

LOUISIANA COMMISSION ON LAW ENFORCEMENT  
AND ADMINISTRATION OF CRIMINAL JUSTICE

APPLICATION AND REVIEW  
SUMMARY

APPLICATION NUMBER: C12-7-026

APPLICANT: St. Bernard Battered Women's Program

PROJECT TITLE: Domestic Violence Program

PROJECT FUNDS :

FUND: \$ 18,403 80.00%

MATCH: \$ 4,601 20.00%

TOTAL: \$ 23,004 100.00%

PROJECT DURATION: 12 months

START DATE: 07/01/2013

END DATE: 06/30/2014

Continuation of C00-7-022

PROJECT SUMMARY:

To provide quality services to women and children whose lives have been impacted by domestic violence. To this end, we propose to provide assistance with navigating the court system to provide safety to this population through legal advocacy and court accompaniment. Provide extensive safety planning for clients in need of protection from abuse and offer safe shelter to survivors.

RECOMMENDATION: FUND  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

CRIME VICTIM ASSISTANCE  
FORMULA GRANT PROGRAM

CFDA #16.575

FOR LCLE USE ONLY:

Project ID: C12J-024

CVA Purpose Area: 1, 2, 3

1. TITLE OF PROJECT

Domestic Violence Program

2.  NEW PROJECT

CONTINUATION PROJECT OF: C11-7-027

3. PROJECT DURATION

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

Desired Start Date: 7/1/2013

Desired End Date: 6/30/2014

4. PROJECT FUNDS

Federal Funds: \$18,403

Cash Match

In-Kind Match: \$4,601

Total Project: \$23,004

5A. APPLICANT AGENCY INFORMATION

Agency Name: St. Bernard Battered Women's Prgm., Inc.

Physical Address: 3010 Jean Lafitte Pkwy.

City: Chalmette

Zip: 70043-4036

Mailing Address: P.O. Box 7

City: Arabi

Zip: 70032-0007

Phone: (504) 277-3177

FAX: (504) 279-9377

Email: deanobwp@aol.com

5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY

Authorized Official: Gail P. Gowland

Title: Executive Director

Agency Name: St. Bernard Battered Women's Program, Inc.

Address: 3010 Jean Lafitte Pkwy.

City: Chalmette

Zip: 70043-4036

Phone: (504) 277-3177

FAX: (504) 279-9377

Email: deanobwp@aol.com

Fed Employer Tax Id: 58 - 1834566

DUNS: 105756618 -

CCR CAGE/NCAGE: 4MUDS

CCR Expiration Date: 3/31/2013

6. IMPLEMENTING AGENCY

Name: Gail P. Gowland

Title: Executive Direc

Agency: St. Bernard Battered Women's Pro

Address: 3010 Jean Lafitte Pkwy.

City: Chalmette

Zip: 70043-4036

Phone: (504) 277-3177 FAX: (504) 279-9377

Email: DeanoBWP@aol.com

7. PROJECT DIRECTOR

Name: Joyce Watson

Title: Program Coordinator

Agency: St. Bernard Battered Women's Pro

Address: 3010 Jean Lafitte Pkwy.

City: Chalmette

Zip: 70043-4036

Phone: (504) 277-3177 FAX: (504) 279-9377

Email: JoyceW@stbernardbwp.com

8. FINANCIAL OFFICER

Name: Mari Baltazar

Title: Grants Manager

Agency: St. Bernard Battered Women's Pro

Address: 3010 Jean Lafitte Pkwy.

City: Chalmette

Zip: 70043-4036

Phone: (504) 277-3177 FAX: (504) 279-9377

Email: MariB@stbernardbwp.com

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

To provide quality services to women and children whose lives have been impacted by domestic violence. To this end, we propose to provide assistance with navigating the court systems in order to provide safety to this population through legal advocacy and court accompaniment. Provide extensive safety planning for clients in need of protection from abuse and offering safe shelter to survivors.

2013 FEB 21 AM 7:07  
LA COMMISSION  
LAW ENFORCEMENT

## 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: Mari Baltazar

Title: Grants Manager

Phone: (504) 277-3177

Fax: (504) 279-3177

E-Mail: MariB@stbernardbwp.com

### PROJECT BUDGET SUMMARY

BUDGET CATEGORIES	FEDERAL FUNDS	CASH MATCH	IN-KIND MATCH	SECTION TOTAL
<b>SECTION 100. PERSONNEL</b>	\$16,908	\$0	\$4,601	<b>\$21,509</b>
<b>SECTION 200. FRINGE BENEFITS</b>	\$1,495	\$0	N/A	<b>\$1,495</b>
<b>SECTION 300. TRAVEL</b>	\$0	\$0	\$0	<b>\$0</b>
<b>SECTION 400. EQUIPMENT</b>	\$0	\$0	\$0	<b>\$0</b>
<b>SECTION 500. SUPPLIES</b>	\$0	\$0	\$0	<b>\$0</b>
<b>SECTION 600. CONTRACTUAL</b>	\$0	\$0	N/A	<b>\$0</b>
<b>SECTION 700. RENOVATION COSTS</b>	\$0	\$0	\$0	<b>\$0</b>
<b>SECTION 800. OTHER DIRECT COSTS</b>	\$0	\$0	\$0	<b>\$0</b>
<b>TOTAL:</b>	<b>\$18,403</b>	<b>\$0</b>	<b>\$4,601</b>	<b>\$23,004</b>

**Provide Source of Cash Match:**

N/A

**Provide Source of In-Kind Match:** 460.10 Volunteer Hours @ \$10.00.

**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
Court Advocate	Megan Trosclair	FT	\$2,031.25	69.37%	12.00	\$16,908.93	<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"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:						\$16,908.93	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
Assist with clerical duties needed by our Court Advocate in conjunction with legal advocacy and court accompaniment and also in our Children's Program while mothers are completing needed paperwork for legal assistance.	460.10	\$10.00	\$4,601.00
			\$0.00
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:			\$4,601.00

SECTION 100. PERSONNEL SUMMARY	
FEDERAL FUNDS	\$16,908
CASH MATCH	
IN-KIND MATCH	\$4,601
<b>PERSONNEL TOTAL</b>	<b>\$21,509</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:

This position assists victims of domestic violence with the completion and filing of petitions for Temporary Restraining Orders and also accompanies them to court. This individual provides safety planning and referrals to other service providers. There is no need for overtime for this position as the schedule is flexible to meet the needs of our program participants.

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

The salary of the Court Advocate and the rate of match for the volunteers was determined by comparing them to the salaries of employees already on staff and with similar positions at other shelters around the state.

C) Project duties of each position requested:

Besides the duties listed under need for this position, other duties include community education, distribution of brochures and pamphlets, placement of educational articles in local newspapers, coordination of services between local, state, and regional agencies, and outreach advocacy. She also assists in presentations and training offered to other domestic violence providers.

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.]

Position will be filled by existing employee, Megan Trosclair.

**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.	Megan Trosclair	.062		\$16,908	\$1,048	5.		.062		\$0	\$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.	Megan Trosclair	.0145		\$16,908	\$245	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.	Megan Trosclair	0.012	CHECK TYPE:	\$16,908	\$202	5.			CHECK TYPE:		\$0
2.					\$0	6.					\$0
3.			<input type="checkbox"/> FUTA		\$0	7.			<input type="checkbox"/> FUTA		\$0
4.			<input checked="" type="checkbox"/> SUTA		\$0	8.			<input type="checkbox"/> SUTA		\$0
PUBLIC/PRIVATE RETIREMENT		RATE		SALARY	TOTAL	PUBLIC/PRIVATE RETIREMENT		RATE		SALARY	TOTAL
1.					\$0	5.					\$0
2.					\$0	6.					\$0
3.					\$0	7.					\$0
4.					\$0	8.					\$0
OTHER:		RATE		SALARY	TOTAL	OTHER:		RATE		SALARY	TOTAL
1.					\$0	5.					\$0
2.					\$0	6.					\$0
3.					\$0	7.					\$0
4.					\$0	8.					\$0
FRINGE BENEFITS TOTAL (A):					\$1,495	FRINGE BENEFITS TOTAL (B):					\$0

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

**Fringe Benefits Total (A+B): \$1,495**

SECTION 200. FRINGE BENEFITS SUMMARY	
FEDERAL FUNDS	\$1,495
CASH MATCH	
<b>TOTAL FRINGE BENEFITS</b>	<b>\$1,495</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.

St. Bernard and Plaquemines Parishes continue to see a rise in unemployment, a lack of affordable housing, and a lack of available child care. All of these factors act as added stressors in homes experiencing domestic violence. The rise in domestic violence happens approximately 6 to 9 months following disasters according to a study conducted by Newcomb College in 2007. We find this to be true after the recent spate of hurricanes in our area as well as the BP oil spill. Individuals are seeking medical attention, shelter, and legal remedies to assist them in getting to safety and away from the perpetrators of this abuse. From information obtained from our database, 61% of the women coming to shelter reported they had no income upon entering shelter and 36% had incomes less than \$10,000.00.

Need: There is a tremendous need for more public awareness of the signs of domestic abuse, more involvement by the community to assist individuals who they think may be in abusive relationships, and more awareness of the resources available to individuals in these situations. During the last 12 month period, our program sheltered 254 women and children for a total of 5,436 nights of shelter. Of these 254 individuals, 106 were women and 148 were children. In 2012, our Court Advocate assisted with the completion of 68 petitions for Temporary Restraining Orders in which 60 were actually filed and were granted.

During 2012, we provided service through our hotline, non-residential, and residential program to 827 survivors of domestic violence and/or sexual assault; 638 women, 180 children, and 9 men. Of these, 39 % were white, 54% were African American, 2% were Multi-Racial, 1% were Asian or Pacific Islanders, and the remaining 4% were listed as Other. The program participants came from the following parishes; 29% from St. Bernard; 1% from Plaquemines; 35% from Orleans; 15% from Jefferson; 5% from St. Tammany, and 15% from other Louisiana Parishes or out of state.

We found that 49% of the individuals who called our hotline came into shelter. Once in shelter, they had a tendency to stay for a longer period of time due to the lack of jobs, lack of affordable housing, and lack of child care.

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

We started a task force on domestic violence in 2010. One area that was cited by members of this task force was mandating enrollment into a batterer's intervention program in order to hold perpetrators accountable for their actions. It is our desire to have area judges mandate attendance to the 26-week Duluth Model of batterer intervention sessions. Since this program is no longer available in our service area, perpetrators are having to seek these services in other parishes.

Another gap in services is awareness of the cycle of domestic violence by other agencies that are serving battered women and their children. Since St. Bernard Parish has elected a new Clerk of Court, the number of individuals seeking relief through the court system has declined. This has created a need for establishing a means of collaborating with that office to ensure that the public is aware of the services that we offer.

Another agency that has been identified as having a gap in services is the school system. Many instances have been reported on violence on school busses, in the classrooms, and at events for children. There is a need to educate children on non-violent behaviors and teens on preventing dating violence and how to have healthy relationships.

## 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, BRIEFY 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:** To expand public awareness of services available through our program and increase advocacy, referral, and follow-up services in addition to increasing Court Advocacy services for survivors of domestic violence in St. Bernard and Plaquemines Parishes.

## 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.

**Objective #1:** To utilize Court Advocate in St. Bernard and Plaquemines Parish to assist in expanding participation in legal services with the expectation that 50 new individuals will be added during this grant period.

During the first seven months of the previous grant (July1, 2012 to January 31, 2013 we have provided 190 hours of legal advocacy. Projected figures for the year would be 326 hours of legal advocacy.

**Objective #2:** To utilize Court Advocate in St. Bernard and Plaquemines Parish to expand legal advocacy and court accompaniment with the expectation that 50 new individuals will be assisted with filing Temporary Restraining Orders and will be accompanied to court.

In the first seven months of the previous grant (July1, 2012 to January 31, 2013 we have assisted 38 individuals in obtaining restraining orders against their abusing spouse/partner. Projected figures for the year would be 72 individuals assisted in obtaining restraining orders against their abusing spouse/partner.

#### 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.

Objective # 1: Our Court Advocate in St. Bernard Parish (with the assistance of volunteers) will increase public awareness in our service area.

Activities: They will distribute a minimum of 500 brochures, post a minimum of 20 posters , and place ads in local newspaper. Booklets containing information and available services will be distributed to sheriff's deputies so that they can be given to survivors when deputies go out on calls.

Timeline: These activities will be accomplished on a quarterly basis during the grant period.

Objective #2: Our Court Advocate in St. Bernard Parish (with the assistance of the Womens's Advocate and other trained staff members) will assist 50 women with filing Temporary Restraining Orders (TRO's) and will accompany them to court for the TRO hearings.

Activities: The Court Advocate will train volunteers and together they will provide training on domestic violence to other program staff and other agencies. Trainings will be held approximately on a quarterly basis.

Timeline: These volunteer training sessions will be performed on an as-needed basis. Trainings for other staff members and agencies will be held approximately on a quarterly basis.

The activities undertaken to achieve the goals & objectives are on-going throughout the grant period of 7/1/2013 to 6/30/2014.



**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.)

Our measurable outcomes were to increase awareness of our program and increase participation. We accomplished this by distributing literature to agencies who come into contact with our program participants. We increased awareness by participating in local fairs and presentations to United Way agencies for their annual campaigns. We also established a task force on domestic violence and are collaborating with various community partners to increase services as well as awareness.

Objective #1: To utilize Legal Advocate in St. Bernard Parish and Outreach Coordinator in Plaquemines Parish to assist in expanding participation in legal services with the expectation that 50 new individuals will be added during this grant period.

During the 1<sup>st</sup> 7 months of the previous grant period (7/1/2012 to 01/31/2013) - 190 hours of legal advocacy were provided to clients. Yearly projection: Approximately 324 hours.

Objective #2: To utilize Legal Advocate in St. Bernard Parish and Outreach Coordinator in Plaquemines Parish to expand legal advocacy and court accompaniment with the expectation that 50 women will be assisted with filing Temporary Restraining Orders and will be accompanied to court.

During the 1<sup>st</sup> 7 months of the previous grant period (7/1/2012 to 01/31/2013) - 38 individual were assisted with

2. Did the project work as expected? Explain.

Yes, the project worked as expected and we were able to increase awareness of our program as well as to increase the services we offer.

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?

We collect data by utilizing the attached surveys. The Law Enforcement Satisfaction Survey is completed by any program participants who have had contact with any law enforcement agency. The Survivor Feedback Forms are completed by all program participants in order to evaluate and improve services.

2. When will the data be collected?

The data is collected at various times during the time that a survivor is participating in any of our programs.

3. Who will collect and analyze the data?

The surveys have been created using Survey Monkey and the results are compiled by that program. A report is printed each quarter and shared with individuals involved in the project.

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

Name: Megan Trosclair

Phone: (504) 277-3177

Email: MeganT@stbernardbwp.com

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

Each quarter the individuals involved in this project will meet and review the reports and make any changes needed to improve the program.

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 Louisiana Commission on Law Enforcement will receive Quarterly Progress Reports on a quarterly basis and expenditure reports on a monthly basis. Monthly reports will be provided to our Board of Directors and will be provided to other agencies as soon as possible upon receiving a request from them.

## 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.

At the conclusion of federal funding, we will seek funds from other grant sources, private individuals, corporate sponsors, or foundations. We will also increase fund-raising efforts to continue this program as we feel it is vital to combating domestic violence in our community.

## 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.

Our program has confidential office space that is utilized by our Court Advocate in St. Bernard Parish. Due to budget cuts and limited participation at our Plaquemines Women's Outreach Center, that facility was closed and we now offer services there on an as-needed basis. All office equipment, communications equipment, parking facilities, and bathroom facilities are available to project staff and survivors needing to use our services.

## 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 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?

Volunteer hours are estimated to be utilized as described below (these are estimates contingent on having trained volunteers available):

Clerical Duties: 200 hrs.  
Court Accompaniment: 110.10 hrs.  
Children's Program: 150 hrs.  
TOTAL: 460.10 hrs.

## 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.

Brochures are distributed to victims utilizing our services. The advocate explains what services are available and will coordinate the efforts of survivors meeting the criteria with the local representative of the Louisiana Crime Victims Reparation Program. Victims sign documentation that they have been given this information. Although most victims do not want to involve law enforcement, we encourage them to take advantage of this program.

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

We will continue to coordinate services on behalf of our survivors with:

- (1) SLLS - Legal aid attorneys who represent survivors in court in both St. Bernard and Plaquemines Parishes;
- (2) Private Attorneys - When it is necessary, referrals are made to private attorneys for pro bono representation or at a reduced rate;
- (3) Sheriff's Office - We coordinate services with the Sheriff's Office whenever a survivor needs transportation from Plaquemines Parish to the shelter in St. Bernard. We also coordinate services when individuals need to return to retrieve their possessions.
- (4) Child Protection - When it becomes necessary to contact child protective services, efforts are coordinated to insure the safety of the child(ren);
- (5) Schools - We work together to insure that children are safely incorporated into the district schools and receive needed supplies and services through the Homeless Liaison at the school board.
- (6) BIP - Coordinate social change efforts with Family Services of Greater New Orleans in St. Bernard to hold batterers accountable for their actions.

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.

As stated above, we refer survivors to the Crime Victims Reparation Program in each parish; however, most survivors do not want to involve law enforcement. We strive to empower survivors to make informed decisions and encourage them to keep their safety and that of their child(ren) at the center of the decision-making process. Upon intake, brochures, fact sheets, and applications are provided.

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

The St. Bernard Battered Women's Program, Inc. will comply with the Louisiana Child Protection Act (LRS 15:587.1) as appropriate. A criminal background check is obtained from local law enforcement on all new hires, interns, and volunteers. A criminal background check is obtained from Louisiana State Police on all staff members.