LOUISIANA COMMISSION ON LAW ENFORCEMENT AND ADMINISTRATION OF CRIMINAL JUSTICE

APPLICATION AND REVIEW SUMMARY

APPLICATION NUMBER: C10-2-004

APPLICANT: The Wellspring Alliance For Families, Inc.

PROJECT TITLE: Victim Assistance Program

PROJECT FUNDS :

FUND:	$ 238,896	80.00%	
MATCH:	$ 59,724	20.00%	
TOTAL:	$ 298,620	100.00%	

Continuation of C07-2-007

PROJECT DURATION: 12 months

START DATE: 02/01/2011

END DATE: 01/31/2012

PROJECT SUMMARY:

The Wellspring Victim Assistance project is a continuation project in which funding is requested to maintain long standing comprehensive coordinated services for primary and secondary victims of domestic/dating violence, sexual assault/rape, child physical/sexual abuse and adult survivors of child victimization.

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

SPECIAL CONDITIONS :

1. NO RELEASE OF 10% TOTAL FEDERAL FUNDS BY LCLE UNTIL MONITORING REVIEW IS RECEIVED BY LCLE.
2. NO DRAWDOWN OF FUNDS (AWARD) UNTIL APPLICATION IS REVIEWED AND APPROVED BY LCLE STAFF.
3. NO RELEASE OF FUNDS BY LCLE UNTIL PRIOR PROJECT C09-2-003 IS FINALIZED.

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 - 2 - 004 CVA Purpose Area: ALL

1. TITLE OF PROJECT
Victim Services Program

2. ☐ NEW PROJECT
☒ CONTINUATION PROJECT OF: C09-2-003

3. PROJECT DURATION
Total Length: **12** Months *(Not to exceed 12 Months)*
Desired Start Date: 2/1/2011
Desired End Date: 01/31/2012

4. PROJECT FUNDS

Federal Funds:	$238,896
Cash Match	
In-Kind Match:	$59,724
Total Project:	**$298,620**

5A. APPLICANT AGENCY INFORMATION
Agency Name: The Wellspring Alliance for Families Inc
Physical Address: 1515 Jackson Street
City: Monroe Zip: 71202-2963
Mailing Address: 1515 Jackson Street
City: Monroe Zip: 71202-2963
Phone: (318) 651-9314 FAX: (318) 651-9320
Email: jbell@wellspringlliance.org

5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY
Authorized Official: Judy Bell
Title: President/CEO
Agency Name: The Wellspring Alliance for Families, Inc.
Address: 1515 Jackson Street
City: Monroe Zip: 71202-2963
Phone: (318) 651-9314 FAX: (318) 651-9320
Email: jbell@wellspringalliance.org

Fed Employer Tax Id: 72 - 0442226 DUNS: 13873 - 8153 CCR CAGE/NCAGE: 48SY7 CCR Expiration Date: 7/6/2011

6. IMPLEMENTING AGENCY
Name: Judy Bell
Title: President/CEO
Agency: Wellspring Alliance for Fam. Inc
Address: 1515 Jackson Street
City: Monroe Zip: 71202-2963
Phone: (318) 651-9314 FAX: (318) 651-9320
Email: jbell@wellspringalliance.org

7. PROJECT DIRECTOR
Name: Judy Bell
Title: President?CEO
Agency: Wellspring Alliance for Fam,Inc
Address: 1515 Jackson Street
City: Monroe Zip: 71202-2963
Phone: (318) 651-9314 FAX: (318) 651-9320
Email: jbell@wellspringalliance.org

8. FINANCIAL OFFICER
Name: Christy Gwin
Title: Dir. of Admin & FInancial Services
Agency: Wellspring Alliance for Fam,Inc
Address: 1515 Jackson Street
City: Monoe Zip: 71202-2963
Phone: (318) 651-9314 FAX: (318) 651-9320
Email: cgwin@wellspringalliance.org

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

The Wellspring Victim Assistance project is a continuation project in which funding is requested to maintain long standing comprehensive coordinated services for primary and secondary victims of domestic/dating violence, sexual assault/rape, child physical/sexual abuse and adult survivors of child victimization. Funds are requested to provide for partial salaries, fringe benefits, utilities and lease space. It is projected that 1,800 victims will be served in the twelve parish area of Northeast Louisiana . Best practices will be used in the provision of services with emphasis on safety and confidentiality. A highly trained and experienced staff will carry out the project under the auspice of a broad based community board of directors.

VOCA PURPOSE AREAS

Please Check Type of Victimization Served (Check all that apply):	
☒	Sexual Assault
☒	Domestic Abuse
☒	Child Abuse
☒	Previously Underserved
State Type of Previously Underserved: Adult Survivors of Childhood Issues	

PROJECT BUDGET SUMMARY

INSTRUCTIONS: The Checklist is self-explanatory. In Project Summary, applicable budget category totals will be automatically entered from each of the Detailed Project Budget Summaries. Provide source of Cash and/or In-Kind Match. In last table, check the type of victimization types that this project will address.

CHECKLIST:

	YES:	NO:
Are all budgeted items allowable per Program Guidelines?	☒	☐
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 shown on Pages 3 through 11.

Person Completing Budget Section: Christy Gwin Title: Dir. of Admin. & Financial Services
Phone: (318) 651-9314 Fax: (318) 651-9320 E-Mail: cgwin@wellspringalliance.org

PROJECT BUDGET SUMMARY

BUDGET CATEGORIES	FEDERAL FUNDS	CASH MATCH	IN-KIND MATCH	SECTION TOTAL
SECTION 100. PERSONNEL	$212,223	$0	$18,250	**$230,473**
SECTION 200. FRINGE BENEFITS	$15,488	$0	N/A	**$15,488**
SECTION 300. TRAVEL	$0	$0	$0	**$0**
SECTION 400. EQUIPMENT	$0	$0	$0	**$0**
SECTION 500. SUPPLIES	$0	$0	$41,474	**$41,474**
SECTION 600. CONTRACTUAL	$0	$0	N/A	**$0**
SECTION 700. RENOVATION COSTS	$0	$0	$0	**$0**
SECTION 800. OTHER DIRECT COSTS	$11,185	$0	$0	**$11,185**
TOTAL:	**$238,896**	**$0**	**$59,724**	**$298,620**

Provide Source of *Cash* Match:

Provide Source of *In-Kind* Match: Volunteer hours are interns from the local unviersity, community groups and individuals. Donated goods and supplies are from churches, businesses, civic and community groups and individuals.

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
Dir. of Prof. Services	Caroline Cascio	FT	$5,317.00	10.00%	12.00	$6,380.40	☒	☐
Dir. of Big Bro. Big Sister	Jane Brandon	FT	$5,173.00	10.00%	12.00	$6,207.60	☒	☐
Therapist	Donna George	FT	$3,759.00	25.00%	7.00	$6,578.25	☒	☐
Therapist	Donna George	FT	$3,872.00	25.00%	5.00	$4,840.00	☒	☐
Therapist	Lisa Longenbaugh	FT	$4,263.00	70.00%	3.00	$8,952.30	☒	☐
Therapist	Lisa Longenbaugh	FT	$4,391.00	70.00%	9.00	$27,663.30	☒	☐
Therapist	Melanie Clark	FT	$3,445.00	40.00%	4.00	$5,512.00	☒	☐
Therapist	Melanie Clark	FT	$3,548.00	40.00%	8.00	$11,353.60	☒	☐
			SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:			$77,487.45	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
Shelter Advocate	Melba Hall	PT	$9.27	25.00	50.00%	8.00	$927.00	☒	☐
Shelter Advocate	Melba Hall	PT	$9.55	25.00	50.00%	44.00	$5,252.50	☒	☐
Shelter Advocate	Florece Staten	PT	$9.00	30.00	80.00%	48.00	$10,368.00	☒	☐
Shelter Advocate	Florece Staten	PT	$9.27	30.00	80.00%	4.00	$889.92	☒	☐
Shelter Advocate	Kenya Vogt	PT	$9.18	20.00	50.00%	4.00	$367.20	☒	☐
ShelterAdvocate	Kenya Vogt	PT	$9.46	20.00	50.00%	48.00	$4,540.80	☒	☐
		PT					$0.00	☐	☐
		PT					$0.00	☐	☐
			SUBTOTAL AMOUNT OF PART-TIME AND/OR OVERTIME EMPLOYEES SALARIES:				~~$22,560.72~~ $22,345.92	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
Volunteers for Supportive Services and Activites	1,700.00	$10.00	$17,000.00
Board of Directors	50.00	$25.00	$1,250.00
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:			$18,250.00

SECTION 100. PERSONNEL SUMMARY	
FEDERAL FUNDS	$212,223
CASH MATCH	
IN-KIND MATCH	$18,250
PERSONNEL TOTAL	$230,473

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
Counseling Services Manager	Deterise Addison	FT	$2,254.00	30.00%	1.00	$676.20	☒	☐
Counseling Services Manager	Deterise Addison	FT	$2,322.00	30.00%	11.00	$7,662.60	☒	☐
Client Advocate	Cathy Burgess	FT	$2,083.00	30.00%	7.00	$4,374.30	☒	☐
Client Advocate	Cathy Burgess	FT	$2,145.00	30.00%	5.00	$3,217.50	☒	☐
Senior Case Manager BBBS	Deri Gayle	FT	$2,664.00	10.00%	7.00	$1,864.80	☒	☐
Senior Case Manager BBBS	Deri Gayle	FT	$2,744.00	10.00%	5.00	$1,372.00	☒	☐
Client Advocate	Lee Bryant	FT	$1,907.00	40.00%	8.00	$6,102.40	☒	☐
Client Advocate	Lee Bryant	FT	$1,964.00	40.00%	4.00	$3,142.40	☒	☐
			SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:			$28,412.20	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
Therapist	Phyllis Taylor	PT	$28.25	14.00	50.00%	8.00	$1,582.00	☒	☐
Therapist	Phyllis Taylor	PT	$29.09	14.00	50.00%	44.00	$8,959.72	☒	☐
Shelter Advocate	Brittney Woods	PT	$9.00	20.00	100.00%	2.00	$360.00	☐	☐
Shelter Advocate	Brittney Woods	PT	$9.27	20.00	100.00%	50.00	$9,270.00	☐	☐
		PT					$0.00	☐	☐
		PT					$0.00	☐	☐
		PT					$0.00	☐	☐
		PT					$0.00	☐	☐
			SUBTOTAL AMOUNT OF PART-TIME AND/OR OVERTIME EMPLOYEES SALARIES:				~~$12,794.00~~ $20,171.72	F = Fed Funds C = Cash Match	

VOLUNTEERS:

DUTIES: List ONLY volunteers used as In-Kind Match. Duties must directly relate to the focus of this project. For further information and direction, please refer to the application instructions.	NO. OF HOURS	VALUED RATE OF HOURLY PAY	IN-KIND TOTAL
			$0.00
			$0.00
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:			$0.00

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

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
Dir. of DomesticViolence	Valerie Bowman	FT	$4,027.00	10.00%	12.00	$4,832.40	☒	☐
Shelter Operations Mgr.	Pearline Badger	FT	$2,339.00	50.00%	6.00	$7,017.00	☒	☐
Shelter Operatons Mgr.	Pearline Badger	FT	$2,409.00	50.00%	6.00	$7,227.00	☒	☐
Shelter Advocate	Faye Smith	FT	$2,166.00	50.00%	3.00	$3,249.00	☒	☐
Shelter Advocate	Faye Smith	FT	$2,230.00	50.00%	9.00	$10,035.00	☒	☐
Shelter Advocate	Sharonda Grimes	FT	$1,591.00	50.00%	11.00	$8,750.50	☒	☐
Shelter Advocate	Sharonda Grimes	FT	$1,638.00	50.00%	1.00	$819.00	☒	☐
		FT	$0.00	0.00%	0.00	$0.00	☐	☐
			SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:			$41,929.90	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
		PT			0.00%	0.00	$0.00	☐	☐
	r	PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
			SUBTOTAL AMOUNT OF PART-TIME AND/OR OVERTIME EMPLOYEES SALARIES:				$0.00	F = Fed Funds C = Cash Match	

VOLUNTEERS:

DUTIES: List ONLY volunteers used as In-Kind Match. Duties must directly relate to the focus of this project. For further information and direction, please refer to the application instructions.	NO. OF HOURS	VALUED RATE OF HOURLY PAY	IN-KIND TOTAL
			$0.00
			$0.00
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:			$0.00

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

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
Records Outcome Monitor	Kristi Whetstone	FT	$2,040.00	40.00%	2.00	$1,632.00	☒	☐
Records Outcome Monitor	Kristi Whetston	FT	$2,101.00	40.00%	10.00	$8,404.00	☒	☐
Finance Assistant	Brandi Joyner	FT	$2,380.00	20.00%	1.00	$476.00	☒	☐
Finance Assistant	Brandi Joyner	FT	$2,451.00	20.00%	11.00	$5,392.20	☒	☐
Dir. of Adm. & Finance	Christy Gwin	FT	$4,977.00	10.00%	12.00	$5,972.40	☒	☐
		FT		0.00%	0.00	$0.00	☐	☐
		FT		0.00%	0.00	$0.00	☐	☐
		FT	$0.00	0.00%	0.00	$0.00	☐	☐
			SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:			$21,876.60	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
		PT			0.00%	0.00	$0.00	☐	☐
	r	PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	80.00%	0.00	$0.00	☐	☐
		PT		0.00	80.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
		PT		0.00	0.00%	0.00	$0.00	☐	☐
			SUBTOTAL AMOUNT OF PART-TIME AND/OR OVERTIME EMPLOYEES SALARIES:				$0.00	F = Fed Funds C = Cash Match	

VOLUNTEERS:

DUTIES: List ONLY volunteers used as In-Kind Match. Duties must directly relate to the focus of this project. For further information and direction, please refer to the application instructions.	NO. OF HOURS	VALUED RATE OF HOURLY PAY	IN-KIND TOTAL
			$0.00
			$0.00
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:			$0.00

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

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:

Partial salary requested for Dir. of Prof. Serv. who provides oversight of the delivery of programs & services to victims in the non-residential program. Partial salary for Dir. of DVwho provides supervision of paid & volunteer staff serving victims in the Residential Program. Partial salary requested for the Dir. of Big Brothers Big Sisters providing supervision to staff and volunteers in the BBBS Program. In direct service, partial salaries are requested 3 full-time & 1 part-time therapist, partial salary for a Counseling Services Manager, & 2 Client Advocates. The Shelter Operations Manager provides for immediate victim needs in the day to day operations of the shelter. Partial salary requested for 2 full-time & 4 part-time Shelter Advocates who work on-site during the evening & weekend hours in the shelter. Partial salary requested for 1full-time Case Manager in the BBBS program. Funds are requested for pro-rata administrative time necessary to record & process program data & case records necessary to complete VOCA programmatic and statistical reports. Administrative time is also necessary to maintain crime victim records, track progress of victim's goals, compile statistics and required time and attendance records.

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

Salaries are below those of similar positions in the area. According to the Alliance & Families' guidelines, salary ranges are at eighty percent of the souhern average. A 3% Cost Price Index adjustment is proposed for January 2011. Increases are granted on anniversary dates of employees.

C) Project duties of each position requested:

Director of Prof. Services oversees & coordinates all non-residential services, assures goals and objectives are established and accomplished, collects, reports, and analyzes project and service provider productivity data. Duties of therapists include crisis intervention, individual therapy, support & therapy groups, community referrals, and court-related services. The Counseling Services Manager & Client Advocate provide crisis intervention & assists victims through our 24-hour crisis lines. The Dir. of DV duties include supervisory responsibilities & training of paid staff & volunteers who provide direct service to residential victims. Shelter Advocates monitor client activities & perform intakes for victims in the shelter. Shelter Operations Mgr. provides for victim needs residing in the shelter. In-Kind Match: Volunteer duties include groups and individual activities. Case Mgr. & Dir. of BBBS duties include recruiting, screening & training volunteers, case managers, & program participants & matching volunteers with program participants. Dir. of BBBS also has supervisory responsibilities of paid staff and volunteers who provide direct service to victims. Interns from the master's University of Louisiana at Monroe Marriage & Family Program are used for therapy. Undergraduate social work interns duties are case management, supportive services & group activities. Board of Directors & Executive Committee meetings are held on a monthly basis. Their primary duty is to determine organizational mission & service priorities including directing the majority of resources to services for victims of crime.

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.]

Application is for a continuation grant and all personnel are original.

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. Caroline Cascio	.062		$6,380	$395	5. Jane Brandon	.062		$6,207	$384
2. Donna George	.062		$11,418	$707	6. Lisa Longenbaugh	.062		$36,615	$2,270
3. Melanie Clark	.062		$16,865	$1,045	7. Melba Hall	.062		$6,179	$383
4. Florece Staten	.062		$11,259	$698	8. Kenya Vogt	.062		$4,908	$304
MEDICARE	RATE		SALARY	TOTAL	MEDICARE	RATE		SALARY	TOTAL
1. Caroline Cascio	.0145		$6,380	$92	5. Jane Brandon	.0145		$6,207	$90
2. Donna George	.0145		$11,418	$165	6. Lisa Longenbaugh	.0145		$36,615	$530
3. Melanie Clark	.0145		$16,865	$244	7. Melba Hall	.0145		$6,179	$89
4. Florece Staten	.0145		$11,259	$163	8. Kenya Vogt	.0145		$4,908	$71
HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL	HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL
1.				$0	5.				$0
2.				$0	6.				$0
3.				$0	7.				$0
4.				$0	8.				$0
WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL	WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL
1. Caroline Cascio	0.005		$6,380	$31	5. Jane Brandon	0.005		$6,207	$31
2. Donna George	0.005		$11,418	$57	6. Lisa Longenbaugh	0.005		$36,615	$183
3. Melanie Clark	0.005		$16,865	$84	7. Melba Hall	0.005		$6,179	$30
4. Florece Staten	0.005		$11,259	$56	8. Kenya Vogt	0.005		$4,908	$24
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	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.				$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):	$3,737				FRINGE BENEFITS TOTAL (B):	$4,389

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

Fringe Benefits Total (A+B): $8,126

SECTION 200. FRINGE BENEFITS SUMMARY	
FEDERAL FUNDS	$15,488
CASH MATCH	
TOTAL FRINGE BENEFITS	**$15,488**

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. Deterise Addison	.062		$8,338	$516	5. Cathy Burgess	.062		$7,591	$470
2. Deri Gayle	.062		$3,236	$200	6. Lee Bryant	.062		$9,244	$573
3. Phyllis Taylor	.062		$10,541	$653	7. Brittney Woods	.062		$9,630	$597
4.	.062			$0	8. t	.062		$0	$0
MEDICARE	RATE		SALARY	TOTAL	MEDICARE	RATE		SALARY	TOTAL
1. Deterise Addison	.0145		$8,338	$120	5. JCathy Burgess	.0145		$7,591	$110
2. Deri Gayle	.0145		$3,236	$46	6. Lee Bryant	.0145		$9,244	$134
3. Phyllis Taylor	.0145		$10,541	$152	7. Brittney Woods	.0145		$9,630	$139
4.	.0145			$0	8.	.0145		$0	$0
HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL	HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL
1.				$0	5.				$0
2.				$0	6.				$0
3.				$0	7.				$0
4.				$0	8.				$0
WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL	WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL
1. Deterise Addison	0.005		$8,338	$41	5. Cathy Burgess	0.005		$7,591	$37
2. Deri Gayle	0.005		$3,236	$16	6. Lee Bryant	0.005		$9,244	$46
3. Phyllis Taylor	0.005		$10,541	$52	7. Brittney Woods	0.005		$9,630	$48
4.	0.005			$0	8. t	0.005		$0	$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.		CHECK TYPE:		$0	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.				$0	5.				$0
2.				$0	6.				$0
3.				$0	7.				$0
4.				$0	8.				$0
OTHER:	RATE		SALARY	TOTAL	OTHER:	RATE		SALARY	TOTAL
1.				$0	5.				$0
2.				$0	6.				$0
3.				$0	7.				$0
4.				$0	8.				$0
FRINGE BENEFITS TOTAL (A):				$1,796	FRINGE BENEFITS TOTAL (B):				$2,154

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

Fringe Benefits Total (A+B): $3,950

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

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. Valerie Bowman	.062		$4,832	$299	5. Pearline Badger	.062		$14,244	$883
2. Faye Smith	.062		$13,284	$823	6. Sharonda Grimest	.062		$9,569	$593
3.	.062			$0	7.	.062		$0	$0
4.	.062			$0	8. t	.062		$0	$0
MEDICARE	RATE		SALARY	TOTAL	MEDICARE	RATE		SALARY	TOTAL
1. Valerie Bowman	.0145		$4,832	$70	5. Pearline Badger	.0145		$14,244	$206
2. Faye Smith	.0145		$13,284	$192	6. Sharonda Grimest	.0145		$9,569	$138
3.	.0145			$0	7.	.0145		$0	$0
4.	.0145			$0	8.	.0145		$0	$0
HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL	HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL
1.				$0	5.				$0
2.				$0	6.				$0
3.				$0	7.				$0
4.				$0	8.				$0
WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL	WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL
1. Valerie Bowman	0.005		$4,832	$24	5. Pearline Badgers	0.005		$14,244	$71
2. Faye Smith	0.005		$13,284	$66	6. Sharonda Grimestt	0.005		$9,569	$47
3.	0.005			$0	7.	0.005		$0	$0
4.	0.005			$0	8. t	0.005		$0	$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.		CHECK TYPE:		$0	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.				$0	5.				$0
2.				$0	6.				$0
3.				$0	7.				$0
4.				$0	8.				$0
OTHER:	RATE		SALARY	TOTAL	OTHER:	RATE		SALARY	TOTAL
1.				$0	5.				$0
2.				$0	6.				$0
3.				$0	7.				$0
4.				$0	8.				$0
FRINGE BENEFITS TOTAL (A):				$1,474	FRINGE BENEFITS TOTAL (B):				$1,938

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

Fringe Benefits Total (A+B): $3,412

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

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. Kristi Whetstone	.062		$0	$0	5. Brandi Joyner	.062		$0	$0
2. Christy Gwin	.062		$0	$0	6.	.062		$0	$0
3.	.062		$0	$0	7.	.062		$0	$0
4.	.062		$0	$0	8. t	.062		$0	$0
MEDICARE	RATE		SALARY	TOTAL	MEDICARE	RATE		SALARY	TOTAL
1. Kristi Whetstone	.0145		$0	$0	5. Brandi Joyner	.0145		$0	$0
2. Christy Gwin	.0145		$0	$0	6. 0	.0145		$0	$0
3.	.0145		$0	$0	7.	.0145		$0	$0
4.	.0145		$0	$0	8.	.0145		$0	$0
HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL	HEALTH/LIFE INSURANCE Provide monthly insurance rates	RATE	MONTHS	TIME DEVOTED TO PROJECT	TOTAL
1.				$0	5.				$0
2.				$0	6.				$0
3.				$0	7.				$0
4.				$0	8.				$0
WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL	WORKMAN'S COMPENSATION	RATE		SALARY	TOTAL
1. Kristi Whetston	0.005		$0	$0	5. Brandi Joyner	0.005		$0	$0
2. Christy Gwin	0.005		$0	$0	6. 0	0.005		$0	$0
3.	0.005			$0	7.	0.005		$0	$0
4.	0.005			$0	8. t	0.005		$0	$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.				$0	5.		CHECK TYPE:		$0
2.		CHECK TYPE:		$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.				$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):				$0	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): $0

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

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	PAID WITH C	PAID WITH IK
Donated Food, Clothing, Goods (IN-KIND MATCH)	41,474.00	$1.00	$41,474.00	☐	☐	☐
			$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:			$41,474.00	F = Federal Funds C = Cash Match IK = In-Kind Match		

BRIEFLY EXPLAIN:

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

B) Its relationship to this project.

IN KIND MATCH - Many civic groups, church groups and individuals donate shelter food and supplies, clothing and school supplies that are utilized by the victims through our residential and non-residential programs. These donated goods are critical to victims who many times leave without the basic necessities. The value of the donation is determined by the donor but can not exceed fair market value. A staff member also signs the donation card verifying the donation. Since the community donations vary from food, clothing, school supplies, etc. we do not have a breakdown or cost breakdown prior to the donation itself. A monthly report is kept recapping each donation, date of donation, description of items donated and amount of donation.

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
			$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	☐	☐	☐
			$0.00	☐	☐	☐
SUBTOTAL OF SECTION A SUPPLIES:			$0.00	F = Federal Funds C = Cash Match IK = In-Kind Match		

BRIEFLY EXPLAIN:

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

B) Its relationship to this project.

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	☐	☐	☐
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	
CASH MATCH	
IN-KIND MATCH	$41,474
SUPPLIES TOTAL	**$41,474**

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
Rental Space	4,050 SF - app. 22.7% share	919.00	$11.00	$10,109.00	☒	☐	☐
Utilities	Approx. $89.66/month	89.67	$12.00	$1,076.04	☐	☐	☐
				$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 OTHER DIRECT COSTS:			$11,185.04			

F = Federal Funds
C = Cash Match
IK = In-Kind Match

BRIEFLY EXPLAIN:

A) Need for each type listed; and

Funds are requested for rental space and utilities of office space. Price per square foot is determined by fair market value. Office space is needed to serve victims through crisis intervention, counseling and supportive services.

B) Its relationship to project.

Office space is needed to provide needed counseling to victims. The office space also houses the 24 hour crisis lines, which are the first to respond to victims through crisis intervention and advocacy. The crisis lines also schedule appointments for counseling and give information to victims regarding group support schedules and advocacy.

:

SECTION 800. OTHER DIRECT COSTS SUMMARY	
FEDERAL FUNDS	$11,185
CASH MATCH	
IN-KIND MATCH	
OTHER DIRECT COSTS TOTAL	$11,185

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.

As evidenced in the statistics below, domestic violence, rape/sexual assault, incest and child abuse are critical problems in the 12-parish service area of Northeast Louisiana (NELA.) population of 347,751. (US Census 2009 ests) Poverty is one of the greatest risk factors for violence in the area with 23.51% living in poverty compared to 17.6% in La. and 13.2% in the U.S. (US Census estimates, 2008). Local law enforcement statistics are given below. U.S. Centers for Disease Control (2010) indicate adult victims of these crimes are at risk of impacts including death, physical injury, STDs, short and long-term emotional difficulties, lost income, homelessness, substance abuse, and more. (CDC, 2010) Child victims are at risk of impacts including permanent damage to physical, mental, and educational development extending into adulthood and often resulting in later criminality, a result shown in La.'s rank in the top ten of juveniles incarcerated (US Census, 2006), top in the nation for adults incarcerated (2008 BJS), and 2nd highest murder rates in the U.S. (FBI, 2008) 1. Domestic and Dating Violence (DV): In 2009, area law enforcement reported 3,054 domestic and dating violence calls in NELA, over four times the national average (9.49 per 1,000 persons age 12 and over in NELA vs. 2.31 in U.S.) (U.S. BJS, 2007 and Census, 2009 ests.) 2. Rape/Sexual Assault: In 2009, area law enforcement reported 183 calls for sexual assault in NELA (number based in part on estimates), which is nearly twice the national average (.57 per 1,000 persons age 12 and over in NELA vs. .3 in U.S.) (U.S. BJS, 2008 and Census, 2009 ests.) 3. Child Abuse: Annie E. Casey Kids Count 2010 reports La. 49th in child wellbeing, based on level of risk factors for child abuse including poverty, teen parents, single-parent homes, and parental unemployment. (US DHH) NELA typically has rates worse than the state's dismal measures: for example, in NELA, 35.3% of children lived in poverty (2000 Census) compared to 27% in the state and 16.6% nationally. Per capita rates (per 1,000 children) of valid child abuse allegations in the Northeast Louisiana parishes for which parish data is available exceed statewide averages. (PCAL, 2008) 4. Adult survivors of incest: In first rape experiences, perpetrators were reported to be family members 23.7% of the time for female victims and 17.7% for males. (Violence and Victims, 2007) Research involving adult survivors of childhood sexual abuse (CSA) indicates that approximately 77% of victims did not report the abuse while in childhood. (Whisnant, 2009) Thus, childhood incest is most likely to be reported when victims are adults. An estimated 100,000 to one million cases of incest occur annually, but only about 10 percent of them are ever reported (Johnson 1983). In 2009, 38.7% of rape victims receiving counseling by The Wellspring were incest survivors. In 2009, The Wellspring and Family Justice Center served 1,529 victims of these crimes and fielded 5,908 crisis calls involving these issues in the service area. Victims are largely young and poor: persons served by The Wellspring in 2009 were 48.7% Caucasian and 49.2% African American; 77.5% with household income under $24,000; 64.6% under age 25 and 81.8% under age 35. Client service needs and how the project meets them are specified in 2 below. Agency needs are professional staff and related expenses to provide the needed services.

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

The primary gap in services for victims in Northeast Louisiana is the lack of ON-SITE (i.e. within the parish) community services as well as coordination of services for victims other than what The Wellspring provides through this grant. Without the continuation of this project, the victims of domestic and dating violence, rape/sexual assault, stalking and child abuse would be at even great risk.

Current Wellspring free and confidential services that address the needs and gaps of victims as outlined in this continuation project include the following: safe emergency shelter with comprehensive supportive services, case management/personal advocacy, safety measures/plan, transitional housing, crisis hotline counseling, child and adult counseling/therapy, child/adult group treatment and support, emergency financial assistance, legal advocacy, information and referral, transportation, etc. In nine of the 12 parishes, The Wellspring is the only service provider which addresses one of the area's largest gaps in terms of any kind of community services. Thus, this project addresses the need identified above and gap identified herein by providing the professional, comprehensive services to meet the initial physical and emotional needs of primary and secondary victims detailed in previous section as well as addressing the ongoing or long-term needs, also detailed in previous section. The proposed project is especially crucial in the service area as there are otherwise either limited or no other alternatives for these services in the service area for this particularly vulnerable population.

Services using best practices are provided by highly trained and experienced staff persons most of whom having graduate and undergraduate degrees. They are skilled at providing crisis intervention, emergency shelter with comprehensive supportive services and coordinated community services in order to meet the growing number and needs of victims of NELA.

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.

GOALS:

(1) To assist primary and secondary victims of Domestic /Dating Violence, Rape/Sexual Assault, Child physical/sexual abuse and Adult Survivors of Incest with their immediate emotional and physical needs.

(2) To assist primary / secondary victims of crime to stabilize their lives after the initial victimization.

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.**

Objectives / Goal #1

1. To maintain comprehensive, coordinated services for a minimum of 1800 victims of domestic/dating violence, sexual assault/rape and child physical/sexual abuse including maintaining safe emergency shelter for 250 abused adults and children. Of those victiims completing departure surveys 85% will strongly agree / agree that their safety has been increased and that they have a higher knowledge of community resources and how to access them.
2. To maintain 24/7/365 telephone crisis intervention with a minimum of 3800 crisis calls with a minimum of 1800 victims seeking additional services.

Objectives for Goal #2

1. To maintain individual counseling/therapy (face-to-face) for 600 adults and children. Of those completing surveys, 85% will strongly agree/agree that the services they received were helpful and that they would refer a friend or family member.
2. To maintain 300 support/therapy groups for adults and children. Of those victims participating and completing surveys, 85% will indicate satisfaction with services and helpfulness in dealing with their trauma.

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.

TIMETABLE: The grant activities / methods will be carried out over the grant period beginning 2/01/2011 through 1/31/2012. There will be no interruption in current services

METHODS /ACTIVITIES for each objective are as follows:

GOAL # 1, Objective 1

(1) Trained shelter staff will provide 24 hour service including basic needs such as safety planning, access to community resources, food, medicine, legal advocacy, transportation, child care, clothing, etc.
(2) Case managers will assist shelter residents with developing individual goals, safety planning, child care, transportation, community referrals, etc.
(3) Victims not requiring safe shelter will be provided with counseling, case management to develop safety plans and access to community resources, legal advocacy, personal advocacy, criminal justice support/advocacy.

Objective 2

(1) Trained staff will operate six 24 hour/365 day a week crisis lines to provide telephone crisis intervention/counseling to victims.
(2) Telephone Crisis Advocates will coordinate providing trained volunteers to serve as hospital escorts/advocates to victims of sexual assault during forensic exam as a part of our community response (SART - Sexual Assault Resource Team) to rape/sexual assault.
(3) Referrals will be made as appropriate to other community service providers including law enforcement, hospitals, schools, public assistance, Family Justice Center, safe shelter, etc.

GOAL #2

Objective #1

(1) Wellspring counselors/therapists will provide individual counseling /therapy for child and adult victims.
(2) One on one mentoring through Big Brothers Big Sisters Mentoring Program will be provided for children/youth who have been exposed to and/or who are victims of violence.

Objective #2

(1) Wellspring staff will provide a weekly support group for victims of domestic violence, sexual assault and survivors of childhood incest.
(2) Staff will provide educational and support groups/activities for children in both residential and non-residential programs.
(3) Training will be provided for volunteers/mentors in the Big Brothers Big Sisters Program to learn the common elements of child sexual abuse, how to help children protect themselves, and how to report child victimization.
(4) Summer enrichment/day camp(s) will be offered for children who are victims of violence to assist them in developing life skills that promote safety.

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: Valerie Bowman PHONE: (318) 651-9314 EMAIL: [redacted]

☒ 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: PHONE: ( ) - EMAIL:

☒ Yes ☐ No 2. Does the agency know who the Crime Victims Reparations (CVR) Claims Investigator is at the Parish Sheriff's Office?

☒ Yes ☐ No 3. Does the agency have posters displayed for promoting CVR and brochures readily available to victims? If no, please fax a written request (contact person, agency name, mailing address) for free CVR posters and brochures to 225-925-6159. NOTE: More information regarding the CVR program, including applications and other forms, can be found at: http://lcle.la.gov/programs/cvr.asp

H. PRIOR RESULTS (For Continuation Projects Only)

1. Based on the objectives of the previous application, what were the measurable outcomes? (Refer to the previous project's performance stated in the quarterly progress reports and other additional information.)

All objectives are on target to be accomplished as projected. Results of the objectives as reported in ther quarterly progress reports to date (Feb, 2010 - June 2010) are as follows:
(1) Of the projected 1800 victims to be served over the course of the grant period, 1,279 primary victims have been served.
(2) Of the projected 500 adult/child counseling/therapy sessions (face-to-face), 461 have been conducted thus far.
(3) Of the projected 6000 crisis/victim calls, 1275 have been recorded with an additional 706 follow-up calls.
(4) Of the projected 300 Adult/Child support and/or therapy groups, 113 have been conducted.
(5) Of the projected 5000 case management sessions, 3655 have been conducted.

Additional information in the Quarterly Progress reports showed that a total of 6103 services have been provided to date as found on the Services Chart, a total of 33 volunteers contributed to the program activities, and 29 employees received a total of 253 hours of training.

Client Satisfaction/progress surveys indicated a high level of satisfaction with services and their helpfulness. Of the victims completing surveys, 81% strongly agreed that services and information were helpful, 91.3% indicated they were treated with dignity and respect, 89% found the facilities to be accessible, comfortable and clean, and 84% indicated they would refer a friend or family member. 92% either strongly agreed or agreed that their safety had increased and 100% indicated they had increased their knowledge of community resources.

2. Did the project work as expected? Explain.

Yes, the project worked as expected. With careful planning in dealing with the loss and/or decline of funding over the past year, services have continued with minimal negative impact. Factors which have contributed to the success of the project include our 35 years of experience in working with victims, success in identifying new and/or maintaining diversified funding streams, With an almost 35 year history of working with victims using highly trained and experienced staff who provide services that capture best practices, the agency continues to enjoy a high level of credibility and accountability.

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?

There will be no changes in the continuation of the project. The objectives have simply been revised to reflect the change in the Request for proposals for outputs versus outcomes.

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?

Direct service staff including counselors/therapists, case managers, client advocates and telephone crisis advocates will be responsible for collecting and recording client data in client files. Data on client satisfaction and progress on goals is collected directly from clients using an anonymous survey.

2. When will the data be collected?

Data from client files is entered into the agency's master data base on a bi-weekly to monthly basis. Depending on the program, client satisfaction data is collected during and at the end of the service period

3. Who will collect and analyze the data?

The Records Outcome Monitors collect the data and run reports. The data is analyzed by the staff leadership team and appropriate actions are taken and reports are prepared and disseminated. Client satisfaction data is analyzed by the Program Directors.

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

Name: Christy Gwin Phone: (318) 651-9315 Email: cgwin@wellspringalliance.org

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

Any updating or revising of a project's strategy is based on regular and ongoing evaluation of the project. The President and CEO and Program Directors are empowered with and charged by the Board of Directors to take the necessary steps to carry out the daily operations and activities of the programs using best practices and with accountability and openness. The Wellspring's Leadership Team, which is made up of the directors of each of the agency's programs as well as the Director and Adm. and Finance and the Director of Communications/Outreach and Development, meets on a minimum of a monthly basis to review program evaluations, processes, service flow, etc. and makes adjustments as needed. In turn the respective program directors meet with direct service staff to implement any changes, provide additional training or resources as required. If immediate action is required, the respective program directors work with the President and CEO to implement it in a timely fashion. If policy changes are needed, the Board of Directors acts on a monthly basis.

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 LCLE will receive quarterly progress reports and monthly expenditure reports. The Wellspring's Board of Directors receives quarterly reports on project results including the number of clients, services, and client satisfaction/progress reports as a part of their balanced agency scorecard. All Wellspring stakeholders (approximately 500 people) receive an annual report, and such information is also available on the agency website. In addition, other funders who receive various monthly, quarterly and annual reports include the LA Department of Children and Family Services (formerly DSS), the LA Foundation Against Sexual Assault and the U.S. Department of Justice / Office on Violence Against Women.

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.

The Wellspring programs serving the victims of domestic violence, rape/sexual assault and child abuse will continue to be funded through local, state and federal sources. Local sources include Wellspring membership and Special Events, the United Way of Northeast Louisiana, local corporations such as CenturyLink, Capital One and Chase, local foundations, churches, civic groups, and City of Monroe (CDBG, ESG and HOME funds). State resources in addition to LCLE (VOCA and VAWA) include Department of Children and Family Services (formerly DSS), LA Foundation Against Sexual Assault, and LA Bar Foundation/IOLTA. Federal resources include U.S. Department of Justice/Office on Violence Against Women and the U.S. Dept of Housing and Urban Development. In addition, new sources of state and federal funding are continuously researched and proposals are submitted on a regular basis. Crisis intervention and all domestic violence services are free of charge.

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.

Full time offices are found in Ouachita Parish, Morehouse Parish, and Franklin Parish as well as in-kind space in Caldwell, Richland and West Carroll parishes. Facilities include a 22 bed safe shelter at an undisclosed location and 45 leased single family units providing transitional housing throughout NELA. Other non-residential services are provided at the Counseling and Family Development Center and Big Brothers Big Sisters Office in Monroe. The Wellspring is the lead partner for the Family Justice Center which is located in a 15,000 sq foot facility and houses Wellspring and community partners who provide a one-stop site offering confidential, comprehensive and coordinated services for victims. Additional resources include computers and internet access for every employee and volunteer as well as appropriate copying, scanning and faxing equipment. Our most valuable resource is our highly experienced and trained staff of 84 persons.

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	June 30, 2010
2.	Dates covered by last audit:	January 1, 2009 - Dec 31, 2009
3.	Date of next audit:	June 30, 2011
4.	Dates to be covered by next audit:	January 1, 2010 - Dec. 31, 2010
5.	Date next audit will be forwarded to LCLE:	June 30, 2011

☐ 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?

In 2009, we had 5309 volunteer hrs including from a broad based community board of directors. All direct service staff and volunteers undergo criminal background checks. Programs serving victims use undergrad interns from the School of Social Work and Criminal Justice Pgrm at ULM/Monroe and Grambling State Univ. Senior level social work interns provide case management, supportive services, group and other residential activities. Master's level interns from ULM and LA Tech Marriage/Family Therapy and Community Counseling Programs provide individual counseling and group services for victims of family violence, sexual assault/rape and child physical/sexual abuse. Many other community persons and Wellspring members volunteer to assist staff with special events, activities, sorting and distributing donated clothing & household items for victims, averaging 4 - 6 hrs per week. Area groups spend 6-8 wks collectively each year raising funds to serve 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.

All victims of crime who may qualify are made aware of the Crime Victims Reparation Program when the counseling guidelines/agreements are presented to clients during the initial in-take session. In addition, a brochure on the program is also available in each client's file and upon request. Brochures are displayed in the waiting areas and at the safe shelter. Project staff makes direct referrals to the compensation program through the Sheriff's Claim Investigator, and assist with applications, forms, and procedures.

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.

The Wellspring views these crimes to be community problems and recognizes that it a coordinated response is necessary to effectively address the crimes. We have a 30 year working relationship with the criminal justice system and other responders in the community as evidenced by the attached letters of support and the current Memorandums of Understanding (MOUs) with criminal justice system/private service providers in Ouachita Parish and also with criminal justice system/private service providers in the Rural Parishes of Northeast La.

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 Wellspring has a close working relationship with law enforcement agencies in Northeast Louisiana as evidenced by our letters of support. Many of the agency's clients are referred for services by law enforcement or the district attorney's office. Clients are encouraged to report the abuse to the appropriate law enforcement agency at the time of initial contact. At the Family Justice Center, law enforcement is on site and can take reports with the advocate present if desired. The Wellspring collaborates with law enforcement agencies to provide training to the police academy and to officers throughout the region. An understanding of services offered makes appropriate referrals more likely. The Wellspring and the Family Justice Center upon request make brochures and business cards available to area patrol officers which outline services to victims

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 Wellspring Alliance for Families, Inc., complies with the Louisiana Child Protection Act (LA RS: 15:587). A criminal records check is conducted by the Louisiana State Police on all prospective employees and volunteers. The result of the criminal record check is kept in the personnel/volunteer file.