

LOUISIANA COMMISSION ON LAW ENFORCEMENT
AND ADMINISTRATION OF CRIMINAL JUSTICE

APPLICATION AND REVIEW
SUMMARY

APPLICATION NUMBER: C11-9-007

APPLICANT: Children's Hospital CARE Center

PROJECT TITLE: Child Advocacy Program

PROJECT FUNDS :

FUND: \$ 56,000 80.00%

MATCH: \$ 14,000 20.00%

TOTAL: \$ 70,000 100.00%

PROJECT DURATION: 12 months

START DATE: 09/01/2011

END DATE: 08/31/2012

Continuation of C05-9-008

PROJECT SUMMARY:

The New Orleans Children's Advocacy Center (NOCAC) provides a child-friendly environment home-like setting where forensic interviews of child abuse victims are conducted and recorded. The NOCAC also facilitates multi-disciplinary team (MDT) meetings where professionals from law enforcement, child protection, the District Attorney's Office and medical professional review all cases. The project coordinates available services for child abuse victims and their non-offending family members.

RECOMMENDATION: FUND X 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: C11-9-007 CVA Purpose Area: 1,2,3

1. TITLE OF PROJECT New Orleans Children's Advocacy Center		2. <input type="checkbox"/> NEW PROJECT <i>Continuation of C10-9-007</i>	
3. PROJECT DURATION Total Length: 12 Months (Not to exceed 12 Months) Desired Start Date: 9/1/2011 Desired End Date: 8/31/2012		4. PROJECT FUNDS Federal Funds: \$56,000 Cash Match: \$14,000 In-Kind Match: Total Project: \$70,000	
5A. APPLICANT AGENCY INFORMATION Agency Name: Children's Hospital Care Center Physical Address: 1101 Calhoun St. City: New Orleans Mailing Address: 200 Henry Clay City: New Orleans Email: sleblanc@chnola.org		5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY Authorized Official: Steve Worely Title: CEO Agency Name: Children's Hospital Care Center Address: 200 Henry Clay City: New Orleans Email: sleblanc@chnola.org	

CCR CAGENCY: 3NVR8 CCR Expiration Date: 12/03/10

6. IMPLEMENTING AGENCY Name: Steve Worely Title: CEO Agency: Children's Hospital Care Center Address: 200 Henry Clay City: New Orleans Email: sleblanc@chnola.org	7. PROJECT DIRECTOR Name: Lorrie Brennan Title: Program Coordinator Agency: New Orleans Children's Advocacy Address: 1101 Calhoun City: New Orleans Email: nocaccor@chnola.org	8. FINANCIAL OFFICER Name: Mirela Nicola Title: Controller Agency: Children's Hospital Address: 200 Henry Clay City: New Orleans Email: mnicola@chnola.org
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9. BRIEF PROJECT DESCRIPTION: (Please do not exceed space provided below.)
The New Orleans Children's Advocacy Center (NOCAC) provides a child-friendly environment where forensic interviews of child abuse victims are conducted and recorded in a home-like setting. The NOCAC also facilitates multidisciplinary team (MDT) meetings where professionals from law enforcement, child protection, the District Attorney's Office and medical professionals review all cases. The project coordinates available services for child abuse victims and their non-offending family members.

LA COMMISSION
ON LAW ENFORCEMENT
AUG - 1, PM 3: 41

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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 checked="" 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:	YES:	NO:
Are all budgeted items allowable per Program Guidelines?	<input checked="" type="checkbox"/>	<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: Lorrie Brennan Title: Program Coordinator
Phone: (504) 896-9237 Fax: (504) 896-9733 E-Mail: nocaccor@chnola.org

PROJECT BUDGET SUMMARY

BUDGET CATEGORIES	FEDERAL FUNDS	CASH MATCH	IN-KIND MATCH	SECTION TOTAL
SECTION 100. PERSONNEL	\$43,849	\$10,962	\$0	\$54,811
SECTION 200. FRINGE BENEFITS	\$3,350	\$839	N/A	\$4,189
SECTION 300. TRAVEL	\$0	\$0	\$0	\$0
SECTION 400. EQUIPMENT	\$0	\$0	\$0	\$0
SECTION 500. SUPPLIES	\$0	\$0	\$0	\$0
SECTION 600. CONTRACTUAL	\$8,800	\$2,200	N/A	\$11,000
SECTION 700. RENOVATION COSTS	\$0	\$0	\$0	\$0
SECTION 800. OTHER DIRECT COSTS	\$0	\$0	\$0	\$0
TOTAL:	\$55,999	\$14,001	\$0	\$70,000

Provide Source of Cash Match: Children's Hospital unrestricted funds.

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
Program Manager/Coordinator	Lorrie Brennan	FT	\$3,705.00	65.00%	12.00	\$28,899.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Case Mgr/Victim Advocate	Josh Long	FT	\$2,661.00	25.00%	12.00	\$7,983.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Forensic Interviewer	Daniel Dooley	FT	\$2,988.00	50.00%	12.00	\$17,928.00	<input checked="" 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"/>
SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:						\$54,810.00	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
								\$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	\$43,849
CASH MATCH	\$10,962
IN-KIND MATCH	
PERSONNEL TOTAL	\$54,811

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:

The Program Manager/Coordinator handles administrative duties of the New Orleans Children's Advocacy Center (NOCAC), establishing administrative practices relative to the operation of a CAC to include the development of policies and procedure in coordination with the National Children's Alliance, Executive Director, and the Core Agency Group. The Program Manager/Coordinator also shall seek full accreditation with the National Children's Alliance.

The Case Manager works with New Orleans Children's Advocacy Center and the clients that are seen at the Care Center assisting with referrals, patient follow-ups, victim reparation and case management, assuring all victims are receiving the needed services.

The Forensic Interviewer provides consistent, professional interviews for child victims as needed by law enforcement and child protection.

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

The salary range for the Program Manager/Coordinator is comparable to other CAC coordinators through out the state of Louisiana and the southern region of CACs. The 2005 survey of CAC's nationwide indicated that the Southern salary range is \$25,000 - 78,000. This position is filled at 65% or \$28,899.

The salary range for the Case Manager/Victim Advocate is comparable to other CAC case managers based on the National CAC Salary survey, which indicated the salary range between \$12,500 - \$60,000. This position is only filled at .25 part-time by the grant thus reflecting the pay of \$7,983.00.

The salary range for the forensic interviewers is comparable to other CAC forensic interviewers based upon the Midwest salary survey indicating a the southern salary range between \$22,000 - \$50,000. This position is filled at 50% or \$17,928.

C) Project duties of each position requested:

Program Manager/Coordinator:

The Program Manager/Coordinator is a full-time position and acts as the liaison between the New Orleans CAC and the Office of Community Service (child protective services), the District Attorney's Office, New Orleans Police Department, Children's Hospital, and available counseling programs. The Program Manager/Coordinator facilitates case coordination and collaboration between multidisciplinary members, prepares grants and necessary reports, collects data on NOCAC statistics, supervises volunteers, implements community awareness strategies, and provides information concerning the center and available resources to the victims and their families. The salary range for the Program Manager/Coordinator is comparable to other social service positions in the Greater New Orleans Community and CACs through out the country.

Case Manager/Victim Advocate:

The Case Manager is a part-time position and serves as the liaison between the NOCAC, the Care Center and MDT team. As a victim advocate, the Case Manager facilitates medical treatment, social services resources, counseling referrals, advocacy and support for families and victims, and crime victim reparation. The Case Manager also assists with the referrals and follow-up of child victims.

Forensic Interviewer:

The Forensic Interviewer is a part-time position that provides both consistent and available professional interviews for child victims as needed by law enforcement and child protection.

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.)

The current Program Manager/Coordinator, Lorrie Brennan, and the Case Manager, Josh Long, were originally hired for the position funded by this grant.

The Forensic Interviewer, Daniel Dooley, was hired to operate the video equipment. After monitoring six months of forensic interviews, he was trained under the evidenced based NICHHD model to conduct forensic interviews. He has completed his supervision time and was subsequently trained to perform forensic interviews.

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. Loric Brennan	.062		\$28,899	\$1,791	5.	.062			\$0
2. Josh Long	.062		\$7,983	\$494	6.	.062			\$0
3. Daniel Dooley	.062		\$17,928	\$1,111	7.	.062			\$0
4.	.062			\$0	8.	.062			\$0
MEDICARE	RATE		SALARY	TOTAL	MEDICARE	RATE		SALARY	TOTAL
1. Loric Brennan	.0145		\$28,899	\$419	5.	.0145			\$0
2. Josh Long	.0145		\$7,983	\$115	6.	.0145			\$0
3. Daniel Dooley	.0145		\$17,928	\$259	7.	.0145			\$0
4.	.0145			\$0	8.	.0145			\$0
HEALTH/LIFE INSURANCE	RATE	MONTHS	THEM/DENIED TO PROJECT	TOTAL	HEALTH/LIFE INSURANCE	RATE	MONTHS	THEM/DENIED 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):				\$4,189	FRINGE BENEFITS TOTAL (B):				\$0

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

Fringe Benefits Total (A+B): \$4,189

SECTION 200. FRINGE BENEFITS SUMMARY	
FEDERAL FUNDS	\$3,350
CASH MATCH	\$839
TOTAL FRINGE BENEFITS	\$4,189

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: 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"/>
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: 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 Toll)	OTHER TRAVEL COSTS	TOTAL COSTS	PAID WITH		
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"/>
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	\$0

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: Forensic Interviewers Title: Agency:	Child Abuse forensic interviews. Attendance at related team reviews, court preparation, testimony and required trainings. Translator service when needed.	220.00	\$50.00	\$11,000.00	<input checked="" type="checkbox"/>	<input checked="" 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				\$11,000.00	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 Taxi)	OTHER TRAVEL COSTS	TOTAL COSTS	PAID WITH	
											F	C
Name:			\$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:

Trained consultants conduct forensic interviews of child abuse victims at the request of law enforcement or office of community services. Interviews are videotaped, then provided to law enforcement and office of community service officials for use within their investigations and prosecution.

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

Utilizing an additional pool of forensic interviewers best meets the individual needs of child victims by having interviewers who speak multiple languages and who specialize in developmental needs of individual victims. Translator services are needed to interpret forensic interviews done in a foreign language for the monitoring team. Contracted interviewers are also available after hours.

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

Experiential background, preferably a college degree, or work experience in a field related to sociology, social work, education, criminal justice, nursing, psychology, counseling, or a similarly applied human services speciality. A minimum of 25 hours of clinical training in interviewing children, 8 hours of supervision by a qualified forensic interviewer and 20 hours of continuing education.

SECTION 600. CONTRACTUAL SUMMARY	
FEDERAL FUNDS	\$8,800
CASH MATCH	\$2,200
CONTRACTUAL TOTAL	\$11,000

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.

PROBLEM:

Statistics dramatically verify the great need for this program. Louisiana was ranked 49th by the 2010 Kids Count Data survey, which compiles state profiles of child well being. Louisiana trails the U.S. average in all 10 major indicators used to compile the overall ranking. In the category of infant mortality and child death rate, Louisiana has regressed since 2000, 75% greater than the national average. 2010 Kids Count statistics reveal that percentage of children in single-parent families are 43% with 25% of Louisiana children under 18 years of age living in families with incomes less than the federal poverty threshold. The most recent 2009 available statistics from the Office Community Services (OCS) revealed there were 21,679 investigations. The NOCAC/Care Center has seen over 2500 child victims and their families during this award period. This is a 17.89% increase in the number of child victims and families referred by Law Enforcement and Child Protection as compared to previous grant period. Along with this increase of victims and families came an increase in the need of services to child victims and their families.

NEED:

By participating as core agencies, the Office of Community Services (OCS), the NOPD Child Abuse Unit, the Orleans Parish District Attorney's Office, and Children's Hospital foster coordination with other agencies through the use of the CAC and a multidisciplinary team (MDT) response to a case. All are collectively committed to minimizing the number of interviews a child victim must endure while maximizing the use of their resources in the investigation and prosecution of child abuse. All agree that a neutral child-friendly facility at which skilled forensic interviews are conducted lessons trauma to a child victim of abuse, and maintains the authority of each agency to pursue their respective mandates. The CAC staff provides a caring, trained adult to familiarize families with the system, and helps them to access the services already instituted but not being fully utilized.

The New Orleans Child Advocacy Center (CAC) addresses identified problems and needs. An Executive Director oversees general agency operation and supervises overall CAC policy. The Project Coordinator and the Case Manager facilitate case coordination and collaboration between MDT members, collect data on CAC statistics, and organize volunteers. They also provide information about the center to the victims and their non-offending parent or guardian when they arrive at the CAC. One trained staff Forensic Interviewer and a pool of 11 contractual interviewers (two of which speak Spanish, one Vietnamese) conduct videotaped forensic (fact-finding) interviews on Closed Circuit Television (CCTV), which enables the team to provide input to the interviewer via a "bug in the ear" microphone that allows them to speak directly to the interviewer without distracting the child. These interviews are admissible in court and make the experience easier on child victims 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.

Since Hurricane Kairina in 2005, there is a lack of available mental health resources. Transportation for our child victims and families is still a major problem.

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. Helping children and their families cope by reducing the trauma of repeated interviews to child victims of abuse.
- Goal 2. Referring victims of child sexual abuse and their families for all services available to them, and to assure families that cases will be followed up on.

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
- Objective 1: 220 forensic interviews for children of child sexual abuse, using a highly trained forensic interviewers.
- Objective 2: Continue to provide opportunities for input from and coordination of the multidisciplinary members assigned to investigate the case.
- Objective 3: Continue to provide follow-up referrals for supportive services to at least 150 families.
- Goal 2:
- Objective 1: Multidisciplinary team (MDT), composed of representatives from the New Orleans District Attorney's Office, the New Orleans Police Department, the Office of Community Services, and Children's Hospital CARE Center to review 120 cases.
- Objective 2: To collect statistics and track outcomes on cases.
- Objective 3: To coordinate at least 12 MDT meetings or as needed by the core agencies to be held during this grant period.

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: A. Schedule interviews within 24 hours after request is received from law enforcement or child protective .
B. Provide an interview setting that is child friendly and appropriate for a forensic interview.
- Objective 2: A. Provide investigative team members an opportunity to observe and give input during the forensic interview through the usage of CCTV. (Communicate via a "bug in the ear" microphone wired to the ear of the interviewer)
B. Provide access to the audio/videtapes to necessary professionals.
- Goal 2
- Objective 1: A. Every case that is brought to the CAC for forensic interviewing will also be placed on the agenda for review by the Multidisciplinary team that will meet biweekly or as needed. The team is comprised of the staff from OCS, NOPD, DA's office, and Children's Hospital CARE Center.
B. Invite professionals from social work, mental health, and medical to participate on a case by case basis.
C. Cases where the child has not been interviewed at the CAC may also be placed on the agenda for the biweekly team meeting by any of the involved agencies.

Timetable for specific activities listed above will occur between start date (9/1/11) and end date (8/31/12) of grant period.

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 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 checked="" type="checkbox"/> Other (Specify): CAC |

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: Josh Long PHONE: (504) 896-9237 EMAIL: nocacccm@chnola.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: Josh Long PHONE: (504) 896-9237 EMAIL: nocacccm@chnola.org

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/training/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 225-925-6159. 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.)

267 children received forensic interview services during the first 45 weeks of the grant. The forensic interviews were done in a setting to thereby reduce trauma for the child and families.

Provided follow up and supportive services for 558 families during the first 45 weeks of the grant. There were a total of 308 cases reviewed at MDT meetings held during the first 45 weeks of the grant. All members of the multidisciplinary team were in attendance and given opportunities for input. Statistics were kept along with outcomes of each case once reviewed at MDT.

2. Did the project work as expected? Explain.

Yes, beyond expectations. In just comparing the first 45 weeks to date to the 52 weeks of last year there has been a significant increase. A 22.5% increase in the number of victims served and a 17% increase in the number of services provided during the first 45 weeks of the grant period.

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 RESULTS

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

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

Information is collected from all caregivers/mature victims who come to the New Orleans Children's Advocacy Center for interview.

2. When will the data be collected?

Data is collected after the forensic interview prior to exist from the New Orleans Children's Advocacy Center.

3. Who will collect and analyze the data?

The Program Manager, Case Manager, and Forensic Interviewer will be responsible for collecting and analyzing the data and present to Executive Director to further analyze.

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

Name: Lorrie Brennan Phone: (504) 896-9237 Email: nocaccor@chnola.org

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

Quarterly after participating in the National Forensic Interview Journal Club, the New Orleans Children's Advocacy Center will schedule time to review and make changes necessary for project strategies to be accomplished.

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.

The Program Manager/Coordinator and Case Manager/Victim Advocate shall compile statistical information on the number of children interviewed along with the demographics, services provided, the number of MDT meetings, and follow-up plans and outcomes of each case reviewed by the MDT team. These reports are given to the Executive Director for review each month. In addition, reports will be shared by NOPD, NO ADA, OCS on a quarterly basis. The NOCAC will also continue to report to National Children's Alliance (via NCATrak), and submit quarterly reports to Louisiana Commission on Law Enforcement, and information will be compiled for the Louisiana Association of Children's Advocacy Centers. Project reports will be submitted to 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.

Children's Hospital of New Orleans
National Children's Alliance
Private Donations
Special event fund raisers

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.

The New Orleans Children's Advocacy Center and the Audrey Hepburn CARE Center are co-located in a renovated home to better facilitate patient's needs. This facility has a kitchen, two interview rooms, two bathrooms, a den, used for MDT meetings and also for patient's families when waiting for appointments. The teen interview room is decorated with a French Quarter scene on one wall with the camera incorporated in a streetlight mounted on the wall. The small children's interview room is decorated with a hot air balloon scene on one wall and the camera is incorporated in the basket of a hot air balloon wall mount. Office space is available at this location for referring agencies as needed to facilitate the forensic interview.

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:	4/26/10
2. Dates covered by last audit:	01/01/09-12/31/09
3. Date of next audit:	4/26/2011
4. Dates to be covered by next audit:	01/01/10-12/31/10
5. Date next audit will be forwarded to LCLE:	9/1/11

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?

Volunteers will provide assistance for the child victims and their families in cooperation with the Children's Hospital Volunteer Program. Volunteers attend a training program conducted by Children's Hospital. They are also trained by the NOCAC. Volunteers are used for activities such as:
Serving as a receptionist/greeter in the waiting area.
Distracting and entertaining children while waiting.
Provide family members with resources and information about the justice system, the CAC, and related community services.

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.

Application for Victim's Reparation are available at the NOCAC and each victim's caregiver is given the application. The Case Manager also provides assistance in filling out and applying for the reparation. The CAC staff helps facilitate communication between the child victim's caregiver and the Orleans Parish Criminal Sheriff's Office regarding the Louisiana Crime Victim's Reparation Program. Additionally, the CAC staff work closely with the DA's office Victim Assistance Program to provide wrap around services.

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.

An interagency protocol agreement has been signed by all of the involved agency heads and has been filed in juvenile court. The protocol details how each case will be coordinated between the involved agencies including the New Orleans Police Department, the Office of Community Services, the District Attorney's Office and Children's Hospital. See attached cooperative agreements.

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.

The CAC operates within a multidisciplinary team concept inclusive of Law Enforcement. Prior to their appointment for an interview at the Child Advocacy Center, the allegations of abuse will have been made to law enforcement/child protection. Calls to the Child Advocacy Center that deal with an initial report of a case for Law Enforcement will be appropriately routed in that direction. Each case involving the NOCAC involves child abuse allegations which by law requires all mandatory reporters to make a report to either OCS or law enforcement. The New Orleans Children's Advocacy Center also provides trainings and information, to the public, teachers and medical professionals, on mandatory reporting obligations on reporting abuse of children to law enforcement and child protection.

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.

All staff volunteers are required to sign a release for a criminal records check through the Louisiana State Police. No individuals (staff or volunteers) are accepted if they have previous convictions or any outstanding convictions for any charges involving an act against a child.