

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

**APPLICATION AND REVIEW
SUMMARY**

APPLICATION NUMBER: M10-8-030

APPLICANT: Hearts of Hope - Sexual Abuse Response Center

PROJECT TITLE: Sexual Assault Program

PROJECT FUNDS :

FUND:	\$	<u>21,634</u>	100.00%
MATCH:	\$	<u>0</u>	0.00%
TOTAL:	\$	<u>21,634</u>	100.00%

PROJECT DURATION: 12 months

START DATE: 01/01/2011

END DATE: 12/31/2011

Continuation of M96-8-005

PROJECT SUMMARY:

The program will provide comprehensive sexual assault treatment program that covers an eight parish region to include Acadia, Iberia, Lafayette, St. Martin, Vermilion, St. Landry, Evangeline, and a portion of St. Mary. The Center provides crisis intervention and crisis counseling on an individual basis.

RECOMMENDATION : FUND X DENY

SPECIAL CONDITIONS :

1. 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**

**S.T.O.P. VIOLENCE AGAINST
WOMEN FORMULA GRANT
PROGRAM**

CFDA #16.588

FOR LCLE USE ONLY: Project ID: M10-8-030 VAWA Purpose Area: 12

1. TITLE OF PROJECT Sexual Assault Program		2. <input type="checkbox"/> NEW PROJECT <input checked="" type="checkbox"/> CONTINUATION PROJECT OF: M09 - 8 - 030	
3. PROJECT DURATION Total Length: 12 Months (Not to exceed 12 Months) Desired Start Date: 3/1/2011 Desired End Date: 2/28/2012		4. PROJECT FUNDS Federal Funds: \$21,634 Cash Match: \$0 In-Kind Match: \$0 Total Project: \$21,634	
5A. APPLICANT AGENCY INFORMATION Agency Name: Hearts of Hope Physical Address: 911 General Mouton City: Lafayette Zip: 70505- Mailing Address: P.O. Box 53967 City: Lafayette Zip: 70505-3967 Phone: (337) 269-1557 FAX: (337) 269-1143 Email: jill.dugas@theheartsofhope.org		5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY Authorized Official: Jill Dugas Title: Executive Director Agency Name: Hearts of Hope Address: P.O. Box 53967 City: Lafayette Zip: 70505-3967 Phone: (337) 269-1557 FAX: (337) 269-1143 Email: jill.dugas@theheartsofhope.org	
Fed Employer Tax Id: 72 - 1321800 DUNS: 968476 - 986		CCR CAGE/NCAGE: CCR Expiration Date:	

6. IMPLEMENTING AGENCY Name: David Barczyk Title: President, Board of Directors Agency: Hearts of Hope Address: P.O. Box 53967 City: Lafayette Zip: 70505-3967 Phone: (337) 269-1557 FAX: (337) 269-1143 Email: dbarczyk@gmail.com	7. PROJECT DIRECTOR Name: Jill Dugas Title: Executive Director Agency: Hearts of Hope Address: P.O. Box 53967 City: Lafayette Zip: 70505-3967 Phone: (337) 269-1557 FAX: (337) 269-1143 Email: jill.dugas@theheartsofhope.org	8. FINANCIAL OFFICER Name: Mark Comeaux Title: Treasurer Agency: Hearts of Hope Address: P.O. Box 53967 City: Lafayette Zip: 70505-3967 Phone: (337) 269-1557 FAX: (336) 269-1143 Email: mark@parkwaysg.com
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9. BRIEF PROJECT DESCRIPTION: (Please do not exceed space provided below.)
The Violence Against Women Program will provide comprehensive sexual assault treatment program that covers an eight parish region to include Acadia, Iberia, Lafayette, St. Martin, Vermilion, St. Landry, Evangeline, and a portion of St. Mary. The Sexual Abuse Response Center (SARC) provides Crisis Intervention and Crisis Counseling on an individual basis. Volunteers and staff members meet rape victims in the local hospital emergency departments and assist victims during the examination process.

2010 OCT 10 10:00 AM
LAW ENFORCEMENT
COMMISSION

VAWA PURPOSE AREAS

Check the VAWA Purpose Area(s) that this project will address. You will be required to report performance on each chosen purpose area.

- 1. Training law enforcement officers, judges, other court personnel, and prosecutors to more effectively identify and respond to violent crimes against women, including the crimes of sexual assault, domestic violence, and dating violence.
- 2. Developing, training, or expanding units of law enforcement officers, judges, other court personnel, and prosecutors specifically targeting violent crimes against women, including sexual assault and domestic violence.
- 3. Developing and implementing more effective police, court, and prosecution policies, protocols, orders, and services devoted to preventing, identifying, and responding to violent crimes against women, including the crimes against women, including sexual assault and domestic violence.
- 4. Developing, installing, or expanding data collection and communication systems, including computerized systems, linking police, prosecutions, and the courts or for the purpose of identifying and tracking arrests, protection orders, violations of protection orders, prosecutions, and convictions for violent crimes against women, including the crimes of sexual assault and domestic violence, including the reporting of such information to the National Instant Criminal Background Check System.
- 5. Developing, enlarging, or strengthening victim services programs, including sexual assault and domestic violence, and dating violence programs; developing or improving the delivery of victim services to underserved populations; providing specialized domestic violence court advocates in courts where a significant number of protection orders are granted; and increasing reporting and reducing attrition rates for cases involving violent crimes against women, including sexual assault and domestic violence.
- 6. Developing, enlarging, or strengthening programs addressing stalking.
- 7. Developing, enlarging, or strengthening programs addressing the needs and circumstances of Indian tribes dealing with violent crimes against women, including the crimes of sexual assault and domestic violence.
- 8. Supporting formal and informal statewide, multi-disciplinary efforts, to the extent not supported by state funds, to coordinate the response of state law enforcement agencies, prosecutors, courts, victim services agencies, and other state agencies and departments, to violent crimes against women, including the crimes of sexual assault, domestic violence, and dating violence.
- 9. Training of sexual assault forensic medical personnel examiners in the collection and preservation of evidence, analysis, prevention, and providing expert testimony and treatment of trauma related to sexual assault.
- 10. Developing, enlarging, or strengthening programs to assist law enforcement, prosecutors, courts, and others to address the needs and circumstances of older and disabled women who are victims of domestic violence or sexual assault, including recognizing, investigating, and prosecuting instances of such violence of assault and targeting outreach and support, counseling, and other victim services to such older and disabled individuals.
- 11. Providing assistance to victims of domestic violence and sexual assault in immigration matters.
- 12. Maintaining core victim services and criminal justice initiatives while supporting complementary new initiatives and emergency services for victims and their families.
- 13. Provide for special victim assistants in law enforcement agencies to serve as liaisons between victims and law enforcement in order to improve the enforcement of protection orders. (Jessica Gonzales Victim Assistants)
- 14. Improving responses to police-perpetrated domestic violence. (Crystal Judson Domestic Violence Protocol Program)

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, enter the percentage of STOP funds directed to each area 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 in each budget section.

Person Completing Budget Section: **Kimberly Brooks** Title: **Grants Administrator**
 Phone: (337) 269-1557 Fax: (337) 269-1143 E-Mail: **kim.brooks@theheartsofhope.org**

PROJECT BUDGET SUMMARY

BUDGET CATEGORY	FEDERAL FUNDS	CASH MATCH	IN-KIND MATCH	SECTION TOTAL
SECTION 100 PERSONNEL	\$19,679	\$0	\$0	\$19,679
SECTION 200 FRINGE BENEFITS	\$1,503	\$0	N/A	\$1,503
SECTION 300 TRAVEL	\$144	\$0	\$0	\$144
SECTION 400 EQUIPMENT	\$0	\$0	\$0	\$0
SECTION 500 SUPPLIES	\$308	\$0	\$0	\$308
SECTION 600 CONTRACTUAL	\$0	\$0	N/A	\$0
SECTION 800 OTHER DIRECT COSTS	\$0	\$0	\$0	\$0
TOTAL:	\$21,634	\$0	\$0	\$21,634

Provide Source of Cash Match:

Provide Source of In-Kind Match:

USE OF STOP FUNDS IN PERCENTAGES

Type of Victimization Served:	Percentage of STOP Funds Used:
Sexual Assault	100%
Domestic Violence/Dating Violence	
Stalking	
Total (must equal 100 percent)	100%

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
Therapist (LCSW)	Lisa Mount	FT	\$3,900.00	40.00%	12.00	\$18,720.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Office Manager/Advocate	Pamela Harris	FT	\$1,599.00	5.00%	12.00	\$959.40	<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:						\$19,679.40		

F = Fed Funds
C = Cash Match

PART-TIME OR OVERTIME EMPLOYEES:

POSITION TITLE	EMPLOYEE NAME	PT OT	ACTUAL EMPLOYER HOURLY SALARY RATE	NUMBER OF HOURS	TIME DEVOTED TO PROJECT	NUMBER OF WEEKS	TOTAL SALARY PAID BY GRANT	PAID WITH:	
								P	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"/>
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	\$19,679
CASH MATCH	\$0
IN-KIND MATCH	\$0
PERSONNEL TOTAL	\$19,679

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.

There is no need for overtime.

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

The salary for the Master Level Social Worker position is based on like positions within the not-for-profit sector, hospital settings and other state positions of the same description.

The Office Manager/Victim Advocate position is occupied by someone with a bachelor's degree. The salary is determined based on what is reasonable for this area and our agency.

C) Project duties of each position requested:

Project duties for the MSW include scheduling individual sessions, monitoring the progress of the victim/survivor's behavior throughout therapy, providing information to the family members with appropriate and documentation of progress. The MSW also participates in educational opportunities and training of professionals.

The SARC Office Manager/Victim Advocate is the first person the sexual assault victims and their families encounter when entering our office. She is responsible for providing a comfortable environment and welcoming attitude to each client served. Her goals are to provide advocacy, LAVNS assistance, and support services to each victim/family that receives services through the Sexual Abuse Response Center.

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 is moved must be filled. If employee is the same from the previous grant, indicate if the employee was originally hired for that position.)

The Master Level Social Worker is an existing position. Lisa Mount has held this positions since 2008.

Pamela Harris has been employed with Hearts of Hope since 2008. Additional job responsibilities of assisting victims with the LAVNS system is being added to her job duties.

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 Lisa Mount	.062		\$18,720	\$1,160	5	.062			\$0
2 Pam Harris	.062		\$959	\$59	6	.062			\$0
3	.062			\$0	7	.062			\$0
4	.062			\$0	8	.062			\$0
MEDICARE	RATE		SALARY	TOTAL	MEDICARE	RATE		SALARY	TOTAL
1 Lisa Mount	.0145		\$18,720	\$271	5	.0145			\$0
2 Pam Harris	.0145		\$959	\$13	6	.0145			\$0
3	.0145			\$0	7	.0145			\$0
4	.0145			\$0	8	.0145			\$0
HEALTHLIFE INSURANCE	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL	HEALTHLIFE INSURANCE	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	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"/> SLTA		\$0	8		<input type="checkbox"/> SLTA		\$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):				\$1,503	FRINGE BENEFITS TOTAL (B):				\$0

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

FRINGE BENEFITS TOTAL (A+B): \$1,503

SECTION 200. FRINGE BENEFITS SUMMARY	
FEDERAL FUNDS	\$1,503
CASH MATCH	\$0
TOTAL FRINGE BENEFITS	\$1,503

SECTION 508. SUPPLIES (Continued)

SECTION B: Use this section only for Publications, workbooks, curriculum guides, videotapes, etc. Under type choose: P - Publications; W - Workbooks; CG - Curriculum Guides; V - Videotapes; O - Other. Itemize each item separately. Include tax and shipping costs in Unit Price, when applicable.

TYPE	TITLE OF PUBLICATIONS/FILMS	QUANTITY	UNIT PRICE	TOTAL COST	PAID WITH		
					F	C	DK
				\$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"/>
				\$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 SECTION B SUPPLIES:				\$0.00	<small>F - Federal Funds C - Cash Match DK - In-Kind Match</small>		

BRIEFLY EXPLAIN:
A) The use of each request and its relationship to the project. Also explain the choice of materials, e.g. based on previous experiences or research showing its effectiveness, etc.:

SECTION 508. SUPPLIES SUMMARY	
FEDERAL FUNDS	\$308
CASH MATCH	
IN-KIND MATCH	
SUPPLIES TOTAL	\$308

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 or state data, (if local data is not available, 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.

Around the world at least 1 in 3 women has been beaten, coerced into sex, or otherwise abused in her lifetime. Most often the abuser is a member of her own family. (Johns Hopkins School of Public Health, 2000.) In the United States An estimated 302,100 women and 92,700 men are forcibly raped each year. (Tjaden, Patricia and Thoennes, Nancy, November 1998.) Rape and sexual assault prevalence is difficult to determine because the crime is significantly underreported.

Using a definition of rape that includes forced vaginal, oral, and anal sex, the National Violence Against Women Survey (Violence Against Women Grants Office. (1998, July). Stalking and Domestic Violence: Third Annual Report to Congress Under the - Violence Against Women Act, p. 7. Washington, CD: U.S. Department of Justice.) found that 1 of 6 U.S. women and 1 of 33 U.S. men has experienced an attempted or completed rape as a child and/or an adult.

The Sexual Abuse Response Center (SARC) was founded in 1981 under the original name of Rape Crisis to provide immediate, comprehensive services to the victims of sexual assault, sexual abuse and violent crimes. The name was changed in 1995 to better define the scope of services that SARC provided, and in 1999 SARC merged with the Children's Advocacy Center to ensure that no survivor of a sexual crime went without immediate intervention. Today SARC services an 8-parish region to include Acadia, Evangeline, Iberia, Lafayette, St. Martin, St. Landry, St. Mary, and Vermilion parishes. Rape continues to be a community problem in the Acadiana area, with 43 new reports of sexual assault reported so far in 2010. Referrals for counseling are received from community programs such as the OCS, Law Enforcement, DA Office, Big Brothers Big Sisters, Faith House and Family Tree to name a few.

An average of 30 new client services are requested each month. The SARC 2009 statistics provide that over 880 individual therapy sessions were provided and 1,000 plus crisis line calls answered. Education and awareness presentations were provided to over 8,000 students, parents, and professionals throughout the area. Training for law enforcement agencies, medical professionals and school board employees continue to show an increase from year to year. As awareness increases throughout the community, so too does the number of victims reporting their personal experiences. During the past decade, all forms of sexual trauma have received unprecedented societal acknowledgement. Greater numbers of victims and families are receiving assistance in dealing with the repercussions of sexual crimes.

Continued sexual assaults and abuses throughout the region, increases the demand on staff to provide training to mandated reporters, including clergy, teachers, counselor and principals.

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

Continued opportunities to train staff members, volunteers, and allied health professionals in the areas significant to victims and their recovery is one area that Hearts of Hope - SARC addresses. By participating in monthly multidisciplinary team meetings with the Lafayette Parish Sexual Assault Response Team (LP SART), our staff is able to ensure collaboration and to promote prosecution of substantiated abuse allegations. This does, however, continue to be an area where improvement is needed.

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.

Hears of Hope believes that sexual abuse and sexual assault is a community issue and not just a problem for the individual victims. By providing victims with compassionate care through the entire process from reporting the assault, to collecting evidence, providing medical treatment through our Sexual Assault Nurse Examiners Program, and providing support services through advocacy and therapy, we can assist with healing and recovery, as well as impact the prosecution and conviction rates of these heinous crimes.

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.

1. Sexual Abuse Response Center (SARC) provides a 24 hour crisis hotline for victims to request assistance. In 2009 SARC responded to 85 emergency room victims. So far in 2010, our staff and volunteers have responded to 72 emergency room victims. SARC will provide Advocacy services through paid staff and trained volunteers to 90 sexual assault and sexual abuse victims through emergency room escort services.
2. Sexual Abuse Response Center (SARC) will provide therapeutic counseling services to 180 victims of sexual assault and sexual abuse to aid in the recovery from the trauma associated with sexual violence. In 2009 SARC therapists conducted 888 individual therapy sessions with 258 new clients. So far in 2010 SARC therapists have served 130 new clients, conducting 567 individual therapy sessions. Seventy-nine clients have been placed on our waiting list so far in 2010. Clients that we are unable to serve immediately are helped as soon as a one of our therapists is available. Our agency offers 6 to 8 therapy sessions to victims free of charge.

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.

The purpose of the Sexual Abuse Response Center is to provide quality and compassionate care to victims of sexual abuse and sexual assault by providing trained advocates and mental health professionals to assist victims through all phases of the recovery process. There is currently an established multidisciplinary response to victims. A victim advocate from Hearts of Hope Sexual Abuse Response Center (SARC), meets the victim in the emergency department. Hearts of Hope Sexual Assault Nurse Examiner's Program is available to victims who report in Lafayette parish emergency rooms. A law enforcement official responds to the emergency department to get a statement from the victim. The victim advocate provides emotional support for the victim and the victim's family. If a forensic exam or "rape kit" has been completed then evidence is turned over to law enforcement for delivery to the local crime lab. The volunteer advocate then refers the victim to SARC for crisis counseling services. Victims are provided 6 – 8 therapy sessions with a Board Certified Social Worker. Hearts of Hope Sexual Abuse Response Center (SARC) offers a 24 hour crisis line available 365 days a year. Staff and volunteer advocates are also available 24 hours a day. Services of Hearts of Hope's Sexual Abuse Response Center is offered year around with out interruptions.

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 type="checkbox"/> Community-Based Organization | <input type="checkbox"/> Prosecution |
| <input type="checkbox"/> Court | <input checked="" 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: **Pam Harris** PHONE: (337) 269-1557 EMAIL:
- 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](http://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: PHONE: () - EMAIL:
- 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 225-923-6159. 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.)
- In 2009 Hearts of Hope - SARC assisted 85 victims in local ER's. SARC therapists conducted a total of 888 individual sessions. SARC volunteers and staff have screened over 1,000 telephone calls. SARC has conducted 304 educational presentations reaching over 8,000 people. So far this year (January - June 2010), SARC has assisted 43 ER victims. Therapists have conducted a total of 440 individual sessions, and 154 educational presentations have been conducted reaching over 5,000 people.

Hearts of Hope has trained a total of 8 new volunteers in 2010, for a total of 41 volunteers.

2. Did the project work as expected? Explain
 Yes

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?

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?

Data is collected from the victims.

2. When will the data be collected?

Data is collected when first contact is made with the victim. Data is further collected upon beginning therapy services and throughout the therapy process.

3. Who will collect and analyze the data?

Data is collected and analyzed by the SARC staff. All data is reviewed by the Executive Director.

4. Who will be responsible for submitting the data for the VAWA Annual Report: State name and contact information

Name: Jill Dugas

Phone: (337) 269-1557

Email: jill.dugas@theheartsofhope.org

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

Kimberly Brooks, Grant Administrator for Hearts of Hope, under the direction of Jill Dugas, Executive Director, will be responsible for updating or revising the project's strategy, if necessary.

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.

Louisiana Commission on Law Enforcement will receive Quarterly Progress Reports and expenditure reports either quarterly or monthly as specified.

Financial and statistical reports are provided to Hearts of Hope Board of Directors on a monthly basis and outcome measurements on a quarterly basis. Reports are also disseminated to United Way of Acadiana and Iberia, and to the Louisiana Foundation Against Sexual Assault (LAFASA). LAFASA meets on a quarterly basis to discuss the needs and progress of individual SARC(s) across the state. A financial audit is conducted on the agency annually, with a fiscal year of January through December.

J. CONTINUATION

Yes No Do you plan to continue this project at the conclusion of federal support?
Since continued STOP 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.

At the conclusion of the 2010-11 grant project, Hearts of Hope will again apply for STOP funding (2011-1012) if available. Victims of sexual crimes are a very vulnerable group and this grant provides an invaluable resource. If for some reason, Hearts of Hope is denied funding for this project, the Board of Directors and the Executive Director will be responsible for seeking out community support in the form of fundraising and donations, and/or replacement 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.

Hearts of Hope is a 4,000 square-foot building that is used by three programs. The Children's Advocacy Center (CAC) occupies 3,000 square feet of the building and has created an atmosphere that is child-oriented and professionally directed to the needs of children. The Sexual Abuse Response Center (SARC) and Sexual Assault Nurse Examiners (SANE) programs occupy the remaining area. The merger of the CAC and SARC has enabled the two programs to provide continuity of care for victims of sexual crimes, shared resources for volunteer training, and shared costs for operational and administration expenses. An alarm system ensures that clients, staff and assets are secured 24 hours a day.

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 match?
If yes, describe the duties and functions to be performed by the volunteers. Indicate the number of volunteer hours per duty-function for this application (this can be an estimate). If volunteers are used as match, their 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. CONSULTATION

Law enforcement, prosecution, the courts, probation and parole agencies and victim services providers must consult with each other. Briefly describe the process used to consult, coordinate, and collaborate with each agency. Attach original current letters of support and/or written cooperative agreements indicating awareness and cooperation/role with this project.

The Sexual Abuse Response Center coordinates the Lafayette Parish Sexual Assault Response Team (LPSART) in Lafayette Parish. The Lafayette Parish Sexual Assault Response Team is a multidisciplinary team with representatives from the 15th Judicial District Attorney's Office, Lafayette Parish Sheriff's Office, Lafayette City Police Department, Lafayette Parish Correctional Center, University of Louisiana at Lafayette Police Department, Acadiana Crime Lab, Hearts of Hope Sexual Abuse Response Center, Faith House Domestic Abuse Center, and Hearts of Hope Sexual Assault Nurse Examiners comprise this team of dedicated individuals. The mission of the LPSART is to utilize a victim-centered response to sexual assault in efforts to achieve the best outcome for victims. Clients in need of services outside the scope of the SARC are referred to private clinicians and/or psychiatric hospitals.