



Envision Illinois

Uniting disability and domestic violence services for
people to achieve Safety, Justice, and Healing

Strategic Plan

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Introduction and Overview

Envision Illinois is a statewide collaboration among seven MOU partners: The Illinois Department of Human Services, Illinois Coalition Against Domestic Violence, Illinois Network of Centers for Independent Living, NAMI Illinois, The Self-Advocacy Alliance, Blue Tower Training, and Illinois Family Violence Coordinating Council and allied partners Illinois Department on Aging and Illinois Department of Public Health. Collectively, we represent the service delivery system in Illinois for disability services and domestic violence.

In 2013, the Illinois Department of Human Services was awarded funding through the U.S. Department of Justice, Office on Violence Against Women (OVW) Discretionary Grant Program. The three year project, "Education, Training and Enhanced Services to End Violence and Abuse of Women with Disabilities Program," is designed to facilitate statewide systems change through an intensive collaboration process.

Envision Illinois seeks to create a system in Illinois in which domestic violence is recognized in the lives of Deaf people and people with disabilities, and is responded to appropriately, in a trauma informed manner, by service providers. As statewide organizations with considerable influence at many levels throughout the state, we believe that we can create such a system.

The following terms and definitions are key to understanding the work of Envision Illinois and the strategic plan.

Deaf: refers to all categories of hearing loss: deaf, hard of hearing, late-deafened, and deafblind.

People with disabilities*: We believe that disability is not something that a person has but, instead, something that occurs outside of the person – the person has a functional limitation. Disability occurs in the interaction between a person, his or her functional ability, and the environment. A

person's environment can be the physical environment, communication environment, information environment, and social and policy environment. Envision Illinois is focusing upon people with mental illness, intellectual and/or developmental disabilities, vision/hearing loss, chemical sensitivities and physical disabilities.

Self-Advocate: people who are Deaf or who have disabilities and who communicate about the things that are important in their lives.

Survivor*: An individual who has experienced ongoing domestic violence and still lives in an abusive relationship as defined in the “domestic violence” and “domestic violence victim” definitions. This individual is “surviving” by living with the hardships and trauma of domestic violence. 2. An individual who is no longer in an abusive relationship and has survived the violence.

Victim: An individual who has experiences ongoing, physical sexual, emotional or psychological abuse from an intimate partner, care giver or family member.

*Note: In the context of this report, survivor will be used when referencing response strategies and Deaf people/people with disabilities will be used in all other contexts.

Overview of Collaboration Members

Illinois Department of Human Services (IDHS) is charged with designing, coordinating, monitoring, and funding a comprehensive and coordinated community-based social service system which includes both disability and domestic violence services.

Illinois Coalition Against Domestic Violence (ICADV) consists of 53 community-based domestic violence victim services organization members located across the State of Illinois.

Illinois Network of Centers for Independent Living (INCIL) is the statewide association of Illinois' 22 Centers for Independent Living (CILs).

National Alliance on Mental Illness Illinois (NAMI Illinois) is a statewide organization of individuals with mental illnesses, families, friends, and professionals dedicated to improving the quality of life for those affected by mental illnesses.

Illinois Self-Advocacy Alliance (The Alliance) is a statewide network that brings together self-advocacy groups across the state to speak with one voice and work together to make systems change.

Blue Tower Training, a division of Macon Resources, Inc (BTT) provides local, regional, and national training, consultation, and materials related to violence against persons with disabilities.

Illinois Family Violence Coordinating Council supports a coordinated community response to family violence across the state of Illinois.

The team is comprised of individuals with disabilities and family members who have experience with both service systems, professionals in the disability and domestic violence fields with expertise at local, state and national levels in the areas of policy, training and service delivery. The team respects the experiences and perspective of government, advocacy groups, service providers, Deaf people and people with disabilities; we know that collaboration is essential to achieve systems change. Each MOU partner is willing and able to integrate the work into their organization vision/mission and their daily operations.

Mission Statement

The Mission of Envision Illinois is to transform services in Illinois into a survivor-centered, seamless, responsive and sustainable system that fully meets the needs of Deaf people and people with disabilities who are

survivors of domestic violence. We will achieve this by listening to the voices of survivors and self-advocates which will lead us to:

- Examine the belief and value systems of the collaborative agencies to promote welcoming, accessible, integrated and informed services and programs and to transform the agency cultures;
- Foster relationships among partners and fully utilize their resources and expertise;
- Integrate and expand knowledge, cultural consciousness and the expertise of partners to create long term social change;
- Remove physical, programmatic, communication and attitudinal barriers and bridge gaps in service delivery; and
- Embed these changes through coordinated policies and protocols, and developed resources across all partner agencies.

Accessible from any point of entry, a diverse array of highly effective comprehensive and inclusive coordinated community responses will be provided by staff who have actively prepared for access utilizing a trauma-informed approach through which policies and procedures, philosophy, and services are designed to support from crisis to healing.

Vision Statement

We ENVISION a culture in Illinois in which Deaf people and people with disabilities who experience domestic violence are empowered by a system of inclusive, accessible, person-centered and person-directed services that result in equal access to healing, safety and justice.

Assumptions

1. Survivors are the experts on their experiences and those experiences impact their choices.

2. All forms of societal victim-blaming silences survivors and promotes pro-violence attitudes and actions.
3. Deaf people and people with disabilities are at significant risk of violence and face many barriers to receive equal services.
4. Society does not understand, know how to communicate with, or relate to Deaf people and people with disabilities or survivors of domestic violence.
5. When advocates, victim and disability service providers, and survivors work in collaboration, system changes will occur to meet survivor's needs.
6. Domestic violence is never the victim's fault.

Values

People First: The voices and experiences of Deaf survivors and survivors with disabilities are at the center of our work. Furthermore, we recognize people first as individuals, prior to identifying any aspect of their life.

Person Centered: The core of our work together will be focused on the unique and diverse strengths, needs and preferences of Deaf survivors and survivors with disabilities. We honor the way in which an individual defines oneself.

Do No Harm: We will evaluate unintended consequences of our work and assure that no one is harmed by actions we take or do not take.

Respect and Dignity: We believe each person has the right to be treated with dignity and respect, including the right to confidentiality. We are committed to following this as a guiding principle in all of the efforts we undertake.

Empowerment: We believe all people are resilient and capable of achieving full potential. As such, we believe individuals are capable of making decisions regarding their own lives, including speaking and acting on their own behalf and advocating in their own best interest.

Trauma-informed: Our intention is to create systems that are trauma-informed and trauma-responsive to survivors of domestic violence who have disabilities. Trauma-informed care refers to recognition that the vast majority of Deaf people and people with disabilities have a trauma history, and services are to be designed with full consideration of the impact of trauma on the person.

Safety: Our primary concern is always that of the person's physical, emotional, and spiritual safety.

Self advocacy: Together with survivors we raise our voices against oppression in all its forms, especially survivors who have been silenced because of their race, age, gender, ethnicity, socio-economic status, disability, immigration status, faith, and/or sexual and gender identity.

Confidentiality: Survivors have the right to decide who they share their story with; we value and respect the right of confidentiality and privacy.

Inclusion: We will change systems and organizations so that Deaf people and people with disabilities are fully included, both in victim services and in our collaboration.

Responsiveness: We will react quickly and positively to Deaf people and people with disabilities.

Accessibility: We think foremost about how to remove barriers and encourage the widest possible participation.

Sustainability: Our work to change organizations and systems will be designed to last.

The vision and mission statements were created as a part of Collaboration Charter, which contains assumptions, values, commitments and contributions, decision making process, conflict management plan, confidentiality agreement, communication and work plans, and key terms. This document, which was the foundation for our collaboration, essentially explained how we as individuals and organizations will continue to work together. Through the collaboration process of developing a charter, the team coined the name Envision Illinois, which reflects the desire to transform the service delivery system in Illinois. The Collaboration Charter was submitted to OVW and approved on July 15, 2014.

Summary of Needs Assessment

After completion and approval of the Collaboration Charter, Envision Illinois immediately began working on the Needs Assessment Plan (NAP). The vision and mission statements developed for the collaboration charter were the guiding force for the needs assessment plan. The intent was to measure the current service delivery system as it relates to key elements of the vision and mission, and determine what steps need to be taken to promote achievement. The goals of the needs assessment were as follows:

1. Examine the needs and preferences of Deaf people and people with disabilities.
2. Identify the strengths, gaps and opportunities within the domestic violence and disability service systems and across systems to develop a sustainable system to meet the needs of Deaf people and people with disabilities.
3. Identify policies, procedures and practices which create capacity for our systems to address the intersection of domestic violence and Deaf people and people with disabilities.

4. Examine the readiness, knowledge, cultural consciousness, comfort, confidence, attitudes, beliefs, values, expertise and awareness of community partners to create long term social change through supporting Deaf people and people with disabilities.
5. Identify resources and connections, including potential/possible connections, of community partners to support Deaf people and people with disabilities.
6. Identify physical, programmatic, communication and attitudinal barriers that impact services (identification and response) and connections between community partners providing services to Deaf people and people with disabilities.

Envision Illinois used a mixed methods approach to gather data for the needs assessment. This provided the most accurate and beneficial data. We used three methods of gathering information: focus groups, individual interviews and surveys. We gathered information from Deaf people and people with disabilities, staff and volunteers from the domestic violence and disability service systems (including ICADV member agencies, DHS contracted service providers for mental health and developmental disabilities services, DHS/Division of Rehabilitation Services employees, Department on Aging/Adult Protective Services) and other community supports. We strategically made the groups as representative and inclusive as possible by asking every MOU partner and its constituents to contribute in some manner to the process (through individual interviews, focus groups or surveys).

Who Did We Engage?

Focus Group and Survey constituents included:

Self-Advocates (not included in survey)

Adult Protective Services

Centers for Independent Living

Developmental Disability Providers

Domestic Violence Agencies

Mental Health Providers

Rehabilitation Services Offices

Key Stakeholder Interviews:

ICADV

IDHS disability divisions

INCIL

NAMI of Illinois

Adult Protective Services

Department of Public Health

Focus Groups			
Agency	Participants	# of Groups	# of Individuals
Deaf People and People with Disabilities			
The Self-Advocacy Alliance, people receiving services from MOU partner organizations, other self-advocacy efforts	Including people with mental illnesses, intellectual and/or developmental disabilities, physical disabilities and Deaf	12	65 Note: 2 self-advocates were interviewed individually
Organizations			
DDD	- Local Advisory Council Meetings - Independent Service Coordination meeting	2	16
DMH/NAMI	- Local Advisory Council Meetings - Recovery Support Specialist meeting	3	34
DRS	- Field Supervisors	3	36
APS	- Advisory Council	1	3
INCIL	- Board Members	1	4
ICADV	- Program Council	5	23
Total Participant Number		27	183

Interviews		
Agency	Participants	# of Individuals
DDD	- State Operated Developmental Center Administrator	1
	- Community Services Administrator	1
DMH	- State Operated Hospitals Administrator	1
	- Community Services Administrator	1
DRS	- Vocational Rehab Administrator	1
	- Home Services Administrator	1
APS	- Adult Protective Services Administrator	1
	- Adult Protective Services, Legal	0
INCIL	- Executive Director	1
NAMI	- Executive Director	1
ICADV	- Executive Director	1
	- Director of Contracts	1
IL Department of Public Health	- Long term care Managers	3
Total Number of Individual Interviews		14

Surveys		
Agency	Participants	Completed Surveys
DHS/DDD	- All DDD contractors - DDD central & regional staff	977
DHS/DMH	- Community Mental Health Center contractors - DMH central & regional staff	
NAMI	- Chapter members and Constant contacts	
APS	- Area Agencies on Aging - APS community agencies	
INCIL	- CIL Program Directors - CIL Coordinators: Personal Assistant, Transition, Deaf Services	
DHS/DRS	- DRS staff: Voc Rehab, Home Services	240
ICADV	- Member organizations: Executive Directors	174
Total Number of Surveys Returned		1,391

Implementation of the needs assessment began in November, 2014 and concluded in April 2015 at which time the needs assessment report was approved by OVW. Envision Illinois identified seven key findings from the analysis of the needs assessment focus groups, individual interviews and survey data.

Key Findings

Key Finding #1: An opportunity exists for collaboration among Deaf people, people with disabilities, domestic violence agencies, and disability service providers.

Across the state, connectivity between domestic violence services and disability service agencies run the spectrum from communities with no connection and little knowledge of each other's agencies/services, to communities where there is some awareness of agencies and services but no real collaboration, to communities with a strong collaboration between the domestic violence service agency and one or more disability agencies. The diverse responses about awareness, networking, referrals, collaborations, etc. indicate that the response to Deaf survivors and survivors with disabilities varies not only from community to community, but on any given day in many communities.

Barriers to collaboration include time, resources, conflicting priorities, lack of knowledge and support. Being aware of these potential obstacles is crucial to finding solutions which minimize them. While many agencies are working at the intersection of domestic violence and people with disabilities, they are often disconnected and unaware of each other's resources and services.

Self-advocates identified a need which supports collaboration to help with staff knowing what to do, who to call, available resources, etc. "If staff

don't know what to do, they should tell me where to find help in the community" – self-advocate.

A strength of the system is the nearly universal belief that collaboration is the key to providing the best possible response to, and system for, Deaf people and people with disabilities. Across the various audiences assessed in the process, collaboration was repeatedly mentioned as a solution to improve the response to Deaf survivors and survivors with disabilities. We need to find better ways to work together; share knowledge and information; and extend training and education in order to eliminate gaps in our system and provide the best possible services for Deaf people and people with disabilities.

Key Finding #2: Development and implementation of policies at the community and state level are needed for both domestic violence and disability services.

It was noted that disability service agencies have policies requiring the reporting of abuse and neglect, but no specific policies on supporting the victim, offering choices, working with the domestic violence agency or engaging the victim in reporting when desired. Many disability service agencies do not even have the words "domestic violence" in their policies; only abuse and neglect. Many are unaware of the definition of domestic violence in the Illinois Domestic Violence Act, which includes caregivers, family members and personal assistants.

From the domestic violence agencies' responses, there is wide variation in policies, procedures and practices. Some reported that no written policies existed; others have only non-discrimination policies, and some have a full-inclusion policy. There is tremendous variation in the response to individuals depending on the particular strengths/experiences of the staff employed at the agency where the individual presents for service.

There is a lack of consistency in the policies and procedures across the state to guide domestic violence agencies and disability service agencies when Deaf people and people with disabilities intersect with domestic violence services. This results in a lack of consistency in the response that Deaf people and people with disabilities receive when they experience domestic violence. The development of a policy on how to respond to disclosures, what steps to take, and how to keep the victim informed and engaged would provide a foundation for all employees, regardless of the employees' previous experience or lack thereof. If person-centered, solid policies are developed and implemented, the service delivery system across agencies and communities could be improved significantly.

Key Finding #3: Create a culture of sustainable, trauma-informed organizations.

It was clear in listening to the voices of self-advocates that much of the impact of trauma was related to experiences outside of the specific episode of domestic violence. For example, although the physical, emotional, financial and/or sexual abuse was acknowledged, much more focus was given to the lack of compassionate response that was received. Fear of being blamed, not being believed and overwhelming shame were frequently experienced. People reported feeling judged, cut off, not understood, not taken seriously, and stigmatized.

These responses indicate a need for trauma-informed care practices. The Division of Mental Health and community mental health providers have an awareness of this evidence-based model, and have done a fair amount of training around trauma-informed responsiveness to Deaf survivors and survivors with disabilities. The Illinois Coalition Against Domestic Violence (ICADV) and community domestic violence service agencies are similarly informed about supporting people in a trauma-informed way. Other disability service agencies reported less of a skill base in trauma-informed practices, and could benefit from training in trauma-responsiveness and

creating trauma-informed organizations. Domestic violence service providers could benefit from additional knowledge about complex traumas that some people experience due to having a disability; for example, the trauma of bullying; the trauma of people trying to “fix” you; the trauma of stigma and invalidation; etc.

When a Deaf person or a person with a disability in Illinois experiences domestic violence, there is a vast range of possible responses from the current systems. These responses vary depending on a specific staff member at the specific agency where the person seeks assistance. This response could be very pro-active, individualized and compassionate (i.e. trauma-informed), it could be unintentionally harmful to the person needing help, or it could be somewhere in between these two ends of the spectrum. In order to ensure a consistently helpful response across and between systems, a strategy to develop a trauma-informed system in Illinois is needed.

Key Finding #4: Accessibility was consistently identified as an area of concern.

Accessibility challenges were reported frequently by Deaf people and people with disabilities, as well as domestic violence agencies. While some domestic violence agencies have actively addressed access issues, many providers across the state struggle with ensuring universal access. Physical accessibility to domestic violence shelter services is not uniform across the state, as some shelters are physically accessible but others are not. Similarly, there is a range of practice and availability related to accessible materials, from ones that are universally designed and inclusive, to those that are not accessible to many Deaf people and people with disabilities.

Other access issues related to domestic violence shelters that were identified by Deaf people and people with disabilities include egress times as well as allowance for service animals, medications, and personal

assistants. Lack of access to transportation to the provider agency was another commonly encountered barrier to services for people with disabilities.

One barrier identified is a sense within the “silo system” of current services that “you take care of your own” rather than providing referrals to other agencies. It was noted that often the well-intended approach of an agency believing that “we know Suzie best, so we can take care of this” or a belief that an agency will not work with someone with disabilities, or worse, that the person with the disability does not understand what happened, so does not need domestic violence services, may prevent an individual from receiving the most helpful and most appropriate responses when domestic violence happens. This is further compounded by the fact that some disability service providers are unaware of the domestic violence service resources within their communities. With separate service systems, Deaf people and people with disabilities who experience domestic violence will likely not have access to the services that they need and deserve. Deaf people and people with disabilities consistently expressed the importance of a welcoming environment and being accepted like everyone else.

The current system is fragmented with gaps and barriers to accessing needed services when domestic violence occurs. Inconsistencies in access were clearly present within the responses across all those who participated in the needs assessment. Physical barriers, communication access, materials and silos must be addressed, and the current system transformed into one capable of providing a coordinated, proactive, compassionate, individualized response to anyone in need of domestic violence services.

Key Finding #5: There is a need for ongoing and systemic training and education within domestic violence and disability service delivery systems.

Participants from all audiences agreed that training was needed across the board. Although the staff in disability service agencies all receive training on abuse and neglect and mandatory reporting, there is not systematic, ongoing training on how to respond to the person disclosing and what supports to offer the person. Likewise, no standard exists for domestic violence agencies to receive training on how to serve victims with disabilities beyond the two hours allotted within the 40 hours required.

The methodology of providing training varied greatly among service providers, ranging from cross training among local providers, persons with disabilities as trainers, stand-alone workshops vs. embedded training. There is not a uniform requirement for providing training on domestic violence and persons with disabilities for any audience. Resources to develop this type of training are also lacking within the system.

It is not possible to provide effective services for Deaf survivors and survivors with disabilities without ongoing training. Survivors will not consistently receive compassionate, proactive, individualized services until there is ongoing, effective training in place for all agencies involved. We need to expand existing training, develop resources, and create cross-training between domestic violence and disability agencies. We cannot improve our systems of service delivery unless we continually learn and share our knowledge and expertise.

Key Finding #6: A need exists for outreach to and education of Deaf people and people with disabilities regarding domestic violence, healthy relationships and available resources.

Many Deaf people and people with disabilities who participated in the needs assessment process said that they lacked information about domestic violence, healthy relationships and available resources. In some areas of Illinois, Deaf people and people with disabilities, along with domestic violence and disability service agencies, are working together to provide classes, do community presentations and awareness training, and engage people at health fairs. In other places, there has been no specific outreach to or educational opportunities for Deaf people or people with disabilities, although there are domestic violence and disability service providers in the community.

The education that is provided appears to focus on healthy vs. unhealthy relationships, being and staying safe, and signs of abuse. The lack of a comprehensive educational program is a concern as focus group participants shared that they desire access to resources and information prior to making any decisions about disclosures or next steps. They want information that can be taken home, preferring to take their time before a decision is reached. They also want education about boundaries, rights, and PTSD as it relates to domestic violence.

For a Deaf person and a person with a disability or a not involved in a structured program through a disability service agency, opportunities for education are limited. Because most classes are taught at a disability service agency, many people not associated with the disability service agency do not receive information about educational opportunities and lack opportunities to become involved.

Specific outreach to Deaf people and people with disabilities regarding domestic violence services has not been widespread. Many indicate that they are unaware of the name, location and/or services provided by their

local domestic violence program, while others indicated that they would call family or their church if they experienced domestic violence. Existing promotional materials are often not written in a

Universally Designed format to be accessible to the most diverse audience possible, nor are the materials located in places where people can easily access them. Deaf people shared that there has been no Deaf community outreach or Deaf friendly advertising.

Key Finding #7: Design a strong and effective peer support system that empowers Deaf people and people with disabilities to reduce violence and promote safety and healing.

Deaf people and people with disabilities have expressed a desire to provide support to and be supported by others with whom they have shared life experience. While it is preferable to many Deaf people and people with disabilities to be involved in a support group led by and for peers, focus group participants shared that peers may not have the necessary knowledge. It is important that facilitators know the resources that are available should a person desire to take additional steps.

Although peer support based opportunities are present on a small scale in communities throughout Illinois, they are not as widespread as would be liked by Deaf people and people with disabilities as well as disability service providers.

Overview of Strategic Planning Process

As a part of the process of analyzing data from the needs assessment, possible solutions were identified. These solutions were included in the needs assessment report and were the starting point for the Envision Illinois team to begin the strategic planning process. During team meetings the framework for the strategic plan was developed as members

reviewed the findings and identified priority actions. A sub-committee further developed the strategic plan based upon the group discussion and crafted a draft plan for further team input. At a subsequent team meeting, the plan was refined, assessed for alignment with the Vision and Mission of Envision Illinois and a time line was created. The final draft created by the subcommittee was reviewed and approved by the team.

Overview of Key Short-Term Initiatives

Goal 1: Build statewide structure of trauma-informed best practices that promote safety, justice and healing for Deaf people and people with disabilities.

Initiative 1.1: Develop model policies and procedures to promote consistent strategies and response to Deaf people and people with disabilities.

Initiative 1.2: Expand existing training, develop resources, and create cross-training between domestic violence and disability service agencies.

Initiative 1.3: Implement strategies to transform a fragmented system into one capable of providing an accessible, trauma-informed, coordinated, proactive, compassionate, individualized response to Deaf people and people with disabilities.

Goal 2: Create a model of community based collaborations to promote sustainable systems change that meets the needs of for Deaf people and people with disabilities Deaf people and people with disabilities.

Initiative 2.1: Develop community collaborative teams to inform the direction of the statewide project.

Initiative 2.2: Implement best practices response to Deaf survivors and survivors with disabilities within the model communities.

In-Depth Overview of Short-Term Initiatives

As outlined in the chart above and in the description of our strategic planning process, Envision Illinois has developed two main goals supported by five key initiatives that will be addressed over the implementation phase of the project. The goals and initiatives have been discussed in depth and plans developed to accomplish the steps within each.

Goal 1: Build statewide structure of trauma-informed best practices that promote safety, justice and healing for Deaf people and people with disabilities.

1.1: Develop model policies and procedures to promote consistent response to Deaf people and people with disabilities.

Development and implementation of policies at the community and state level are needed for both domestic violence and disability service agencies.

The first action in achieving the initiative is to conduct policy and procedure reviews within the Envision Illinois partners and their provider network. Although partners participating in Envision Illinois have policies and procedures in place to meet accreditation and/or contractual requirements, many of the policies and procedures are not consistent in being trauma-informed and disability responsive. Determining where agency policies and procedures excel and where there are gaps will assist the statewide team in the development of templates that can be used to guide agencies in ensuring that policies and procedures provide response that is trauma-informed and disability responsive while meeting accreditation and contractual requirements.

Based on the information gathered through policy and procedure reviews as well as required reporting regulations for providers, best practice guidelines will be developed with a focus on providing a consistent person centered response regardless of the agency providing the service and/or

the community in which the service is provided. These guidelines will vary between the disability agencies and the domestic violence agencies, but all will be trauma-informed and person-centered. This process will lead to a better understanding between partners and serves as an example for the community collaborative teams in terms of understanding each other's obligations as it relates to required reporting.

Developing comprehensive, person-centered policy and procedure templates from which domestic violence agencies and disability service agencies may pattern after will help establish consistency in response to Deaf survivors and survivors with disabilities. Within domestic violence agencies, there is a wide range of policies and procedures regarding services to Deaf survivors and survivors with disabilities, from non-existent to those that outline full inclusion. Focus group participants suggested that there are many opportunities to improve policies and procedures to widen the inclusion of Deaf people and people with disabilities into services including service animals and/or personal assistants in shelter; expanding the types of accessible materials that are available; utilization of sign language interpreters; and other accommodations. Many disability service agencies do not have the words "domestic violence" in their policies and procedures, instead focusing on the words "abuse and neglect" as required by their state and federal reporting requirements. Many are also unaware of the definition of domestic violence as outlined in the Illinois Domestic Violence Act; this definition includes not only agency staff but also caregivers, family members and personal assistants. The policy templates will be developed by the statewide team with input from state and local experts, and will be made available to the community collaborative teams as models to use within their organizations.

A review of the *Domestic Violence Services Guidelines Manual* will identify needed enhancements to state standards and implications for monitoring as it relates to serving Deaf survivors and survivors with disabilities.

Domestic violence agencies utilize the *Domestic Violence Services*

Guidelines Manual to guide the provision of safety and assistance to survivors of domestic violence. These guidelines promote best practices and excellence in domestic violence services across the state. Last revised in 2010, a review of the manual will determine if current best practices are written into state standards and implications for monitoring, and if not, provide an opportunity to share ideas for enhancement.

Completion of the actions in this initiative will build a strong foundation of model policies and procedures to share with providers resulting in the promotion of consistent response so that Deaf survivors and survivors with disabilities will receive survivor-centered, seamless, responsive and sustainable system.

Initiative 1.2: Expand existing training, develop resources, and create cross-training between domestic violence and disability service agencies.

There exists a need to expand existing training, develop resources and create cross training between domestic violence and disability service agencies

A thorough review of current training of ICADV, IDHS, and other Envision Illinois partners will identify where strengths and gaps of being trauma-informed and disability responsive exist. As with policies and procedures, partners participating in Envision Illinois have in place a wide range of training to meet accreditation requirements and/or contractual requirements although that training may be not consistent with best practices. In addition, many agencies work at the intersection of domestic violence and Deaf people and people with disabilities, but they are unaware the strengths and capacities of what each provides within the community. Reviewing current training will provide a snapshot of what is being provided and covered while creating a framework for modifying training, developing materials and resources, and engaging self-advocates in the design and delivery of training.

Where gaps exist in the state-level training, input will be solicited from Deaf people, people with disabilities, and all statewide partners. Throughout the needs assessment process, it was evident that one strength in the current system is the nearly universal belief that collaboration is the key to providing the best possible response to and system for Deaf people and people with disabilities. Bringing together the voices, experience and expertise of Envision Illinois partners to close any gaps that exist in state-level training will lead to training modifications that reflects current best practice. Developing resources for and providing training to supervisors will assist them in supporting skills learned by staff to ensure that accessible, trauma-informed, coordinated, proactive, compassionate, individualized responses are provided to Deaf people and people with disabilities. Cross-training within the Envision Illinois statewide team and the community collaborative teams on subjects such as Universal Design, confidentiality, mandated reporting, domestic violence services, and other topics that impact the services provided to Deaf people and people with disabilities will be provided.

Development of materials will be made available to Envision Illinois partners through the ICADV Provider Education Library. Another strength of the statewide team is to think creatively and reach out in collaboration to assist in the development of materials and resources that bridge informational and attitudinal gaps. Having materials and resources that reflect best practice and are accessible to community locations will help support disability service and domestic violence agencies in ensuring that they are always ready and prepared to support Deaf survivors and survivors with disabilities.

Deaf people and people with disabilities have experience and expertise that can provide a strong foundation for training and resources. During focus groups, Deaf people and people with disabilities, shared personal and professional satisfaction in helping teach others about domestic violence, safety and relationships. When experiencing obstacles to services and

supports are shared, opportunities to make changes are revealed. The value of having a person with a disability or a Deaf person as trainer may be the difference between staff simply learning information and staff really understanding how that information impacts the lives of those they support.

Initiative 1.3: Implement strategies to transform a fragmented system into one capable of providing an accessible, trauma-informed, coordinated, proactive, compassionate, individualized response to Deaf people and people with disabilities.

Implementing strategies to transform the current fragmented system into one capable of providing an accessible, trauma-informed, coordinated, proactive, compassionate, individualized response will support Deaf people and people with disabilities regardless of the door through which they walked.

Many domestic violence agencies shared struggles and concerns about providing accessible services; the development of a disability accessibility review tool will assist providers of domestic violence services in conducting self-reviews to highlight areas of improvement. Accessibility can be defined in many different ways, from physical accessibility to information accessibility to system accessibility to attitudinal accessibility. Developing a comprehensive disability accessibility review tool will allow domestic violence agencies to take a proactive approach of turning obstacles into opportunities to create a welcoming and inclusive environment for Deaf people and people with disabilities who utilize services.

Although disability service providers have strengths in ensuring that environments and services are accessible to those who seek them, providing services that are trauma-informed, responsive and compassionate can vary greatly from provider to provider and within providers, from employee to employee. Developing a trauma-informed

accessibility review tool will assist in developing consistency across and between disability service systems, leading to better support for Deaf people and people with disabilities who experience trauma.

Once the accessibility reviews have been developed, they will be implemented by the partners of the community collaborative teams. Domestic violence agencies will assess themselves utilizing the disability accessibility review tool while disability service agencies utilize the trauma-informed accessibility review tool, coming together to share the strengths and areas of opportunity revealed in the findings. Following completion of the reviews, the community partners will share their findings with each other so that collaborative work begins to assist each agency in improving services to provide the best support for Deaf people and people with disabilities. Results of the accessibility reviews will also be shared with the statewide team to incorporate into the statewide plan the framework to address common access obstacles.

In Illinois, self-advocates and professionals provide a wealth of expertise in trauma-informed systems at both the state and local levels. While some of the expertise is already known to Envision Illinois partners, other expertise will be revealed throughout the implementation process; this expertise may be found in self-advocates, community partners, and others who live and work at the intersection of domestic violence and Deaf people and people with disabilities. The ability to recognize and utilize expertise in many forms will not only strengthen the process but also the outcomes leading to better support for Deaf people and people with disabilities.

Ensuring that the state data collection systems within Envision Illinois partner agencies capture state response to domestic violence of Deaf people and people with disabilities is a key component of this initiative. A thorough review of the data that is currently being captured will be completed and shared with the statewide team; following that review and sharing, suggestions for modifications will be made to ensure that the

initiative of providing coordinated, proactive, compassionate, individualized response to Deaf people and people with disabilities

Goal 2: Create a model of community based collaborations to promote sustainable systems change that meet the needs of Deaf people and people with disabilities.

Initiative 2.1: Develop community collaborative teams to inform the direction of the statewide project.

The Envision Illinois statewide team will select at least 2 community collaborative teams to inform the direction of the statewide project. Teams will be selected from communities in which are located domestic violence services and disability service agencies. One of the communities selected will have a comprehensive domestic violence program that includes shelter services. The communities selected will be of different size and will not have been used previously in Illinois Imagines in order to gain a fresh perspective on collaborative work and response to violence against Deaf people and people with disabilities. The statewide team is considering a third pilot site in an established Illinois Imagines community and bringing in a local domestic service provider; budget parameters will assist in making the final decision on the third pilot site. Commitment to the project from all participating providers will be paramount to the success of the community collaborative team.

Resource Consultants will be used to provide technical assistance and support to the community collaborative teams in order to facilitate team cohesiveness and systems understanding including the use of the review tools and sample policies; each team will have its own Resource Consultant. The Resource Consultant may be members of the statewide team who are familiar with team-building processes and team dynamics as well as having an understanding of the domestic violence and the disability service systems; if needed, external consultants will be procured. By

connecting with and providing support to the teams on a regular basis, the Resource Consultants will serve as a vital link between the teams and the statewide Envision Illinois team.

Once the collaborative team partners have come together and have spent time developing cohesiveness as well as understanding of the systems in which they work, the disability accessibility review and the trauma-informed accessibility review tools will be implemented. The results of the reviews will be shared with the collaborative team partners as well as with the statewide team. Plans to reduce barriers and gaps in services will be developed while strengths will be capitalized upon. Based on the information revealed in the reviews, resources targeting the closure of gaps and the removal of barriers will either be sought or developed to improve access to services. Training on the resources will be provided to teams so that they can efficiently and effectively utilize the information. Team partners will also be tasked with testing developed policy and procedure templates and submitting feedback to the statewide team for analysis.

Initiative 2.2: Implement best practices response to Deaf survivors and survivors with disabilities within the model communities.

Implementing best practices in response to Deaf survivors and survivors with disabilities will be supported by the creation of a culture of sustainable, trauma-informed organizations focused on the development of a trauma-informed system to ensure awareness and understanding about trauma within each of the systems.

Envision Illinois recognizes that ongoing funding from OVW is not guaranteed; it is imperative that the community collaborative partners who play a critical role at the intersection of disability and domestic violence have the information and resources necessary for sustainability. To that end, training will be provided to and resources shared with the partner

agencies of the community collaborative teams. Additionally, the teams will have the opportunity to meet and share their experiences in an effort to maximum efforts. Resource consultants will utilize local and statewide expertise as needed and requested in the provision of training. Community collaborative teams will also create individualized sustainability plans to support systems change, regardless of continued funding of the project. Ensuring that the collaborative teams and the individual partners within the teams are prepared for the journey will result in a system that is survivor-centered, seamless, responsive, and sustainable.

Strategies for Implementation

Building upon the successful strategies utilized by the Envision Illinois state-wide team in developing the collaboration charter, needs assessment plan and report, the implementation of the strategic plan will be through a combination of state team, work groups and individual assignments. Work groups and individual contributions will draw upon the expertise and interests of existing team members, staff from partnering organizations, self-advocates and content experts. To organize our efforts, four workgroups will be developed initially: Best Practices, Training, Accessibility, and Trauma-Informed. The workgroups will complete specific actions and report back to the state team for discussion, review and approval. Composition of the workgroups will reflect the diversity of the systems upon which Envision Illinois is committed to change. Vera Institute on Justice will be utilized for technical assistance and access to resources to support successful implementation and desired outcomes.

Timeline

Goal 1: Build statewide structure of trauma-informed best practices that promote safety, justice and healing for Deaf people and people with disabilities.

Initiative 1.1: Develop model policies and procedures to promote consistent response to Deaf people and people with disabilities.

Action	Who	By When	Deliverables
Action 1a: Conduct initial policy and procedure reviews within the Envision Illinois collaborative partners.	State team members and their organizations	Sixty (60) days following OVW approval	<ul style="list-style-type: none">- Review of relevant existing policies and procedures.- Presentation of relevant policies and procedures to statewide team- Identification of possible areas of change in policies and procedures
Action 1b: Draft changes to policies and procedures to present to agency decision-makers	State team members and their organizations	One hundred eighty (180) days following OVW approval	<ul style="list-style-type: none">- Draft of suggested language presented to statewide team- Present draft of suggested language to agency decision-makers

Actions	Who	By When	Deliverables
<p>Action 2a: Review the <i>Domestic Violence Services Guidelines Manual</i> to identify needed enhancements to state standards and implications for monitoring.</p>	<ul style="list-style-type: none"> - Best Practices Workgroup - State team 	<p>Sixty (60) days following approval from OVW</p>	<ul style="list-style-type: none"> - Presentation of <i>Domestic Violence Services Guidelines Manual</i> to statewide team to familiarize team with state guidelines - Review of relevant sections of the <i>Domestic Violence Services Guidelines Manual</i> - Identification of opportunities for enhancement in the manual
<p>Action 2b: Draft suggested language to be included in <i>Domestic Violence Services Guidelines Manual</i>.</p>	<ul style="list-style-type: none"> - Best Practices Workgroup - State team 	<p>One hundred eighty (180) days following OVW approval</p>	<ul style="list-style-type: none"> - Draft of suggested language presented to statewide team - Present draft of suggested language to agency decision-makers

Actions	Who	By When	Deliverables
Action 2c: Implement suggested language into <i>Domestic Violence Services Guidelines Manual</i> .	- Best Practices Workgroup - State team	September 2016	- Revised <i>Domestic Violence Services Guidelines Manual</i>
Action 3: Develop best practice guidelines related to required reporting by providers.	- Best Practices Workgroup - State team	Sixty days (60) following approval	- Best practices guidelines
Action 4: Develop policy templates for domestic violence agencies.	- Best Practices Workgroup - State team	One hundred twenty (120) days following OVW approval Ongoing as needed	- Domestic Violence policy templates
Action 5: Develop policy templates for disability service organizations.	- Best Practices Workgroup - State team	One hundred eighty (180) days following OVW approval Ongoing as needed	- Disability services policy templates

Initiative 1.2: Expand existing training, develop resources, and create cross-training between domestic violence and disability service agencies.

Actions	Who	By When	Deliverables
Action 1: Review current training within ICADV, IDHS, and other Envision Illinois partners.	- Training Workgroup - State team	One hundred twenty (120) days following OVW approval Ongoing as needed	- Completed reviews
Action 2: Modify training with input from Deaf people, people with disabilities, and all statewide partners.	- Training Workgroup - State team	May 2016	- Input received - Training modified
Action 3: Develop materials and make available through ICADV Provider Education Library.	- Training Workgroup - State team	July 2016	- Materials developed - Materials posted
Action 4: Utilize self-advocates as trainers in the design and delivery of training and resources.	- Training Workgroup - State team	September 2016	A minimum of 4 trainings through existing training resources, such as statewide conferences, regional meetings, webinars

Initiative 1.3: Implement strategies to transform a fragmented system into one capable of providing an accessible, trauma-informed, coordinated, proactive, compassionate, individualized response to Deaf people and people with disabilities.

Actions	Who	By When	Deliverables
Action 1: Develop disability accessibility review tool for domestic violence services.	- Accessibility Workgroup - State team	Ninety (90) days following OVW approval	- Tool completed
Action 2: Develop trauma-informed accessibility review tool for disability service providers.	- Trauma-Informed Workgroup - State team	Ninety (90) days following OVW approval	- Tool completed
Action 3: Review the results of accessibility reviews completed in the community collaborative teams.	- Accessibility Workgroup - State team	One hundred fifty (150) days following development of community teams	- Review completed
Action 4: Incorporate community accessibility review findings into statewide plan to address common access obstacles.	- Accessibility Workgroup -Trauma-Informed Workgroup - State team	June 2016	- Revised statewide plan

Actions	Who	By When	Deliverables
Action 5: Review and modify current state data collection systems within Envision Illinois partner agencies in order to better capture state response to domestic violence of Deaf people and people with disabilities.	- State team	September 2016	- Data systems reviewed - Data systems modified

Goal 2: Create a model of community based collaborations to promote sustainable systems change that meet the needs of Deaf survivors and survivors with disabilities.

Initiative 2.1: Develop community collaborative teams to inform the direction of the statewide project.

Actions	Who	By When	Deliverables
Action 1: Select model communities.	- State team	Thirty (30) days following OVW approval	- Communities selected

Actions	Who	By When	Deliverables
Action 2: Provide technical assistance and support to the community collaborative teams to facilitate team cohesiveness and systems understanding.	<ul style="list-style-type: none"> - Resource Consultants - State team 	One hundred twenty (120) days following development of community teams	<ul style="list-style-type: none"> - Teams established - Regularly scheduled team meetings - Progress notes - Cross training conducted
Action 3: Implement and test the accessibility review tools within the community collaborative teams.	<ul style="list-style-type: none"> - Community teams - Resource Consultants - Accessibility Workgroup - State team 	One hundred fifty (150) days following development of community teams	<ul style="list-style-type: none"> - Completed reviews
Action 4: Develop a plan to reduce barriers and gaps and build upon strengths as identified in reviews.	<ul style="list-style-type: none"> - Community teams - Resource Consultants 	One hundred eighty (180) days following development of community teams	<ul style="list-style-type: none"> - Plans developed for each community

Actions	Who	By When	Deliverables
Action 5: Find or create resources to respond to identified barriers and improve access to services.	<ul style="list-style-type: none"> - Community teams - Resource Consultants - State team 	Ongoing as resources are identified and/or developed	<ul style="list-style-type: none"> - Resources identified and/or developed
Action 6: Test policy templates and submit feedback to the statewide team and make revisions as indicated.	<ul style="list-style-type: none"> - Community teams - Resource Consultants - Best Practices Workgroup - State team 	June 2016	<ul style="list-style-type: none"> - Feedback received - Revisions made

Initiative 2.2: Implement best practices response to Deaf survivors and survivors with disabilities and within the model communities.

Actions	Who	By When	Deliverables
Action 1: Conduct training on best practices with partner agencies of the model communities.	<ul style="list-style-type: none"> - Community teams - Resource Consultants - Training 	June 2016	<ul style="list-style-type: none"> - Training completed

	Workgroup		
Actions	Who	By When	Deliverables
Action 2: Share resources within the partner agencies of the model communities.	<ul style="list-style-type: none"> - Community teams - Resource Consultants - Best Practices Workgroup 	Ongoing as resources are identified and/or developed	- Resources shared
Action 3: Create a sustainability plan for each of the model communities which continues systems change efforts.	<ul style="list-style-type: none"> - Community teams - Resource Consultants - State team 	September 2016	- Sustainability plan developed

Overview of Long-Term Plans

The long-term plans for Envision Illinois will emerge more fully during the implementation phase of this project over the next 12-15 months. Given the statewide nature of this grant project, it was impossible to address all of the key findings and possible solutions identified in the needs assessment process in the Short-Term Initiatives. The Long-Term Plans will extend our efforts in the short-term initiatives that addressed collaboration, accessibility, trauma-informed organizational cultures and model policies as well as beginning to focus our efforts on developing a system of peer supports and engagement and education of Deaf people and people with disabilities.

To build upon the initiatives and steps in the short-term initiatives, Envision Illinois will share the resources, training, and lessons learned through the community collaborative teams and the statewide team. The model policies will become available to the domestic violence service system across the state as well as the disability services system in Illinois. The state-level training materials and accessibility review tools will also be made available to both systems across the state. The data collection changes will allow Envision Illinois to measure progress in serving Deaf survivors and survivors with disabilities. The data will be used to target specific actions that may be needed in the future. Depending on the outcome of the model community collaborative teams, this model may be extended to other communities in Illinois as the project moves forward.

Envision Illinois plans to focus energy and resources in the area of outreach to and engagement of Deaf people and people with disabilities in the community collaborative communities, and across the state. There will be a commitment to establishing a system for ongoing education of Deaf people and people with disabilities on domestic violence, healthy relationships, rights, self-care, and resources. This will require us to secure/establish an educational program that is feasible for people with a wide range of learning styles. Domestic violence agencies, disability service providers and Deaf trainers/trainers with disabilities will need to be trained on the educational curriculum. Implementation obstacles will be identified and addressed as they arise, with technical assistance from the Envision Illinois Statewide Team.

The last area identified in the needs assessment report is the need for a strong and effective peer education and support system that empowers Deaf people and people with disabilities to reduce violence and promote safety and healing. We have heard very clearly about the value of the current peer support system for those with a lived experience of mental illnesses and the desire to expand a peer support system for survivors. Our goal will be to understand the components of such a system for Deaf

people and people with disabilities. Education, training and support will be aspects of this long-range plan to develop a peer support system in Illinois.

Envision Illinois will continue its commitment to systems change: uniting disability and domestic violence services for people to achieve safety, justice and healing. The information gathered and lessons learned from the needs assessment process and implementation activities will continue to inform our work together over the next three to five years, as we pave the way for additional activities.

Conclusion

Envision Illinois is excited to be at the point of strategic planning and the implementation phase of the grant. The collaboration partners and their organizations are committed to the short-term goals and initiatives as outlined in this strategic plan, and are confident that these initiatives will lay the foundation for best practice response to Deaf survivors and survivors with disabilities. The collaboration has learned a lot from each other and has grown in our commitment to address the issues at the intersection of domestic violence and Deaf people and people with disabilities.

Deaf people and people with disabilities, like everyone else, want to be treated with dignity and respect by service providers. Our proposed activities are designed to help the state partners to strengthen our collective systems to promote services and environments that are safe, accessible, compassionate, individualized, and survivor-centered. Our capacity-building initiatives will result in Envision Illinois becoming the leading resource in Illinois for those impacted by the intersection of domestic violence and Deaf people and people with disabilities. We stand strong and are ready to move forward to change systems for improved safety, justice, and healing.

APPENDIX

TIMELINE

Goal 1: Build statewide structure of trauma-informed best practices that promote safety, justice and healing for Deaf survivors and survivors with disabilities.

Initiative 1.1: Develop model policies and procedures to promote consistent response to Deaf people and people with disabilities who experience domestic violence.											
ACTIVITIES	30 days	60 days	90 days	120 days	150 days	180 days	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Action 1a: Conduct initial policy and procedure reviews within the Envision Illinois collaborative partners.		X									
Action 1b: Draft changes to policies and procedures to present to agency decision-makers						X					
Action 2a: Review the <i>Domestic Violence Services Guidelines Manual</i> to identify needed enhancements to state standards and implications for monitoring.		X									

ACTIVITIES	30 days	60 days	90 days	120 days	150 days	180 days	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Action 2b: Draft suggested language to be included in <i>Domestic Violence Services Guidelines Manual</i>						X					
Action 2c: Implement suggested language into <i>Domestic Violence Services Guidelines Manual</i> .											X
Action 3: Develop best practice guidelines related to required reporting by providers.		X									
Action 4: Develop policy templates for domestic violence agencies.				X							
Action 5: Develop policy templates for disability service organizations.						X					

Initiative 1.2: Expand existing training, develop resources, and create cross-training between domestic violence and disability service agencies.

ACTIVITIES	30 days	60 days	90 days	120 days	150 days	180 days	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Action 1: Review current training within ICADV, IDHS, and other Envision Illinois partners.				X							
Action 2: Modify training with input from people with disabilities, Deaf people, and all statewide partners.							X				
Action 3: Develop materials and make available through ICADV Provider Education Library.									X		
Action 4: Utilize self-advocates as trainers in the design and delivery of training and resources.											X

Initiative 1.3: Implement strategies to transform a fragmented system into one capable of providing an accessible, trauma-informed, coordinated, proactive, compassionate, individualized response to Deaf people and people with disabilities who experience domestic violence.

ACTIVITIES	30 days	60 days	90 days	120 days	150 days	180 days	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Action 1: Develop disability accessibility review tool for domestic violence services			X								
Action 2: Develop trauma-informed accessibility review tool for disability service providers.			X								
Action 3: Review the results of accessibility reviews completed in the community collaborative teams.					X						
Action 4: Incorporate community accessibility review findings into statewide plan to address common access obstacles.								X			

ACTIVITIES	30 days	60 days	90 days	120 days	150 days	180 days	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Action 5: Review and modify current state data collection systems within Envision Illinois partner agencies in order to better capture state response to domestic violence of Deaf people and people with disabilities.											X

Goal 2: Create a model of community based collaborations to promote sustainable systems change that meet the needs of Deaf survivors and survivors with disabilities.

Initiative 2.1: Develop community collaborative teams to inform the direction of the statewide project.											
ACTIVITIES	30 days	60 days	90 days	120 days	150 days	180 days	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Action 1: Select model communities	X										
Action 2: Provide technical assistance and support to the community collaborative teams to facilitate team cohesiveness and systems understanding.				X							
Action 3: Implement and test the accessibility review tools within the community collaborative teams.					X						
Action 4: Develop a plan to reduce barriers and gaps and build upon strengths as identified in reviews.						X					

ACTIVITIES	30 days	60 days	90 days	120 days	150 days	180 days	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Action 5: Find or create resources to respond to identified barriers and improve access to services. ongoing							X	X	X	X	X
Action 6: Test policy templates and submit feedback to the statewide team and make revisions as indicated.								X			

Initiative 2.2: Implement best practices response to Deaf survivors and survivors with disabilities within the model communities.

ACTIVITIES	30 days	60 days	90 days	120 days	150 days	180 days	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Action 1: Conduct training on best practices with partner agencies of the model communities.								X			
Action 2: Share resources within the partner agencies of the model communities. Ongoing		X	X	X	X	X	X	X	X	X	X
Action 3: Create a sustainability plan for each of the model communities which continues systems change efforts.											X