

LOUISIANA COMMISSION ON LAW ENFORCEMENT
AND ADMINISTRATION OF CRIMINAL JUSTICE

APPLICATION AND REVIEW
SUMMARY

APPLICATION NUMBER: C10-7-033

APPLICANT: St. Tammany Childrens Advocacy Center

PROJECT TITLE: Severe Child Abuse Section

PROJECT FUNDS :

FUND: \$ 9,841 80.00%

PROJECT DURATION: 12 months

MATCH: \$ 2,460 20.00%

START DATE: 07/01/2012

TOTAL: \$ 12,301 100.00%

END DATE: 06/30/2013

Continuation of NEW

PROJECT SUMMARY:

This funding will pay a portion of the salary of the forensic interviewer. This position is specifically trained to interview abused children, who understands and follows the legal protocol established for these interviews, and who ensures that every agency investigating crimes against children in ST. Tammany Parish has access to these services of the Children Advocacy Center within the time-frame needed by investigating agencies.

RECOMMENDATION : FUND X DENY

SPECIAL CONDITIONS :

1. NO DRAWDOWN OF FUNDS (AWARD) BY LCLE UNTIL APPLICANT RESPONSE TO LCLE LETTER OF 07/20/2012 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: C10-7-033 CVA Purpose Area: 3

1. TITLE OF PROJECT

Severe Child Abuse Section

2. NEW PROJECT

CONTINUATION PROJECT OF: C - -

3. PROJECT DURATION

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

Desired Start Date: 7/1/2012

Desired End Date: 6/30/2013

4. PROJECT FUNDS

Federal Funds: \$9,841

Cash Match \$2,460

In-Kind Match: \$0

Total Project: **\$12,301**

5A. APPLICANT AGENCY INFORMATION

Agency Name: St. Tammany Children's Advocacy Center

Physical Address: 223 W. 28th Avenue

City: Covington

Zip: 70433-2119

Mailing Address: P.O. Box 1852

City: Covington

Zip: 70434-1852

Phone: (985) 892-3885

FAX: (985) 892-3875

Email: liz@cachopehouse.org

5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY

Authorized Official: Jesse Hartley

Title: Executive Director

Agency Name: St. Tammany Children's Advocacy Center

Address: P.O. Box 1852

City: Covington, LA

Zip: 70434-1852

Phone: (985) 892-3885

FAX: (985) 892-3875

Email: jesse@cachopehouse.org

Fed Employer Tax Id: 72 - 1271514

DUNS: 961488392 -

CCR CAGE/NCAGE: SF0F6

CCR Expiration Date: 4/12/2013

6. IMPLEMENTING AGENCY

Name: Jesse Hartley

Title: Executive Director

Agency: St. Tammany Children's Advocacy

Address: P.O. Box 1852

City: Covington, LA

Zip: 70434-1852

Phone: (985) 892-3885 FAX: (985) 892-3875

Email: jesse@cachopehouse.org

7. PROJECT DIRECTOR

Name: Jesse Hartley

Title: Executive Director

Agency: St. Tammany Children's Advocacy

Address: P.O. Box 1852

City: Covington, LA

Zip: 70434-1852

Phone: (985) 892-3885 FAX: (985) 892-3875

Email: jesse@cachopehouse.org

8. FINANCIAL OFFICER

Name: Elizabeth Taurman

Title: Director of Development

Agency: St. Tammany Children's Advocacy

Address: P.O. Box 1852

City: Covington, LA

Zip: 70434-1852

Phone: (985) 892-3885 FAX: (985) 892-3875

Email: liz@cachopehouse.org

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

This funding will pay a portion of the salary of our forensic interviewer. This is a full-time staff position. This position calls for someone specifically trained to interview abused children, who understands and follows the legal protocol established for these interviews, and who ensures that every agency investigating crimes against children in St. Tammany Parish has access to the services of the Children's Advocacy Center within the time-frame needed by the investigating agencies.

LA COMMISSION
ON LAW ENFORCEMENT
2012 JUN -5 PM 2:48

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
Sr. Forensic Interviewer	JoBeth Rickels	FT	\$3,750.00	27.34%	12.00	\$12,303.00	<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"/>
		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:						\$12,303.00	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
Not Applicable							\$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
Not Applicable			\$0.00
			\$0.00
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:			\$0.00

SECTION 100. PERSONNEL SUMMARY	
FEDERAL FUNDS	\$9,841
CASH MATCH	\$2,460
IN-KIND MATCH	
PERSONNEL TOTAL	\$12,301

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 forensic interview is the heart of what we do at the Children's Advocacy Center. Our facilities are designed to make a child feel comfortable and safe enough to reveal the truth about what happened. Our forensic interviewer is specially trained to conduct non-leading interviews in an age-appropriate manner for the child involved and to foster an environment of safety and trust. The investigating agencies watch the interview in process through a closed-circuit screen in another room and are able to ask the interviewer for clarification of anything needed before the interview concludes. Through this process a child victim is not interviewed several times by multiple agencies. The recorded interview is admissible in court.

Children's Advocacy Centers are part of the multi-disciplinary approach to investigations of crimes against children. Our forensic interviewer convenes the monthly meetings of the multi-disciplinary team (law enforcement, child protection services, the District Attorney's Office and CAC interviewer and therapist) and chairs those meetings, which are held at our site. This process enables the team members to share information and keep each other apprised of developments on all open cases.

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

Our Sr. Forensic Interviewer's salary is based on national and regional salary surveys. Forensic interviewer's salaries are typically based on their years of experience, level of training, and education. Her salary is equivalent with interviewers who possess the same years of experience, have completed advanced-level trainings, and hold a master's degree.

C) Project duties of each position requested:

- Conducts sensitive and thorough forensic interviews with children regarding allegations of abuse for whom investigation have been opened by Law Enforcement and/or Department of Child and Family Services.
- Works with multi-disciplinary team members (law enforcement, child protection services of the Department of Child and Family Services, and the District Attorney's Office) in child abuse cases by facilitating the coordination of the investigating team's efforts and providing an objective venue for open discussions among team members. Convenes and chairs monthly multi-disciplinary team meetings for this purpose.
- Provides expert testimony as requested by the District Attorney's Office as to the CAC's interviewing protocol, the interviewer's training and abilities, the forensic interview format used in a specific case, and the individual issues involving a child's case.
- Ensures quality and continuity of forensic interviewing services, which includes training and developing backup forensic interviewing support.
- Provides crisis intervention and support to child victim and their family members as needed.
- Stays informed on the latest child abuse issues, research, protocols and interviewing techniques.
- Maintains required paperwork pertaining to forensic interviews for archiving in each child's record. This also includes review and update of current computer database. The database documents and is capable of producing reports on the number of interviews and outcomes for each child including: placement (custody),

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 position is held by JoBeth Rickels.

SECTION 200. FRINGE BENEFITS (Employer's Share Only)

Enter the Individual Name(s) of the employees receiving fringe benefits for each position funded through this grant. There are two sets of each benefit below to allow budgeting for eight employees. For further information and direction, please refer to the application instructions.

Check: All Fringe Benefits Will Be Paid by Applicant Agency

Additional Fringe Benefits Will Be Paid by Applicant Agency

EMPLOYEES' NAMES:					EMPLOYEES' NAMES: (Continued)				
SOCIAL SECURITY	RATE		SALARY	TOTAL	SOCIAL SECURITY	RATE		SALARY	TOTAL
1.	.062			\$0.00	5.	.062			\$0.00
2.	.062			\$0.00	6.	.062			\$0.00
3.	.062			\$0.00	7.	.062			\$0.00
4.	.062			\$0.00	8.	.062			\$0.00
MEDICARE	RATE		SALARY	TOTAL	MEDICARE	RATE		SALARY	TOTAL
1.	.0145			\$0.00	5.	.0145			\$0.00
2.	.0145			\$0.00	6.	.0145			\$0.00
3.	.0145			\$0.00	7.	.0145			\$0.00
4.	.0145			\$0.00	8.	.0145			\$0.00
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.				\$0.00	5.				\$0.00
2.				\$0.00	6.				\$0.00
3.				\$0.00	7.				\$0.00
4.				\$0.00	8.				\$0.00
WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL	WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL
1.				\$0.00	5.				\$0.00
2.				\$0.00	6.				\$0.00
3.				\$0.00	7.				\$0.00
4.				\$0.00	8.				\$0.00
UNEMPLOYMENT TAX Based on first \$7,000 or Less	RATE	TYPE	SALARY	TOTAL	UNEMPLOYMENT TAX Based on first \$7,000 or Less	RATE	TYPE	SALARY	TOTAL
1.		CHECK TYPE:		\$0.00	5.		CHECK TYPE:		\$0.00
2.				\$0.00	6.				\$0.00
3.		<input type="checkbox"/> FUTA		\$0.00	7.		<input type="checkbox"/> FUTA		\$0.00
4.		<input type="checkbox"/> SUTA		\$0.00	8.		<input type="checkbox"/> SUTA		\$0.00
PUBLIC/PRIVATE RETIREMENT	RATE		SALARY	TOTAL	PUBLIC/PRIVATE RETIREMENT	RATE		SALARY	TOTAL
1.				\$0.00	5.				\$0.00
2.				\$0.00	6.				\$0.00
3.				\$0.00	7.				\$0.00
4.				\$0.00	8.				\$0.00
OTHER:	RATE		SALARY	TOTAL	OTHER:	RATE		SALARY	TOTAL
1.				\$0.00	5.				\$0.00
2.				\$0.00	6.				\$0.00
3.				\$0.00	7.				\$0.00
4.				\$0.00	8.				\$0.00
FRINGE BENEFITS TOTAL (A):				\$0.00	FRINGE BENEFITS TOTAL (B):				\$0.00

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

Fringe Benefits Total (A+B): \$0.00

SECTION 200. FRINGE BENEFITS SUMMARY	
FEDERAL FUNDS	
CASH MATCH	
TOTAL FRINGE BENEFITS	\$0.00

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.

Child abuse and neglect and in particular child sexual abuse are more prevalent than most adults recognize. Most of the cases seen at our center involve child sexual abuse so that is the area I am addressing in this application.

An adult retrospective study in 2006 made by the Centers for Disease Control and Prevention showed that one in four girls and one in six boys will be sexually molested before their 18th birthday, which is an even more shocking when one realizes this means there are an estimated 42 million adult survivors of child sexual abuse in the United States. According to the national organization, Darkness2Light, child sexual abuse is very costly one financially (\$14,345 is the tangible costs for intervention and treatment for a single incident of child sexual abuse) and the after-effects are devastating, from psychiatric disorders and substance abuse problems to suicidal thoughts and attempted suicide, and teen pregnancies. Their financial statistics for St. Tammany Parish show the direct and immediate costs of child sexual abuse are almost \$2 million a year; with long-term costs and losses caused by child sexual abuse at \$20.5 million a year. We have interviewed more than 2,800 children since opening our doors in 1996.

Not only do we interview and offer therapy to the children who come to us for an interview, but we also have an adult education initiative to bring about awareness of child sexual abuse and to teach community members how to recognize, steps to prevent it, and to be a voice for children. Several staff and board members, including our forensic interviewer, are facilitators for this program.

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

Our mission is to improve community response to child abuse by partnering with a team of professionals to facilitate collaborative investigations. Prior to implementation of Children's Advocacy Centers, every agency involved in the investigation of child abuse interviewed a child – often more than once - as they attempted to gather information for their own segment of the investigation. The social service and the criminal justice systems were not working together in an effective manner. This model led to the child interacting with multiple professionals and discussing the details of their abuse on many different occasions and in a variety of settings. The repeated interviewing and unfriendly manner of the settings the child visited negatively affected court outcomes and the ambiguity of the role of each agency sometimes lead to children “falling through the cracks” and not receiving proper follow up services. This added to the child's emotional distress and created a segmented, repetitious, and often frightening experience for the child victims. The concept of Children's Advocacy Centers changed forever the way child abuse investigations are handled.

Our Children's Advocacy Center does the interviewing for all the investigating agencies in St. Tammany and Washington Parishes, and also courtesy interviews for the FBI and for investigating agencies outside our parishes if the child is now living here. We are a “neutral” agency, not prosecutory, and as such our intent is to provide the avenue or environment for a child to tell the truth. Our services mean that each agency does not need to have an employee who is a specially trained forensic interviewer for children, the video recording equipment, a special room for children to be interviewed in; nor do they incur the cost to keep an interviewer trained in this protocol and in current best practices.

Our CAC also has a licensed therapist who offers therapy to both the child victim and non-offending caregiver(s) as they heal from the abuse.

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.

-To ensure that every agency investigating crimes against children in St. Tammany Parish has access to the services of the Children's Advocacy Center, within the time-frame needed by the investigating agencies, during normal working hours 52 weeks a year.

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). Full-time staff interviewer-To conduct 200 forensic interviews with child abuse victims
- 2). To provide the evidence obtained from forensic interviews to relevant criminal justice agencies for 200 cases.

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.

- Full-time staff person who is a trained interviewer. We have a backup interviewer to ensure that we have coverage 52 weeks/year during normal working hours and as needed for emergencies outside normal work hours. We also have access to interviewers at other CACs whom we can rely on if needed.

Conduct interviews of child abuse cases and video recording of the interview.

- Our interviewer and backup interviewer keep their skills honed through regularly-scheduled "peer reviews" hosted through our state CAC and they attend professional trainings and seminars annually.

-We have an office coordinator who schedules appointments upon calls from the investigative agencies. If she is not available, our scheduling calendar is set up so that any staff person taking a call can also schedule an interview.

-Law enforcement agencies are given a copy of the recorded interview for their investigative use. A second copy of the interview is kept in our safe for the District Attorney's Office if needed.

The activities undertaken to achieve the goals and objectives are on going through out the grant period of 7/1/2012 to 6/30/2013.

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?

Our CAC has been selected for a pilot program from our state organization to collect feedback on our services. The form that will be used will be ready within a month. We will collect information from the caregivers of the children and from the Multi-disciplinary team.

2. When will the data be collected?

The data will be collected from caregivers immediately after their child has been interviewed. A second survey will be made 60 days after a child has been to our center. The survey will be administered by our volunteer intern.

3. Who will collect and analyze the data?

The data will be analyzed by our state organization and by one of the staff members not directly involved in the interview process.

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

Name: Liz Taurman

Phone: (985) 892-3885

Email: liz@cachopehouse.org

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

The Board of Directors, the Executive Director, the interviewer, and our office coordinator will review the results and make policy and procedural changes as needed.

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.

Quarterly Progress and Expenditure Reports will be submitted to the Louisiana Commission on Law Enforcement.

The Board of Directors, the Executive Director, interviewer, and office coordinator will receive the results. Our reporting to the state CAC (ACLA) will be made every six months.

Children's Advocacy Center – Intake Form

Child's Name _____ Client Interview # _____

Interviewer _____ Interview date/time _____

Referral Source _____ Date CAC received referral _____

LAW ENFORCEMENT

LE Agency _____ Incident # _____

Detective/Investigator _____ Date of Initial Report _____

DEPT. OF CHILD AND FAMILY SERVICES

DCFS Parish _____ Case Investigator(s) _____

Date of Initial Report to DCFS _____

CHILD'S INFORMATION

Full Name _____ SS# _____

Date of Birth _____ Age _____ Race/Gender _____

Street _____

City, State, Zip _____

Phone _____ Parish _____

Who has LEGAL CUSTODY of child? _____

Does Child have any developmental delays? _____

MOTHER _____ Race/Gender _____ DOB _____

Street _____

City, State, Zip _____

Other Family Members _____

FATHER _____ Race/Gender _____ DOB _____

Street _____

City, State, Zip _____

Other Family Members _____

CHILD'S NAME _____

Intake # _____

ALLEGED PERPETRATOR(S)

Name _____ DOB (Age) _____ Race/Gender _____ Relationship _____

1 _____

2 _____

Address of Alleged Perpetrator(s) _____

Phone # _____ SSN _____

Town/community where abuse occurred _____

Type of ABUSE being investigated

Sexual _____ Physical _____ Neglect _____ Witness _____ Drug Endangered _____ Other _____

Nature of Abuse/Brief description of presenting problem _____

Cultural Issues _____

Has the child been interviewed?

NO _____ YES _____ By whom _____

Has the Child had a medical exam?

NO _____ Will an exam be scheduled? _____

YES _____ Date, location, & Physician _____

Counseling Referrals _____

Victim Advocate Notes _____

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.

We have in place some public funding through the municipalities we serve. We also fundraise throughout the year with special events, grants, and business and individual sponsors of our programs and services.

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 facility in Covington is owned by us, thanks to a generous donation from the St. Tammany Homebuilders Association. All of our interview equipment is owned and maintained by us, and was updated four years ago. We have a system that makes two copies of each interview; one we keep and the other goes to law enforcement. In addition, we store all our records through NCA Track, which is an secure system housed in Oakridge, Tennessee.

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?

Due to the confidential nature of child abuse, volunteers are not used as match or as part of the VOCA funded portion of our program. Volunteers are utilized by the CAC in areas not directly related to child abuse victims.

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.

An investigation has already begun on the crimes committed against the children we see. Our District Attorney's Office has a Crime Victim Reparations Program, which our Victim Advocate and our therapist both talk with the caregivers about.

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.

Children's Advocacy Centers are part of the multi-disciplinary approach to investigations of crimes against children. Our forensic interviewer convenes the monthly meetings of the multi-disciplinary team (law enforcement, child protection services, the District Attorney's Office and CAC interviewer and therapist) and chairs those meetings, which are held at our site. This process enables the team members to share information and keep each other apprised of developments on all open cases.

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 crimes are already under investigation when the victim sees us.

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. Tammany Children's Advocacy Center will comply with the Louisiana Child Protection Act .

Rutha Chatwood

From: Rutha Chatwood
Sent: Friday, July 20, 2012 3:25 PM
To: Helmer Magnuson
Subject: C10-7-033; St. Tammany Children's Advocacy Center; Severe Child Abuse Section

Ms. Elizabeth Taurman
St. Tammany Children's Advocacy Center
c/o Mr. Helmer Magnuson
Metropolitan/Jefferson CJCC
1221 Elmwood Park Blvd., Suite 607
Harahan, LA 70123-2337

RE: C10-7-033; St. Tammany Children's Advocacy Center; Severe Child Abuse Section

Dear Ms. Taurman:

This office has received the above referenced application. The application will be presented at the Victim Services Advisory Board and the Commission meetings scheduled for September 12 and 13, 2012, respectively.

Based on my review of the application, the following issues must be addressed and resolved. Additional issues may arise between the review process and the Advisory Board and 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. Page 1, Section 9. Brief Project Description – Please include a statement requesting pre-award costs dating back to July 1, 2012.
2. Page 14, Program Narrative, Problem Definition, Question 1 –
 - a. Please identify the current nature and magnitude of the specific problem in your local community that needs to be addressed through this proposed project. Be sure to include current data from your local jurisdiction to support the justification.
 - b. In addition, please remove any verbiage that describes prevention activities, as these are unallowable VOCA activities. Please note that VOCA funds may be used for presentations in public forums, such as schools and community centers designed to identify crime victims and refer them to needed services. These costs may include staff time, materials, brochures, and newspaper notices. However, funds may not be used for activities solely intended to educate the community, raise the public's awareness of crimes, and other crime prevention activities.

In order to be in compliance with this guideline, please remove or re-word the information regarding the “adult education initiative to bring about awareness of child sexual abuse and to teach community members how to recognize, steps to prevent it, and to be a voice for the children” in this section because the statement may give the impression the activities are crime prevention activities, which are not allowed.

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 was requested to the District Office. 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 **Friday, August 10, 2012**. Please contact the District Office if you have any questions.

Sincerely,

Rutha Chatwood

Victim Services Program Manager
LA Commission on Law Enforcement

Mailing Address:

P. O. Box 3133
Baton Rouge, LA 70821-3133

Physical Address:

602 North Fifth Street
Baton Rouge, LA 70802

Phone: 1-225-342-1625

Fax: 1-225-342-1846

Email: rutha.chatwood@lcle.la.gov

Hours: Tuesday - Friday, 7:00 a.m. – 5:30 p.m.