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# Introduction

The Community Alliance for Individuals with Disabilities (C-AID) is a regional collaboration in southeastern North Carolina between the Rape Crisis Center (RCC) of Coastal Horizons Center, Inc., and the disAbility Resource Center (dRC), both headquartered in Wilmington, NC.

RCC provides crisis response, supportive counseling, advocacy, and court accompaniment to those who are survivors of sexual assault or sexual abuse. In addition, RCC provides outreach and training in schools and in the community to raise awareness about the dangers and prevalence of sexual assault. The parent organization of RCC, Coastal Horizons Center, Inc. provides professional assistance to those in need of substance abuse and mental health treatment services, prevention, crisis intervention, criminal justice alternatives, and community outreach. This needs assessment process focused on the RCC exclusively rather than on the entire Coastal Horizons organization.

The dRC, founded in 2008, is a community based, non-profit, non-residential program that provides free services to persons with any type of disability. The dRC is dedicated to empowering all persons, regardless of disability, to make choices about their own lives and experience success and well being as active participants in society. The dRC is one of eight Centers for Independent Living (CIL) in the state of North Carolina. A CIL is defined as, "A private, nonprofit corporation that provides services to maximize the independence of individuals with disabilities and the accessibility of the communities they live in." The dRC provides an array of independent living services including information and referral with counseling, help with accessible living situations, job searches, prescription assistance, computer classes, and advocacy. Staff members, the majority of whom have a disability or who have had a personal life experience with a disability, provide the services.

This collaboration is funded by a three-year grant through the U.S. Department of Justice, Office of Violence Against Women (OVW). The two agencies in our collaboration are committed to a long-term, synergistic relationship. Historically in this region, there has been no RCC-dRC collaboration that has addressed organizational capacity to serve survivors with disabilities effectively and safely. The dedicated funding of this grant will allow us, at last, to take the first steps in addressing this issue.

# Vision Statement

We envision a day when sexual assault is unacceptable and perpetrators are held accountable. We envision our entire community to be disability-aware, trauma-informed and fully accessible to persons with disabilities. We envision a day when all victim service providers will have welcoming, effective, and healing services for sexual assault survivors with disabilities and that these individuals will feel physically and emotionally safe, valued, and respected. We envision a day when sexual assault survivors, with or without disabilities, become advocates for their own rights and well being to the maximum extent possible. Our needs assessment process has shed light on the path to this vision.

# Mission Statement

Within our service area of New Hanover and Brunswick counties of North Carolina, we will work to attain this vision by making sustainable improvements in our two organizations in (1) enhancements to facility accessibility, policies, protocols, and culture for serving sexual assault survivors with disabilities (2) staff knowledge, skills, and attitudes regarding sexual assault survivors with disabilities, and (3) building effective relationships between the organizations in our collaboration. In addition to survivors with disabilities, we include any other survivors who need access to our services. In the future, we hope to address specifically the needs of the Deaf community, the needs of survivors with mental health issues, and to provide training in best practices to other victim service providers.

# Work To Date

In the first two years of our grant we:

* Developed our collaboration charter, which is the foundation of our team and which guides and structures our activities;
* Developed a needs assessment plan and conducted a needs assessment that allowed us to gather information from individuals with disabilities and survivors of sexual assault to assess our collaboration's existing strengths and weaknesses in service delivery;
* Developed a needs assessment report that presented the findings of the assessment;
* Conducted listening sessions with RCC and dRC staff and the dRC Board of Directors in order to validate and prioritize the findings in our assessment report.

# Needs Assessment Plan

Our collaboration developed a needs assessment plan to identify current organizational structures and barriers that are preventing us from providing safe, accessible and comfortable environments for serving survivors with disabilities. For this assessment we examined three sources of information:

1. Existing client satisfaction data.
2. Focus groups and interviews with current clients about their experiences with victim service organizations, including our own, and what they envision a service agency to be like in their ideal world.
3. Performance indicators gathered during our organizational assessments using Vera Institute of Justice's Performance Indicator Measurement System (PIMS). The performance indicators were grouped into six categories or "baskets". Although scores for both RCC and dRC were low across all six categories, PIMS did give us a spectrum of environmental and behavioral goals in our client services.[[1]](#footnote-1)

During our needs assessment in February and March, 2015, we gathered information from our RCC and dRC clients in five focus groups and three interviews about how well their needs were met when they were served by our organizations. We captured dozens of compelling quotes from individuals with disabilities and survivors that validated the importance of specific PIMS indicators.

# Needs Assessment Report

In our subsequent Needs Assessment Report, we presented the information gathered from existing client satisfaction data, focus groups and interviews, and scores on the PIMS indicators. We grouped our findings using the six "baskets “from the PIMS with an emphasis on those factors that would build capacity in our organizations:

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| * Responsibility
 | * Partnerships
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| * Policies
 | * Material Resources
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| * Human Resources
 | * Programming/Procedures
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Four themes emerged from an examination of the performance indicators and the comments made during the focus groups and interviews.

**Theme #1: Policies and Procedures.**  Both organizations have substantial shortfalls in their policies and procedures that compromise their commitment to providing safe, accessible, and responsive services to survivors with disabilities. We need to develop policies that place the survivor with disabilities at the center of our work.

**Theme #2: Accessibility& Disclosure**. Both organizations need to make their facilities and their communication/information systems far more accessible and welcoming to survivors with disabilities to ensure they feel safe, confidential, and accepted. Examples include persons using wheelchairs cannot gain entrance to our facility without assistance; there are no visible smoke alarms for Deaf and hard-of-hearing individuals; clients with low vision could not read the consent forms needed to complete intake. There are no assistive communication devices to access our services.

**Theme #3: Knowledge Building**. Both agencies have deficits in the training and education they provide to their staff and interns.

**Theme #4: Partnership and Outreach**. Both organizations need more knowledge of each other's procedures/service delivery with a greater use of regional information databases.

# Listening Sessions

We explored these four themes during our listening sessions with RCC/dRC staff, interns, and volunteers and with the dRC Board of Directors in order to prioritize what was important to the personnel who work in and govern our organizations. The goals of the listening sessions were to inform our stakeholders of the key findings from our needs assessment and to capture their opinions about priorities and needs within our collaboration.

We held a total of six listening sessions in February and March of 2015. Listening sessions for the RCC were facilitated by someone from the dRC and sessions for the dRC were facilitated by someone from the RCC. Again, we captured many compelling quotes from our staffs and from members of the dRC Board of Directors about the four themes. In particular, participant comments focused on three areas:

* **Policies and Procedures**. Listening session participants emphasized the need for well-crafted policies in the areas of eligibility, accommodations, guardianship, service animals, consent for services, and serving individuals with intellectual disabilities.
* **Accessibility**. Participants focused on making sure our facilities were ADA compliant, of having materials inclusive for survivors with disabilities and Deaf individuals, having assistive communication devices and auxiliary aids, and creating an assessment team to make sure our facilities stayed up-to-date.
* **Staff Training.** Here, participants focused on the need for sexual harassment training, the impact of ableism, crisis intervention, sexual assault screening tools, and practical learning opportunities.

The listening sessions provided us with additional guidance in elaborating and expanding on themes, determining their feasibility, and creating an implementation sequence for our strategic plan.

# Strategic Plan Initiatives

Our strategic plan will give us a roadmap for achieving substantive changes in how and what services we provide to survivors with disabilities in our collaboration. Based on what we learned in the our needs assessment and listening sessions, and working with our technical assistance expert from the Vera Institute, our collaboration team selected three initiatives that are of strategic importance and that are feasible to accomplish within the next 15 months. These initiatives are:

**Initiative 1: Develop policies and procedures in key areas of service in both organizations.**

Both organizations are deficient in their written policies and procedures in almost all areas. In addition, personnel of both organizations are in need of a broad range of information and training in order to become disability aware and trauma informed. Based on what we learned in the needs assessment and listening sessions, we have selected key polices and procedures for development in our strategic plan

**Initiative 2: Promote access to the physical and communication environments of each organization and enhance their safety plans.**

From our needs assessment and listening sessions, we learned about a variety of physical and communication barriers in both organization that prevent sexual assault survivors with disabilities from accessing our services. Individuals using wheelchairs cannot open the front doors of our facilities; staff members at RCC have no means of communicating with hard-of-hearing or Deaf individuals; clients with low vision are unable to see current consent forms and other documents needed for service; and dRC staff are not screening clients for SV services.

**Initiative 3: Develop staff training in both organizations in the new policies and procedures and in foundation knowledge critical for providers of service to survivors with disabilities.**

From our needs assessment and listening sessions, we learned personnel of both organizations are in need of a broad range of information and skills in order to become disability aware and trauma informed in their service provision. dRC staff need foundation knowledge about the effects of sexual assault on the lives of persons with disabilities and RCC staff need training in how disabilities and sexual assault synergistically affect each other.

Additionally, we feel that training will broaden the perceived scope of responsibilities among staff in both organizations. RCC staff will learn to feel comfortable with clients presenting with disabilities, and dRC staff will become trauma informed when serving their clients. Buy-in for these training topics is assured since senior managers from both dRC and RCC are members of our collaboration team. We selected training topics based on the needs we heard from staff and interns and will use the expertise of our combined personnel to develop most of these topics. We will turn to expertise outside of our organizations as needed.

# Work Teams and Training Schedule

In order to be successful in achieving these initiatives, we will form work teams to carry out the development activities. Members of our collaboration team who have expertise in the given initiatives will lead the work teams and draw on other staff members, interns, and community experts as needed. Each work team will have at least one member from the dRC and one from the RCC. The lead person(s) of each work team will be responsible for recruiting members. It is anticipated that work teams will meet at least once a week depending on the development timeline. Specific work plans are described in the following pages.

As a collaboration, we felt once new policies, procedures and protocols were developed and approved by OVW that training in these should follow in a timely manner while the curriculum was fresh in the minds of the developers. Therefore, we propose organizing the training into three half-day workshops occurring quarterly at months 6, 9, and 12 after the approval of this strategic plan. Additionally we feel that:

1. Learning is best achieved when presented a few topics at a time. As shown in the training schedule below, each quarterly workshop will present one topic to the combined staffs of both dRC and RCC and one topic specific to either dRC or RCC. Each quarter, personnel of each organization will be trained in two topics relevant to their jobs. Training topics can be repeated for the other organization at a later time as needed.
2. Personnel can implement this training immediately and can be observed and given feedback on their performance. This also will give our trainers an opportunity to evaluate their strategies and make changes before the next workshop.
3. Quarterly workshops also will engage all personnel of both organizations early on instead of delaying their involvement for almost a year.

# Work Plan for Achieving the Strategic Objectives

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| **Initiative 1: Develop policies and procedures in key areas of service in both organizations.** |
| **1A** | **For dRC and RCC, develop/adapt policies and procedures for delivering services free of cultural prejudices such as ableism, racism, and hetersexualism.**This is a foundation skill that is critical for providers serving sexual assault survivors with disabilities. We all harbor many unconscious biases toward some individuals. In addition, we often practice micro-aggression towards those we marginalize through our comments and both verbal and non-verbal communication. When we marginalize people we increase their vulnerability to the risk of more sexual violence.  |
| # | **Key Activities by Work Team Unless Noted** | **Lead** | **Month** | **Notes** |
| a | Identify and review exemplary policies and procedures in CILs, OVW grantees and other organizations. | Emily, Charlotte, & Hal | 1-2 | * Emily (RCC), Charlotte (dRC), and Hal will assist two undergraduate interns in a literature search for exemplary policies and procedures in victim-service organizations.
* The work team will review selected policies and procedures and tailor them to the needs of dRC and RCC.
* The collaboration will review them before submission to OVW.
* Training on these new policies and procedures (See Initiative 3A) will take place six months after approval of the strategic plan.
 |
| b | Adapt/develop selected policies and procedures and review in work team. |
| c | Vet policy and procedures through collaboration. |
| d | Submit policy and procedures to OVW for approval. | Hal | 3 |
| e | Once approved, hand-off policy and procedures to the training team. | Hal | 4 |

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| **Initiative 1: Develop policies and procedures in key areas of service in both organizations.** |
| **1B** | **For the dRC, develop/adapt a sexual violence (SV) screening tool and integrate use in appropriate policies and procedures.** Staff and interns at the dRC have developed skill sets appropriate for individuals with disabilities but, through repetition and lack of exposure, are glossing over clients who present with symptoms of sexual assault or who wish to disclose sexual assault experiences. It is important for them to gain competency in serving individuals with disabilities who may have experienced SV experiences. In this session, dRC staff be introduced to the use of a sexual violence screening tool for use with their clients and to learn appropriate referrals to the RCC. |
| # | **Key Activities by Work Team Unless Noted**  | **Lead** | **Month** | **Notes** |
| a | Identify and review SV screening tools in CILs, OVW grantees, and other victim-service organizations. | Melea & Hal | 1 | * Melea (dRC) and Hal will work with two undergraduate interns from RCC to conduct research on SV screening tools.
* The work team will selected a few members of dRC staff to beta test the tool.
* Work team will develop a protocol for the use of the screening tool and include it in any appropriate policy and procedures.
* Hal will introduce the protocol for the use of the tool to the collaboration for approval.
 |
| b | Adapt the selected SV screening tool. |
| c | Beta test the adapted screening tool with selected staff members and adapt as required. |
| d | Develop a protocol for the use of the screening tool.  |
| e | Vet tool and policy/procedures through collaboration. |
| f | Submit tool and policy/procedures to OVW for approval. | 2 |
| g | Once approved, hand-off screening tool protocol and the policy/procedures to the training team. | Hal | 3 |

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| **Initiative 1: Develop policies and procedures in key areas of service in both organizations.** |
| **1C** | **For RCC, develop/adapt policies and procedures that reflect services that are disability aware and trauma informed.**Staff and interns at a rape crisis center usually have skill sets appropriate only for survivors who have no discernable disabilities outside of some mental health issues. It is important for them to have policies and procedures that establish standards for serving survivors with a broad range of disabilities.  |
| # | **Key Activities by Work Team Unless Noted** | **Lead** | **Month** | **Notes** |
| a | Identify policies and procedures in CILs, OVW grantees, and other organizations that give guidance to staff on providing service that is disability aware while being trauma informed. | Liz, Charlotte, & Hal | 1-2 | * The work team will review policies and procedures in other victim-service organizations that set standards for service delivery that is disability aware and trauma informed.
* Liz (RCC) and Charlotte (dRC) will work with the undergraduate interns (RCC) on reviewing existing policies and procedures at RCC and adapting them as required to reflect a service delivery model that is disability aware while being trauma informed.
 |
| b | Develop or adapt existing RCC policies/procedures and circulate drafts in the work team for review. |
| c | Vet developed/adapted RCC policies and procedures through the collaboration. | Hal |
| d | Adapt new policies and procedures for use at dRC if feasible and desired. | 2 |
| e | Submit to OVW for approval. | 3 |
| f | Once approved, hand-off policy and procedures to the training team. |

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| **Initiative 1: Develop policies and procedures in key areas of service in both organizations.** |
| **1D** | **For the RCC and the dRC, develop/adapt a protocol for universal screening for accommodations.** The dRC and the RCC both need established protocols that give employees standards and guidelines for universal screening for accommodations. Most of the accommodation mandates are described in the ADA laws but additional accommodation standards may be applicable. |
| # | **Key Activities by Work Team Unless Noted** | **Team Lead** | **Month** | **Notes** |
| a | Identify and review protocols for universal screening for accommodations in other organizations and Federal and state law. | Hal, Liz, Melea | 5 | * Hal and Liz from RCC and Melea from dRC will identify and review protocols for universal screening for accommodations.
* All team leads will conduct interviews with a few self-advocates who can comment on these protocols.
* The work team and then the collaboration will vet the protocols for inclusion into agency policies and procedures.
* Implementation of accommodation screening is covered under barrier removal in Initiative 2C.
 |
| b | Develop/adapt selected protocol and circulate drafts for review by the work team.  |
| c | Interview self-advocates for comments on the protocol. |
| d | Review protocol in the collaboration and integrate revisions.  | Hal |
| e | Submit protocol to OVW for approval. | 6 |
| f | Once approved, hand-off protocol to the training team. | 7 |

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| **Initiative 1: Develop policies and procedures in key areas of service in both organizations.**  |
| **1E** | **For dRC, develop/adapt policies and procedures for mandatory reporting and best practices for serving survivors and perpetrators.**Here are two, tricky policies that need to be developed conscientiously by the collaboration. Staff at the dRC need to be trained in the implementation of the mandatory reporting requirements within North Carolina. They also need to articulate and review the difficult situation where they are serving both survivors and perpetrators. |
| # | **Key Activities by Work Team Unless Noted** | **Lead** | **Month** | **Notes** |
| a | Identify and review policies in CILs, other organizations, and state law for mandatory reporting and guideline policies for serving both survivors and perpetrators. |  Bree, Gloria, & Amy Horgan | 5 | * Bree (RCC), Gloria (dRC) and an outside consultant will identify and review policies and procedures for mandatory reporting and serving both survivors and perpetrators.
* All team leads will conduct interviews with a few self-advocates who can review these policies.
* The work team and the collaboration will vet the policies and submit to OVW for approval before initiating work on the procedures.
* These policies and procedures will be reviewed by the collaboration for their application to RCC.
 |
| b | Interview self-advocates on early drafts for input. |
| c | Adapt selected policies and circulate drafts within the work team for review. |
| d | Vet policies through collaboration. |
| e | Submit policies to OVW for approval.  | Hal |
| f | Once approved, draft procedures for each policy and submit to the collaboration for feedback and revisions. | Bree & Gloria  | 6 |
| g | Submit procedures to OVW for approval. | Hal | 7 |
| h | Once approved, hand-off policy and procedures to the training team. |

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| **Initiative 1: Develop policies and procedures in key areas of service in both organizations.** |
| **1F** | **For RCC, develop/adapt a policy and procedures for consent and guardianship issues.**In our needs assessment, we heard the need for guidance on supporting survivors who have guardians. Consent and guardianship issues are tricky problem for RCC in particular. For this difficult issue, RCC will use an outside consultant from Guardian Ad Litem to develop a new policy or adapt an existing policy and procedures. |
| # | **Key Activities by Work Team Unless Noted** | **Team Lead** | **Month** | **Notes** |
| a | Identify and review consent and guardianship policies and procedures in other organizations and state law. | Bree, Gloria and outside counsel from GAL | 6 | * Bree from RCC, Gloria from dRC and an outside consultant from Guardian Ad Litem (GAL) will review and select policies for consent and guardianship issues appropriate to our collaboration.
* Team leads will conduct interviews with a few self-advocates for input on candidate policies.
* The work team will draft a policy and have the collaboration review.
* Once policy has been approved, Hal will draft the procedures to support the policy and have the work team and the collaboration review and revise as needed.
 |
| b | Draft the policy and review within the work team. |
| c | Interview self-advocates on early drafts for input. |
| d | Have work team incorporate changes to the draft policy and have it reviewed by the collaboration.  |
| e | Submit policy to OVW for approval. | Hal |
| f | Once approved, draft procedures to support this policy and have collaboration review and approve. |
| g | Submit procedures to OVW for approval. | 7 |
| h | Once approved, hand-off policy and procedures to the training team. | 8 |

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| **Initiative 1: Develop policies and procedures in key areas of service in both organizations.** |
| **1G** | **For RCC, develop/adapt a policy and procedures for service animals.**Service animals are an evolving and important part of service delivery for survivors with disabilities. Both organizations need to educate their work staff and make modifications to their facilities to accommodate a range of service animals. |
| **#** | **Key Activities by Work Team Unless Noted** | **Lead** | **Month** | **Notes** |
| a | Identify and review service animal policies and procedures in other organizations and in state laws. | Emily, Hal, Melea, & Susan Lanier | 9 | * Emily and Hal from RCC and Melea and Susan from dRC will identify and review service animal policies and procedures.
* The work team and then the collaboration will vet the policies and procedures.
* Contact OVW if the policy and procedures require installation of adaptive equipment to the inside or outside of the offices.
 |
| b | Adapt the selected policy and procedures and circulate drafts within the work team for review. |
| c | Vet policy and procedures through collaboration. |
| d | Submit policy and procedures to OVW for approval.  | 10 |
| e | Once approved, hand-off policy and procedures to the training team. | Hal |

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| **Initiative 2: Promote access of the physical and communication environments of each organization and enhance safety plans.** |
| **2A** | **For dRC and RCC, develop/adapt a tool for an accessibility review of each organization and conduct the reviews.**In line with the Human Rights Model of Disability, we need to focus on how environments, support systems, and the lack of exercising rights create disabilities rather than the functional limitations of individuals. Our needs assessment and listening sessions showed us serious deficiencies in our physical and communication environments, which will make many of our potential clients functionally disabled. We will identify the required changes we need to make by conducting a detailed assessment of each organization. These certainly will include assistive communication devices, such as a picture guide for SANE exams, and structure modifications supported by the OVW grant.  |
| # | **Key Activities by Work Team Unless Noted**  |  **Lead** | **Month** | **Notes** |
| a | Identify and review existing assessment tools. | Melea, David, Hal | 1-2 | * The three leads on the work team will direct and assist two undergraduate interns in conducting the research on assessment tools and adapting the tools as needed for each organization.
* Hal, Melea, and David will determine who will conduct the reviews.
* The collaboration will review the tools and candidate accommodations.
* The work team will present to the collaboration a list of candidate barriers for removal and accommodations to be implemented. The collaboration will prioritize the list in Initiative 2C.
 |
| b | Develop/select/adapt an assessment tool for use with each organization. Email OVW on selection. |
| c | Once approved, vet tool through collaboration. |
| d | Schedule an assessment review of dRC and RCC. | Hal | 3-4 |
| e | Conduct the review of each organization. | TBD |
| f | Review/edit results with the collaboration. | Hal | 5 |
| g | Make a list for the collaboration team of barriers to remove and accommodations to make. |

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| **Initiative 2: Promote access of the physical and communication environments of each organization and enhance safety plans.** |
| **2B** | **For RCC and dRC, develop and conduct a barrier removal plan for each organization.** The collaboration team now sequences the list of barriers to be removed and the accommodations to be made during the following six-month period in order to make service delivery more accessible, welcoming, safe, and empowering. |
| # | **Key Activities by Work Team Unless Noted** | **Lead** | **Month** | **Notes** |
| a | Senior leadership of both organizations on the collaboration team determines their barrier removal priorities. | Bree, Gloria & Hal | 5-6 | * The senior leaders of both organizations serve on the collaboration team. They will establish a sequence for the removal of barriers and the implementation of accommodations.
* The work team leads and the two undergraduate interns will write the barrier removal plan.
* The work team will interview a few self-advocates to get their input on the plan.
* Gloria and Bree will present the plan to the dRC Board of Directors and a Coastal Horizons senior manager respectively.
* Hal will submit the plan to OVW.
* The orientation of both staffs to the accessibility review, the barrier removal plan and any specific accommodations will occur during the training workshop in month 12 after the approval of the strategic plan.
 |
| b | Write a barrier removal plan for each agency. |
| c | Get input from self-advocates on the plan. |
| d | Review the plan within the work team and then the collaboration. |
| e | Have the plan reviewed by the dRC Board of Directors and a senior manager within Coastal Horizons Center. |
| f | Submit revised barrier removal plan to OVW. |
| g | Once approved, conduct the removal of barriers and implementation of specific accommodations. | 7-12 |
| h | During the training session in month 12 (See Initiative 3H), orient both staffs to progress on the removal of barriers and the addition of accommodations in each organization. | 12 |

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| **Initiative 2: Promote access of the physical and communication environments of each organization and enhance safety plans.** |
| **2C** | **For dRC and RCC, develop and implement a safety enhancement plan for each organization.** We will make use of the excellent available protocols to guide survivor-service organizations in developing safety planning for their clients with disabilities and their staff. |
| # | **Key Activities by Work Team Unless Noted** | **Lead** | **Month** | **Notes** |
| a | Work team researches existing safety planning protocols for each organization. | Bree, Gloria &Hal | 5-6 | * The work team leads and the two undergraduate interns will research safety plan protocols at other organizations and develop a draft of a protocol for use at dRC and RCC.
* The collaboration will review and revise the protocol as needed.
* Work team uses the protocol to determine elements of the safety plan and then develops the plan.
* Hal will submit the plans to OVW.
* RCC will review the enhancements in dRC and visa versa.
* Once approved, Hal and Melea will oversee the implementation of the enhancements in their respective organizations.
* Staffs will be oriented to the plans during the training workshop in month 12 after the approval of the strategic plan.
 |
| b | Work team drafts a safety planning protocol for each organization. |
| c | Collaboration reviews the safety planning protocol. |
| d | Work team implements the protocol at dRC and RCC and presents recommended enhancements to the collaboration. |
| e | Collaboration determines a safety enhancements plan for each organization. |
| f | Collaboration reviews plan and revises as needed. |
| g | Submit safety enhancement plans to OVW. | Hal & Melea |
| h | Once approved, implement the safety enhancements and have enhancements cross-checked by dRC and RCC collaboration members.  | 7-12 |

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| **Initiative 2: Promote access of the physical and communication environments of each organization and enhance safety plans.** |
| **2D** | **Establish a process for the annual review of accessibility and safety for each organization.**  |
| # | **Key Activities by Work Team Unless Noted** | **Lead** | **Month** | **Notes** |
| a | Collaboration identifies core positions to conduct annual reviews. | Bree, Gloria, & Hal | 10-12 | * The collaboration will establish future annual review dates.
* Bree and Gloria will develop the amendment to the existing MOU between RCC and dRC for the annual reviews and have the MOU signed by the leadership of each organization.
 |
| b | Collaboration establishes dates for reviews. |
| c | Develop/sign MOU between organizations for annual reviews. |

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| **Initiative 3: Develop staff training in both organizations in the new policies and procedures and in foundation knowledge critical for providers of service to survivors with disabilities.** |
| **3A** | **For dRC and RCC, train both staffs in providing services free of cultural prejudices such as ableism, racism, and heterosexualism.**We all harbor many unconscious biases and practice micro-aggressions toward certain individuals. When we marginalize people we increase their vulnerability to the risk of sexual assault. It is important for staff members and interns in our collaboration to be aware of these dangers and to learn how to provide inclusive, compassionate service to all. The training sessions described in this initiative are the initial offering; each then is included in existing orientation and refresher training for all staff. It is our hope that we can export these training sessions to other organizations in our region that serve victims with disabilities. |
| # | **Key Activities by Work Team Unless Noted**  |  **Lead** | **Month** | **Notes** |
| a | Develop a target audience profile for RCC and dRC. | Hal & Charlotte | 4 | Hal (RCC), Charlotte (dRC), and two undergraduate interns (RCC) will: * Interview staff of both organizations to build a profile of the target audience.
* Research best practices for teaching this topic.
* Develop a lesson plan for teaching this 75-minute instructional session. Objectives should be specific, measurable, achievable, relevant, and time-based (SMART).[[2]](#footnote-2)
* Beta test the lesson plan within the policy and procedures work team for this initiative and revise as required.
* Present the lesson plan to the collaboration and incorporate changes.
* Collaboration will determine who will facilitate the training session.
 |
| b | Research best practices in teaching this topic to this target audience. |
| c | Develop a draft of the lesson plan that indicates objectives, materials, length of time, and teaching strategies. |
| d | Vet a draft of the lesson plan within the work team and the collaboration and incorporate changes. |
| e | Submit lesson plan to OVW for approval. | Hal |
| f | Once approved, conduct a dry run of session with the selected facilitators and then train both staffs and build into their orientation &refresher training. | TBD | 6 |

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| **Initiative 3: Develop staff training in both organizations in the new policies and procedures and in foundation knowledge critical for providers of service to survivors with disabilities.** |
| **3B** | **For dRC, train staff on the intersection of sexual assault and disabilities and the new SV screening tool.**This training will give dRC staff background information about and how sexual assault and disabilities synergistically affect each other. With this background information, we will introduce and give them practice with the SV screening tool they will use in their daily work**.** They will also learn how to make appropriate referrals to the RCC. |
| **#** | **Key Activities by Work Team Unless Noted**  |  **Lead** | **Month** | **Notes** |
| a | For this target audience, research best practices for:* teaching the intersection of sexual assault and disabilities;
* using an SV screening tool, and
* policies for appropriate referrals.
 | Hal | 3-4 | Hal (RCC), Sabrina (dRC), and two undergraduate interns will: * Use the dRC audience profile to help shape the instructional content.
* Research best practices in other CILs and OVW grantees for teaching this topic.
* Brainstorm strategies for teaching the SV screening tool.
* Develop a lesson plan using the template for teaching this 90-minute instructional session. Objectives should be
* Beta test the lesson plan within the policy and procedures work team for this initiative and revise as required.
* Present the lesson plan to the collaboration and incorporate changes.
* Collaboration will determine who will facilitate the training.
 |
| b | Develop a draft of the lesson plan that indicates objectives, materials, length of time, and teaching strategies. |
| c | Vet a draft of the lesson plan within the work team and the collaboration and incorporate changes. |
| d | Submit lesson plan to OVW for approval. |
| e | Once approved, conduct a dry run of session with the selected facilitators and then train both staffs and build into their orientation & refresher training. | TBD | 6 |

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| **Initiative 3: Develop staff training in both organizations in the new policies and procedures and in foundation knowledge critical for providers of service to survivors with disabilities.** |
| **3C** | **For RCC, train the staff on the new policies and procedures that reflect services that are both disability aware and trauma informed.**Staff and interns at a rape crisis center, through repetition and lack of exposure, have skill sets appropriate only for survivors who have no discernable disabilities outside of some mental health issues. It is important for them to gain competency in serving survivors with a broad range of disabilities. In this session, RCC staff will build on their foundation training described in Initiative 3A to make their services not only trauma informed but appropriately responsive to this broad range of disabilities.  |
| **#** | **Key Activities by Work Team Unless Noted**  |  **Lead** | **Month** | **Notes** |
| a | Research best practices for teaching this topic to this target audience. | Hal & Sabrina | 3-4 | Hal (RCC), Sabrina (dRC), and two undergraduate interns will: * Use the RCC audience profile to help shape the instructional content.
* Research best practices in other OVW grantees for teaching this topic.
* Brainstorm teaching strategies.
* Develop a lesson plan using the template for teaching this 90-minute instructional session. Objectives should be
* Beta test the lesson plan within the policy and procedures work team (Initiative 1C) for this initiative and revise as required.
* Present the lesson plan to the collaboration and incorporate changes.
* Hal will submit plan to OVW for approval.
* Collaboration will determine who will facilitate the training.
 |
| b | Develop a draft of the lesson plan for teaching this topic that indicates objectives, materials, length of time, and strategies. |
| c | Vet a draft of the lesson plan within the work team and with the collaboration and incorporate changes. |
| d | Submit lesson plan to OVW for approval. |
| e | Once approved, conduct a dry run of session with the selected facilitators and then train both staffs and build into their orientation & refresher training. | TBD | 6 |

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| **Initiative 3: Develop staff training in both organizations in the new policies and procedures and in foundation knowledge critical for providers of service to survivors with disabilities.** |
| **3D** | **For the RCC and the dRC, train both staffs on a protocol for conducting universal screening for accommodations.**Although similar disabilities may require different accommodations, it is useful for our collaboration agencies to be aware of typical strategies for working with clients who have various types of impairments. In this way they will be prepared to discuss and respond appropriately to accommodation requests. |
| **#** | **Key Activities by Work Team Unless Noted**  |  **Lead** | **Month** | **Notes** |
| a | Research best practices for teaching a protocol for screening for accommodations to this target audience. | Hal& Melea | 7-8 | Hal (RCC), Melea (dRC), and two undergraduate interns will: * Use the audience profile for dRC/RCC for shaping the instructional approach.
* Research best practices in CILs and OVW grantees and other service organizations.
* Collaborate with the work team in Initiative 2C to identify accommodations that should be available as needed.
* Brainstorm teaching strategies for training staffs for screening for universal accommodations.
* Develop a lesson plan for teaching this 75-minute instructional session. Objectives should be SMART.
* Discuss lesson plan with the policy and procedures work team for this initiative and revise as required.
* Present lesson plan to collaboration and incorporate changes.
* Collaboration will determine who will facilitate this session.
 |
| b | Develop a draft of the lesson plan that indicates objectives, materials, length of time, and teaching strategies. |
| c | Vet a draft of the lesson plan within the work team and the collaboration and incorporate changes. |
| d | Submit lesson plan to OVW for approval. | Hal |
| e | Once approved, conduct a dry run of session with the selected facilitators and then train both staffs and build into their orientation & refresher training. | TBD | 9 |

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| **Initiative 3: Develop staff training in both organizations in the new policies and procedures and in foundation knowledge critical for providers of service to survivors with disabilities.** |
| **3E** | **For dRC, train the staff on the new policies and procedures for mandatory reporting and serving survivors and perpetrators.**  |
| **#** | **Key Activities by Work Team Unless Noted**  |  **Lead** | **Month** | **Notes** |
| a | Research best practices for teaching this target audience about mandatory reporting and serving both survivors and perpetrators. | Hal | 7-8 | Hal (RCC), Gloria (dRC), and two undergraduate interns will: * Use the audience profile for dRC for shaping the instructional content and approach.
* Research best practices in other CILs and OVW grantees that serve both survivors and perpetrators.
* Brainstorm teaching strategies.
* Develop a lesson plan for teaching this 90-minute instructional session. Objectives should be SMART.
* Beta test the lesson within the policy and procedures work team for this initiative and revise as required.
* Present lesson plan to collaboration and incorporate changes.
* Collaboration will determine who will facilitate the training.
 |
| b | Develop a draft of the lesson plan that indicates objectives, materials, length of time, and teaching strategies. |
| c | Vet a draft of the lesson plan within the work team and the collaboration and incorporate changes. |
| d | Submit lesson plan to OVW for approval. |
| e | Once approved, conduct a dry run of session with the selected facilitators and then train both staffs and build into their orientation & refresher training. | TBD | 9 |

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| **Initiative 3: Develop staff training in both organizations in the new policies and procedures and in foundation knowledge critical for providers of service to survivors with disabilities.** |
| **3F** | **For RCC, train staff on new organizational policies and procedures for consent and guardianship issues.** |
| **#** | **Key Activities by Work Team Unless Noted**  |  **Lead** | **Month** | **Notes** |
| a | Research best practices for teaching consent and guardianship issues to this target audience. | Hal & Gloria | 7-8 | Hal (RCC), Gloria (dRC), and two undergraduate interns will: * Use the audience profile for dRC for shaping the instructional content and approach.
* Research best practices in other CILs and OVW grantees on consent and guardianship issues.
* Brainstorm teaching strategies.
* Develop a lesson plan for teaching this 90-minute instructional session. Objectives should be SMART.
* Beta test the lesson within the policy and procedures work team for this initiative and revise as required.
* Present lesson plan to collaboration and incorporate changes.
* Collaboration will determine who will facilitate the training.
 |
| b | Develop a draft of the lesson plan that indicates objectives, materials, length of time, and teaching strategies. |
| c | Vet a draft of the lesson plan within the work team and the collaboration and incorporate changes. |
| d | Submit lesson plan to OVW for approval. |
| e | Once approved, conduct a dry run of session with the selected facilitators and then train both staffs and build into their orientation & refresher training. | Hal | 9 |

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| **Initiative 3: Develop staff training in both organizations in the new policies and procedures and in foundation knowledge critical for providers of service to survivors with disabilities.** |
| **3G** | **For the RCC and the dRC, train both staffs on the new policy and procedure for service animals.** |
| **#** | **Key Activities by Work Team Unless Noted**  |  **Lead** | **Month** | **Notes** |
| a | Research best practices for teaching the policy and procedures for using service animals in an RCC or dRC. | Hal | 10 | Hal (RCC) and Melea (dRC), and two undergraduate interns will: * Use the audience profile for RCC and dRC for shaping the instructional content and approach.
* Research best practices in other CILs and OVW grantees and brainstorm teaching strategies.
* Develop a lesson plan for teaching this 75-minute instructional session. Objectives should be SMART.
* Beta test the lesson within the policy and procedures work team (Emily, Hal, Melea, & Susan Lanier) for this initiative and revise as required.
* Present lesson plan to collaboration and incorporate changes.
* Work team will determine who will facilitate the training.
 |
| b | Develop a draft of the lesson plan that indicates objectives, materials, length of time, and teaching strategies. |
| c | Vet a draft of the lesson plan within the work team and the collaboration and incorporate changes. |
| d | Submit lesson plan to OVW for approval. |
| e | Once approved, conduct a dry run of session with the selected facilitators and then train both staffs and build into their orientation & refresher training. | TBD | 12 |

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| **Initiative 3: Develop staff training in both organizations in the new policies and procedures and in foundation knowledge critical for providers of service to survivors with disabilities.** |
| **3H** | **For dRC and RCC, orient both staffs to the accessibility findings and safety enhancement plans at each organization.**Training on this initiative is scheduled for the last quarterly workshop since key accessibility and safety planning activities will occur throughout the previous months. |
| **#** | **Key Activities by Work Team Unless Noted**  |  **Lead** | **Month** | **Notes** |
| a | Research best practices for how best to teach safety enhancement plans and accessibility findings to this target audience. | Hal& David | 10-11 | Hal (RCC) and David (dRC), and two undergraduate interns will: * Use the audience profile for RCC and dRC for shaping the instructional content and approach.
* Research best practices in other CILs and OVW grantees and brainstorm teaching strategies.
* Develop a lesson plan for teaching this 75-minute instructional session. Objectives should be SMART.
* Beta test the lesson within the accessibility work team and the safety planning work team and revise as required.
* Present lesson plan to collaboration and incorporate changes.
* Work team will determine who will facilitate the orientation training.
 |
| b | Develop a draft of the lesson plan that indicates objectives, materials, length of time, and teaching strategies. |
| c | Vet a draft of the lesson plan within the work team and the collaboration and incorporate changes. |
| d | Submit lesson plan to OVW for approval. |
| e | Once approved, dry run the orientation and then orient the staffs at RCC and dRC to these findings and plans and build into their refresher training. | TBD | 12 |

# Appendix A

The PIMS indicators are organized into six "baskets" of organizational policies or practices. Across the six baskets there are 30 areas and each area has 4 specific performance indicators for a total of 120 indicators. For example, Basket 3,"Policies", has five areas (Eligibility, Accommodations, Full Participation, Service Animals, and Guardianship) and each area has four indicators that show, as of March 2015, how well our organizations were performing in this area. Fractional numbers indicate how many components each organization had implemented of the total possible.

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| **Basket** | **Organization Area** | **RCC Score** | **dRC Score** |
| 1 | Responsibility | 6/24 | 13/24 |
| 2 | Partnerships | 12/20 | 9/24 |
| 3 | Policies | 0/20 | 2/16 |
| 4 | Material Resources | 4/16 | 5/16 |
| 5 | Human Resources | 3/16 | 3/16 |
| 6 | Programming | 0/24 | 2/24 |
| **Total** | 25/120 **(21%)** | 34/120 **(28%)** |

1. The evaluation scores for our two agencies are shown in Appendix A. [↑](#footnote-ref-1)
2. Here, the training team will develop a lesson plan template that can be used for each training session. [↑](#footnote-ref-2)