LOUISIANA COMMISSION ON LAW ENFORCEMENT AND ADMINISTRATION OF CRIMINAL JUSTICE

APPLICATION AND REVIEW SUMMARY

APPLICATION NUMBER: M09-8-021

APPLICANT: Adapt, Inc.

PROJECT TITLE: Sexual Assault Program

PROJECT FUNDS :

FUND:	$ 9,523	100.00%	
MATCH:	$ 0	0.00%	
TOTAL:	$ 9,523	100.00%	

PROJECT DURATION: 8 months

START DATE: 09/01/2010

END DATE: 04/30/2011

Continuation of M96-5-008

PROJECT SUMMARY:

ADAPT/Washington Parish Sexual Assault Center will enlarge and strengthen its victim service program by assisting at least 20 new women victims of sexual assault by maintaining a 24/7 crisis hotline and Hospital ER room/law enforcement escort advocates, and by coordination victim services on their behalf. This will be accomplished by paying contracted crisis line/escort advocates a minimal incentive to ensure the 24/7 availability of services. The project director will provide services to or on behalf of sexual assault victms and their families.

RECOMMENDATION : **FUND** X **DENY** ___

SPECIAL CONDITIONS :

1. NO DRAWDOWN OF FUNDS (AWARD) UNTIL APPLICATION IS REVIEWED AND APPROVED BY LCLE STAFF.
2. NO RELEASE OF FUNDS BY LCLE UNTIL PRIOR PROJECT M08-8-034 IS FINALIZED.
3. NO DRAWDOWN (AWARD) OF FUTURE V.A.W.A. FUNDING UNTIL THE V.A.W.A. PREVIOUSLY REQUIRED FEDERAL ANNUAL REPORT IS SUBMITTED AND APPROVED BY LCLE.

LOUISIANA COMMISSION ON LAW ENFORCEMENT AND THE ADMINISTRATION OF CRIMINAL JUSTICE

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

CFDA #16.588

FOR LCLE USE ONLY: **Project ID:** M09-8-021 **VAWA Purpose Area:** 5

1. TITLE OF PROJECT
Sexual Assault Program

2. ☐ **NEW PROJECT**
☒ **CONTINUATION PROJECT OF: M08 - 8 - 034**

3. PROJECT DURATION
Total Length: 8 Months (*Not to exceed 12 Months*)
Desired Start Date: 9/1/2010
Desired End Date: 4/30/2011

4. PROJECT FUNDS

Federal Funds:	$9,523
Cash Match	$0
In-Kind Match:	$0
Total Project:	**$9,523**

5A. APPLICANT AGENCY INFORMATION
Agency Name: ADAPT.Inc.
Physical Address: 216 Memphis Street
City: Bogalusa, LA Zip: 70427-3844
Mailing Address: 216 Memphis Street
City: Bogalusa, LA Zip: 70427-3844
Phone: (985) 735-0160 FAX: (985) 735-0970
Email: adapt_inc@bellsouth.net

5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY
Authorized Official: Sandra Bloom
Title: Vice-President, Board of Directors
Agency Name: ADAPT, Inc.
Address: 216 Memphis Street
City: Bogalusa, LA Zip: 70427-3844
Phone: (985) 735-0160 FAX: (985) 735-0970
Email: adapt_inc@bellsouth.net

Fed Employer Tax Id: 72 - 1274844 DUNS: 966950370 - CCR CAGE/NCAGE: 5ZUY2 CCR Expiration Date: 5/11/2011

6. IMPLEMENTING AGENCY
Name: Sandra Bloom
Title: Vice-President, Board of Directors
Agency: ADAPT, Inc.
Address: 216 Memphis Street
City: Bogalusa, LA Zip: 70427-3844
Phone: (985) 735-0160 FAX: (985) 735-0970
Email: adapt_inc@bellsouth.net

7. PROJECT DIRECTOR
Name: Charlette Fornea
Title: Project Director
Agency: ADAPT, Inc.
Address: 216 Memphis Street
City: Bogalusa, LA Zip: 70427-3844
Phone: (985) 735-0160 FAX: (985) 735-0970
Email: adapt_inc@bellsouth.net

8. FINANCIAL OFFICER
Name: Michelle Knight
Title: Treasure
Agency: ADAPT, Inc.
Address: 216 Memphis Street
City: Bogalusa, LA Zip: 70427-3844
Phone: (985) 735-0160 FAX: (985) 735-0970
Email: adapt_inc@bellsouth.net

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

ADAPT/Washington Parish Sexual Assault Center will enlarge and strengthen its victim service program by assisting at least 20 new women victimsof sexual assault by maintaining a 24/7 crisis hotline and hospital ER room/law enforcement escort advocates, and by coordination victim services on their behalf. This will be accomplished by paying contracted crisis line/escort advocates a minimal incentive to ensure the 24/7 availability of services. The project director will provide services to or on behalf of sexual assault victims and their families.

VAWA PURPOSE AREAS

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

☐ 1. Training law enforcement officers, judges, other court personnel, and prosecutors to more effectively identify and respond to violent crimes against women, including the crimes of sexual assault, domestic violence, and dating violence.

☐ 2. Developing, training, or expanding units of law enforcement officers, judges, other court personnel, and prosecutors specifically targeting violent crimes against women, including sexual assault and domestic violence.

☐ 3. Developing and implementing more effective police, court, and prosecution policies, protocols, orders, and services devoted to preventing, identifying, and responding to violent crimes against women, including the crimes against women, including sexual assault and domestic violence.

☐ 4. Developing, installing, or expanding data collection and communication systems, including computerized systems, linking police, prosecutions, and the courts or for the purpose of identifying and tracking arrests, protection orders, violations of protection orders, prosecutions, and convictions for violent crimes against women, including the crimes of sexual assault and domestic violence, including the reporting of such information to the National Instant Criminal Background Check System.

☒ 5. Developing, enlarging, or strengthening victim services programs, including sexual assault and domestic violence, and dating violence programs; developing or improving the delivery of victim services to underserved populations; providing specialized domestic violence court advocates in courts where a significant number of protection orders are granted; and increasing reporting and reducing attrition rates for cases involving violent crimes against women, including sexual assault and domestic violence.

☐ 6. Developing, enlarging, or strengthening programs addressing stalking.

☐ 7. Developing, enlarging, or strengthening programs addressing the needs and circumstances of Indian tribes dealing with violent crimes against women, including the crimes of sexual assault and domestic violence.

☐ 8. Supporting formal and informal statewide, multi-disciplinary efforts, to the extent not supported by state funds, to coordinate the response of state law enforcement agencies, prosecutors, courts, victim services agencies, and other state agencies and departments, to violent crimes against women, including the crimes of sexual assault, domestic violence, and dating violence.

☐ 9. Training of sexual assault forensic medical personnel examiners in the collection and preservation of evidence, analysis, prevention, and providing expert testimony and treatment of trauma related to sexual assault.

☐ 10. Developing, enlarging, or strengthening programs to assist law enforcement, prosecutors, courts, and others to address the needs and circumstances of older and disabled women who are victims of domestic violence or sexual assault, including recognizing, investigating, and prosecuting instances of such violence of assault and targeting outreach and support, counseling, and other victim services to such older and disabled individuals.

☐ 11. Providing assistance to victims of domestic violence and sexual assault in immigration matters.

☐ 12. Maintaining core victim services and criminal justice initiatives while supporting complementary new initiatives and emergency services for victims and their families.

☐ 13. Provide for special victim assistants in law enforcement agencies to serve as liaisons between victims and law enforcement in order to improve the enforcement of protection orders. (Jessica Gonzales Victim Assistants)

☐ 14. Improving responses to police-perpetrated domestic violence. (Crystal Judson Domestic Violence Protocol Program)

PROJECT BUDGET SUMMARY

INSTRUCTIONS: The Checklist is self-explanatory. In Project Summary, applicable budget category totals will be automatically entered from each of the Detailed Project Budget Summaries. Provide source of Cash and/or In-Kind Match. In last table, enter the percentage of STOP funds directed to each area that this project will address.

CHECKLIST:

	YES:	NO:
Are all budgeted items allowable per Program Guidelines?	☒	☐
Were instructions followed to determine allowable personnel/contractual costs?	☒	☐
Are all line item computations correct?	☒	☐
Do line items add to category totals?	☒	☐
Have category totals been rounded to nearest dollar?	☒	☐

Each category amount listed in the table below must equal category totals in each budget section.

Person Completing Budget Section: Charlette Fornea Title: Project Director

Phone: (985) 735-0160 Fax: (985) 735-0970 E-Mail: adapt_inc@bellsouth.net

PROJECT BUDGET SUMMARY

BUDGET CATEGORY	FEDERAL FUNDS	CASH MATCH	IN-KIND MATCH	SECTION TOTAL
SECTION 100 PERSONNEL	$2,730	$0	$0	$2,730
SECTION 200 FRINGE BENEFITS	$305	$0	N/A	$305
SECTION 300 TRAVEL	$240	$0	$0	$240
SECTION 400 EQUIPMENT	$0	$0	$0	$0
SECTION 500 SUPPLIES	$100	$0	$0	$100
SECTION 600 CONTRACTUAL	$240	$0	N/A	$240
SECTION 800 OTHER DIRECT COSTS	$5,908	$0	$0	$5,908
TOTAL:	$9,523	$0	$0	$9,523

Provide Source of *Cash* Match: 0.00

Provide Source of *In-Kind* Match: None Required

USE OF STOP FUNDS IN PERCENTAGES

Type of Victimization Served:	Percentage of STOP Funds Used:
Sexual Assault	100%
Domestic Violence/Dating Violence	0%
Stalking	0%
Total (*must equal 100 percent*)	100%

SECTION 100. PERSONNEL

Enter Position Titles and Names of the employees for each position funded through this grant. For further information and direction, please refer to the application instructions.

FULL-TIME EMPLOYEES:

POSITION TITLE	EMPLOYEE NAME	FT	ACTUAL MONTHLY SALARY	TIME DEVOTED TO PROJECT	NUMBER OF MONTHS	TOTAL SALARY PAID BY GRANT	PAID WITH F	PAID WITH C
		FT				$0.00	☐	☐
		FT				$0.00	☐	☐
		FT				$0.00	☐	☐
		FT				$0.00	☐	☐
		FT				$0.00	☐	☐
		FT				$0.00	☐	☐
		FT				$0.00	☐	☐
		FT				$0.00	☐	☐
SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:						$0.00	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	PAID WITH C
Program Director	Charlette Fornea	PT	$28.00	97.00	3.35%	30.00	$2,729.58	☒	☐
							$0.00	☐	☐
							$0.00	☐	☐
							$0.00	☐	☐
							$0.00	☐	☐
							$0.00	☐	☐
							$0.00	☐	☐
							$0.00	☐	☐
SUBTOTAL AMOUNT OF PART-TIME AND/OR OVERTIME EMPLOYEES SALARIES:							$2,729.58	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
N/A			$0.00
			$0.00
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:			$0.00

SECTION 100. PERSONNEL SUMMARY	
FEDERAL FUNDS	$2,730
CASH MATCH	$0
IN-KIND MATCH	$0
PERSONNEL TOTAL	$2,730

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:

No positions are new. All have been backfilled. We do not pay for overtime. The director position is needed in order to provide counseling services to victims, to promote interagency coordination among law enforcement, medical, and judicial systems on behalf of the victim, to ensure emergency care and proper evidence collection, and to train and supervise staff and volunteers.

Director will receive $2,730

Total for 100 Personnel is $2,730

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

1. The director of the Washington Parish Sexual Assault Center will be paid a monthly salary of $341.25/Month for a total of eight months during this grant period = $2,730/Fund Year.
2. 3.35% of the Director's time (approximately 12.13 hours/month) shall be spent:
   A. Providing direct services to sexual assault victims and their families
   B. Providing coordination of services on victims' behalf
   C. Providing training, evaluation, scheduling crisis line/hospital escorts, and monitoring victim services
3. Time & Attendance records shall be maintained.

C) Project duties of each position requested:

1. Director (backfilled):
   A. Will provide supervision of staff and volunteers.
   B. Will provide continuing education, training, & evaluation of staff and volunteers.
   C. Will coordinate month-to-month schedules to assure manning of the 24/7 telephone crisis line.
   D. Will collect, review, and analyze all agency reports and phone contacts.
   E. Will maintain records which include names, duties, and functions performed, number of volunteer hours and dates worked, and value of duty performed.
   F. Will assist in providing direct victim services; such as crisis intervention, intake, information, education, referral, counseling, advocacy, and emotional support.

D) Indicate if personnel will be new or existing personnel. If existing, indicate if position has been backfilled. If this is a continuation application, indicate the personnel's original status. [Existing personnel is an employee that currently works for the agency, but will now be working on grant activities. If so, the position from which the employee is moved must be filled. If employee is the same from the previous grant, indicate if the employee was originally hired for that position.]

We are requesting to continue funding the position of director of the Washington Parish Sexual Assault Center. This position is existing and has been backfilled. Mrs. Fornea is the existing director and has successfully served as Director of the Washington Parish Sexual Assault Center for the past nineteen (19) years. She was also the founder of this organization. She is a Licensed Professional Counselor and a National Board Certified Counselor who is an experienced therapist and is qualified by the state to provide assessment, counseling and supervision of mental health professionals.

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. Charlette Fornea	.062		$2,730	$169	5.	.062			$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. Charlette Fornea	.0145		$2,730	$39	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. N/A				$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. Charlette Fornea	0.024		$2,730	$65	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. Charlette Fornea	0.012	CHECK TYPE:	$2,730	$32	5.		CHECK TYPE:		$0
2.				$0	6.				$0
3.		☐ FUTA		$0	7.		☐ FUTA		$0
4.		☒ SUTA		$0	8.		☐ SUTA		$0
PUBLIC/PRIVATE RETIREMENT	RATE		SALARY	TOTAL	PUBLIC/PRIVATE RETIREMENT	RATE		SALARY	TOTAL
1. N/A				$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):	$305				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): $305

SECTION 200. FRINGE BENEFITS SUMMARY	
FEDERAL FUNDS	$305
CASH MATCH	$0
TOTAL FRINGE BENEFITS	$305

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. ***Out-of-state travel 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: Staff/Volunteers TITLE: PURPOSE:	$0.48	500.00	$240.00	☒	☐	☐
NAME: TITLE: PURPOSE:			$0.00	☐	☐	☐
NAME: TITLE: PURPOSE:			$0.00	☐	☐	☐
NAME: TITLE: PURPOSE:			$0.00	☐	☐	☐
SUBTOTAL FOR LOCAL TRAVEL:			$240.00	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: FROM	TO	PAID WITH F	C	IK
NAME: TITLE: PURPOSE:				☐	☐	☐
NAME: TITLE: PURPOSE:				☐	☐	☐
NAME: TITLE: PURPOSE:				☐	☐	☐

CONTINUED FROM ABOVE TABLE	MILEAGE RATE	TOTAL MILES	MILES COST	NO. OF DAYS	NO. OF MEALS	MEAL COSTS	AIRFARE COSTS	LODGING COSTS (Include Tax)	OTHER TRAVEL COSTS	TOTAL COSTS	PAID WITH F	C	IK
NAME:			$0.00							$0.00	☐	☐	☐
NAME:			$0.00							$0.00	☐	☐	☐
NAME:			$0.00							$0.00	☐	☐	☐
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	$240
CASH MATCH	$0
IN-KIND MATCH	$0
TRAVEL TOTAL	$240

SECTION 400. COMPUTER QUESTIONNAIRE

If a computer and/or computer software is requested, the following must be completed. Please do not exceed spaces provided.

1. How will the purchase of computer equipment and/or software enhance the program to be funded?

2. How will the computer(s) be integrated into and/or enhance your current system?

3. What is the cost of each of the following:

   A. Installation?

   B. Staff training to use the computer equipment?

   C. The on-going operational costs, such as maintenance agreements, supplies, etc.?

4. How will additional costs be supported?

SECTION 500. SUPPLIES

SECTION A: List items within this category by major type; e.g., office supplies (pens, pencils, paper, etc.), postage, blank cassette tapes, etc. Include tax and shipping costs in Unit Price. If office supplies average $50 per month or less, i.e., $600 for a 12-month grant period, do not itemize items. List as "Basic Supply Allowance" under "Type" and the dollar amount under "Total Cost". Please refer to application instructions for direction.

TYPE OF SUPPLIES	QUANTITY	UNIT PRICE	TOTAL COST	PAID WITH		
				F	C	IK
Basic Supply Allowance	1.00	$100.00	$100.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
			$0.00	☐	☐	☐
SUBTOTAL OF SECTION A SUPPLIES:			$100.00	F = Federal Funds C = Cash Match IK = In-Kind Match		

BRIEFLY EXPLAIN:

A) Need for and use of each major supply type requested:

1. Basic office supplies in form of pens, paper, folders, binders, and ink are needed:
   A. To be used to coordinate services on behalf of sexual assault victims.
   B. To train staff and volunteers to man the crisis line.
   C. To perform hospital escorts.
   D. For the implementation of direct services.
2. Postage is needed in order to provide follow-up and victim coordination of services.

B) Its relationship to this project.

These supplies are much needed in order to facilitate services to victims of sexual assault.

SECTION 500. SUPPLIES (Continued)

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

TYPE	TITLE OF PUBLICATIONS/FILMS	QUANTITY	UNIT PRICE	TOTAL COST	PAID WITH		
					F	C	IK
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
SUBTOTAL OF SECTION B SUPPLIES:				$0.00	F = Federal Funds C = Cash Match IK = In-Kind Match		

BRIEFLY EXPLAIN:

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

SECTION 500. SUPPLIES SUMMARY	
FEDERAL FUNDS	$100
CASH MATCH	$0
IN-KIND MATCH	$0
SUPPLIES TOTAL	$100

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	PAID WITH C
Name: Title: Crisis Line/Hospital Escort Agency:	Man crisis hotline and serve as hosptial/law enforcement victim escorts/advocates	30.00	$8.00	$240.00	☒	☐
Name: Title: Agency:				$0.00	☐	☐
Name: Title: Agency:				$0.00	☐	☐
Name: Title: Agency:				$0.00	☐	☐
			SUBTOTAL OF CONTRACTUAL COSTS:	$240.00	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 Tax)	OTHER TRAVEL COSTS	TOTAL COSTS	PAID WITH F	PAID WITH C
NAME:			$0.00							$0.00	☐	☐
NAME:			$0.00							$0.00	☐	☐
NAME:			$0.00							$0.00	☐	☐
									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:

1. The purpose of Crisis Line Advocates and/or Hospital/Law Enforcement Escorts is to help answer the crisis line and to assist the victim throughout the rape kit examination and law enforcement reporting when a volunteer or regular staff member is not available. The Crisis Line Advocates and/or Hospital/Law Enforcement Escorts are much needed to enhance victim services.

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

1. Crisis Line Advocates and/or Hospital/Law Enforcement Escorts are needed to man 24/7 crisis telephone line and assist the victim through the examination process and law enforcement reporting. This rate of compensation is reasonable and consistent with that paid for similar services. This small stipend is necessary and cost effective to ensure that services are provided during the hard to fill times, such as after hours and on weekends and holidays.

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

1. Funds will be used to help offset the cost of manning the 24-hour crisis line and victim escorts. Volunteers in good standing may choose to be placed on a rotation list for an incentive compensation at the rate of $8.00/Hour for a limited number of hours. This is cost effective because the national value for this service is $10/hour.

SECTION 600. CONTRACTUAL SUMMARY	
FEDERAL FUNDS	$240
CASH MATCH	$0
CONTRACTUAL TOTAL	$240

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	PAID WITH C	PAID WITH IK
Telephone/fax/internet	Less than pro-rata share	8.00	$50.00	$400.00	☒	☐	☐
Utilities: Elec., gas, etc.	Less than pro-rata share	8.00	$150.00	$1,200.00	☒	☐	☐
Rent	Less than pro-rata share	8.00	$325.00	$2,600.00	☒	☐	☐
Bookkeeping services	Less than pro-rata share	8.00	$125.00	$1,000.00	☒	☐	☐
Liability Insurance	Pro-rata by project/year	1.00	$500.00	$500.00	☒	☐	☐
Washington Parish Commissio	Actual cost of dues	1.00	$10.00	$10.00	☒	☐	☐
Maintenance of build/equipm	Less than pro-rata by project/year	1.00	$198.00	$198.00	☒	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
				$0.00	☐	☐	☐
			SUBTOTAL OF OTHER DIRECT COSTS:	$5,908.00	F = Federal Funds C = Cash Match IK = In-Kind Match		

BRIEFLY EXPLAIN:

A) Need for each type listed; and

1. Telephone/fax/internet services are needed to maintain the 24-hour crisis line and to provide services to or on behalf of victims of sexual assault and their families. 2. Utilities & rent: The Washington Parish Sexual Assault Center utilizes approximately 75% of the total office space in the building (3/4 x 2860 sq. ft. =2,145 sq. ft.) Our pro-rata share of utilities is 75%. Total utilities for this office averages $525/month and rent is $1,000/month. The amounts listed above are less than that needed to operate the Rape Crisis Center. All other Direct Costs cited in this application will be used to complete the goals and objectives of this project.3. Bookkeeping/accounting services are needed to assist with filing required state and federal reports and taxes, conducting manadatory audits, payroll, software support, and monthly statements at a cost of approximately $4,026/yr. of which $1,000 is used from these funds. 4-6 D&O Insurance and professional liability insurance

B) Its relationship to project.

All Other Direct Costs relate directly and are necessary in order to fulfill this project's goals and objectives. They ensure sexual assault victims a confidential, emotionally supportive environment in which they are most likely to benefit from coordination of services and to return to their former level of functioning before the crime was committed. Victims are more likely to report to law enforcement if they know that someone is available to guide them through the process.

SECTION 800. OTHER DIRECT COSTS SUMMARY	
FEDERAL FUNDS	$5,908
CASH MATCH	$0
IN-KIND MATCH	$0
OTHER DIRECT COSTS TOTAL	$5,908

PROGRAM NARRATIVE

A. PROBLEM DEFINITION

1. Identify the nature and magnitude of the specific problem existing in your particular community that needs to be addressed through this proposed project. **Document the need, not the symptoms or solutions.** Be sure to include current **valid local data or state data, if local data is not available**, to support the justification. Give the source and date of your information. State the needs of your agency and the needs of the victims in your area as related to this problem and justify the need for the proposed project.

These services are desperately needed to continue in our parish. There is a sexual perpetrator prisoner release half-way house here that is causing many problems in the community because of repeat offending. Plans are to increase the number of beds to 46 and to relocate prisoners from neighboring states here. These parolees are not adaquately supervised, and I can only see many more sexual assaults in the future.

Presently the Washington Parish Crisis Ceter is the only agency in Washington Parish whose sole purpose is to help victims of rape or attempted rape.

Washington Parish is comprised of two small towns and a number of small communities with a total population of approximately 43,926 (2000 census). Due to the high risk make-ups of the parish, rural, high unemployment (13.2%), single-parent families, economically deprived (72%) idenfied by the local school system), the area suffers a lare number of citizens who experience major crisis in their lives. The lack of available services produces people who contemplate suicides, running away, substance abuse, and breaking the law. Sometimes frustration and anger cause people to commit sexual assault. Often times, sexual assault causes running away, suicide, or substance abuse in the lives of the victims. The teen pregnancy rate is 16.6%; 42% of all births in Washington Parish are to teen mothers.

Nineteen (19) years ago, before the existence of the Rape Crisis Center, only 20 rapes or attempted rapes were reported to parish law enforcement agencies. In the past year, we have assisted over 101 victims, including recent assault and incest survivors. Over one-third of the victims were sixteen (16) and younger. Both primary and secondary victims were assisted through crisis counseling, referral, advocacy, information, and the crisis hotline. Obviously, the problem of sexual assault is growing. The presence of a rape crisis center and the help it represents defintely encourages victims to report. However, many other victims fail to report for personal reasons, or because there is no evidence due to poor evidence collection. We have spent the last 19 years working with law enforcement and the medical community to help correct these deficiencies, and to increase victim sensitivity. It takes our constant vigilance on behalf of the victim to ensure that all agencies are working together and at our highest efficiency. The Washington Rape Crisis Center/ADAPT, Inc. is the only agency in Washington Parish whose sole purpose is to help victims of rape or attempted rape.

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

There is no other agency in Washington Parish that specifically responds to victims of sexual assault or attempted sexual assault. These victims needed advocacy at the hospital and throughout law enforcement procedures and ensuing court. They needed interagency coordination. They needed a watchdog to make agencies accountable to their victim's rights and to ensure timeliness. Before ADAPT/Washington Parish Sexual Assult Center was formed, sexual assault victims were reluctant to report because of lack of services in our parish and because of lack of victim sensitivity on behalf of both law enforcement and medical service providers. Furthermore, these victims then had no follow-up services that would help restore them to their previous levels of functioning. There were no counseling services available, nor crisis hot-line, nor hospital/law enforcement advocate escorts. The Washington Parish Sexual Assult Center has tried to fill these gaps in services through this very much needed funding.

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: To enhance rape crisis services for 20 new women who are victims of sexual assault.

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: To maintain a 24-hour day crisis telephone line for women who have experienced sexual assault or attempted sexual assault

Goal 1, Objective 2: To maintain hospital/law enforcement escorts 24/7 who will assist women victims of sexual assault who choose to report

Goal 1, Objective 3: To provide emotional support and coordination of services to 20 women victims of sexual assault

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: Schedule and monitor staff and volunteers who man the crisis line 24/7 (By Oct. 1, 2010 ongoing through April 30, 2011)

Goal 1, Objective 2: Schedule and monitor staff/volunteers who provide 24/7 hospital/law enforcement escort services (By Oct. 1, 2010 ongoing through April 30, 2011)

Goal 1, Objective 3: Provide emotional support, interagency coordination, information, referral, and crisis intervention to 20 women victims of sexual assault. (By Oct. 1, 2010 ongoing through April 30, 2011)

D-2. TRAINING PROJECTS

Complete this page in lieu of Section D – Activities/Methods. This page is to be completed only if this application is for the training of individuals involved in the criminal justice system. DO NOT use this for in-house training.

1. Training Curriculum (topics to be included):

N/A

2. Type of personnel to be trained:

3 Number of personnel to be trained:

4. Geographical locations of trainees (who will be invited):

5. Dates and hours of training:

6. Location of training:

7. Explanation supporting the effectiveness of the training program including how the program will meet the identified need.

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.

- ☐ Community-Based Organization
- ☐ Court
- ☐ Domestic Violence Program
- ☐ Domestic Violence State Coalition
- ☐ Dual Program (Sexual Assault and Domestic Violence)
- ☐ Dual State Coalition (Sexual Assault and Domestic Violence)
- ☐ Government Agency (Department of Human Services, Bureau of Health)
- ☐ Law Enforcement
- ☐ Probation, Parole, or Other Correctional Agency
- ☐ Prosecution
- ☒ Sexual Assault Program
- ☐ Sexual Assault State Coalition
- ☐ Tribal Coalition
- ☐ Tribal Government
- ☐ Tribal Sexual Assault and/or Domestic Violence Program
- ☐ Unit of Local Government
- ☐ University/School
- ☐ Other (Specify):

☐ Yes ☒ No Is this a faith-based organization?

☐ Yes ☒ No Is this a culturally specific community-based organization?

F. LOUISIANA AUTOMATED VICTIM NOTIFICATION SYSTEM (LAVNS)

1. Name of the individual responsible for assisting victims in regard to accessing and using the LAVNS system:

NAME: Pam Helton PHONE: (985) 735-0160 EMAIL: adapt_inc@bellsouth.net

☒ Yes ☐ No 2. Does this individual also serve as agency's point of contact for LAVNS? If not, please provide name and contact information:

NAME: PHONE: ( ) - EMAIL:

☐ Yes ☒ No 3. Has this individual attended trainings provided by LCLE to learn how victims are served by LAVNS? If no, agency will request LAVNS training from LCLE within 30 days of award. NOTE: More information regarding the LAVNS program, including training information, can be found at: http://lcle.la.gov/programs/lavns.asp.

☒ Yes ☐ No 4. Does the agency have posters displayed for promoting LAVNS and brochures readily available to victims? If no, please go to the LCLE website to request free LAVNS materials at: www.lcle.la.gov/lavns.

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: Melissa Creel PHONE: (985) 735-0160 EMAIL: adapt_inc@bellsouth.net

☒ 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.)

ADAPT Washington Parish Sexual Assault Center has exceeded its previous goal of providing services to 25 women victims of sexual assault. According to our on-going documentation and logs, our quarterly progress reports to LCLE, and our montly performance reports to LAFASA, we has assisted 86 women victims within the past 12 months. In addition, we have provided 24 victims with hospital escorts, and 36 with criminal justice advocacy. We have maintained a 24/7 crisis hotline, and have participated in monthly Multi-diciplinary Team Meetings with coordinating agencies to ensure that victims are provided appropriate and timely services.

2. Did the project work as expected? Explain.

Yes. We know that it takes a coordinated effort of services in order to provide adaquately for victims of sexual assault. Therefore, our project includes assistance to the 24/7 crisis hotline, 24/7 hospital/law enforcement victim adocacy, and for crisis intervention, emotional support, interagency coordination, and to a positive, sensitive victim environment. Because of this three-pronged approach, we have been very successful in helping victims to recover from the trauma of being raped or attempted rape.

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?

Primary data is collected from victims, their significant others, law enforcement, medical personnel, and other social services agencies.

2. When will the data be collected?

Data is collected at first contact and on each subsequent contact. All contacts and the information gained each time are documented because the nature of the crime does not always reveal all the information at the very beginning of services.

3. Who will collect and analyze the data?

The Crisis Team collects data according to their job and function at the time of victim contact. The Project Director will analyze the data and make appropriate referrals to services, provide follow-up with the victim and other agencies as indicated.

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

Name: Charlette Fornea Phone: (985) 732-4961 Email: cfornea_lpc@yahoo.com

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

After the data has been analyzed, the Project Director will make initiate necessary changes to project strategies as indicated. All revisions are data driven.

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 Director will administer the program and report to the Board of Directors. The Board of Directors will make any decisions regarding matters which involves the basic philosophy and/or policy of the program.

The Washington Parish Sexual Assault Crisis Center/ADAPT, Inc. will submit monthly expenditure reports and Quarterly Progress Reports on the prescribed forms to the Louisiana Commission on Law Enforcement. The ADAPT Board of Directors will also review quarterly financial and progress reports. the Louisiana Foundation Against Sexual Assault will receive monthly statistical progress reports and copies of the quarterly progress reports.

J. CONTINUATION

☒Yes ☐No Do you plan to continue this project at the conclusion of federal support?
Since continued STOP funding is limited and not assured, alternate funding sources should be sought. Name the sources and potential sources of continued funding for this project at the conclusion of Federal support.

As long as VAWA Funds are available, the Washington Parish Sexual Assault Crisis Center will continue to apply to the Louisiana Commission on Law Enforcement for assistance with this program. In addition, ADAPT, Inc. will attempt to locate other sources of funding, such as United Way and the Louisiana Foundation Against Sexual Assault.

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.

Office space for the purpose of coordination, training and implementation of services to victims of rape or attenpted rape is leased by ADAPT, Inc. The Washington Parish Sexual Assault Crisis Center is located at 216 Memphis Street, Bogalusa, Louisiana, approximately 1 block from the Washington Parish Sheriff's Office substation and across the street from Bogalusa City Court. The suite consists of three offices, a large group therapy room, a play therapy room, a bathroom, and a storage room. The total amount of space allotted to the Sexual Assault Crisis Center is approximately 2,145 square feet.

L. AUDIT REQUIREMENTS

All applications must check one:

☐ This organization/agency expends $500,000 or more in federal funds (during the fiscal year of the organization/agency from any and all sources including the amount of this application) **AND MUST SUBMIT THE FOLLOWING INFORMATION:**

1. Date of last audit
2. Dates covered by last audit:
3. Date of next audit:
4. Dates to be covered by next audit:
5. Date next audit will be forwarded to LCLE:

☒ This organization/agency expends less than $500,000 in federal funds from all sources during the fiscal year of the organization/agency.

M. VOLUNTEERS

☒ Yes ☐ No Are you using volunteers as match?
If yes, describe the duties and functions to be performed by the volunteers. Indicate the number of volunteer hours per duty-function for this application (this can be an estimate). If volunteers are used as match, their duties must directly relate to the focus of this project and information stated in Section 100 Personnel.

☒ Yes ☐ No Are volunteers screened in compliance with the Louisiana Child Protection Act (LRS 15:587.1) as appropriate?

No match is required this fund year. In general, we utilize volunteers who man the 24/7 crisis hotline as our match.

N. CONSULTATION

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

We will continue to coordinate our services with the criminal justice system, law enforcement, child's advocacy center, and other social service providers, public and private, through monthly Multi-Disciplinary Team meetings and through on-site advocacy efforts on a case by case basis. We also provide information and referral to other agencies as needed. We staff and provide technical support to hospital, law enforcement, and other first responder personnel on a 24-hour availabilty. We work with the school-based health centers to assist and advise them on sexual assault cases as needed.
The Washington Parish Sexual Assault Crisis Center will work with all five law enforcement agencies and the two hospitals within Washington Parish by providing each agency with an escort duty calendar and trained escorts/counselors who will respond immediately upon notification of rape, attemped rape, or if a victim presents herself to us first and wished to report. We will make available rape evidence collection training and victim sensitivity training to both volunteers and law enforcement officials. We will make referrals to other social service agencies, and network so that no duplication of services will exist. Letters of support and cooperation are attached.