

LOUISIANA COMMISSION ON LAW ENFORCEMENT  
AND ADMINISTRATION OF CRIMINAL JUSTICE

APPLICATION AND REVIEW  
SUMMARY

APPLICATION NUMBER: C09-8-025

APPLICANT: Rapides Children's Advocacy Center, Inc.

PROJECT TITLE: Child Advocacy Program

PROJECT FUNDS :

FUND: \$ 5,287 80.00%

PROJECT DURATION: 4 months

MATCH: \$ 1,322 20.00%

START DATE: 05/01/2012

TOTAL: \$ 6,609 100.00%

END DATE: 08/31/2012

Continuation of NEW

PROJECT SUMMARY:

Funds will be designated to the production of a picture and print book for sexually abused children, *Help Me Tell My Story*, that illustrates the multiple steps and procedures associated with investigations and devantual prosecution of the perpetrator. Books will be created and individualized to the region, highlighting parish court rooms, district attorneys, local landmarks, etc.

RECOMMENDATION: FUND X DENY    

SPECIAL CONDITIONS :

1. NO DRAWDOWN OF FUNDS (AWARD) BY LCLE UNTIL APPLICANT RESPONSE TO LCLE LETTER OF 04/18/12 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:** C09.8.025

**CVA Purpose Area:** 1 & 5

<b>1. TITLE OF PROJECT</b> Child Advocacy Program		<b>2. <input checked="" type="checkbox"/> NEW PROJECT</b> <input type="checkbox"/> CONTINUATION PROJECT OF: C - -	
<b>3. PROJECT DURATION</b> Total Length: 3 Months <i>(Not to exceed 12 Months)</i> Desired Start Date: 5/1/2012 Desired End Date: 8/31/2012		<b>4. PROJECT FUNDS</b> Federal Funds: \$5,287 Cash Match: \$1,322 In-Kind Match: Total Project: \$6,609	
<b>5A. APPLICANT AGENCY INFORMATION</b> Agency Name: Rapides Children's Advocacy Center Physical Address: 1506 Albert Street City: Alexandria Zip: 71301-6439 Mailing Address: PO Box 228 City: Alexandria Zip: 71301-6439 Phone: (318) 448-4006 FAX: (318) 448-6427 Email: wbond@rapidescac.org		<b>5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY</b> Authorized Official: Wade Bond Title: Executive Director Agency Name: Rapides Children's Advocacy Center Address: 1506 Albert City: Alexandria Zip: 71301-6439 Phone: (318) 448-4006 FAX: (318) 448-6427 Email: wbond@rapidescac.org	

Fed Employer Tax Id: 72 - 1299269    DUNS: 964981 - 542    CCR CAGE/NCAGE: 5zch7    CCR Expiration Date: 1/19/2013

<b>6. IMPLEMENTING AGENCY</b> Name: Wade Bond Title: Executive Director Agency: Rapides Children's Advocacy Cent Address: 1506 Albert Street City: Alexandria Zip: 71301-6439 Phone: (318) 448-4006 FAX: (318) 448-6427 Email: wbond@rapidescac.org	<b>7. PROJECT DIRECTOR</b> Name: Wade Bond Title: Executive Director Agency: Rapides Children's Advocacy Cent Address: 1506 Albert Street City: Alexandria Zip: 71301-6439 Phone: (318) 448-4006 FAX: (318) 448-6427 Email: wbond@rapidescac.org	<b>8. FINANCIAL OFFICER</b> Name: Stephanie Holloway Title: Finance Director Agency: Rapides Children's Advocacy Cent Address: 1506 Albert Street City: Alexandria Zip: 71301-6439 Phone: (318) 448-4006 FAX: (318) 448-6427 Email: sholloway@rapidescac.org
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**9. BRIEF PROJECT DESCRIPTION:** *(Please do not exceed space provided below.)*  
Funds will be designated to the production of a picture and print book for sexually abused children, Help Me Tell My Story, that illustrates the multiple steps and procedures associated with investigations and eventual prosecution of the perpetrator. Books will be created and individualized to the region, highlighting parish court rooms, district attorneys, local landmarks, etc.

2012 APR 10 PM 1:25  
 LA COMMISSION  
 LAW ENFORCEMENT



**SECTION 800. OTHER DIRECT COSTS**

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

TYPE OF OTHER DIRECT COST	METHOD OF DETERMINING COST	QUANTITY	UNIT PRICE	TOTAL COST	PAID WITH		
					F	C	IK
Print Booklets	389 x \$20 per book -15% off	389.00	\$17.00	\$6,613.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL OF OTHER DIRECT COSTS:				\$6,613.00	F = Federal Funds C = Cash Match IK = In-Kind Match		

**BRIEFLY EXPLAIN:**

A) Need for each type listed; and

Currently, there is a need throughout Central Louisiana for additional court and family advocacy with regards to educating children and families on the investigative and prosecutorial processes of sex abuse crimes. Our systems currently have victims' advocates that work diligently to address children's questions and concerns. District attorneys, law enforcement officers, and court personnel offer additional support. Although these supports are extremely helpful, the entire legal process can be overwhelming and confusing at times. These individualized, child friendly books will provide additional support and comfort in producing answers to children and their families who have experienced sexual abuse and are working through the processes of investigations and prosecution.

B) Its relationship to project.

This cost is the project in its entirety.

SECTION 800. OTHER DIRECT COSTS SUMMARY	
FEDERAL FUNDS	\$5,287
CASH MATCH	\$1,326
IN-KIND MATCH	
<b>OTHER DIRECT COSTS TOTAL</b>	<b>\$6,613</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.

Currently, there is a need throughout Central Louisiana for additional court and family advocacy with regards to educating children and families on the investigative and prosecutorial processes of sex abuse crimes. Our systems currently have victims' advocates that work diligently to address children's questions and concerns. District attorneys, law enforcement officers, and court personnel offer additional support. Although these supports are extremely helpful, the entire legal process can be overwhelming and confusing at times. These individualized, child friendly books will provide additional support and comfort in producing answers to children and their families who have experienced sexual abuse and are working through the processes of investigations and prosecution.

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

Child sexual abuse investigations can be confusing to victims and their families. This book focuses on enhancing the public's understanding of the investigative and legal processes. Distributing this educational book to victims and families will address the need of educating victims on the process, assist with answering questions, and provide a tangible tool for child victims to utilize during the process of healing and recovery.

## **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 1: Distribute booklets at the advocacy center, through law enforcement offices, and crime victims assistance personnel to all children and families who are victims of sexual abuse throughout Central Louisiana.

## **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: Each child who discloses sexual abuse at the advocacy center will be offered one booklet.

Objective 2: Each parish sheriff office and district attorney office will be given booklets to distribute within their community.

#### **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.

The booklet will be purchased within the first month of grant period. The booklet will be immediately available for distribution to child victims of sexual abuse at the advocacy center. The booklet distribution will be ongoing throughout the grant period. By month 3 of grant period, each parish sheriff office and district attorney office will receive booklets to be distributed within their department.



## 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?

The child advocacy center will be responsible for data collection.

2. When will the data be collected?

The data will be collected on an ongoing basis.

3. Who will collect and analyze the data?

Wade Bond, Executive Director, of the Child Advocacy Center will collect and analyze the data.

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

Name: Wade Bond

Phone: (318) 448-4006

Email: [wbond@rapidescac.org](mailto:wbond@rapidescac.org)

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

Wade Bond, Executive Director, will be responsible for updating and/or revising the projects strategy. Based on the simplicity of the project, no revisions are expected.

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 Rapides Children's Advocacy Center will submit the Quarterly Progress Reports, Expenditure Reports and all other required forms on a monthly or quarterly basis as described in the award.

Quarterly Progress Reports are submitted to the Louisiana Commission on Law Enforcement

Quarterly Expenditure Reports are submitted to the Louisiana Commission on Law Enforcement

Monthly review of Program and Financial report are reviewed by Board of Directors

### 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.

### 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 center is located at 1506 Albert Street in a building that has been provided to the agency. The building is a one story home like setting that has one kitchen, two waiting rooms, a forensic interview room, a therapy room, a monitoring room, and two additional office spaces. In 2011, the agency introduced a mobile cac bus to the center to provider additional resources to the surrouding parishes.

### 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?

## 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.

All victims are screened at time of interview to determine if there are specific needs. Those who are in need of applying for victim compensation are identified by staff and provided contact information on Louisiana Crime Victims Reparations 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.

Our agency coordinates activities with other criminal justice/ private service providers in the community through the implementation of our protocol. A copy is included.

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.

Our agency encourages victims to report to law enforcement through fostering increased communication between victim and law enforcement and through providing advocacy services on behalf of the victim.

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.

Our agency complies with the Louisiana Child Protection Act (LRS 15:587.1).

## Kathy Guidry

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**From:** Kathy Guidry  
**Sent:** Thursday, April 19, 2012 6:26 AM  
**To:** Wade Bond (wbond@rapidescac.org)  
**Subject:** C09-8-025, Rapides Children's Advocacy Center, Child Advocacy Program - AMENDED

Mr. Wade Bond  
Rapides Children's Advocacy Center  
1506 Albert St.  
PO Box 228  
Alexandria, LA 71301-6821

RE: C09-8-025, Child Advocacy Program

Dear Ms. Watson:

This office has received the above application. This application will be presented at the Victim Services Advisory Board and the Commission meetings, which are scheduled for May 23<sup>rd</sup> and May 24<sup>th</sup>, 2012, respectively. The information regarding the location of the meetings is yet to be determined. Since this is a new application, you will be required to attend both meetings.

Based on the preliminary review of the referenced application, the following issues must be addressed and resolved. Additional issues may arise between the agency review process and the Advisory Board/Commission meetings. If so, you will be given every opportunity and assistance to address and/or resolve any additional issues to avoid delaying the application to be presented.

1. Pg. 1 –
  - a. Please provide verification of your DUNS and CCR CAGE/NCAGE number and expiration date.
  - b. According to the US Post Office the correct zip code +4 for the physical address is 71301-6821 and 71309-0228 for the po box. Please correct your records.
2. #3, Project Duration – Please adjust the end date to April 30, 2013. Projects are required to begin on the first day of the month and end on the last day of the month. Projects can no longer begin or end outside these dates.
3. Pg. 13, Section 800 Other Direct Costs – Please correct the match to \$1,322 as stated on page 1 and the certification of match. The boxes on the how the books will be purchased were checked for you. Please correct your copy.
4. Pg. 14, A Problem Definition #1 – Please provide current local statistics that supports what this project hopes to address.
5. Pg. 15, B Goal – The goal should be a brief concise statement of the overall accomplishments this project wants to achieve. What do you hope the distribution of the books will accomplish?
6. Pg. 15, C Objectives – Each objective needs to be stated in measureable (absolute numbers) terms.
7. Pg. 16, D Activities – Need to state the timetable the activities will occur.
8. Pg. 22, N Required Components – Need to supply (3) three letters of support on the agencies' letterhead.
9. Pg. 30, Certification of Match – The availability of the match must coincide with the project period.

10. Subgrant Award Report

- a. #8 – The amounts listed here must coincide with the purpose areas identified on page 2.
- b. #10B – You need to include all VOCA funding the agency receives.

11. Need to supply an organization Chart.

Please email or mail ONLY the changes as directed on the appropriate application pages and return only those pages for which changes or additional information directly to LCLE. Please do not fax replies, as they are not always legible.

All pages resubmitted must be complete in all aspects, including signatures, initials, dates, and responses. This information is due to LCLE **by Monday, April 30, 2012**. Please contact me if you have any questions pertaining to this letter.

Sincerely,

*Katherine C. Guidry*

Federal Programs Section Manager  
LA Commission on Law Enforcement  
602 N. 5th St., 1st Floor

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C: (225) 241-5978

F: (225) 342-1846

Email: [kathy.guidry@lcle.la.gov](mailto:kathy.guidry@lcle.la.gov)