

LOUISIANA COMMISSION ON LAW ENFORCEMENT  
AND ADMINISTRATION OF CRIMINAL JUSTICE

APPLICATION AND REVIEW  
SUMMARY

APPLICATION NUMBER: C11-5-016

APPLICANT: Southeast Spouse Abuse Program

PROJECT TITLE: Domestic Violence Program

PROJECT FUNDS :

FUND:	\$	<u>50,476</u>	80.00%
MATCH:	\$	<u>12,619</u>	20.00%
TOTAL:	\$	<u>63,095</u>	100.00%

PROJECT DURATION: 12 months

START DATE: 12/01/2011

END DATE: 11/30/2012

Continuation of C88-5-003

PROJECT SUMMARY:

SSAP provides 24-hour crisis intervention in the 4 parishes served to include Tangipahoa, Washington, Livingston and St. Helena Parishes. SSAP offers advocacy and referral services as self-reported needs from these individuals; provide paralegal services and collaboration with court, legal and law enforcement partners on these persons behalf; temporary lodging, emergency food, transportation and other financial assistance is provided as applicable; offers up to 24 month transitional housing to survivors with or without children. All services offered by SSAP are confidential and at no charge to the victims.

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.



**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: C11-5-016 CVA Purpose Area:

<b>1. TITLE OF PROJECT</b> Domestic Violence Program		<b>2. <input type="checkbox"/> NEW PROJECT</b> <input checked="" type="checkbox"/> CONTINUATION PROJECT OF: C10-5-016	
<b>3. PROJECT DURATION</b> Total Length: 12 Months (Not to exceed 12 Months) Desired Start Date: 12/1/2011 Desired End Date: 11/30/2012		<b>4. PROJECT FUNDS</b> Federal Funds: \$50,476 Cash Match: \$12,619 In-Kind Match: Total Project: \$63,095	
<b>5A. APPLICANT AGENCY INFORMATION</b> Agency Name: Southeast Spouse Abuse Program Physical Address: P. O. Box 1946 City: Hammond Zip: 70401-1946 Mailing Address: P. O. Box 1946 City: Hammond Zip: 70401-1946 Phone: (985) 542-8384 FAX: (985) 429-1288 Email: exdirssap82@gmail.com		<b>5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY</b> Authorized Official: Pamela Hutcheson Title: Executive Director Agency Name: Southeast Spouse Abuse Program Address: P. O. Box 1946 City: Hammond Zip: 70401-1946 Phone: (985) 542-8384 FAX: (985) 429-1288 Email: exdirssap82@gmail.com	
Fed Employer Tax Id: 52-1243258 DUNS: 122615677- CCR CAGE/NCAGE: 527W3 CCR Expiration Date: 8/18/2012			

<b>6. IMPLEMENTING AGENCY</b> Name: Pamela Hutcheson Title: Executive Director Agency: Southeast Spouse Abuse Program Address: P. O. Box 1946 City: Hammond Zip: 70401-1946 Phone: (985) 542-8384 FAX: (985) 429-1288 Email: exdirssap82@gmail.com	<b>7. PROJECT DIRECTOR</b> Name: Pamela Hutcheson Title: Executive Director Agency: Southeast Spouse Abuse Program Address: P. O. Box 1946 City: Hammond Zip: 70401-1946 Phone: (985) 542-8384 FAX: (985) 429-1288 Email: exdirssap82@gmail.com	<b>8. FINANCIAL OFFICER</b> Name: Michelle O'Dell Title: Financial Officer/Admin Asst Agency: Southeast Spouse Abuse Program Address: P. O. Box 1946 City: Hammond Zip: 70401-1946 Phone: (985) 542-8384 FAX: (985) 429-1288 Email: modelssap82@gmail.com
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**9. BRIEF PROJECT DESCRIPTION:** (Please do not exceed space provided below.)  
SSAP provides 24 hour crisis intervention in four (4) Parishes which include Tangipahoa, Washington, Livingston and St Helena and offers advocacy and referral services to adults who self identify as being victims of domestic violence and their dependent children. The agency provides an array of services which include crisis intervention, safety planning, individual/group counseling, emergency food, clothing, temporary lodging, transportation, legal advocacy/support, court technical assistance, court preparation, in addition to a six (6) month emergency and a 24 month transitional housing program. All services offered by SSAP are confidential and at no charge to the victim. The agency employs a staff of 12 consisting of an Executive Director, Direct Service Supervisor, Financial Officer/Administrative Assistant, Community Liaison, two (2) HUD Case Managers, four (4) full-time Adult/Outreach Advocates, a part-time Adult/Outreach Advocate, and a part-time Child Advocate. The agency's main office is located in Hammond, Louisiana, with outreach offices/locations in the other three parishes in the service area. SSAP also collaborates with and offers domestic violence training to law enforcement, local court systems and other social service agencies to ensure that quality services are being provided to victims of domestic violence and their dependent children.

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LAW ENFORCEMENT  
COMMISSION

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Revised 08/2010

**VOCA PURPOSE AREAS**

Please Check Type of Victimization Served (Check all that apply):	
<input type="checkbox"/>	Sexual Assault
<input checked="" type="checkbox"/>	Domestic Abuse
<input type="checkbox"/>	Child Abuse
<input type="checkbox"/>	Previously Underserved
State Type of Previously Underserved: Domestic Violence Victims	

**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.

<b>CHECKLIST:</b>	<b>YES:</b>	<b>NO:</b>
Are all budgeted items allowable per Program Guidelines?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Were instructions followed to determine allowable personnel/contractual costs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are all line item computations correct?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do line items add to category totals?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Have category totals been rounded to nearest dollar?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Each category amount listed in the table below must equal category totals shown on Pages 3 through 11.		
Person Completing Budget Section: Pamela Hutcheson	Title: Executive Director	
Phone: (985) 542-8384	Fax: (985) 429-1288	E-Mail: exdirssap82@gmail.com

**PROJECT BUDGET SUMMARY**

BUDGET CATEGORIES	FEDERAL FUNDS	CASH MATCH	IN-KIND MATCH	SECTION TOTAL
SECTION 100. PERSONNEL	\$36,600	\$12,619	\$0	\$49,219
SECTION 200. FRINGE BENEFITS	\$6,962	\$0	N/A	\$6,962
SECTION 300. TRAVEL	\$4,223	\$0	\$0	\$4,223
SECTION 400. EQUIPMENT	\$0	\$0	\$0	\$0
SECTION 500. SUPPLIES	\$600	\$0	\$0	\$600
SECTION 600. CONTRACTUAL	\$0	\$0	N/A	\$0
SECTION 700. RENOVATION COSTS	\$0	\$0	\$0	\$0
SECTION 800. OTHER DIRECT COSTS	\$2,091	\$0	\$0	\$2,091
<b>TOTAL:</b>	<b>\$50,476</b>	<b>\$12,619</b>	<b>\$0</b>	<b>\$63,095</b>

**Provide Source of Cash Match:** Partial salary of Direct Service Supervisor from DCFS \$12,619 (12/01/11 to 11/30/12)

**Provide Source of In-Kind Match:** N/A

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Revised 08/2010

**SECTION 100. PERSONNEL**

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

**FULL-TIME EMPLOYEES:**

POSITION TITLE	EMPLOYEE NAME	FT	ACTUAL MONTHLY SALARY	TIME DEVOTED TO PROJECT	NUMBER OF MONTHS	TOTAL SALARY PAID BY GRANT	PAID WITH	
							F	C
Adult/Outreach Advocate	Angela Mondello	FT	\$2,100.00	100.00%	12.00	\$25,200.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Adult/Outreach Advocate	Markeshia Desselles	FT	\$2,088.00	45.50%	12.00	\$11,400.48	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Direct Service Supervisor	Katina Smith	FT	\$2,858.33	36.79%	12.00	\$12,618.95	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
		FT				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES:						\$49,219.43		

F = Fed Funds  
C = Cash Match

**PART-TIME OR OVERTIME EMPLOYEES:**

POSITION TITLE	EMPLOYEE NAME	PT	OT	ACTUAL EMPLOYEE HOURLY SALARY RATE	NUMBER OF HOURS	TIME DEVOTED TO PROJECT	NUMBER OF WEEKS	TOTAL SALARY PAID BY GRANT	PAID WITH	
									F	C
								\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
								\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
								\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
								\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
								\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
								\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
								\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
								\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
								\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL AMOUNT OF PART-TIME AND/OR OVERTIME EMPLOYEES SALARIES:								\$0.00		

F = Fed Funds  
C = Cash Match

**VOLUNTEERS:**

IN-KIND TOTAL	VALUED RATE OF HOURLY PAY	NO. OF HOURS
\$0.00		
\$0.00		
SUBTOTAL AMOUNT OF VOLUNTEERS IN-KIND SALARIES:		\$0.00

IN-KIND TOTAL: 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.

SECTION 100. PERSONNEL SUMMARY	
FEDERAL FUNDS	\$36,600
CASH MATCH	\$12,619
IN-KIND MATCH	
PERSONNEL TOTAL	\$49,219

**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:

SSAP covers a large geographic area in Southeast Louisiana (Tangipahoa, Livingston, Washington, and St. Helena parishes), much of which is remote, smaller towns and villages. The agency's services are needed in these areas on a consistent basis for domestic violence victims and their dependent children. Without SSAP services, which are accessible in the local communities, supportive, unintrusive, free and confidential, being provided in the local communities with our service area, domestic violence and its far reaching effects and would continue to permeate and destroy into where victims are unaware of available services. For these reasons, as well as the high volume and severity of domestic violence cases in our service area, we need staff to cover the expressed needs and to be present in the community to increase awareness and provide services where the victims live. There are no opportunities for overtime in the positions proposed. These are carryover positions from the last grant. No new positions are proposed.

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

In an effort to attract and retain individuals with the highest degree of knowledge, skills and ethics salaries are offered within the range of similar job descriptions in the State. Salaries are reviewed/approved annually by the SSAP Board of Directors.

C) Project duties of each position requested:

Both Advocates are responsible for providing direct services via face to face or phone, in the main/outreach office, in court, or in other outreach settings to victims of domestic violence and their dependent children within SSAP's four parish service area, consisting of Tangipahoa, Livingston, Washington and St. Helena parishes. Services include, but are not limited to, crisis intervention, safety planning, advocacy, victim empowerment, domestic violence education, individual/group counseling, transportation assistance, assistance with protective orders, including technical assistance, escort to court, and legal advocacy, CVR referral and assistance with application, LAVNS referral, as well as information and referral to specific identified needs. In an effort to provide greater accessibility and expand services to victims and their dependent children, Advocates regularly provide direct services in outreach parishes (Livingston, Washington, and St. Helena).

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.]

Personnel are existing and the positions have not been backfilled. On May 28, 2011 Katina Smith was promoted to the Direct Service Supervisor. On June 6, 2011 Angela Mondello transitioned into the position 100% funded by this grant and Markeshia Desselles was hired was hired in the position partially funded by this grant.

**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

EMPLOYEE'S NAMES				EMPLOYEE'S NAMES (Continued)			
SOCIAL SECURITY	RATE	SALARY	TOTAL	SOCIAL SECURITY	RATE	SALARY	TOTAL
1. Angela Mondello	.062	\$25,200	\$1,562	5.	.062		\$0
2. Markeshia Desselles	.062	\$11,400	\$706	6.	.062		\$0
3.	.062		\$0	7.	.062		\$0
4.	.062		\$0	8.	.062		\$0
MEDICARE	RATE	SALARY	TOTAL	MEDICARE	RATE	SALARY	TOTAL
1. Angela Mondello	.0145	\$25,200	\$365	5.	.0145		\$0
2. Markeshia Desselles	.0145	\$11,400	\$165	6.	.0145		\$0
3.	.0145		\$0	7.	.0145		\$0
4.	.0145		\$0	8.	.0145		\$0
HEALTH/LIFE INSURANCE	RATE	MONTHS	THREESIDED TO PROJECT	HEALTH/LIFE INSURANCE	RATE	MONTHS	THREESIDED TO PROJECT
1. Angela Mondello	200.00	12.00	100.00%	5.			\$0
2. Markeshia Desselles	200.00	12.00	45.50%	6.			\$0
3.				7.			\$0
4.				8.			\$0
WORKMAN'S COMPENSATION	RATE	SALARY	TOTAL	WORKMAN'S COMPENSATION	RATE	SALARY	TOTAL
1. Angela Mondello	0.016	\$25,200	\$403	5.			\$0
2. Markeshia Desselles	0.016	\$11,400	\$182	6.			\$0
3.			\$0	7.			\$0
4.			\$0	8.			\$0
UNEMPLOYMENT TAX	RATE	TYPE	SALARY	UNEMPLOYMENT TAX	RATE	TYPE	SALARY
1. Angela Mondello	0.014	CHECK TYPE	\$6,250	5.		CHECK TYPE	\$0
2.				6.			\$0
3.		5	\$0	7.		<input type="checkbox"/> PUTA	\$0
4.		<input checked="" type="checkbox"/> SUTA	\$0	8.		<input type="checkbox"/> SUTA	\$0
PUBLIC/PRIVATE RETIREMENT	RATE	SALARY	TOTAL	PUBLIC/PRIVATE RETIREMENT	RATE	SALARY	TOTAL
1.			\$0	5.			\$0
2.			\$0	6.			\$0
3.			\$0	7.			\$0
4.			\$0	8.			\$0
OTHER:	RATE	SALARY	TOTAL	OTHER:	RATE	SALARY	TOTAL
1.			\$0	5.			\$0
2.			\$0	6.			\$0
3.			\$0	7.			\$0
4.			\$0	8.			\$0
FRINGE BENEFITS TOTAL (A):			\$6,962	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): \$6,962

SECTION 200. FRINGE BENEFITS SUMMARY	
FEDERAL FUNDS	\$6,962
CASH MATCH	
TOTAL FRINGE BENEFITS	\$6,962

**SECTION 300. TRAVEL**

Itemize travel expenses of project personnel. Mileage is allowable 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. Only 50% of out-of-state travel reimbursement and 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: Angela Mondello TITLE: Adult/Outreach Advocate PURPOSE: Travel for court/outreach, etc. in service area	\$0.48	4,243.00	\$2,036.64	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: Markeshia Desselles TITLE: Adult/Outreach Advocate PURPOSE: Travel for court/outreach, etc. in service area	\$0.48	3,150.00	\$1,512.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: _____ TITLE: _____ PURPOSE: _____			\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: _____ TITLE: _____ PURPOSE: _____			\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL FOR LOCAL TRAVEL:			\$3,548.64	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:		PAID WITH		
		FROM	TO	F	C	IK
NAME: Angela Mondello TITLE: Adult/Outreach Advocate PURPOSE: Training on current victim/ advocacy issues	Louisiana Coalition Against Domestic Violence Quarterly Training, Baton Rouge, Louisiana	4/14/2012	4/15/2012	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: Markeshia Desselles TITLE: Adult/Outreach Advocate PURPOSE: Training on current victim/ advocacy issues	Louisiana Foundation Against Sexual Assault Statewide Conference, Baton Rouge, Louisiana	12/7/2011	12/9/2011	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: _____ TITLE: _____ PURPOSE: _____				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CONTINUED FROM ABOVE TABLE	MILEAGE RATE	TOTAL MILES	MILES COST	NO. OF DAYS	NO. OF MEALS	HOTEL COSTS	AIRFARE COSTS	LOADING COSTS (Include Toll)	OTHER TRAVEL COSTS	TOTAL COSTS	PAID WITH		
											F	C	IK
NAME: Angela Mondello	\$0.48	90.00	\$43.20	2	4	\$76		\$218		\$337.20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: Markeshia Desse	\$0.48	90.00	\$43.20	2	4	\$76		\$218		\$337.20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NAME: _____			\$0.00							\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL FOR NON LOCAL IN-STATE AND OUT-OF-STATE TRAVEL COST:										\$674.40	F = Federal Funds C = Cash Match IK = In-kind Match		

SECTION 300. TRAVEL SUMMARY	
FEDERAL FUNDS	\$4,223
CASH MATCH	
IN-KIND MATCH	
TRAVEL TOTAL	\$4,223



**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. Provide 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
Hotel Stays	8 Nights at \$70 per night	8.00	\$70.00	\$560.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	12 Trips/Avg cost \$50/Trip	12.00	\$50.00	\$600.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food/Clothing	24 Gift Cards at \$25/per card	24.00	\$25.00	\$600.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utility/Rental Assistance	Portion of utility/rental expense	1.00	\$331.00	\$331.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUBTOTAL OF OTHER DIRECT COSTS:				\$2,091.00			

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

**BRIEFLY EXPLAIN:**

A) Need for each type listed; and  
Many domestic violence victims have very limited financial resources and often need emergency services (food, clothing and shelter, etc. to meet their basic needs when leaving a domestic violence situation. The agency is in need of funding to provide for emergency needs of domestic violence victims and their dependent children.

B) Its relationship to project.  
The agency will use the funding to meet the emergency needs of domestic violence victims and their dependent children in order to ensure their safety.

SECTION 800. OTHER DIRECT COSTS SUMMARY	
FEDERAL FUNDS	\$2,091
CASH MATCH	
IN-KIND MATCH	
OTHER DIRECT COSTS TOTAL	\$2,091

**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.

The National Coalition Against Domestic Violence states that 1 in 4 women in Louisiana will be survivors of domestic violence at some point in their lifetime (www.ncadv.org, May 16, 2009). According to the 2009 Violence Policy Center (VPC) annual report Louisiana ranked number one (#1) in the nation in the rate of women killed by men, with a rate of 2.53 per 100,000. In the cases where the victim offender relationship could be identified, 91% were murdered by someone they knew. Of these, 62% were wives or intimate acquaintances of their killers.

Domestic violence is an epidemic that shows no prejudices. Individuals, regardless of race, nationality, age, education level, income level, abilities, etc. can all be potential clients of our agency and other agencies like ours. One fact remains true; the majority of the survivors of domestic violence are women, 85-95% in fact, according to the American Institute on Domestic Violence (<http://www.aidv-usa.com/Statistics.htm>, May 16, 2009).

SSAP statistics substantiate the problem of domestic violence in our four (4) parish service area. From the period of July 1, 2010 through June 30, 2011 SSAP Advocates answered 2,437 crisis/hotline calls; provided 3,274 shelter/lodging nights to domestic violence victims and their dependent children; provided assistance with 397 protective orders and provided community education and public awareness to 883 participants.

Circumstances of all survivors vary. Some are fleeing violent situations; some are looking for ways to escape their situation, some have been gone from the violence for many years, while others are coming to us only for support and do not want to leave the abuser for one reason or the other. The needs of battered individuals vary in degree also. Some come to the agency seeking, first and foremost, safety and shelter from the abuse; while others are looking for supportive individual and group sessions, technical assistance with protective orders, transportation, emergency or transitional housing, advocacy, referrals, education, safety planning, emergency financial assistance, and services for their children. Needs of the target population have increased dramatically primarily due to the economic downturn necessitating greater need for emergency financial assistance to help with basic necessities such as food, clothing and shelter, as well as assistance needed to pay rent and utility bills. The agency has also noted that the frequency and severity of incidents of domestic violence are increasing as evidenced by the increase in the number of requests for assistance with protective orders, as well as reports of the types of domestic violence increasing from verbal and emotional abuse to acts of physical violence.

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

According to the 2010 US Census significant demographic changes have occurred in the agencies service area and highlight the need for increased services to underserved populations as evidenced by an increase in the Hispanic and Two or More Races populations in all four (4) parishes in our service area, as well as increase in the Black populations in two parishes (Tangipahoa and St Helena). Moreover, three (3) of the four (4) parishes (Livingston being the exception) report the percentage of persons below the poverty level is higher than the State of Louisiana and United States as a whole. In addition to the poverty status the majority of our service area is rural. Services are extremely limited, specifically transportation and affordable housing. Also, current/past SSAP survivors have identified and inability to access services due to a lack of transportation. These statistics and information document the gap in and tremendous need for services provided to domestic violence victims by the agency: to respond to their emotional and physical needs; to assist victims with stabilizing their lives after victimization; to assist victims with understanding and participating in the criminal justice system; and to provide victims with a measure of safety and security. To bridge this gap, providing outreach services in all four parishes is essential to ensure accessibility to victims where they live.

## 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, BRIEFLY state what the project hopes to accomplish. Do this by providing a clear statement of the effect this project will have on the problem.

The mission of the Southeast Spouse Abuse Program is to promote social change by providing services which empower battered and abused individuals and their dependent children to achieve safe, violence-free lives; to partner with the community by providing information and education geared toward the elimination of domestic violence, the achievement of peace in relationships and the establishment of a system to hold perpetrators accountable.

Goal 1: To empower victims and their dependent children through services to achieve safe, violence-free lives.

## C. OBJECTIVES

**OBJECTIVES:** Provide at least TWO (2) measurable objectives for EACH goal. Objectives need to be measurable, observable aspects of the program. Identify who, what will change and by how much. Use absolute numbers, not percentages and be sure to include a baseline number.

**Objective 1:**  
Of 275 unduplicated adult survivors of domestic violence served, 260 will develop a viable safety plan and plan of action geared toward establishing themselves and their dependent children in a violence-free environment.

**Objective 2:**  
Of 105 adult survivors of domestic violence served, 100 will secure housing and establish a safe, independent, and violence free life for themselves and their dependent children.

## 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.

Activities/Methods for Objective 1:

1. Trained paid staff will provide crisis intervention via 24 hour weekend, night and holiday on-call coverage offering safety planning and assistance in developing a plan of action inclusive of emergency lodging, transportation assistance and use of 911. Other supportive services will include individual and group supportive and informational counseling.
2. Paid staff will make referrals to the Crime Victim Reparations Program and assist with the application process. Referrals will be made to other programs offering services not provided by SSAP and will provide technical assistance with preparation of protective orders and court escort.
3. SSAP will provide vouchers and gas cards for transportation to survivors seeking activities to promote self-sufficiency, including efforts to support the criminal prosecution process.
4. SSAP will provide hotel lodging to those in need of an immediate safety avenue with a working plan to enter a shelter or transfer to another location within a defined time frame. The agency will work with law enforcement and local taxi services where no other resources are available.
5. It is anticipated that 95% of all callers will receive safety planning.

Timetable for Activities/Methods for Objective 1:

1. Advocates will provide a minimum of weekly group and up to four (4) hours of individual sessions with extensions as requested by victim.
2. Each quarter a minimum 65 unduplicated victims will be provided safety planning and assistance with a plan of action for establishing a violence-free living environment.

Activities/Methods for Objective 2:

1. Advocates will provide housing lists of all housing authorities in the four parish area in conjunction with a list of required documentation for consideration and the application process to all survivors seeking housing.
2. SSAP will provide housing orientation sessions providing information on housing requirements, review of needs assessment, and clarification of expectations and explanation of roles of the agency in the housing program. All survivors on the housing list will be encouraged to attend these sessions in order to remain eligible for housing.
3. The agency will identify and view properties throughout the four parish area developing a solid base of housing possibilities for lease and referral to survivors able to afford on their own.
4. SSAP will monitor progress of each participant in the housing program by conducting a visit to each unit at least monthly and will staff weekly and update a plan of habitation as needed.
5. The agency will provide written and verbal advocacy to other housing avenues, such as shelters, as applicable, and will provide information that empowers the individual to self-advocate.
6. Statistics are kept on each call from survivors and is tallied at the end of each month for cumulative monthly and annual reporting. All referrals are listed per survivor file and the cumulative number is kept for statistical purposes; safety plans are revisited at each contact and revised as situations change. This is documented in each contact note. Survivors are counseled to encourage internalization of this plan to increase personal and family safety.
7. The agency will receive feedback on exit forms provided to all housing participants and to other (when possible) not using services after six months. Financial records are kept on those survivors receiving assistance in housing whether in agency housing or other community housing. The agency also keeps records of those receiving assistance in transferring to another location for housing or shelter.

Timetable for Activities/Methods for Objective 2:

1. Advocates will conduct home visits at least monthly to assist survivors with developing and implementing a plan for self-sufficiency.
2. Each quarter Advocates will assist a minimum of 25 adult survivors with securing a safe, violence-free living environment.

Program will begin on 12/1/11 & continue thru 11/30/12.

### 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.

- |   |   |
|---|---|
| <input type="checkbox"/> Community-Based Organization                                       | <input type="checkbox"/> Prosecution  |
| <input type="checkbox"/> Court  | <input type="checkbox"/> Sexual Assault Program                                 |
| <input checked="" type="checkbox"/> Domestic Violence Program                               | <input type="checkbox"/> Sexual Assault State Coalition                         |
| <input type="checkbox"/> Domestic Violence State Coalition                                  | <input type="checkbox"/> Tribal Coalition                                       |
| <input type="checkbox"/> Dual Program (Sexual Assault and Domestic Violence)                | <input type="checkbox"/> Tribal Government                                      |
| <input type="checkbox"/> Dual State Coalition (Sexual Assault and Domestic Violence)        | <input type="checkbox"/> Tribal Sexual Assault and/or Domestic Violence Program |
| <input type="checkbox"/> Government Agency (Department of Human Services, Bureau of Health) | <input type="checkbox"/> Unit of Local Government                               |
| <input type="checkbox"/> Law Enforcement  | <input type="checkbox"/> University/School                                      |
| <input type="checkbox"/> Probation, Parole, or Other Correctional Agency                    | <input type="checkbox"/> 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: Katina Smith PHONE: (985) 542-8384 EMAIL: klsmithssap82@gmail.com

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/etrograms/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](http://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/etrograms/cvr.asp>.

### H. FOR 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.)

SSAP has exceeded the objectives set in the previous application in regard to unduplicated adult survivors receiving immediate safety planning and planning for establishing a violence-free environment for themselves and their dependent children. During the period from December 1, 2010 to June 30, 2011 SSAP provided services to 722 unduplicated domestic violence victims. This time period is only slightly more than half the grant period and measurable outcomes have far exceeded the proposed 160. In addition, 100% of victims were provided safety planning.

SSAP has also exceeded the objectives set in the previous application in regard to assisting domestic violence victims and their dependent children secure housing and establish a safe, independent, and violence free life. During the period from December 1, 2010 to June 30, 2011 SSAP provided housing assistance either through SSAP's transitional housing program or referrals to other housing alternatives, such as domestic violence shelters, to 213 unduplicated adults. This time period is only slightly more than half the grant period and measurable outcomes have far exceeded the proposed 80.

In addition, the agency proposed to hold at least two Coordinated Response Team Meetings (CCRT) during the grant period and thus far has already held four- three initial meetings and one quarterly.

2. Did the project work as expected? Explain.

The project did work as expected as evidenced by the number of direct services provided to victims of domestic violence and their dependent children.

1. 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?

The goal to empower victims of domestic violence and their dependent children remain the same.

The objectives for this grant period are to increase accessibility to services in the individual parishes we serve. SSAP staff will spend more time in the outlying parishes providing services to promote a violence-free living environment. Due to a high rate of poverty and a lack of transportation it is more feasible for SSAP to bring services to victims of domestic violence where they live.

In addition, affordable housing is also a scarce resource in the entire service area. SSAP will assist victims in securing housing by either providing safe housing through our services or referral to other housing alternatives.

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?

Data will be collected from victims of domestic violence through phone calls for a request of services, face to face contact to complete intake forms, requests for housing assistance, referrals to other services, etc. Data will also be collected, as needed, from other community providers.

2. When will the data be collected?

Data will be collected by staff on an ongoing basis and submitted weekly. A report will be prepared weekly reflecting collective direct and indirect services provided to survivors and their dependent children, as well as community and outreach activities conducted.

3. Who will collect and analyze the data?

The designated staff member will compile data into a report reflecting the week's activities. The Executive Director and Direct Service Supervisor will review and analyze to improve service delivery.

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

Name: Pamela Hutcheson Phone: (985) 542-8384 Email: exdirssap82@gmail.com

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

After evaluating weekly reports, the Executive Director and Direct Service Supervisor will determine compliance with stated goals and objectives. Revisions will be made in office and service delivery policies and procedures, as deemed necessary, to ensure quality services are provided in an optimal manner.

In the event of unforeseen situations or needed additional direction to ensure compliance with grant requirements, the Board of Directors and/or District Director will be consulted.

Evaluation forms utilized by SSAP are attached.

6. Name the recipients who will receive the project's results and the schedule of reporting (i.e. monthly, quarterly, yearly). Recipients MUST state the Louisiana Commission on Law Enforcement will receive Quarterly Progress Reports and expenditure reports quarterly/monthly as specified at award time. Recipients should also include, if applicable, board of directors, applicant agency (if different from implementing agency), courts with jurisdiction, etc.

Quarterly progress reports, monthly expenditure reports and a final report on the subgrant project will be submitted to the Louisiana Commission on Law Enforcement as required by the grant. Reports will also be made available to SSAP's Board of Directors, United Way, HUD, the Division of Children and Family Services and other agencies that work cooperatively with the agency. Information is shared during quality assurance visits and during quarterly meetings with other domestic violence programs seeking to improve services to victims of domestic violence and/or replicate similar practices.

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.

SSAP's full-time Resource Developer/Community Liaison dedicates time to recruiting and training volunteers, building community support and pursuing fundraising efforts. When federal support concludes, the agency hopes its fundraising efforts will increase charitable donations from organizations, institutions and individuals and provides monies lessening the need for increased support from its current funding sources. We are hopeful HUD will continue to provide funds to address the housing needs that are increasingly being identified by victims. Domestic violence program directors meet throughout the year in an effort to strategize and explore multiple avenues of funding sources. Though it is a desire and goal to be self-sustaining, the agency recognizes this is not a matter that will be achieved within the next few years, especially in light of current economic conditions on all levels- local, state, national and international.

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.

All SSAP Staff have a designated office space in the main office in Hammond. In addition, outreach offices have been secured by donating agencies/entities: the Bogalusa YMCA, Denham Springs Police Department, and Greensburg Court House. Outreach offices, comparable to the main office, are utilized to provide all services in an effort to ensure that victims of domestic violence can access services in the parish in which they live. Presently an Adult/Outreach Advocate provides services in outreach parishes weekly, as well as additional time being spent in court attendance to assist victims of domestic violence. Both Advocates designated to the grant will travel within all four parishes in the agency's service area.

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: 11/16/10
2. Dates covered by last audit: 07/01/09 to 06/30/10
3. Date of next audit: 11/10/11
4. Dates to be covered by next audit: 07/01/10 to 06/30/11
5. Date next audit will be forwarded to LCLE: 12/31/11

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?

SSAP volunteers provide the following services for the agency:  
Clerical and General Office: Volunteers provide clerical support, including answering phones, typing, copying, collating materials, and filing. Anticipated hours during subgrant period - 260 (avg. 5 hrs per week)  
Fundraising/Community Support: Volunteers assist with fundraising events and special projects, such as Domestic Violence Month and assistance to families during holidays. They conduct client follow-up surveys and may also assist in community presentations. Anticipated hours during subgrant period- (avg. 50 hours)  
Board of Directors: Members of the Board of Directors volunteer their time and are not compensated in any way, including mileage to and from meetings. Anticipated hours during subgrant period- (avg. 30)

#### 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.

SSAP Staff will maintain current information on the Crime Victims Reparations Program- contact information and application process- in the agency's service area. Upon initial contact with a victim during the intake process staff will provide information and explain the Crime Victims Reparations Program to the victim, if applicable. SSAP Staff will offer/provide assistance with completing the application process and advocating on the behalf of the victim as requested by the victim. SSAP Staff will coordinate with Crime Victim Reparations Program staff to facilitate domestic violence victims accessing CVR services.

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.

Advocates have and will continue to attend court weekly in all four parishes in SSAP's service area to provide immediate access to services. The agency held four (4) Coordinated Community Response Team (CCRT) meetings during the grant year- two more than proposed in the previous year's grant application. The CCRT has proven to be a valuable, integral part of accomplishing SSAP's mission. The CCRT is coordinated by SSAP and is comprised of community law enforcement, prosecuting attorney/victim assistance staff, court personnel, and other community agencies which provide services to victims of domestic violence and their dependent children. Meetings are held and will continue to be held at least quarterly to discuss issues/concerns related to safety, service delivery and accountability of perpetrators. In addition, the agency has met with Division of Children & Family Services and plans to enter into a cooperative agreement so that SSAP may be a partner agency to assist with application process for services such as food stamps and other financial assistance to domestic violence victims and their dependent children. Moreover, local law enforcement and other social services agencies are in support of the services we provide and coordinate with the agency to ensure safety and optimal service delivery. See attached Letter of Support.

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.

SSAP staff will provide information/education to victims regarding the cycle of abuse which includes the essential element of holding the perpetrator accountable by reporting incidents of abuse to law enforcement as part of the process to end the cycle of domestic violence. Information and referral to the Crime Victims Reparation Program will be given to victims of domestic violence and assistance and advocacy will be offered to the victims. LAVNS information and referral will also be provided to victims of domestic violence. In addition, other services needed to enable the victim to report domestic violence and cooperate with authorities will also be provided, including but not limited to, safety planning, providing transportation to attend meetings with law enforcement, attendance at court, as well as advocating for the victim.

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

SSAP complies with the Louisiana Child Protection Act by performing background checks on all employees who provide direct services to children.