



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:

CVA Purpose Area:

1. TITLE OF PROJECT

Domestic Violence Advocacy

2.  NEW PROJECT

CONTINUATION PROJECT OF: C11-1-012

3. PROJECT DURATION

Total Length: 12 Months (Not to exceed 12 Months)

Desired Start Date: 1/1/2013

Desired End Date: 12/31/2013

4. PROJECT FUNDS

Federal Funds: \$44,549

Cash Match: \$11,137

In-Kind Match: \$0

Total Project: \$55,686

5A. APPLICANT AGENCY INFORMATION

Agency Name: Providence House

Physical Address: 814 Cotton St.

City: Shreveport

Zip: 71101-3404

Mailing Address: 814 Cotton St.

City: Shreveport

Zip: 71101-3404

Phone: (318) 221-7887

FAX: (318) 221-7976

Email: information@theprovidencehouse.com

5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY

Authorized Official: Simone Hennessee

Title: Executive Director

Agency Name: Providence House

Address: 814 Cotton St.

City: Shreveport

Zip: 71101-3404

Phone: (318) 221-7976

FAX: (318) 221-7976

Email: simone@theprovidencehouse.com

Fed Employer Tax Id: 72 - 1205164

DUNS: 883592149 -

CCR CAGE/NCAGE: 4S3Q4

CCR Expiration Date:

6. IMPLEMENTING AGENCY

Name: Simone Hennessee

Title: Executive Director

Agency: Providence House

Address: 814 Cotton St.

City: Shreveport

Zip: 71101-3404

Phone: (318) 221-7887

FAX: (318) 221-7976

Email: simone@theprovidencehouse.com

7. PROJECT DIRECTOR

Name: Simone Hennessee

Title: Executive Director

Agency: Providence House

Address: 814 Cotton St.

City: Shreveport

Zip: 71101-3404

Phone: (318) 221-7887

FAX: (318) 221-7976

Email: simone@theprovidencehouse.com

8. FINANCIAL OFFICER

Name: Hershey Krippendorf

Title: Director of Accounting

Agency: Providence House

Address: 814 Cotton St.

City: Shreveport

Zip: 71101-3404

Phone: (318) 221-7887

FAX: (318) 221-7976

Email: hershey@theprovidencehouse.com

9. BRIEF PROJECT DESCRIPTION: (Please do not exceed space provided below.)

Providence House provides crisis intervention, emergency shelter, counseling, case management, safety planning, support groups, referrals for other benefits and assistance, healthcare support, and legal advocacy including Temporary Protective Orders to victims of domestic violence in Northwest Louisiana. In addition to these direct services, Providence House also provides outreach to rural and high risk communities as well as prevention education and first responder training in all communities served.

The primary goal of this request is to continue funding two full-time staff advocate positions. These positions provide the critical ongoing support and promote healing to approximately 450 victims of domestic violence. The domestic violence advocacy services are essential to victims, allowing them the opportunity to regain control, make informed decisions and access available community resources. The ultimate goal is to allow victims to feel safe enough to address change in their lives and remain free from violent relationships permanently. Providence House endorses the widespread belief that reducing violence in families reduces violence in the community and promotes safer and more secure areas for individuals to live and work.

2012 SEP 24 PM 2:32

LA COMMISSION  
LAW ENFORCEMENT

CVA - 1

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
Domestic Violence Advocate	Eliza Demery	FT	\$1,805.75	100.00%	12.00	\$21,669.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Domestic Violence Advocate	Wilma Brown	FT	\$1,733.34	100.00%	12.00	\$20,800.08	<input checked="" 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"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:						\$42,469.08	F = Fed Funds C = Cash Match	

**PART-TIME OR OVERTIME EMPLOYEES:**

POSITION TITLE	EMPLOYEE NAME	PT 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
n/a							\$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
n/a			\$0.00
n/a			\$0.00
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:			\$0.00

SECTION 100. PERSONNEL SUMMARY	
FEDERAL FUNDS	\$42,469
CASH MATCH	\$0
IN-KIND MATCH	
<b>PERSONNEL TOTAL</b>	<b>\$42,469</b>

**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 shown above; justify need for overtime:

Providence House serves over 450 domestic violence victims, including their children, each year in the SAFE House. Advocates fill a vital role in the program's success and in creating a safe and comfortable environment for the survivors. It is critical that the victims as well as their children have the services in place to help support them in their time of crisis and have access to services on a 24 hour basis. The Advocates provide a wide array of supportive services including, but not limited to: 24 -hour crisis response, intervention, counseling, case management, assistance with legal matters, and the development of safety plans. No overtime is anticipated.

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

Salaries were based on comparable positions at local non-profit agencies and by using the Louisiana Association of Non Profit Salary Comparisons.

C) Project duties of each position requested:

Advocates: Direct services to domestic violence victims, including but not limited to: answer telephone crisis line, assess the victim's situation while providing intervention and de-escalation, safety planning and develop service plan and/or referral(s), helping to meet the individual's/family's immediate (shelter, basic needs, transportation, etc.) and long-term needs; assist victim/family in identifying resources and assure all needed services provided are effective in meeting the victim's and/or family's goals; assist clients in preparing documentation and successfully navigating the judicial system including filing injunctions, requests for Legal Aid representation and court testimony; mediate and facilitate communication between client and other agencies/providers, assuring referrals given are appropriate and are accessed by the client; develop and review written safety plans for victims and family members to assure their own safety; educate client about pending legal procedures and possible court-related situations while helping to prepare them to support law enforcement in prosecution of their case; accompany victim as needed or requested to any judicial hearings, trials and court related procedures by Law Enforcement; provide community education to individuals or groups about victims' rights, available services, safety and prevention efforts, and other family violence subjects.

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.]

All personnel is existing as this is a continuation grant.

**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.	.062			\$0	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.	.0145			\$0	5.	.0145			\$0
2.	.0145			\$0	6.	.0145			\$0
3.	.0145			\$0	7.	.0145			\$0
4.	.0145			\$0	8.	.0145			\$0
HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL	HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME 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 Based on first \$7,000 or Less	RATE	TYPE	SALARY	TOTAL	UNEMPLOYMENT TAX Based on first \$7,000 or Less	RATE	TYPE	SALARY	TOTAL
1.		CHECK TYPE:		\$0	5.		CHECK TYPE:		\$0
2.				\$0	6.				\$0
3.		<input type="checkbox"/> FUTA		\$0	7.		<input type="checkbox"/> FUTA		\$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):				\$0	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): \$0**

SECTION 200. FRINGE BENEFITS SUMMARY	
FEDERAL FUNDS	
CASH MATCH	
<b>TOTAL FRINGE BENEFITS</b>	<b>\$0</b>

**SECTION 300. TRAVEL**

Itemize travel expenses of project personnel. Mileage is unallowable in agency owned vehicles. Charges are not to exceed established agency travel rates, but in no case can this exceed current Louisiana Travel Guideline rates. *Only 50% of out-of-state travel reimbursement and requires prior approval from LCLE.*

LOCAL TRAVEL: NAME/POSITION TITLE/PURPOSE OF TRAVEL	MILEAGE RATE	TOTAL MILES	TOTAL COST	PAID WITH		
				F	C	IK
NAME: n/a TITLE: PURPOSE:	\$0.00		\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: TITLE: PURPOSE:			\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: TITLE: PURPOSE:			\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: TITLE: PURPOSE:			\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL FOR LOCAL TRAVEL:			\$0.00	F = Federal Funds C = Cash Match IK = In-Kind Match		

NON-LOCAL IN-STATE/OUT-OF-STATE TRAVEL (OUT-OF-STATE TRAVEL REQUIRES PRIOR APPROVAL FROM LCLE) NAME/POSITION TITLE/PURPOSE OF TRAVEL	TRAVEL DESTINATION	TRAVEL DATES:		PAID WITH		
		FROM	TO	F	C	IK
NAME: n/a TITLE: PURPOSE:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: TITLE: PURPOSE:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: TITLE: PURPOSE:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CONTINUED FROM ABOVE TABLE	MILEAGE RATE	TOTAL MILES	MILES COST	NO. OF DAYS	NO. OF MEALS	MEAL COSTS	AIRFARE COSTS	LODGING COSTS (Include Tax)	OTHER TRAVEL COSTS	TOTAL COSTS	PAID WITH		
											F	C	IK
NAME: n/a			\$0.00							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME:			\$0.00							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME:			\$0.00							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL FOR NON LOCAL IN-STATE AND OUT-OF-STATE TRAVEL COST:										\$0.00	F = Federal Funds C = Cash Match IK = In-Kind Match		

SECTION 300. TRAVEL SUMMARY	
FEDERAL FUNDS	
CASH MATCH	
IN-KIND MATCH	
TRAVEL TOTAL	<b>\$0</b>



**SECTION 400. COMPUTER QUESTIONNAIRE**

If a computer and/or computer software is requested, the following must be completed. Please do not exceed spaces provided.

1. How will the purchase of computer equipment and/or software enhance the program to be funded?

n/a

2. How will the computer(s) be integrated into and/or enhance your current system?

n/a

3. What is the cost of each of the following:

A. Installation?

n/a

B. Staff training to use the computer equipment?

n/a

C. The on-going operational costs, such as maintenance agreements, supplies, etc.?

n/a

4. How will additional costs be supported?

n/a





**SECTION 600. CONTRACTUAL**

Compensation for individual consultant services is to be reasonable and consistent with that paid for similar services in the marketplace. Travel, lodging, and meals, if applicable, should be figured in addition to compensation. All expenses must be included in the contract. Must use approved LCLE contract.

INDIVIDUAL CONSULTANT	TYPE OF SERVICE OR TASK	HOURS DEVOTED	RATE PER HOUR	TOTAL COST	PAID WITH	
					F	C
Name: n/a Title: Agency:				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Name: Title: Agency:				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Name: Title: Agency:				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Name: Title: Agency:				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL OF CONTRACTUAL COSTS				\$0.00	F = Federal Funds C = Cash Match	

CONTINUED FROM ABOVE TABLE	MILEAGE RATE	TOTAL MILES	MILES COST	NO. OF DAYS	NO. OF MEALS	MEAL COSTS	AIRFARE COSTS	LODGING COSTS (Include Tax)	OTHER TRAVEL COSTS	TOTAL COSTS	PAID WITH	
											F	C
NAME: n/a			\$0.00							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
NAME:			\$0.00							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
NAME:			\$0.00							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL FOR NON LOCAL IN-STATE AND OUT-OF-STATE TRAVEL COST:										\$0.00	F = Federal Funds C = Cash Match	

**BRIEFLY EXPLAIN:**

A) Purpose of each consultant or other contractual service requested:

n/a

B) Why the service requested is necessary and cost effective:

n/a

C) Method of procurement and basis for determining rate of pay:

n/a

SECTION 600. CONTRACTUAL SUMMARY	
FEDERAL FUNDS	
CASH MATCH	
<b>CONTRACTUAL TOTAL</b>	<b>\$0</b>

**SECTION 700. RENOVATION**

**Note:** Do not budget this category unless LCLE gives prior approval for proposed renovations – even if funded as In-Kind Match.

Is your building registered or does your building qualify with the National Historic Society?     YES     NO

If yes, you must meet the requirements set forth by Section 106 of the National Historic Preservation Act (16. U.S.C. Section 470, et. seq., as amended). List planned renovations and itemized costs explain the need for each.

PRE-APPROVED RENOVATIONS	TOTAL COST	PAID WITH		
		F	C	IK
n/a		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n/a		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n/a		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n/a		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL OF RENOVATION COSTS:		\$0		<small>F = Federal Funds C = Cash Match IK = In-Kind Match</small>

SECTION 700. RENOVATION COSTS SUMMARY	
FEDERAL FUNDS	
CASH MATCH	
IN-KIND MATCH	
<b>RENOVATION COSTS TOTAL</b>	<b>\$0</b>

**SECTION 800. OTHER DIRECT COSTS**

Itemize each type: e.g., audit, rent (show square footage and cost per square foot), phone charges, utilities, printing, duplicating, registration fees for conferences/workshops, etc. Prorate telephone and utility bills. Show method of determining cost. Please refer to application instructions for direction.

TYPE OF OTHER DIRECT COST	METHOD OF DETERMINING COST	QUANTITY	UNIT PRICE	TOTAL COST	PAID WITH		
					F	C	IK
Utilities at SAFE House	based on annual costs	1.00	\$6,962.00	\$6,962.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liability insurance	half of annual premium	1.00	\$4,175.00	\$4,175.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL OF OTHER DIRECT COSTS:				\$11,137.00	F = Federal Funds C = Cash Match IK = In-Kind Match		

**BRIEFLY EXPLAIN:**

A) Need for each type listed; and

Utilities at the SAFE House include telephones, electricity, water, and internet. These are a vital to daily operations.

B) Its relationship to project.

n/a

SECTION 800. OTHER DIRECT COSTS SUMMARY	
FEDERAL FUNDS	
CASH MATCH	\$11,137
IN-KIND MATCH	
<b>OTHER DIRECT COSTS TOTAL</b>	<b>\$11,137</b>

## 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.

Domestic Violence is not a new problem in Northwest Louisiana, and far too many situations have resulted in the loss of lives for women in our community. According to 2009 data collected by the Violence Policy Center, Louisiana ranked 3rd in the nation for females murdered by males, of which 98% were killed by someone they knew. For the last two years, Caddo Parish has had the most domestic violence related homicides in the entire state. The most recent state-wide statistics from the National Coalition Against Domestic Violence indicate that one in three women report being physically or sexually abused each year. Law enforcement reported in 2006, 8,686 women and 4,607 children received domestic violence services. (retrieved from [www.ncadv.org](http://www.ncadv.org)). The Surgeon General of the United States reported violence as the number one public health risk to women between the ages of 15 and 44 in this country, exceeding auto accidents, muggings, and cancer-related deaths. According to a Family Violence Prevention Fund report on housing and domestic violence, domestic violence is the major cause of family homelessness in this country. In 2006, law enforcement reported 8,686 women and 4,607 children in Louisiana received domestic violence services, while the Louisiana Protective Order Registry entered 21,355 orders in 2011, with 1,912 being issued in the four parishes (Caddo, Bossier, Red River and Webster) served by the Providence House Domestic Violence program.

In the last two years, Providence House has averaged nearly 700 calls for shelter annually and served over 250 women with children and 200 single women. Nearly 500 children have received shelter with their parent in those 2 years as well. Unfortunately, our current statistics show these trends have remained the same for 2012. Domestic Violence is a complex and multi-faceted issue, and for many victims an array of circumstances must be addressed in order for them to feel strong and secure enough to make the changes necessary to remain free from this violence. Many perpetrators have isolated the innocent victims from their families and the outside world, leaving them to feel they have no safe place to turn to seek refuge or help. The intimidation or threats they experience from their abuser often result in fear to seek medical attention or help from law enforcement. When victims finally decide to reach out for help, it is of utmost importance they are treated with compassion, understanding, and empathy. It is also crucial that they have access to the comprehensive support services that our advocacy program provides as a simple intervening of law enforcement is not enough to address to the host of emotional problems and financial barriers that most battered women face as a result of this abuse. These very issues, if left unaddressed, often times lead the victims back to the abusive situation as they do not have the financial resources and emotional strength to create a life for themselves independent of their perpetrator. Victim advocates are critical in that they provide guidance and counseling as well as connection to the necessary resources and services.

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

Providence House has a long history of serving domestic violence families; however, during 2008, as the YWCA began limiting their services, we experienced a dramatic increase in the need for services and shelter. This dramatic increase in demand for domestic violence services resulted in an equally dramatic increase in the number of other homeless families we were forced to turn away. In February 2009, Providence House initiated a new formalized program, without secure funding, and officially opened an emergency domestic violence SAFE HOUSE on February 11, 2009. Shortly thereafter, the YWCA completely stopped services for domestic violence victims leaving Providence House as the only organization filling this critical need in several of the northwest Louisiana parishes.

It is crucial that victims, as well as their children, have the services in place to help support them in their time of crisis. By providing this option for safe shelter to residents of our community, we are literally saving lives. With Caddo Parish having the highest rates of domestic violence homicides in the state for the last two years, there is no question about the grave need for this service in our community.

## **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: To provide an immediate response to a threat by providing a safe and secure shelter.

Goal #2: To provide supportive services for all victims of domestic violence which will allow healing to each victim and empower them to remain free from violence permanently.

## **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: To provide an immediate response to a threat by providing a safe and secure shelter

Objective #1: Execute an ongoing Victim Awareness/Outreach plan to ensure the community is aware of the services provided. (Ongoing from 1/1/13-12/31/13; Teen Dating Violence Awareness month (2/1/13-2/28/13) DV Awareness month activities = 10/1/12-10/31/13)

Objective #2: Provide immediate response to a minimum of 500 victims who call the crisis phone line. (Ongoing from 1/1/13-12/31/13)

Objective #3: Provide a minimum of 10,000 nights of shelter to victims and their families. (Ongoing from 1/1/13- 12/31/13)

Goal #2: To provide supportive services for all victims of domestic violence which will allow healing to each victim and empower them to remain free from violence permanently.

Objective # 1: Maintain training of staff advocates with required annual 40 hours of training  
(Attend at least 1 training event per quarter: 1/1/13-3/30/13;4/1/13-6/30/13; 7/1/13-9/30/13; 10/1/13-12/31/13)

Objective # 2: Provide advocacy services to a minimum of 100 victims seeking refuge at the SAFE House. (Ongoing from 1/1/13-12/31/13)

Objective # 3: Provide counseling to a minimum of 100 victims seeking the Domestic Violence services. (Ongoing from 7/1/12-6/30/13)

## **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:** To provide an immediate response to a threat by providing a safe and secure shelter

**Objective #1:** Execute an ongoing Victim Awareness/Outreach plan to ensure the community is aware of the services provided. (Ongoing from 1/1/13-12/31/13; Teen Dating Violence Awareness month (2/1/13-2/28/13) DV Awareness month activities = 10/1/12-10/31/13)

Activity 1.1: Provide information on services for victims in 12 community settings.

Activity 1.2: Use of billboards, college newspapers, flyers and the local media to inform victims of services available.

Activity 1.3: Outreach Coordinator will speak at health fairs, colleges, middle and high schools, conferences to educate community, including victims, of the services available at Providence House

Activity 1.4: Volunteer community members distribute informational materials in various community venues and events

Activity 1.5: Outreach coordinator, Program Manager, and Director of Public Relations will conduct roundtables and trainings for first responders and healthcare professionals and medical school students

**Objective #2:** Provide immediate response to a minimum of 500 victims who call the crisis phone line. (Ongoing from 1/1/13-12/31/13)

Activity 2.1: Provide victims information on SAFE House services.

Activity 2.2: Provide referrals to appropriate agencies.

Activity 2.3: Offer SAFE House shelter and/or hotel vouchers to 100% of those needing emergency services (i.e. men and other victims who are unable to access the shelter immediately)

**Objective #3:** Provide a minimum of 1,000 nights of shelter to victims and their families. (Ongoing from 1/1/13- 12/31/13)

Activity 3.1: Offer safe and secure shelter to a maximum of 100 individuals (adults and children) at one time, 365 days of year.

Activity 3.2: Provide safe and secure shelter to all victims for a maximum of 45 days.

**Goal #2:** To provide supportive services for all victims of domestic violence which will allow healing to each victim and empower them to remain free from violence permanently.

**Objective # 1:** Maintain training of staff advocates with required annual 40 hours of training

(Attend at least 1 training event per quarter: 1/1/13-3/30/13;4/1/13-6/30/13; 7/1/13-9/30/13; 10/1/13-12/31/13)

Activity 1.1: At minimum, 6 staff members will participate in LCADV meetings, trainings, seminars, and annual conferences to increase knowledge and build relationships with other domestic violence shelter staff.

**Objective # 2:** Provide advocacy services to a minimum of 100 victims seeking refuge at the SAFE House. (Ongoing from 1/1/13-12/31/13)

Activity 2.1: Serve a minimum of 375 walk-in clients, including adults and children, and provide information and/or referrals to appropriate agencies.

Activity 2.2: Develop a detailed safety plan for a minimum of 200 victims.

Activity 2.3: When requested, Providence House staff will meet with 100% of the victims to draft individual and family protective orders. Providence House staff will also follow up with individuals after their protective order is put into place.

Activity 2.4: Continue the partnership with Shreveport Bar Foundation to allow victims pro bono legal representation

Activity 2.5: Provide transportation to 100% of all those who request it to attend court proceedings and/or hearings.

**Objective # 3:** Provide counseling to a minimum of 100 victims seeking the Domestic Violence services. (Ongoing from 7/1/12-6/30/13)

Activity 3.1: Provide daily peer support sessions to a minimum of 100 adults in the SAFE House shelter

Activity 3.2: Providence House will offer counseling to 100% of victims in efforts to address any identified or unidentified individual emotional needs and/or those of the family, as a result of the violence.

Activity 3.3: Provide continuity of care to 100% of those who request ongoing counseling (adults and children).

Activity 3.4: Continue the partnership with Center for Families to provide additional and follow-up counseling as well as family conflict resolution to victims and their families.

**D-2. TRAINING PROJECTS**

**Complete this page in lieu of Section D – Activities/Methods. This page is to be completed only if this application is for the training of individuals involved in the criminal justice system. DO NOT use this for in-house training.**

1. Training Curriculum (topics to be included):

n/a

2. Type of personnel to be trained:

n/a

3. Number of personnel to be trained: n/a

4. Geographical locations of trainees (who will be invited):

n/a

5. Dates and hours of training: n/a

6. Location of training: n/a

7. Explanation supporting the effectiveness of the training program including how the program will meet the identified need.

n/a



## **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.)

For the two quarters that have been completed in the grant period, the Providence House's Domestic Violence Advocacy program served an unduplicated 189 victims of domestic violence. Based on this trend, we are on track to meeting our objective of serving 350 victims in the SAFE House.

The services these victims received include, but are not limited to, shelter, crisis counseling, therapy, group treatment and support, personal advocacy, criminal justice support and advocacy, information and referrals, and emergency assistance. In the first two reporting quarters of the grant period, 176 victims have received individual counseling and an additional 145 victims received crisis line counseling. 133 Temporary Restraining Orders were filed by victims with the assistance of our legal advocate. The staff and advocates attended 21 training sessions as part of the program professional development objective.

2. Did the project work as expected? Explain.

Yes. All objectives were met in that the program provided the comprehensive advocate services to an increased number (505 in grant period) of victims including shelter, counseling, legal advocacy, referral to community resources, as well as non-direct services of community education and trainings.

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?

Some numbers have been adjusted after further evaluation of client needs. Additional goals and objectives have been added as they further capture our program's scope of services.

## I. EVALUATION AND DISSEMINATION OF REPORTING

### **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?

Providence House tracks client statistical information and ultimately, produces an Annual Program Report to the community. Additionally, as it relates to the other goals, the Domestic Violence Program Manager tracks the trainings, the counseling sessions, and the education outreach efforts.

2. When will the data be collected?

Providence House tracks client statistical information on a daily, weekly and monthly basis to compile in the Annual Program Report at the end of each fiscal year.

3. Who will collect and analyze the data?

Domestic Violence Program Manager oversees the collection of the data; The Director of Operations analyzes and submits the data to Louisiana Commission on Law Enforcement.

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

Name: Hershey Krippendorf

Phone: (318) 221-7887

Email: [hershey@theprovidencehouse.com](mailto:hershey@theprovidencehouse.com)

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

All Providence House programs receive an in-depth evaluation, conducted annually, to allow the programs to continue to be responsive to the needs of the immediate population served, as well as continue to evolve. This evaluation is conducted by the Program Review and Development Committee, comprised of staff, Board members and community representatives. All reports and recommendations are reported to the Board of Directors. The Executive Director implements new policies and procedures upon direction from the Board of Directors.

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.

Providence House prepares and presents monthly statistical data and annual reports to the staff, Board of Directors and the public. Providence House will disseminate quarterly reports and quarterly expenditure reports to the Louisiana Commission on Law Enforcement.

## 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.

Each year, Providence House engages in a strategic plan to obtain funding from a variety of sources including public and private dollars, from individuals, foundations and organizations. Funding concerns will always challenge non-profits. There are no easy answers, but we do have a proven track record of success (20 years). Providence House utilizes a variety of approaches to obtain funding that have proven successful. The most significant are: raising funds from private sources, grant writing, generating significant in-kind services and building strategic alliances, implementation of an ongoing gift program, and our endowment gift program. Annually, approximately 65% of Providence House's total budget is met with individual donations and corporate and private foundation support. Providence House is continuously researching and submitting funding opportunities to such agencies that are dedicated to domestic violence and family violence prevention.

## 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.

Providence House owns two buildings (shelter and education center) and rents over 50 apartments in the Shreveport-Bossier City communities. In February 2009, Providence House leased and renovated an additional 14,000 sq. ft. facility to shelter domestic violence victims (known as the SAFE House). The SAFE House includes living and office space, including a children's area, computer lab, kitchens and lounges, to care for 25 domestic violence families with children and singles (over 100 beds). Providence House also owns and leases several vehicles to facilitate transportation for clients (vans, bus, and cars).

## 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                         | 2/1/2012              |
| 2. Dates covered by last audit:               | 10/1/2010 - 9/30/2011 |
| 3. Date of next audit:                        | 2/1/2013              |
| 4. Dates to be covered by next audit:         | 10/1/2011- 9/30/2012  |
| 5. Date next audit will be forwarded to LCLE: | 6/1/2013              |

- 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 match?  
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?

## 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.

Referral to Louisiana Crime Victims Reparations Program is a critical component of the referrals that victims receive during the advocacy process. The program is explained and procedures for registering are outlined. Victims are given brochures and referral sheets with the appropriate contact person's name and phone number during their medical exam at the hospital and during the intake process for walk-in victims, including assistance with applications, forms and procedures, as necessary.

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.

This agency works collaboratively with community providers and law enforcement to ensure victims know their options and are connected with the resources available to them. Providence House has formed partnerships with the Shreveport Bar Foundation to assist victims with legal matters and with the Center for Families to provide additional counseling. Providence House is an active member of the Shreveport- Bossier Domestic Violence Task Force.

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.

Advocacy for domestic violence victims requires a clear understanding that the decision to report to law enforcement must come from victims themselves at a time when they feel safe. Self-determination must always be respected, even when the victim chooses not to report. However, every effort will be made to work diligently with victims and to address any fears that may prevent them from moving forward with prosecution.

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.

Providence House complies with the Louisiana Child Protection Act and conducts criminal background checks and fingerprinting of all volunteers who work directly with the children.