pnepa.com	

9. BRIEF PROJECT DESCRIPTION: (Please do not exceed space provided below.)
The BRCAC lessens the trauma experienced by child victims when abuse allegations are investigated by facilitating a collaborative partnership of child protective services, law enforcement, prosecution, medical and mental health professionals in a child-friendly setting.

2011 SEP 27 PM 12:41
LA COMMISSION
LAW ENFORCEMENT

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Revised JULY 2010

VOCA PURPOSE AREAS

Please Check Type of Victimization Served (Check all that apply):

<input checked="" type="checkbox"/>	Sexual Assault
<input type="checkbox"/>	Domestic Abuse
<input checked="" type="checkbox"/>	Child Abuse
<input type="checkbox"/>	Previously Underserved

State Type of Previously Underserved:

PROJECT BUDGET SUMMARY

INSTRUCTIONS: The Checklist is self-explanatory. In Project Summary, applicable budget category totals will be automatically entered from each of the Detailed Project Budget Summaries. Provide source of Cash and/or In-Kind Match. In last table, check the type of victimization types that this project will address.

CHECKLIST:

Are all budgeted items allowable per Program Guidelines?	YES: <input checked="" type="checkbox"/>	NO: <input type="checkbox"/>
Were instructions followed to determine allowable personnel/contractual costs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are all line item computations correct?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do line items add to category totals?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Have category totals been rounded to nearest dollar?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Each category amount listed in the table below must equal category totals shown on Pages 3 through 11.

Person Completing Budget Section: Dana Guilbeau Title: Accountant
Phone: (225) 343-1984 Fax: (225) 343-1987 E-Mail: Dana@batonrougecac.org

PROJECT BUDGET SUMMARY

BUDGET CATEGORIES	FEDERAL FUNDS	CASH MATCH	IN-KIND MATCH	SECTION TOTAL
SECTION 100. PERSONNEL	\$15,792	\$3,949	\$0	\$19,741
SECTION 200. FRINGE BENEFITS	\$1,207	\$302	N/A	\$1,509
SECTION 300. TRAVEL	\$0	\$0	\$0	\$0
SECTION 400. EQUIPMENT	\$0	\$0	\$0	\$0
SECTION 500. SUPPLIES	\$0	\$0	\$0	\$0
SECTION 600. CONTRACTUAL	\$0	\$0	N/A	\$0
SECTION 700. RENOVATION COSTS	\$0	\$0	\$0	\$0
SECTION 800. OTHER DIRECT COSTS	\$0	\$0	\$0	\$0
TOTAL:	\$16,999	\$4,251	\$0	\$21,250

Provide Source of Cash Match: Unrestricted operating funds from fundraising activities.

Provide Source of In-Kind Match:

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Revised JULY 2010

SECTION 100. PERSONNEL

Enter Position Titles and Names of the employees for each position funded through this grant. For further information and direction, please refer to the application instructions.

FULL-TIME EMPLOYEES:

POSITION TITLE	EMPLOYEE NAME	FT	ACTUAL MONTHLY SALARY	TIME DEVOTED TO PROJECT	NUMBER OF MONTHS	TOTAL SALARY PAID BY GRANT	PAID WITH	
							F	C
Family Advocate	LaTonia Dunbar	FT	\$2,666.64	49.35%	12.00	\$15,791.84	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family Advocate	LaTonia Dunbar	FT	\$666.68	49.35%	12.00	\$3,948.07	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:						\$19,739.91		

F = Fed Funds
C = Cash Match

PART-TIME OR OVERTIME EMPLOYEES:

POSITION TITLE	EMPLOYEE NAME	FT/OT	ACTUAL EMPLOYEE HOURLY SALARY RATE	NUMBER OF HOURS	TIME DEVOTED TO PROJECT	NUMBER OF WEEKS	TOTAL SALARY PAID BY GRANT	PAID WITH	
								F	C
							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL AMOUNT OF PART-TIME AND/OR OVERTIME EMPLOYEES SALARIES:							\$0.00		

F = Fed Funds
C = Cash Match

VOLUNTEERS:

DUTIES: List ONLY volunteers used as In-Kind Match. Duties must directly relate to the focus of this project. For further information and direction, please refer to the application instructions.	NO. OF HOURS	VALUED RATE OF HOURLY PAY	IN-KIND TOTAL
			\$0.00
			\$0.00
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:			\$0.00

SECTION 100. PERSONNEL SUMMARY	
FEDERAL FUNDS	\$15,792
CASH MATCH	\$3,949
IN-KIND MATCH	
PERSONNEL TOTAL	\$19,741

SECTION 100. PERSONNEL (Continued) - BRIEFLY EXPLAIN

Yes No Are job descriptions for each position attached? If not, explain:

Yes No Are resumes for each position attached? If not, explain:

A) Need for each position shows above; justify need for overtime:

The Family Advocate (FA) is responsible for providing services to crime victims and their families. The Family Advocate collaborates with the Multidisciplinary Team, partners with organizations and agencies in an effort to provide services.

B) The basis for determining the salary of each position:

Salary range is based on salaries for similar positions in the region.

C) Project duties of each position requested:

- Serves as an advocate and liaison with the community
- Provide education, support and referral information to the Non-Offending Caregiver (NOC) at the time of the victim's forensic interview
- Identifies and initiates contact with the victim and/ or NOC following the forensic interview and throughout the legal process to provide ongoing support
- Develops and maintains collaborations with community agencies by providing up-to-date resources and referrals
- Develops and maintains educational/prevention curriculum for professionals, children and parents in the community
- Engages in community health fairs / promote awareness about child abuse
- Assists with providing services to, or identified crime victims to needed services
- Facilitates support group meeting for victims NOC
- Attends and participates in MDT staff meetings
- Maintains regular contact with the Executive Director, MDT and contract therapist regarding case status
- Provides safety planning to victims
- Maintenance of client files and data base

D) Indicate if personnel will be new or existing personnel. If existing, indicate if position has been backfilled. If this is a continuation application, indicate the personnel's original status. [Existing personnel is an employee that currently works for the agency, but will now be working on grant activities. If so, the position from which the employee was moved must be filled. If employee is same from the previous grant, indicate if the employee was originally hired for that position.]

LaTonia Dunbar, Family Advocate is an existing position

SECTION 200. FRINGE BENEFITS (Employer's Share Only)

Enter the individual Name(s) of the employees receiving fringe benefits for each position funded through this grant. There are two sets of each benefit below to allow budgeting for eight employees. For further information and direction, please refer to the application instructions.

Check: All Fringe Benefits Will Be Paid by Applicant Agency Additional Fringe Benefits Will Be Paid by Applicant Agency

EMPLOYEES' NAMES					EMPLOYEES' NAMES (Continued)					
SOCIAL SECURITY	RATE		SALARY	TOTAL	SOCIAL SECURITY	RATE		SALARY	TOTAL	
1. LaTonia Dumber	.062		\$19,740	\$1,223	5.	.062			\$0	
2.	.062			\$0	6.	.062			\$0	
3.	.062			\$0	7.	.062			\$0	
4.	.062			\$0	8.	.062			\$0	
MEDICARE	RATE		SALARY	TOTAL	MEDICARE	RATE		SALARY	TOTAL	
1. LaTonia Dumber	.0145		\$19,740	\$286	5.	.0145			\$0	
2.	.0145			\$0	6.	.0145			\$0	
3.	.0145			\$0	7.	.0145			\$0	
4.	.0145			\$0	8.	.0145			\$0	
HEALTH/LIFE INSURANCE	RATE	MONTHS	THE DEVOTED TO PROJECT	TOTAL	HEALTH/LIFE INSURANCE	RATE	MONTHS	THE DEVOTED TO PROJECT	TOTAL	
1.				\$0	5.				\$0	
2.				\$0	6.				\$0	
3.				\$0	7.				\$0	
4.				\$0	8.				\$0	
WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL	WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL	
1.				\$0	5.				\$0	
2.				\$0	6.				\$0	
3.				\$0	7.				\$0	
4.				\$0	8.				\$0	
UNEMPLOYMENT TAX	RATE	TYPE	SALARY	TOTAL	UNEMPLOYMENT TAX	RATE	TYPE	SALARY	TOTAL	
1.		CHECK TYPE		\$0	5.		CHECK TYPE		\$0	
2.				\$0	6.				\$0	
3.		<input type="checkbox"/> FLTA		\$0	7.		<input type="checkbox"/> FLTA		\$0	
4.		<input type="checkbox"/> SUTA		\$0	8.		<input type="checkbox"/> SUTA		\$0	
PUBLIC/PRIVATE RETIREMENT	RATE		SALARY	TOTAL	PUBLIC/PRIVATE RETIREMENT	RATE		SALARY	TOTAL	
1.				\$0	5.				\$0	
2.				\$0	6.				\$0	
3.				\$0	7.				\$0	
4.				\$0	8.				\$0	
OTHER:	RATE		SALARY	TOTAL	OTHER:	RATE		SALARY	TOTAL	
1.				\$0	5.				\$0	
2.				\$0	6.				\$0	
3.				\$0	7.				\$0	
4.				\$0	8.				\$0	
FRINGE BENEFITS TOTAL (A):				\$1,509	FRINGE BENEFITS TOTAL (B):				\$0	

PLEASE NOTE: IF MORE THAN EIGHT EMPLOYEES CHARGED TO THIS PROJECT, PLEASE COMPLETE AN ADDENDUM PAGE.

Fringe Benefits Total (A+B): \$1,509

SECTION 200. FRINGE BENEFITS SUMMARY	
FEDERAL FUNDS	\$1,207
CASH MATCH	\$302
TOTAL FRINGE BENEFITS	\$1,509

PROGRAM NARRATIVE

A. PROBLEM DEFINITION

1. Identify the nature and magnitude of the specific problem existing in your particular community that needs to be addressed through this proposed project. Document the need, not the symptoms or solutions. Be sure to include current valid local data to support the justification. Give the source and date of your information. State the needs of your agency and the needs of the victims in your area as related to this problem and justify the need for the proposed project.

In FY 05, East Baton Rouge Parish Office of Community Services validated 943 reports of child abuse and neglect, a 37% increase from the previous year. According to the National Children's Alliance, more than 800,000 cases of child abuse were confirmed in 2006 alone. With the number of child abuse cases on the rise each year, it is the mission of the BRCAC to improve the community's response to abuse, particularly in cases of child sexual abuse.

In cases of child sexual abuse, there are typically no witnesses and most often no medical evidence. This means that the child victim bears the burden of providing the facts necessary in a child protection or criminal case. In 95% of these cases, the offender is someone known and trusted by the victim, making the weight of this burden unimaginable. It is thus understandable that the Child Welfare League of America reports the following findings: 79% of sexual abuse victims initially deny the abuse or are tentative in disclosing. Of those victims who disclose, 75% only disclose accidentally. And following a disclosure, 22% of victims recant even when professionals have determined that the abuse indeed occurred. These statistics demonstrate the need for a focus on the investigative efforts in sexual abuse cases.

While the Baton Rouge community has a number of public and private agencies that work to prevent, investigate, prosecute, and treat cases of child abuse, there is a need for improved communication and coordination among these responding agencies. A fragmented system can cause abused children to be re-victimized with multiple interviews, insensitive treatment, and inadequate intervention. To prevent this re-victimization, children should have the benefit of professionals collaborating in a child-focused environment.

When individual cases of child abuse are not handled properly, it can have tragic effects on a community. In fact, the Coordinating Council on Juvenile Justice and Delinquency Prevention studied arrest records of groups with and without recorded maltreatment histories and found a 53% increase in juvenile delinquency in the group with previously documented abuse. Of Louisiana's incarcerated population, 80% of women and 65% of men were abused as children. It is even estimated that 65% of teenage mothers were sexually abused. With studies consistently showing that one in four girls and one in six boys will be sexually abused by their 18th birthday, a community must address how it responds to reports of this type of abuse.

2. Describe gap in community resources and how the gap was identified. Explain what need is created by this gap in services/programs.

The Children's Advocacy Center is mandated by state law, however, the law did not provide funding to pay for this mandate. There are no other organizations filling this need in Baton Rouge.

B. GOALS

GOALS: The primary mission of all projects is to have a positive impact on the victims, not just to accumulate statistics on how many are served. Based on the problem identified, BRIEFLY state what the project hopes to accomplish. Do this by providing a clear statement of the effect this project will have on the problem.

Goal 1: Lessen the trauma experienced by children when abuse allegations are investigated.

Goal 2: Help child victims and non-offending family members begin to heal while preventing further victimization.

Goal 3: Increase the awareness of child abuse and its prevention

Based on the prevalence of child sexual and physical abuse, BRCAC is working towards educating Non-offending caregivers, child victims and the community at large on ways to prevent further victimization. The goal is to increase knowledge and reduce recidivism and abuse before it begins.

C. OBJECTIVES

OBJECTIVES: Provide at least TWO (2) measurable objectives for EACH goal. Objectives need to be measurable, observable aspects of the program. Identify who, what will change and by how much. Use absolute numbers, not percentages and be sure to include a baseline number.

Goal 1: Lessen the trauma experienced by children when abuse allegations are investigated.

Objective 1: Provide a child-friendly environment for the forensic interviews of 270 children.

Objective 2: Coordinate the investigative efforts of local law enforcement and child protection investigators in 270 cases.

Baseline for G1, O1 - The baseline total is 227

Baseline for G2, O2 - the baseline total is 227

Goal 2: Help child victims and non-offending family members begin to heal while preventing further victimization.

Objective 1: Serve as a resource for education and referral for 270 children and their families.

Objective 2: Provide counseling services to 65 child victims.

Baseline for G2, O1 - The baseline total is 226

Baseline for G2, O2 - The baseline total is 40

Goal 3: Increase the awareness of child abuse and its prevention

Objective 1: Provide a minimum of six (10) community awareness events related to child abuse prevention.

Objective 2: Promote public awareness of the program through the use of at least two (5) media outlets.

Objective 3: Identify at least 5 victims through public awareness

Baseline total for G3, O1 - The baseline total is 7

Baseline total for G3, O2 - The baseline total is 4; Advocate newspaper, Local news stations, Facebook, Community Magazines

Baseline total for G3, O3 - The baseline total is 4

D. ACTIVITIES / METHODS

List the specific activities and/or services to be provided that will accomplish the objectives. Must include a timetable for achieving the various components of your project. Timetable must cover entire grant period. This must relate back to the Goals and Objectives. If this is a training project, omit this page and complete D-2 Training Programs.

Goal 1

Objective 1

Activities and Services

Provide child-friendly, age appropriate rooms in which Forensic Interviews will be conducted.

Provide an overall environment at the CAC that is appealing to children.

Goal 1

Objective 2

Activities and Services

Maintain an active Multidisciplinary Team as a source of collaboration which is inclusive of law enforcement and child protective workers

Goal 2

Objective 1

Activities and Services

Provide education, support and referral information to victims and their families.

Goal 2

Objective 2

Activities and Services

Ensure that space, time and a licensed clinician is present to provide individual therapy.

Ensure that a licensed clinician is available to provide supervision for additional therapist, counselors or social service interns.

Goal 3

Objective 1

Activities and Services

Participate in community health fairs, maintain a relationship with other service-related organizations to schedule presentations on child abuse and its prevention.

Goal 3

Objective 2

Activities and Services

Maintain use of the agency's website, as well as an active social networking site; local newspaper coverage.

Goal 3

Objective 3

Activities and Services

Identify at least 3 crime victims by means of providing education and prevention information. Once these victims are identified, BRCAC will provide them with needed services or referrals to other service providers.

BRCAC currently engages in all of the above mentioned activities and services. BRCAC will continue to engage in each activity and service during the duration of this grant 03/01/2011 through 02/28/2012.

E. DEMOGRAPHICS

1. This project serves the following Congressional District(s)

- 1 2 3 4 5 6 7 All (Statewide Project)

2. Type of Organizations:

Applicant Agency: Law Enforcement Prosecution Court Non-Profit Organization Tribal Government

Check the one answer that best describes the organization receiving VOCA Formula Grant Program funds.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Community-Based Organization | <input type="checkbox"/> Prosecution |
| <input type="checkbox"/> Court | <input type="checkbox"/> Sexual Assault Program |
| <input type="checkbox"/> Domestic Violence Program | <input type="checkbox"/> Sexual Assault State Coalition |
| <input type="checkbox"/> Domestic Violence State Coalition | <input type="checkbox"/> Tribal Coalition |
| <input type="checkbox"/> Dual Program (Sexual Assault and Domestic Violence) | <input type="checkbox"/> Tribal Government |
| <input type="checkbox"/> Dual State Coalition (Sexual Assault and Domestic Violence) | <input type="checkbox"/> Tribal Sexual Assault and/or Domestic Violence Program |
| <input type="checkbox"/> Government Agency (Department of Human Services, Bureau of Health) | <input type="checkbox"/> Unit of Local Government |
| <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> University/School |
| <input type="checkbox"/> Probation, Parole, or Other Correctional Agency | <input type="checkbox"/> Other (Specify): |

Yes No Is this a faith-based organization?

Yes No Is this a culturally specific community-based organization?

F. LOUISIANA AUTOMATED VICTIM NOTIFICATION SYSTEM (LAVNS)

1. Name of the individual responsible for assisting victims in regard to accessing and using the LAVNS system:

NAME: LaTonia Dunbar PHONE: (225) 343-1984 EMAIL: latonia@batonrougecac.org

Yes No 2. Does this individual also serve as agency's point of contact for LAVNS? If not, please provide name and contact information:

NAME: PHONE: () - EMAIL:

Yes No 3. Has this individual attended trainings provided by LCLE to learn how victims are served by LAVNS? If no, agency will request LAVNS training from LCLE within 30 days of award. NOTE: More information regarding the LAVNS program, including training information, can be found at: <http://lcle.la.gov/programs/lavns.asp>.

Yes No 4. Does the agency have posters displayed for promoting LAVNS and brochures readily available to victims? If no, please go to the LCLE website to request free LAVNS materials at: www.lcle.la.gov/lavns.

G. CRIME VICTIMS REPARATIONS (CVR)

Yes No 1. Is same individual responsible for assisting victims in regard to services available through the CVR program? If not, please provide name and contact information:

NAME: LaTonia Dunbar PHONE: (225) 343-1984 EMAIL: Latonia@batonrougecac.org

Yes No 2. Does the agency know who the Crime Victims Reparations (CVR) Claims Investigator is at the Parish Sheriff's Office?

Yes No 3. Does the agency have posters displayed for promoting CVR and brochures readily available to victims? If no, please fax a written request (contact person, agency name, mailing address) for free CVR posters and brochures to 225-925-6159. NOTE: More information regarding the CVR program, including applications and other forms, can be found at: <http://lcle.la.gov/programs/cvr.asp>.

H. PRIOR RESULTS (For Continuation Projects Only)

1. Based on the objectives of the previous application, what were the measurable outcomes? (Refer to the previous project's performance stated in the quarterly progress reports and other additional information.)

Between January, 2010 and December, 2010, BRCAC conducted Forensic Interviews (FI) for 184 victims of child sexual and physical abuse in a child-friendly environment. Please note, the number of interviews increased from the previous year. Overall, by providing education, support and referral information to child victims and NOC's following the initial FI, BRCAC has been able to educate an increased number of families on how to protect their children from further victimization.

Participation in community health fairs has also been a successful avenue for providing education, referral and prevention information to crime victims.

2. Did the project work as expected? Explain.

The project did work as expected. BRCAC successfully offered services that lessened the trauma experienced by child victims and their NOC's by providing them with an environment that was conducive to servicing children and their families. Our efforts also lessened the trauma to child victims and their family's by working as a liaison with investigators and child protection workers who actively used the CAC to conduct their Forensic Interviews.

We continue to engage with the community in education and prevention efforts, and have been successful, as evidenced by continuing to receive invitations for community engagements.

3. Have the original goals and objectives been revised? Yes No

If Yes, explain what changes will be made in the continuation of this project and why?

As a result of having met the goals and objectives in the previous grant, the number/total for each measurable objective will be increased for this continuation grant.

I. EVALUATION AND DISSEMINATION OF RESULTS

A COPY OF YOUR EVALUATION FORMS USED FOR THIS PROJECT MUST BE INCLUDED.

1. From who will the data be collected – what is the source?

Crime victims and their non-offending caregiver.

2. When will the data be collected?

At the time of the forensic interviews

3. Who will collect and analyze the data?

LaTonia Dunbar

4. Who will be responsible for submitting the data for the Quarterly Progress Reports: State name and contact information.

Name: LaTonia Dunbar

Phone: (225) 343-1984

Email: latonia@batonrougecac.org

5. Following evaluation, who and how will updating or revising of the project's strategy be accomplished?

The Board of Directors oversees the Executive Director and sets goals for the director and the program at the annual meeting.

6. Name the recipients who will receive the project's results and the schedule of reporting (i.e. monthly, quarterly, yearly). Recipients MUST state the Louisiana Commission on Law Enforcement will receive Quarterly Progress Reports and expenditure reports quarterly/monthly as specified at award time. Recipients should also include, if applicable, board of directors, applicant agency (if different from implementing agency), courts with jurisdiction, etc.

Board of Directors and Louisiana Commission on Law Enforcement will receive reports quarterly. *Progress reports and expenditure reports will be submitted to LCLE.*

J. CONTINUATION

Yes No Do you plan to continue this project at the conclusion of federal support?
Since continued VOCA funding is limited and not assured, alternate funding sources should be sought. Name the sources and potential sources of continued funding for this project at the conclusion of Federal support.

Have several successful fund raising activities and other governmental and foundation grants.

K. RESOURCES

Describe the facilities and additional resources available to this project. Include the physical facility where services are provided. If applicable, list other resources available to this project, i.e. equipment, supplies, staff, etc.

Building at 626 E. Blvd. is approximately 3,756 square feet of useable program space.

Forensic Interviews are conducted in a child-friendly setting. There are two interview rooms. One interview room consists of a table and chairs that are scaled in size for small children, the second room consists of a table and chairs that are scaled for larger children.

Monitoring equipment is also used during the forensic interview process, along with ear pieces. In a separate room, additional staff from law enforcement and child protection are able to monitor the interview and communicate as needed with the forensic interviewer with use of an earpiece.

L. AUDIT REQUIREMENTS

All applications must check one:

This organization/agency expends \$500,000 or more in federal funds (during the fiscal year of the organization/agency from any and all sources including the amount of this application) AND MUST SUBMIT THE FOLLOWING INFORMATION:

1. Date of last audit:
2. Dates covered by last audit:
3. Date of next audit:
4. Dates to be covered by next audit:
5. Date next audit will be forwarded to LCLE:

This organization/agency expends less than \$500,000 in federal funds from all sources during the fiscal year of the organization/agency.

M. VOLUNTEERS

Yes No Are you using volunteers as staff?
If yes, describe the duties and functions performed by the volunteers. Indicate the number of volunteer hours per duty-function for this application (this can be an estimate). Volunteers' duties must directly relate to the focus of this project and information stated in Section 100 Personnel.

Yes No Are volunteers screened in compliance with the Louisiana Child Protection Act (LRS 15:587.1) as appropriate?

Intern student from Southern University and LSU, who serve as volunteers are screened appropriately.

Individuals who serve as volunteers for BRCAC fund raising events are not screened in compliance with the La. Protection Act, as they do not come in contact with clients or any confidential information.

N. REQUIRED COMPONENTS

1. Subgrantees are required to help victims apply for victim compensation. Describe a specific plan on how applicant has or will interface with the Louisiana Crime Victims Reparations Program.

Non-offending caregivers are given a packet of information pertaining to child sexual and physical abuse prevention. In this packet is the brochure for Crime Victim's Reparations Program. It is explained to each caregiver, how to access any needed services from CVR.

2. Describe how applicant has/will coordinate activities with other criminal justice system/private service providers in the community. If you have obtained cooperative agreements, a copy may be attached to the application in addition to the brief description.

We cooperate with area Sheriff's Offices and City Police and in accordance with our memorandum of understanding, along with several other social service agencies (see attached).

3. Indicate how the applicant will address the issue of encouraging the victims to report to law enforcement. Policies and procedures may be attached to the application in addition to the brief description.

Clients come to BRCAC directly from law enforcement and child protective service agencies as a source of referrals.

4. State that the applicant will comply with the Louisiana Child Protection Act (LRS 15:587.1) as appropriate. The Louisiana Child Protection Act refers to screening prospective employees, NOT reporting instances of child abuse.

The organization will comply with Louisiana Child Protection Act.