

**LOUISIANA COMMISSION ON LAW ENFORCEMENT
AND ADMINISTRATION OF CRIMINAL JUSTICE**

**APPLICATION AND REVIEW
SUMMARY**

APPLICATION NUMBER: M10-8-007

APPLICANT: Faith House

PROJECT TITLE: Domestic Violence Program

PROJECT FUNDS :

FUND: \$ 15,117 100.00%
MATCH: \$ 0 0.00%
TOTAL: \$ 15,117 100.00%

PROJECT DURATION: 12 months

START DATE: 05/01/2011

END DATE: 04/30/2012

Continuation of M96-8-016

PROJECT SUMMARY:

Victims/Survivors are assigned to a Survivor Advocate who will work with them throughout their time with our program. The Survivor Advocate meets with the survivor within 24 hours of their entrance into our shelter. She then assists the survivors with developing personalized safety plans that can be applied to all aspects of their lives, for example when encountering the batterer in the workplace, while traveling, while in public places or in a school environment. Survivor Advocates are available on a daily basis to meet with the survivors individually for empowerment-based peer counseling, and they work together to develop self-identified goals that the survivor wishes to achieve during her stay. These goal plans are changed and updated on a regular basis. As the survivor identifies goals, our Survivor Advocate makes referrals to and advocates with outside community resources to accomplish identified goals. To expand their network of support, support groups are offered three times a week in the shelter for survivors. In the group settings, survivors can share their experiences and offer support to one another.

RECOMMENDATION: FUND DENY

SPECIAL CONDITIONS :

1. 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**

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

CFDA #16.588

FOR LCLE USE ONLY:

Project ID: M10-8-007

VAWA Purpose Area: 12

| | | | |
|--|--|--|--|
| 1. TITLE OF PROJECT Domestic Violence Program | | 2. <input type="checkbox"/> NEW PROJECT <input checked="" type="checkbox"/> CONTINUATION PROJECT OF: M09 - 8 - 007 | |
| 3. PROJECT DURATION Total Length: <u>12</u> Months (Not to exceed 12 Months) Desired Start Date: <u>5/1/2011</u> Desired End Date: <u>4/30/2012</u> | | 4. PROJECT FUNDS Federal Funds: \$15,117 Cash Match In-Kind Match: Total Project: \$15,117 | |
| 5A. APPLICANT AGENCY INFORMATION Agency Name: Faith House, Inc. Physical Address: 1453 W. Willow Street City: Lafayette Zip: 70506-1026 Mailing Address: P. O. Box 93145 City: Lafayette Zip: 70509-3145 Phone: (337) 267-9422 FAX: (337) 232-2770 Email: faithhouseacadiana.com | | 5B. AUTHORIZED OFFICIAL OF APPLICANT AGENCY Authorized Official: Billi Lacombe Title: Executive Director Agency Name: Faith House, Inc. Address: P. O. Box 93145 City: Lafayette Zip: 70509-3145 Phone: (337) 267-9422 FAX: (337) 232-2770 Email: blacombe@faithhouseacadiana.co | |
| Fed Employer Tax Id: <u>72 - 0910067</u> DUNS: <u>627245178 -</u> CCR CAGE/CAGE: <u>487F7</u> CCR Expiration Date: <u>March 2011</u> | | | |
| 6. IMPLEMENTING AGENCY Name: Marcee Rose Title: President, Board of Directors Agency: Faith House, Inc. Address: P. O. Box 93145 City: Lafayette Zip: 70509-3145 Phone: (337) 267-9422 FAX: (337) 232-2770 Email: macee@mylafayettehomes.com | 7. PROJECT DIRECTOR Name: Billi Lacombe Title: Exector Director Agency: Faith House, Inc. Address: P. O. Box 93145 City: Lafayette Zip: 70509-3145 Phone: (337) 267-9422 FAX: (337) 232-2770 Email: blacombe@faithhouseacadiana.co | 8. FINANCIAL OFFICER Name: Liz Moreau Title: Treasurer, Board of Directors Agency: Faith House, Inc. Address: P. O. Box 93145 City: Lafayette Zip: 70509-3145 Phone: (337) 267-9422 FAX: (337) 232-2770 Email: ljmoreau@bplb.com | |

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

Faith House, Inc. is applying for \$15,117 to partially fund the position of Survivor Advocate. Survivors are assigned to a Survivor Advocate who will work with them throughout their time with our program. The Survivor Advocate meets with the survivor within 24 hours of their entrance into our shelter. she then assists the survivors with developing personalized safety plans that can be applied to all aspects of their lives, for example when encountering the batterer in the work place, while traveling, while in public places or in a school environment. Survivor Advocates are available on a daily basis to meet with the survivors individually for empowerment-based peer counseling, and they work together to develop self-identified goals that the survivor wishes to achieve during her stay. These goal plans are changed and updated on a regular basis. As the survivor identifies goals our Survivor Advocate makes referrals to and advocates with outside community resources to accomplish identified goals. To expand their network of support, support groups are offered three times a week in the shelter for survivors. In the group settings survivors can share their experiences and offer support to one another.

2010 DEC 15 A 10: 37
LAW ENFORCEMENT
COMMISSION

VAWA - 1

Revised JULY 2010

VAWA PURPOSE AREAS

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

- 1. Training law enforcement officers, judges, other court personnel, and prosecutors to more effectively identify and respond to violent crimes against women, including the crimes of sexual assault, domestic violence, and dating violence.
- 2. Developing, training, or expanding units of law enforcement officers, judges, other court personnel, and prosecutors specifically targeting violent crimes against women, including sexual assault and domestic violence.
- 3. Developing and implementing more effective police, court, and prosecution policies, protocols, orders, and services devoted to preventing, identifying, and responding to violent crimes against women, including the crimes against women, including sexual assault and domestic violence.
- 4. Developing, installing, or expanding data collection and communication systems, including computerized systems, linking police, prosecutions, and the courts or for the purpose of identifying and tracking arrests, protection orders, violations of protection orders, prosecutions, and convictions for violent crimes against women, including the crimes of sexual assault and domestic violence, including the reporting of such information to the National Instant Criminal Background Check System.
- 5. Developing, enlarging, or strengthening victim services programs, including sexual assault and domestic violence, and dating violence programs; developing or improving the delivery of victim services to underserved populations; providing specialized domestic violence court advocates in courts where a significant number of protection orders are granted; and increasing reporting and reducing attrition rates for cases involving violent crimes against women, including sexual assault and domestic violence.
- 6. Developing, enlarging, or strengthening programs addressing stalking.
- 7. Developing, enlarging, or strengthening programs addressing the needs and circumstances of Indian tribes dealing with violent crimes against women, including the crimes of sexual assault and domestic violence.
- 8. Supporting formal and informal statewide, multi-disciplinary efforts, to the extent not supported by state funds, to coordinate the response of state law enforcement agencies, prosecutors, courts, victim services agencies, and other state agencies and departments, to violent crimes against women, including the crimes of sexual assault, domestic violence, and dating violence.
- 9. Training of sexual assault forensic medical personnel examiners in the collection and preservation of evidence, analysis, prevention, and providing expert testimony and treatment of trauma related to sexual assault.
- 10. Developing, enlarging, or strengthening programs to assist law enforcement, prosecutors, courts, and others to address the needs and circumstances of older and disabled women who are victims of domestic violence or sexual assault, including recognizing, investigating, and prosecuting instances of such violence of assault and targeting outreach and support, counseling, and other victim services to such older and disabled individuals.
- 11. Providing assistance to victims of domestic violence and sexual assault in immigration matters.
- 12. Maintaining core victim services and criminal justice initiatives while supporting complementary new initiatives and emergency services for victims and their families.
- 13. Provide for special victim assistants in law enforcement agencies to serve as liaisons between victims and law enforcement in order to improve the enforcement of protection orders. (Jessica Gonzales Victim Assistants)
- 14. Improving responses to police-perpetrated domestic violence. (Crystal Judson Domestic Violence Protocol Program)

VAWA - 2

Revised JULY 2010

PROJECT BUDGET SUMMARY

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

CHECKLIST:

| | | |
|--|-------------------------------------|--------------------------|
| | YES: | NO: |
| Are all budgeted items allowable per Program Guidelines? | <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 in each budget section.

Person Completing Budget Section: **Bobbie Hollier** Title: **Administrative Assistant**
 Phone: (337) 267-9422 Fax: (337) 232-2770 E-Mail: bhollier@faithhouseacadiana.com

PROJECT BUDGET SUMMARY

| BUDGET CATEGORY | FEDERAL FUNDS | CASH MATCH | IN-KIND MATCH | SECTION TOTAL |
|--------------------------------|-----------------|------------|---------------|-----------------|
| SECTION 100 PERSONNEL | \$15,117 | \$0 | \$0 | \$15,117 |
| SECTION 200 FRINGE BENEFITS | \$0 | \$0 | N/A | \$0 |
| SECTION 300 TRAVEL | \$0 | \$0 | \$0 | \$0 |
| SECTION 400 EQUIPMENT | \$0 | \$0 | \$0 | \$0 |
| SECTION 500 SUPPLIES | \$0 | \$0 | \$0 | \$0 |
| SECTION 600 CONTRACTUAL | \$0 | \$0 | N/A | \$0 |
| SECTION 800 OTHER DIRECT COSTS | \$0 | \$0 | \$0 | \$0 |
| TOTAL: | \$15,117 | \$0 | \$0 | \$15,117 |

Provide Source of Cash Match:

Provide Source of In-Kind Match:

USE OF STOP FUNDS IN PERCENTAGES

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

SECTION 100. PERSONNEL

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

FULL-TIME EMPLOYEES:

| POSITION TITLE | EMPLOYEE NAME | FT | ACTUAL MONTHLY SALARY | TIME DEVOTED TO PROJECT | NUMBER OF MONTHS | TOTAL SALARY PAID BY GRANT | PAID WITH | |
|--|-----------------|----|-----------------------|-------------------------|------------------|----------------------------|-------------------------------------|--------------------------|
| | | | | | | | F | C |
| Survivor Advocate | Lestria Batiste | FT | \$1,977.33 | 63.71% | 12.00 | \$15,117.08 | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | | FT | | | | \$0.00 | <input type="checkbox"/> | <input type="checkbox"/> |
| | | FT | | | | \$0.00 | <input type="checkbox"/> | <input type="checkbox"/> |
| | | FT | | | | \$0.00 | <input type="checkbox"/> | <input type="checkbox"/> |
| | | FT | | | | \$0.00 | <input type="checkbox"/> | <input type="checkbox"/> |
| | | FT | | | | \$0.00 | <input type="checkbox"/> | <input type="checkbox"/> |
| | | FT | | | | \$0.00 | <input type="checkbox"/> | <input type="checkbox"/> |
| SUBTOTAL AMOUNT OF FULL-TIME EMPLOYEES SALARIES: | | | | | | \$15,117.08 | 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"/> |
| 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. | N.O. 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 | \$15,117 |
| CASH MATCH | |
| IN-KIND MATCH | |
| PERSONNEL TOTAL | \$15,117 |

SECTION 100. PERSONNEL (Continued) - BRIEFLY EXPLAIN:

Yes No Are job descriptions for each position attached? If not, explain.

Yes No Are resumes for each position attached? If not, explain:

A) Need for each position shown above; justify need for overtime:

The Survivor Advocate for whom we are requesting funding provides direct services to survivors of domestic violence in our emergency shelter. The services include handling crisis calls, crisis/peer and options counseling, support groups, safety planning, domestic violence education, referrals to social agencies and advocacy with agencies. In order to develop violence free lives, many survivors of domestic violence must become independent, find housing, employment, transportation, childcare and the other resources that contribute to independent living. The survivors usually come to us with nothing, and our Survivor Advocate is responsible for assisting them to generate the resources necessary. Without a Survivor Advocate's assistance, many of our women would not have the necessary services to achieve safe, independent lives. On occasion the Survivor Advocate has to work late or come in early to meet with a survivor. When this happens she will then adjust her schedule for the rest of the week so she does not have overtime.

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

The salaries for these positions are based on the general salary structure of the entire program, the job description, and information from the Louisiana Coalition Against Domestic Violence.

C) Project duties of each position requested:

The Survivor Advocate makes personal contact each day with the survivors to find out if they need a private meeting, if they are encountering problems, and what kind of help they would like. Each survivor who stays in the shelter at least 72 hours completes, with assistance of the survivor advocate, a Goal Plan which reflects her personal goals. The Survivor Advocate identifies possible community resources, provides contact information, encourages the survivor to advocate for her own needs and tracks the survivor's success. When appropriate, the Survivor Advocate will advocate on behalf of the survivor.

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

This is a continuation grant, the position of survivor advocate has been funded by VAWA since July 1, 1997. The current Survivor Advocate is Lestria Batiste. Lestria has been employed by Faith House since 09-16-06 and has been in the position of survivor advocate since October 18, 2010.

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

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

Check: All Fringe Benefits Will Be Paid by Applicant Agency Additional Fringe Benefits Will Be Paid by Applicant Agency

| EMPLOYEES NAMES: | | | | | EMPLOYEES NAMES: (Continued) | | | | |
|---------------------------|-------|-------------------------------|--------------------|-------|------------------------------|-------|-------------------------------|--------------------|-------|
| SOCIAL SECURITY | RATE | | SALARY | TOTAL | SOCIAL SECURITY | RATE | | SALARY | TOTAL |
| 1 | .062 | | | \$0 | 5 | .062 | | | \$0 |
| 2 | .062 | | | \$0 | 6 | .062 | | | \$0 |
| 3 | .062 | | | \$0 | 7 | .062 | | | \$0 |
| 4 | .062 | | | \$0 | 8 | .062 | | | \$0 |
| MEDICARE | RATE | | SALARY | TOTAL | MEDICARE | RATE | | SALARY | TOTAL |
| 1 | .0145 | | | \$0 | 5 | .0145 | | | \$0 |
| 2 | .0145 | | | \$0 | 6 | .0145 | | | \$0 |
| 3 | .0145 | | | \$0 | 7 | .0145 | | | \$0 |
| 4 | .0145 | | | \$0 | 8 | .0145 | | | \$0 |
| HEALTH INSURANCE | RATE | MONTHS | THREATENED PROJECT | TOTAL | HEALTH INSURANCE | RATE | MONTHS | THREATENED 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 | | | | \$0 | 5 | | | | \$0 |
| 2 | | | | \$0 | 6 | | | | \$0 |
| 3 | | | | \$0 | 7 | | | | \$0 |
| 4 | | | | \$0 | 8 | | | | \$0 |
| UNEMPLOYMENT TAX | RATE | TYPE | SALARY | TOTAL | UNEMPLOYMENT TAX | RATE | TYPE | SALARY | TOTAL |
| 1 | | CHECK TYPE | | \$0 | 5 | | CHECK TYPE | | \$0 |
| 2 | | | | \$0 | 6 | | | | \$0 |
| 3 | | <input type="checkbox"/> FLTA | | \$0 | 7 | | <input type="checkbox"/> FLTA | | \$0 |
| 4 | | <input 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) | | | | \$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 |

PROGRAM NARRATIVE

A. PROBLEM DEFINITION

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

Services for survivors of domestic violence are desperately needed in our communities. The services provided by Faith House are designed to positively impact one of the most pressing and critical unmet needs identified in the City of Lafayette's Consolidated Plan, which identifies battered women and their children as one of the largest homeless subpopulations. Domestic violence is a major problem in the United States, in Louisiana, and in Lafayette.

The 2009 Point in Time Homeless Census for Region IV (which includes Lafayette Parish) was conducted on January 27-28, 2009. From the data collected, ninety nine victims of domestic violence were sheltered and eighteen victims were unsheltered for a total of one hundred seventeen victims of domestic violence during this twenty-four hour period of time.

The total civilian labor force in Lafayette Parish for August, 2010 was 113,854 of which 106,645 were employed and 7,209 were unemployed (www.voshost.com). The Louisiana Department of Labor reports that the State Unemployment rate for August 2010 for Lafayette Parish was 6.3%. In Louisiana as of August 2010, 8.2% or 172,867 people were unemployed.

Poverty is a serious issue for survivors of domestic violence. A large number (17.6%) of people in Louisiana live at or below the poverty level. In Faith House's service area four out of the five parishes have a higher percentage than the state. (Evangeline 22.7%, St. Landry 25.6%, Acadia 19.7% Vermilion 17.9% and Lafayette 14.7%) www.quickfacts.census.gov

From January 2010 through August 8, 2010 fifty nine people died due to domestic violence in Louisiana. Louisiana ranks first in the nation in the number of women killed by men. This is an indication on how serious the problem of domestic violence is in the state. It's more common than many think. www.lpb.org.

Citing national survey data the U. S. Department of Justice, on any day, one and a half percent of all women will be physically or sexually abused by their intimate partner or spouse and another one half percent will be stalked by a former partner. In Louisiana, that number is roughly 34,500 women every day.

According to The National Coalition Against Domestic Violence, 50 percent of all women will experience physical violence in an intimate relationship and for 24 to 30 percent of those women the battering will be regular and on-going. Ninety-five percent of all violence victims are women. www.la-womenspolice.com

Faith House is the only domestic violence program that serves Lafayette parish as well as the rural parishes of Acadia, St. Landry, Evangeline and Vermilion parishes. In 2009, Faith House housed 783 survivors for a total of 18,532 nights of shelter. The shelter facility has 45 beds and was at or above capacity 92% of the time for a total of 334 days in 2009. Based on three meals per day per women and children were provided with 55,170 meals in 2009. Non-Residential services were provided to 598 women and 728 children. Faith House had to turn away 316 residential women during calendar year 2009. The staff answered 7,807 information/crisis/counseling calls in 2009. As the only domestic violence shelter in the Lafayette area, this facility plays a crucial role in meeting the emergency safety needs of women and children who are survivors of domestic violence. Through October 2010, 432 residents (235 women and 197 children) checked in the shelter and were provided 14,200 nights of shelter. Non-residential services were provided to 537 women and 409 children. The staff answered 5,929 information/crisis/counseling calls during this time.

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

Survivors and staff members advocating on behalf of survivors identify gaps in community resources as:

- Legal assistance for survivors remains the largest gap in community resources. Oftentimes survivors cannot afford attorneys for divorce, custody, or community property cases which results in inequitable representation during hearings and has a negative affect on victims and their children.
- Lack of affordable housing is an ongoing gap. Many survivors are paid minimum wage and can't earn enough money to sufficiently support their household.
- Financial assistance for relocation ex. bus tickets, plane tickets, gas money, etc. Funding streams for relocation of victims are not readily available. Survivors may have to leave and relocate to escape further harm from abuse.
- Medication assistance particularly with medications for injuries such as prescription pain medications and mood stabilizing prescriptions.

The needs created by these gaps in services often affect the very basic needs of life for a victim and her children. These gaps are identified by needs surveys and goal plans. Survivors share this information with us on a regular basis and our advocates network with other service providers to identify needs.

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.

Goal 1: Faith House will provide survivors of domestic violence with support services and assistance as they try to develop violence free lives for themselves and their children.

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: Goal plans will be completed for 115 women who stay in the shelter at least 72 hours from July 1, 2011 to June 30, 2012.

Objective 2: Safety plans will be provided for 115 women who stay in the shelter from July 1, 2011 to June 30, 2012.

Objective 3: Advocacy services including one on one counseling, referrals and client advocacy will be provided 3,500 times from July 1, 2011 to June 30, 2012.

D. ACTIVITIES / METHODS

List the specific activities and/or services to be provided that will accomplish the objectives. Must include a timetable for achieving the various components of your project. Timetable must cover entire grant period. This must relate back to the Goals and Objectives. If this is a training project, omit this page and complete D-2 Training Programs

Goal 1, Objective 1: Within 72 hours of admission the survivor of domestic violence will be assisted by the survivor advocate to develop a goal plan and with referrals and advocacy as necessary.

Goal 1, Objective 2: Within 72 hours of admission the survivor of domestic violence will be assisted by the survivor advocate to develop a safety plan and with referrals and advocacy as necessary.

Goal 1, Objective 3: As a woman checks into Faith House she will receive crisis intervention services from our shelter manager. Within 24 hours she will sit with a survivor advocate to determine her immediate needs and will receive any advocacy or referrals appropriate.

The Survivor Advocate will meet with residential survivors daily to provide needed services. These services include one on one counseling, client advocacy, referrals and transportation.

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: Mary Anne McDougall PHONE: (337) 267-9422 EMAIL: legaladvocate@faithhousea

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: Crystal Scrantz PHONE: (337) 267-9422 EMAIL: cscrantz@faithhouseacadiana.co

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: Crystal Scrantz PHONE: (337) 232-8954 EMAIL: cscrantz@faithhouseacadiana.co

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.)

Our project is a direct victim service project which provides crisis counseling, crisis hotline counseling, group treatment/support, shelter, referrals, advocacy, emergency financial assistance, and legal advocacy to survivors of domestic violence. We will measure the number of women served and the amount of services received.

2. Did the project work as expected? Explain.

Yes, it worked as expected. Approximately 185 women were able to receive safe, effective services due to this project.

3. Have the original goals and objectives been revised? Yes No

If Yes, explain what changes will be made in the continuation of this project and why?

I. EVALUATION AND DISSEMINATION OF REPORTING

A COPY OF YOUR EVALUATION FORMS USED FOR THIS PROJECT MUST BE INCLUDED.

1. From who will the data be collected - what is the source?

We ask each woman receiving services to complete an evaluation form, however it is not mandatory.

2. When will the data be collected?

The data is collected on the survivor's shelter departure date.

3. Who will collect and analyze the data?

Shelter advocates, shelter managers, and/or our legal advocate collects the data and submits the information to the Program Director. The Program Director analyzes the data each month and reports the findings to the Executive Director, Board of Directors, grantors, etc.

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

Name: Crystal Sorantz

Phone: (337) 267-9422

Email: csorantz@faithhouseacadiana.org

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

Formal strategies are accomplished by utilizing feedback and suggestions from survivors, staff members, and board members. The Executive Director and Program Director meet to update and revise the project's strategies informally as needed.

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

Monthly statistics are reported to the Board of Directors in the Director's Report.

Reports are submitted monthly to the Department of Children and Family Services, United Way of St. Landry/Evangeline Parish, Louisiana Commission on Law Enforcement and Lafayette Consolidated Government. Quarterly reports are filed with CVA, VAWA, Consolidated Government External Agency, HUD, United Way of Acadiana, and foundation grants.

J. CONTINUATION

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

At the conclusion of federal support, we will seek support from the community.

K. RESOURCES

Describe the facilities and additional resources available to this project. Include the physical facility where services are provided. If applicable, list other resources available to this project, i.e. equipment, supplies, staff, etc.

The facility in Lafayette consists of a 45-bed shelter and direct services/administrative offices. There are nine residential bedrooms, with five connecting baths. There is a large playroom, playground, a dining room, a family room, a laundry room, a wardrobe room, a medication room, a nurse's room, and a large kitchen. There are a total of 10 direct services/administrative offices. Each office is equipped with a computer, printer, telephone, adding machine and other supplies. Faith House has a fax machine and copy machine that is available for each employee to use.

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: In progress
2. Dates covered by last audit: July 1, 2009 - June 30, 2010
3. Date of next audit: September 2011
4. Dates to be covered by next audit: July 1, 2010 - June 30, 2011
5. Date next audit will be forwarded to LCLB: Upon completion of the audit that is in progress

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

M. VOLUNTEERS

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

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

N. CONSULTATION

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

Faith House has amicable relations with law enforcement in the five-parish area we serve. During calendar year 2009, Faith House provided 13 law enforcement trainings to various agencies in Acadiana. The local police officers often call from the scene of domestic incidents and allow our advocates to speak with the survivor if she so chooses, and they hand out Faith House literature.

Lafayette has a Family Court which consists of two judges, both of whom are supportive of our program. Responding to a concern expressed by Hearing Officers, the legal advocate is available to meet with survivors prior to TRO hearings each Thursday in court to answer questions and explain the order and the process. The Legal Advocate then escorts them to the courtroom.