

Needs Assessment Plan

Intersections

***Coming Together at the Crossroads to Better
Serve Sexual Assault Survivors with Disabilities***



INTERSECTIONS: Coming Together at the Crossroads Between Disabilities and Sexual Assault to Better Serve People with disabilities who have experienced sexual assault is being supported by grant no. 2009-FW-AX-K006 "Education, Training and Enhanced Services to End Violence Against and Abuse of Women with Disabilities Grant Program" awarded by the Office on Violence Against Women, U.S. Department of Justice.

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I. INTRODUCTION

Intersections is a collaboration between Moving to End Sexual Assault (MESA), our community's local rape crisis center, and Imagine!, a primary provider of developmental disability services. Both organizations serve Boulder and Broomfield Counties in Colorado. Intersections began collaborating in October, 2009 and is funded for three years by the Office on Violence Against Women through the Education, Training, and Enhanced Services to End Violence Against and Abuse of Women with Disabilities Grant Program (Disability Grant Program). Intersections endeavors to create sustainable, systemic changes within each organization that will result in exceptional services for people with disabilities in our community who have experienced sexual assault.

Through the development of the project charter, our first grant deliverable, the foundation for a collaborative relationship was built. We then developed the following needs assessment plan,¹ our second grant deliverable, which outlines how we will gather information from constituents at both organizations to determine our combined strengths and challenges in ensuring a safe, accessible, and welcoming environment for people with disabilities who have experienced sexual assault. Based on the findings of the needs assessment, we will develop a strategic plan that will shape the ultimate goals and outcomes for this project to help us determine how our organizations will best serve people at the intersection of sexual assault and disabilities.

Intersections plans to engage all levels of both MESA and Imagine!, including clients, staff, interns, volunteers, leadership, executive staff, and board members. Because Imagine! is significantly larger than MESA, we have narrowed our focus and will only engage certain departments at Imagine! to balance the two organizations and to ensure our process is manageable. Those that we engage from Imagine! during the needs assessment will be the same groups with which we plan to pilot our strategic plan and implementation activities prior to rolling out across the entire organization. More information is provided in the Methodology section.

¹ Please note that this document replicates some sections from the collaboration Charter (such as the Vision and Mission). However, this document is meant to be a stand-alone document to outline our plan for conducting the needs assessment, and is designed to be accessible to anyone outside of the collaboration.

II. VISION AND MISSION

A. Vision Statement

Intersections envisions that people with disabilities who have experienced sexual assault will be met with trauma-informed and disability-aware services. Services will be responsive, seamless, and fully accessible, provided by a network of highly-skilled professionals who are comfortable working with and honoring the choices of people with disabilities who survive sexual assault. People with disabilities who have experienced sexual assault will feel safe, in control, valued, heard, and respected. Our community will understand the impact and complexities of sexual assault and will share ownership for supporting survivors with disabilities.

B. Mission Statement

The mission of Intersections is to address and enhance systems for serving people with disabilities who have experienced sexual assault. Through this collaboration, Imagine! and MESA will transform our organizational cultures to be trauma-informed and disability-aware by:

- Formalizing the connections between MESA and Imagine! to open both organizations' systems to each other's resources and knowledge in order to build a seamless and dynamic system of support for people with disabilities who have experienced sexual assault;
- Identifying, developing, and enhancing policies and procedures within both organizations to improve our "response-ability" and accessibility to people with disabilities who have experienced sexual assault to receive timely information, advocacy, and support;
- Increasing the awareness, skills, and comfort level of staff and volunteers at MESA and Imagine! to work directly with people with disabilities who have experienced sexual assault.

III. COLLABORATION MEMBERS

A. Moving to End Sexual Assault (MESA)

Organization Type: Sexual Assault Response and Education

MESA believes every person has the right to live free of sexual assault and works to end the suffering caused by this crime. MESA is the only rape crisis center in Boulder and Broomfield Counties and serves as an expert in

trauma and sexual violence. MESA offers services to teen and adult survivors as well as prevention education programs in the community. Services to clients include a 24-hour hotline, hospital response, support during the legal process, individual and group counseling, and referrals. Prevention education programs include a high school peer education program, elder abuse prevention, and a men's program to educate other males on ending sexual assault.

B. Imagine!

Organization Type: Disability Services

Imagine!'s mission is to create and offer innovative supports to people of all ages with cognitive, developmental, physical, and health related needs so they may live fulfilling lives of independence and quality in their homes and communities. By implementing progressive ideas and programs based on the latest research, Imagine! helps people aspire to, and achieve, a fulfilling life of new possibilities. Imagine! is the Community Centered Board (CCB) for Boulder and Broomfield Counties, serving as the single point of entry for any eligible person with a developmental disability to receive services and support. In addition to serving as a state CCB, Imagine! also provides services designed to incorporate people with developmental, cognitive and physical challenges into the fabric of their communities. Services include educational and therapeutic services, job training and placement, recreation and leisure activities, opportunities for community living, behavioral health services, technology solutions, and support for families. Imagine! provides support services to more than 2,500 people of all ages with developmental delays and cognitive disabilities including autism, cerebral palsy, Down syndrome, and mental retardation.

IV. NEEDS ASSESSMENT GOALS

Intersections is conducting this needs assessment to:

- Identify current organizational structures and gaps at both organizations with regard to policies, procedures, protocols, and trainings that address how to respond to and support people with disabilities who have experienced sexual assault.
- Evaluate skills, awareness, and comfort levels of staff and volunteers at every level of both organizations to respond to and support people with disabilities who have experienced sexual assault.

- Identify what current relationships exist between MESA and Imagine! (both formal and informal), barriers to working together effectively, and opportunities to grow, nurture, and sustain the relationship.
- Identify what works and does not work in an organization to ensure accessibility, safety, “response-ability,” and a welcoming environment through the lens of sexual assault survivors and people with disabilities.
- Identify what supports and limits exist in each organization’s culture to respond to and address issues of accessibility, safety, “response-ability,” and a welcoming environment for people with disabilities who have experienced sexual assault.

V. INFORMATION SOURCES

A. Existing Information

While MESA and Imagine! collect data on who we serve, they have not in the past collected data relating to how to best serve people at the intersection of sexual violence and disabilities. Additionally, no other organizations at the local or state levels have collected data specific to serving people at the intersection of sexual violence and disabilities that is particularly relevant to our community.

However, three studies have been conducted in Colorado that address similar issues.

- Victim Services 2000 (or VS2000) is a collaboration in Denver, CO, and is funded by the Office for Victims of Crime (OVC). Their goal is to improve services for crime victims. In 1997, they conducted a needs assessment and asked victims how services could be modified to best serve them.² They specifically engaged victims who were identified as “underserved” to know how to tailor services to be more accessible for all victims. (However, this study did not clearly state how “underserved” was defined and may or may not have included people with disabilities.) This study did engage victims

² Stark, E. (2000). *Denver Victim Services 2000 Needs Assessment*. From: OVC Bulletin, October 2000. http://www.ncjrs.gov/ovc_archives/bulletins/dv_10_2000_1/files/NCJ183397.pdf

- directly, and the information provided by these victims will be compared with the findings from our needs assessment.
- The Denver Sexual Assault Interagency Council conducted a needs assessment in 2003,³ evaluating barriers to services provided by emergency response workers to survivors of sexual assault, specifically within emergency rooms and Sexual Assault Nurse Examiner (SANE) programs. Although this study did not evaluate serving people with disabilities specifically, some of the findings may be applicable to the work of our collaboration.
 - The National Institute of Justice conducted an evaluation of Denver's Emergency Response System (911 call center) regarding its effectiveness for serving Deaf callers.⁴ The information was used to provide call centers nation-wide with best practices for serving Deaf callers. This study engaged the staff that worked at the Emergency Response Center (911 call center) and asked them what they needed to be more successful at responding to Deaf callers. Although this study does not focus specifically on the intersection of sexual assault and people with disabilities, it does provide examples and guidance that non-disability agencies can use to improve their accessibility. This may be particularly applicable to MESA's 24-hour hotline. The findings from this study will be compared to the needs articulated by MESA and Imagine! staff, volunteers, and interns when working at the intersection.

Because none of these studies specifically evaluated how to best serve people with disabilities who have experienced sexual violence in Boulder and Broomfield Counties, data is still needed to inform the work of Intersections and form the foundation for our strategic plan. We plan to compare the results of the studies cited above to our needs assessment results as they may potentially inform the development of our strategic plan.

³ Loring, M. *Summary of the Metropolitan Denver Sexual Assault Response Project: Blue Ribbon Report*. Denver Sexual Assault Interagency Council: Denver, CO. <http://www.denversaic.org/content/documents/BlueRibbonReport.doc>

⁴ Rubin, P. & Dunne, T. (1994). *The Americans with Disabilities Act: Emergency Response Systems and Telecommunication Devices for the Deaf*. National Institute of Justice: Research In Action: Washington, D.C. <http://www.ncjrs.gov/pdffiles/adad.pdf>

B. New Information

The data collected through our needs assessment will be original and qualitative in nature. It will provide us with new insight into how each organization is currently supporting individuals with disabilities who have experienced sexual violence, areas we can improve upon, and what survivors of sexual assault and people with disabilities need to receive safe, accessible and welcoming services. We will gather this information through focus groups and interviews and then use the data to guide the development of our strategic plan. Ultimately, this information will help us determine what systems changes are necessary to make the services of both MESA and Imagine! more responsive, accessible, and safe.

VI. METHODOLOGY AND AUDIENCES

Two methods have been chosen for this needs assessment: focus groups and interviews. These methods were chosen based on what would work best for each needs assessment audience. Intersections plans to engage all levels of both MESA and Imagine!, including clients, volunteers, interns, staff, leadership, executive staff, and board members. When engaging clients at both organizations, we do not intend to recruit or engage individuals at the intersection.

MESA is significantly smaller than Imagine! as a whole, with only nine staff members, two clinical interns, and approximately 40 hotline volunteers (75 volunteers total), compared to Imagine!, which has 750 employees. As a result, we will be engaging all of MESA's employees and interns, and two groups of volunteers.

MESA is a team of Mental Health Partners (MHP), which is the community mental health center for Boulder and Broomfield counties. As a result, MHP has ultimate authority over MESA in all areas of functioning, including fiscal, personnel, policies and procedures, and non-profit status. Therefore, we will be engaging the Mental Health Partners' executive staff (Executive Director and head directors of departments that oversee MESA), as well as the Mental Health Partners' Executive Committee of their Board of Directors. While MHP leadership has ultimate authority, they value the insights and programmatic decisions of MESA leadership and our

collaboration and will be open and supportive of the recommendations that stem from the needs assessment.

We have decided to narrow the scope of who we will engage at Imagine! during the needs assessment rather than engage the entire organization, in order to balance and compliment the size of MESA and to provide us with a more manageable number of needs assessment participants. We have strategically selected certain departments at Imagine! to engage, which are Case Management, Innovations adult residential services, and Family Services (which includes Supported Living Services).

We have chosen the Case Management Department because they are at the forefront of advocating for and ensuring clients of Imagine! receive needed services. Also, when the time comes to roll out our implementation activities throughout Imagine!, Case Managers are in a position to effect change due to their role in overseeing a significant number of clients in partnership with all levels and departments of Imagine!.

We have chosen the Innovations adult residential services and Supported Living Services (SLS) departments because these groups are the largest providers of residential/supported living services at Imagine!, representing a wide spectrum of levels of disability and ensuring that we hear multiple points of view. Staff providing services in Innovations and SLS are paid employees and are therefore required to follow Imagine! policies and procedures. As a result of choosing these three departments, changes made at our pilot sites within Imagine! will be easily replicable throughout the entire organization.

A. FOCUS GROUPS

i. Audiences

Intersections will primarily use focus groups for gathering information from survivors, people with disabilities, staff, volunteers, interns, and board members because we believe that this is the most efficient way to effectively engage larger groups of individuals in a short period of time. We also believe that a focus group setting will help to generate a diverse range of ideas and perspectives.

All participants will be given the option of participating in individual interviews if they prefer.

Sexual Assault Survivors

We will be engaging survivors who are clients of MESA that have received ongoing services through our Client Services Department within the past year. Ongoing services include individual and/or group therapy and/or case management services. We believe that sexual assault survivors are the experts of their own experience and have the power to represent their own needs and expectations. As a result, it is imperative to ask them directly what their own personal experiences are when receiving services so that we may make our organizations safer and more trauma-informed. Because the strategic plan will ultimately influence the way services and supports are provided, it is critical that we ask the individuals who will be most impacted by our systems changes. We will be screening out MESA clients who also receive Imagine! services. (For more information on this process and logic see Recruitment, p. 20 and Safety, p. 38.)

By engaging survivors of sexual assault, we hope to gain information about the following (for questions, see Appendix J):

- What makes a service providers approachable, safe, comfortable, and any barriers to services.
- The best methods of outreach to alert survivors of services.
- The importance and value of confidentiality as a safety tool.
- The best practices for serving survivors (including staff behavior, knowledge, and skills).
- The impact trauma has on someone's approach to seeking services.

People with Disabilities

We will be engaging people with disabilities who are enrolled in Imagine! services, specifically those in Supported Living Services or Innovations adult residential services, all of whom receive case management services from Imagine!. The clients of Innovations that we are engaging live in group homes and are receiving close supervision, allowing us to ensure better safety for their participation. The clients we will be engaging from Supported Living Services are living independently and will bring a unique voice to their experience on accessing services in their community. All

clients will be their own guardian and can make their own decision about consenting to participation in the needs assessment process (See Recruitment, p. 21 and Safety, p. 38)

People with disabilities are vital to the needs assessment process. We believe that people with disabilities are the experts of their own experience and have the power to represent their own needs and expectations. As a result, it is imperative to ask them directly what their personal experiences are when receiving services so that we may make our organizations more comfortable, accessible, and disability-aware. Because the strategic plan will ultimately influence the way services and supports are provided, it is imperative that we ask the individuals who will be most impacted by our systems changes.

By engaging people with disabilities, we hope to gain information about the following (for questions, see Appendix K):

- What makes a service provider accessible and comfortable for people with disabilities.
- The best methods of outreach to alert people with disabilities about accessible and disability-informed services.
- The best practices for serving people with disabilities (including staff behavior, knowledge, and skills).
- What service providers need to know about informed consent and what the best practices for obtaining informed consent from people with disabilities.

Staff, Volunteers, and Interns

MESA Client Services staff, hotline volunteers, and clinical interns provide direct services to clients. Specifically, this group includes the Client Services Coordinator, Bi-Lingual Case Manager, clinical interns, volunteer hotline super group leaders, and volunteer counselors. These individuals at MESA are being engaged because they have the most experience working directly with MESA clients who are survivors of sexual assault. These individuals have completed all required training and have a direct understanding of what is expected of them on how to interact with and support survivors. Additionally, these individuals can speak to how MESA addresses serving people at the intersection.

MESA employs additional staff members who do not provide direct services to clients. These individuals include those within the Prevention Education and Development Departments. These staff members have received very similar training regarding policies, procedures, and organizational expectations as those who provide direct services. Therefore, we will be asking them the same questions as those that work directly with clients with regard to organizational culture, training, etc. However, we will not be asking them questions related to serving clients.

Imagine! staff we are engaging include Innovations group home staff and supervisors, the SLS Mentor, and case managers. Imagine! staff are being engaged because they have the most experience working directly with people with disabilities within Imagine!. As a result, they have completed all required training and have an understanding of what is expected of them when providing services and supports to people with disabilities, and they can speak to Imagine!'s overall culture when working at the intersection. Additionally, these individuals can address how Imagine! serves people at the intersection.

By engaging MESA staff, volunteers, and interns and Imagine! staff, we hope to gain information about the following (for questions, see Appendices M-N):

- The current culture of each organization with regard to how people at the intersection are viewed and treated.
- Any historical or current partnering between MESA and Imagine!
- Trainings, policies, and procedures for responding to people at the intersection, as well as barriers to providing services.

Imagine! and Mental Health Partners: Board Members

Intersections will engage the Services Committee of the Imagine! Board and the Executive Committee of the Mental Health Partners Board in order to gain their unique perspective on the project, as well as to generate support for the mission and vision of the collaboration, with the ultimate goal of achieving long-term commitment to the work of the project. We recognize that the backing of both organizations' Boards of Directors is critical to the success and sustainability of any systemic changes resulting from the

project. Through engaging board members, we also hope to gain information on any challenges they foresee to the project's success. (For questions, see Appendix Q.)

i. Numbers and Structure of Focus Groups

Focus Groups	Min # of Participants	Max# of Participants	# of Groups	Length of Group
<i>MESA Client Services</i> Dept: Client Services Coordinator, Bi-Lingual Case Manager, Clinical Interns	4	7	1	1.5 hours
MESA Hotline Volunteers	4	7	1	1.5 hours
MESA Hotline Super Group Leaders	4	7	1	1.5 hours
<i>MESA additional staff:</i> Prevention Education Department, Development Department	3	7	1	1.5 hours
Imagine! Case Managers and SLS staff	4	7	2	1.5 hours
Imagine! Group Home Staff	4	7	1	1.5 hours
Imagine! Group Home Supervisors	4	7	1	1.5 hours
Sexual Assault Survivors	3	5	3	1.5 hours
People with disabilities	3	5	3	1.5 hours
<i>Imagine! Board:</i> Services Committee	3	7	1	.5 hours
<i>MHP Board:</i> Clinical Services Committee	3	7	1	.5 hours

B. INTERVIEWS

i. Audience

Intersections will use individual and small group⁵ interviews for gathering information from Executive Staff and Leadership, Imagine! Family Caregivers, and Collaboration Team Members from MESA. We have chosen interviews for this group because it provides an opportunity for individuals to have more anonymity and to share their views honestly without self-censorship. It also allows for more flexibility for participants that may have more restricted scheduling needs.

We will also provide the option to participate in an individual interview for anyone who is recruited for a small group interview. Please see below for information on why we chose interviews for these select groups.

Family Caregivers

We will be engaging family caregivers of people with disabilities who are currently receiving Imagine! residential services. Specifically, these family caregivers will have family members who are considered to have a significant cognitive disability that interferes or inhibits their ability to engage in meaningful communication, including the inability to utilize assistive technology and/or sign language. (We are naming this group of individuals “non-verbal” purely to summarize this description, but recognize that there are many ways that these individuals may communicate their needs other than verbally or through the use of assistive technology.)

We have decided to engage this group because Imagine!, and specifically the Supported Living Services and Innovations departments, provides services to a significant number of individuals who are non-verbal and rely completely on their caregivers to access services for them in their community. As a result, we believe it is best to talk directly to those who access community resources on their family member’s behalf. This will inform MESA on the special considerations that are involved in providing

⁵ We use the term “small group interview” throughout to mean interviews with more than one person. These group interviews will consist of 2-3 people at most. Small group interviews will bring together the Director and Assistant Director(s) from each department at Imagine! that we are engaging, because these folks work closely together and have similar insight into the department they manage.

services to non-verbal clients and working with their family members, such as confidentiality, privacy, and informed consent.

Although their family members are currently in residential services, the family caregivers we will engage have at one time had full caretaking responsibilities so that they can accurately speak to their experience of seeking services for those they cared for. Additionally, we will not be speaking to any family caregiver whose family member (client of Imagine!) will also be participating in the needs assessment process.

The Imagine! family caregiver network is a small community. Therefore, Intersections will use individual interviews for gathering information from family caregivers as a way to help preserve the confidentiality of those participating.

By engaging Family Caregivers, we hope to learn about (See Appendix L for questions.):

- How community agencies can best work with family caregivers when providing services to people with disabilities who are non-verbal.
- How to make services accessible and comfortable for people with disabilities who are non-verbal.
- The best methods for outreach for alerting caregivers of accessible and disability-informed services in the community to serve their family member.
- The best practices for serving people with disabilities who are non-verbal (including staff behavior, knowledge, and skills).
- The best-practices for obtaining informed consent from people with cognitive challenges who are non-verbal.

Executive Staff

Intersections will use interviews for gathering information from MESA and Imagine! Executive Staff. Executive staff consist of the executive directors and top management at Imagine! and Mental Health Partners. This group has overall organizational oversight, a broad understanding of state rules and regulations, a more global perspective on the community, and decision making power over strategic planning. We believe that interviews will be the most successful manner to engage this group to provide for flexibility

and accommodation of their schedules, and to glean their historical and unique perspectives.

Executive Staff Include:

- MESA: Mental Health Partners' Executive Director, Mental Health Partners' Clinical Operations Director
- Imagine!: Imagine!'s Executive Director/CEO, Imagine!'s Integrity Officer

Leadership

Intersections will use individual or small group interviews for gathering information from MESA and Imagine! Leadership. Leadership consists of the top management at Imagine! and MESA. This group has program oversight and management, authority over decisions made regarding direct client support, and decision making power over strategic planning.

In order to create an efficient process that will allow for the sharing of ideas to build a rich conversation, for Imagine! Leadership, rather than individual interviews, we will offer interviews with both the Director and Assistant Director(s) from each department. (All participants selected to participate in interviews with their colleague will be given the option of participating in individual interviews if they prefer.)

Leadership Include:

- MESA: MESA's Network Director, MESA's Team Leader, and MESA's Program Manager
- Imagine!: The Director and Assistant Directors from Case Management, Innovations, and Family Services (The Assistant Director of Family Services is also the collaboration team member for Imagine!)

By engaging *Executive Staff and Leadership*, we hope to gain information about the following (for questions, see Appendices O-P):

- The current culture of each organization with regard to how people at the intersection are viewed and treated.
- Any historical or current partnering between MESA and Imagine!

- Trainings, policies, and procedures for responding to people at the intersection, as well as barriers to providing services, as well as the process for making change.
- The level of commitment to increasing the organization's capacity to serve folks at the intersection.

Collaboration Team Members

The two individuals at MESA who are on the Intersections collaboration team (the Project Manager and the Education and Training Coordinator) will participate in an interview together. They will be provided with the same questions as other staff at MESA (refer to page 11 for MESA staff, volunteers, and interns).

Optional Interviews

We recognize that speaking in a group setting may be objectionable for some people for reasons such as lack of privacy or discomfort in a group setting. Therefore, Intersections will offer individual interviews to anyone recruited for focus groups or small group interviews. This will be clearly explained during the recruitment process (Recruitment Scripts: Appendices B-D).

ii. Numbers and Structure of Individual and Small Group Interviews

Interviews (I-Individual Interview; SG-Small Group Interview)	# of Interviews	Approximate Time Length of Group
<p><i>Imagine!:</i> Executive Staff</p> <ul style="list-style-type: none"> • Executive Director/CEO (1) • Integrity Officer (1) <p>Leadership:</p> <ul style="list-style-type: none"> • Case Management Director and Assistant Director (2) • Innovations Director and Assistant Directors (2-3) • Family Services Director and Assistant Director (2) <p>Family Caregivers</p>	<p>2</p> <p>3-7</p> <p>3-5</p>	<p>1 hour</p> <p>1.5 hours</p> <p>1 hour</p>
<p><i>MESA:</i> Executive Staff</p> <ul style="list-style-type: none"> • MHP Executive Director (1) • MHP Clinical Operations Director (1) <p>Leadership</p> <ul style="list-style-type: none"> • MESA Network Director (1) • MESA Team Leader (1) • MESA Program Manager (1) <p>Collaboration Team Members:</p> <ul style="list-style-type: none"> • Education and Training Coordinator and Project Manager (2) 	<p>2</p> <p>3</p> <p>2</p>	<p>1 hour</p> <p>1.5 hours</p> <p>1 hour</p>
<p><i>Optional Interviews</i></p>	<p>TBD</p>	<p>1 hour</p>

C. RECRUITMENT

i. Recruitment Methods

The following is an explanation for the method for which we will use to recruit each group we will be engaging, as well as who will primarily act as the recruiter for each group.

For Survivors

When possible, a face-to-face conversation with a person from MESA who is known by them will be used to recruit participants for all focus groups and optional interviews (Appendix B). The recruitment materials will include an RSVP form (Appendix E) that will list all accommodation options, and invitees will be instructed to complete the form and give it back to the recruiter directly.

MESA does not maintain a large group of current clients seeking ongoing services. It may be necessary to reach out to clients who have recently terminated their services with MESA. Because safety considerations in contacting former clients will be paramount, we plan to take the following steps:

- All MESA clients complete a discharge form when they end services, which includes questions regarding if they want to be contacted in the future for further opportunities at MESA, what the best way to contact them is, and if it is okay to leave a message.
- MESA recruiters will look at each individual's discharge information and only contact those former clients who had agreed to being contacted by MESA in the future.
- MESA will only contact discharged clients who ended services with MESA within the past year because the practice of collecting information regarding consent to contact them in the future was put in place one year ago.
- Only the method of contact indicated by the client will be used.
- For contacts by telephone, Intersections will use a blocked or otherwise unidentifiable number.
- Messages will be left only with those who agreed that this would be safe for them.

- Former clients will be contacted by their primary provider of services whenever possible. If this is not possible, another staff person from MESA will serve as the recruiter.
- MESA will not recruit anyone who we know to be currently in a potentially vulnerable or dangerous situation.

There is the potential for MESA clients to also receive services from Imagine!. Intersections is specifically not recruiting MESA clients who receive Imagine! services in order to avoid Imagine! staff having to file a M.A.N.E (Misuse, Abuse, Neglect, or Exploitation) report (Appendix V). Imagine! staff will be conducting all focus groups and interviews for MESA clients. A M.A.N.E. report would be triggered if an Imagine! employee who is conducting survivor focus groups learns that a participant in the group is a survivor and receives Imagine! services.

A process has been created for MESA to screen out survivors who are receiving services at Imagine!. (This screening process is not needed for people with disabilities receiving services at Imagine! because MESA is not required to report M.A.N.E., should an Imagine! client disclose their sexual assault history during focus groups conducted by MESA.) During the recruitment process, the recruiter will state: “For the purpose of this focus group, we will not be recruiting anyone who also receives services from Imagine!. Does this apply to you?” (Appendix B).

For People with Disabilities

Participants for all focus groups of people with disabilities will be recruited by individual face-to-face conversations, facilitated by either a collaboration member or a staff member known by the individuals being recruited (Appendix B). The recruitment materials will include an RSVP form (see Appendix E) that will list all accommodation options, and invitees will be instructed to complete the form and give it back to the recruiter directly. To mitigate for safety concerns, we will only engage people with disabilities who are their own guardian and/or can consent to participate in the needs assessment process themselves. Those acting as recruiters will know who is and is not their own guardian ahead of time, prescreening them using Imagine!’s database, and will only recruit those who are their own guardian.

For Family Caregivers

An individual phone conversation facilitated by either a collaboration member or a staff member known by the individual being recruited will be used to recruit family caregivers for all individual interviews (Appendix B). All calls will come from an Imagine! phone number by a person who already typically has contact with them regarding their Imagine! services, mitigating potential safety concerns. The recruiter will fill out the RSVP form for the invitee, going through each section including available accommodations (Appendix E).

For Staff, Volunteers, and Interns

Recruiters will be the participant's supervisor or a collaboration member from their organization. Recruitment will take place during a staff or volunteer meeting. Recruiters will clearly state that invitees can call or email the Project Manager with any additional questions (Appendix B). The recruitment materials will include an RSVP form (Appendix E) that will list all accommodation options, and invitees will be instructed to complete the form and give it back to the recruiter directly. To ensure invitees have the opportunity to speak to someone individually about the process, the Project Manager's contact information will be provided.

For Executive Staff and Leadership

For both organizations, the Project Manager will email an invitation (Appendix C) and the recruitment materials to each individual and arrange the interview. The recruitment materials will include an email listing all accommodation options, and invitees will be instructed to RSVP via email to the Project Manager directly.

For Board Members

Intersections will be conducting a focus group during an already scheduled Board committee meeting at each organization. Prior to the board committee meeting, recruitment materials and information about the focus group will be provided to all potential participants by each organization's committee coordinator (Appendix D). The recruitment materials will include an email listing all accommodation options, and invitees will be instructed to RSVP via email to the Project Manager directly. In this information, it will be clearly stated that this is an optional focus group.

Because the focus group will take place in the first thirty minutes of the committee meeting, those who wish to opt out will be advised to miss the first part of the meeting.

ii. Recruitment Process

The recruiter will follow the recruitment scripts that have been specifically designed for the intended audience. (See Recruitment Scripts: Appendices B-D.) The Recruiter will:

- Explain the purpose of the focus group/interview and the overall goal of the collaboration.
- Alert the invitee of any reasons that confidentiality cannot be maintained, such as M.A.N.E. reporting, mandatory reporting, and intent to harm self or others. (See Appendices T-W)
- Review the recruitment materials, including the RSVP form and Frequently Asked Questions. (See Appendices E-G)
- *For all focus groups:* Discuss what incentives they will receive. (See Incentives, p. 30)
- Review the date, time, and location of the interview or focus group.
- Review accommodation options. (See RSVP form for a complete list: Appendix E.)
- Confirm whether or not the individual is willing to participate.
- Offer an individual interview for those that do not want to participate in a focus group. If the invitee prefers an individual interview, the recruiter will have a list of pre-selected dates/times and ask that the invitee select the date/time that works best for them. The recruiter will ensure that this date/time is listed on the RSVP form.
- Answer any additional questions.

All recruiters are to contact the Project Manager by phone or email the same business day as recruitment with the responses of invitees. The recruiters will submit the RSVP forms to the Project Manager within three business days.

iii. Recruitment Tools

Recruiters will utilize the following tools during recruitment. For anyone needing assistance, the recruiter will read aloud all documents.

RSVP Form

All invitees will receive an RSVP form (Appendix E). The RSVP form will ask for the invitee's first name, if they want to participate in the needs assessment process, how they'd like to participate (focus group/optional interview), and what accommodations they need. Names collected from the RSVP forms will only be utilized to connect participants with their requested accommodations. Additionally, we will offer participants the option to receive meeting reminders, which will entail asking them for the best method to contact them. This will provide more identifying information. Therefore, once the reminder has been made by the Project Manager, the RSVP form will be destroyed, ensuring that no identifying information other than each person's first name is available during the focus groups/interviews.

The Project Manager from MESA will be the designated point person for keeping track of all RSVP responses and accommodation requests for all focus groups and interviews. RSVP forms for that particular meeting will be destroyed within one business day of that meeting. Having the name of participants will not trigger any mandatory reporting requirements, as they will only be viewed by the recruiter and Project Manager and will not be linked to any information shared by participants during the focus group/interview.

For those receiving in-person recruitment, the recruiter will provide them with an RSVP form and request that they complete the form while the recruiter is present. The recruiter will go through each section of the RSVP form, explaining what is needed and ensuring that invitees understand what they are being asked. For those invited via email, the RSVP form will be attached to the email and it will be requested that they email back the RSVP form by a due date selected by the collaboration.

For those being recruited via telephone, the RSVP form will be reviewed with them by the recruiter, who will fill out the form and turn it in to the

Project Manager. The recruiter will go through each section of the RSVP form, explaining what is needed and ensuring that invitees understand what they are being asked.

Frequently Asked Questions Sheet

The FAQ sheet will answer general questions about what focus groups/interviews entail (Appendix F). This sheet will be provided to all participants during the recruitment process. For survivors and people with disabilities, we will let them know during recruitment that we are taking all *forms* back at the end of the recruitment process. Therefore, survivors and people with disabilities will not be able to keep the FAQ sheet to mitigate for safety concerns.

Meeting Reminder Cards

Because we recognize that not all participants will want a meeting reminder call/email, we will provide all invitees with the option of taking a meeting reminder card with them (Appendix G). This will be the only written material that survivors and people with disabilities can take with them from the recruitment process. This card will be the size of a business card and will only list the Project Manager's first name, a contact phone number, and a blank space to fill in the date/time of the meeting. The phone number listed will be to a confidential Imagine! voicemail and not state anything about the project or sexual assault on the voicemail recording. The location of the meeting, information on MESA and Intersections, and more information on the Project Manager will not be included.

iv. Recruitment Training

All individuals who will act as recruiters will be required to participate in recruitment training. Recruitment training will last approximately 1.5 hours and will be conducted by Collaboration Team Members. Recruiters may be collaboration members, supervisors from specific programs we are engaging, and individuals working directly with clients. A discussion will be held within the collaboration prior to beginning our needs assessment to identify who the best recruiters will be for each group we engage.

Training will include:

- An overview of the grant and needs assessment process

- Important considerations around safety, confidentiality, reporting requirements, and accessibility
- Recruitment tools
- How to recruit the minimum/maximum number of participants for focus groups and keep track of the limited number of each group
- *For recruiters for survivors:* How to screen out those currently receiving Imagine! services
- *For recruiters for people with disabilities:* How to screen out those that are not their own guardian

D. FOCUS GROUP/INTERVIEW PROCEDURE

- Focus groups and interviews will involve a moderated discussion using open-ended questions, unique for each audience, based on the goals of that particular group (see Appendices J-Q for all questions).
- Those conducting focus groups and interviews will not be from the same organization being engaged.
- Focus groups of staff, interns, volunteers, and board members will bring together people in similar positions at their organization or who work together.
- Each focus group will have a group facilitator, note taker, and floater. (See below for additional information on roles.)
- Interviews with Imagine! Leadership will bring together two employees who are in the same department, and will be offered the opportunity to participate in individual interviews if they prefer.
- Each interview will have a facilitator and note taker. (See below for additional information on roles).
- Interviews will not have a floater or counselor present due to resource limitations and lack of need for additional support.
- The facilitator and/or note taker for any optional interviews for survivors or people with disabilities will have training and experience in crisis counseling should a participant need additional emotional support during the interview. (See below for additional information on roles).
- At all focus groups for survivors and people with disabilities, a trained counselor will be available to provide support, as needed (see below for a description of the Counselor role). Additionally, a list of local community resources will be available at all focus groups and

interviews, should someone need information on where to obtain support. (Appendix S)

At the beginning of each focus group and interview, the following will be explained (Appendices H-I):

- Passive consent and voluntary participation.
- The purpose of the focus group/interview and that they are being called upon as experts to assist us.
- Confidentiality and exceptions to confidentiality.
- *For survivors and people with disabilities:* The opportunity to speak with a counselor on site or receive a list of local community resources in case participants would like emotional support during or just following the interview session.

E. ROLES OF THOSE CONDUCTING FOCUS GROUPS AND INTERVIEWS

The following is a list of those conducting focus groups and interviews, and a description of each role. Those conducting focus groups and interviews will not be from the same organization that is being engaged, other than the Note Taker, who will be the Project Manager. All participants filling these roles will participate in a brief training that includes:

- An overview of the grant and the needs assessment process
- An overview of the role and expectations
- Training on the specific requirements of the role
- How to manage special circumstances: safety, confidentiality, reporting requirements, and accommodations.

No one from MESA will be required to report M.A.N.E. (Mistreatment, Abuse, Neglect, or Exploitation) to the State Division of Developmental Disabilities. Only Imagine! employees who suspect M.A.N.E. of a person receiving their services are mandated to file a report (Appendix V). All roles *will* be required to break confidentiality for mandatory reporting requirements and statements that meet reporting requirements for intent to harm self/others.

Facilitator

The facilitator will be an employee of either organization with experience in interviewing techniques and group facilitation, and will have familiarity with disability services and/or sexual assault services. The facilitator will welcome participants and introduce the other people conducting the meeting. The facilitator will make sure everyone is comfortable, will review general housekeeping details, and will address safety and confidentiality issues using the script created by the collaboration, prior to getting into the pre-created questions and prompts. (See Appendices H-I for all facilitation scripts.) The facilitator will keep the discussion in line with the questions and will intervene quickly in cases of possible arguments or personal disclosures. (See Appendix J-Q for all questions.) The facilitator will be responsible for insuring that people feel the environment is comfortable and safe, and understand that they can leave at any time. For all focus groups and interviews, the facilitator will be responsible for keeping track of the time.

Note Taker

The Project Manager will be the note taker at all focus groups and interviews for both MESA and Imagine!. The note taker will be responsible for objectively taking notes of the discussion on a laptop. The note taker will not participate in the discussion and will sit in a part of the room that will be the least distracting for participants when possible. The note taker will document what each person says without paraphrasing and will document when emotions such as frustration, anger, or happiness are expressed. The note taker may ask that something said be repeated by raising her hand.

The note taker will not be linking any information shared to specific participants and will exclude any identifying information other than which organization and type of group they are from (for example, "Staff from MESA said..."). The note taker will be responsible for insuring that all written information and notes are kept in a safe and confidential place (See Confidentiality Considerations, p.).

At the end of each focus group/interview, the note taker will facilitate a debriefing session with the facilitator and floater to jointly identify themes,

significant comments, and new information related to the goals of the needs assessment. The note taker will be responsible for translating all notes into “note summaries,” which will be provided to collaboration team members. In the event of technical difficulties, the notes can be taken by hand and later transcribed onto the computer.

Floater (For focus groups only)

The primary responsibilities of the floater are to assist with ensuring the facilitator and note taker have what they need to conduct the meeting, and to attend to any comfort and safety requests of participants. The Floater will assist with food and room set-up and ensure that focus group participants feel safe and comfortable. If anyone wants to access the counselor or their own personal care attendant, the floater will escort them out of the room. For all focus groups, the floater will assist with keeping track of time when not assisting individual participants.

Counselor

A counselor will be available at focus groups for survivors and people with disabilities to provide emotional support either during or just following the group session. The counselor will be in a separate, private, accessible space to insure confidentiality and safety. All counselors will have training in crisis management as well as training regarding confidentiality, mandatory reporting, and intent to harm requirements. Additionally, because all counselors will come from MESA, they will receive an overview of Imagine! policies, including M.A.N.E. reporting, in order to attend to any questions or considerations that may be in place for participants who receive Imagine! services. However, they will not be required to report M.A.N.E. All counselors will also have cards that list local resources.

F. CONSENT PROCESS

We will be using a *passive* consent process for all focus groups and interviews because it provides for more confidentiality of participants, prevents a paper trail, and eliminates time spent on administrative matters in the session itself. Passive consent will be clearly outlined in the facilitator's opening remarks (Appendices H-I). Participants will be told they can leave or discontinue at any time. Once the remarks have been read, it will be assumed that all participants who choose to stay will be giving consent for their participation. Participants of focus groups and interviews are agreeing to:

- Participate in a focus group/interview.
- Have their comments anonymously recorded in writing.
- Have their comments anonymously used in the needs assessment report.
- Have their comments anonymously used for developing the collaboration's strategic plan and implementation activities.

G. INCENTIVES

During all focus groups, Intersections will provide light refreshments. The Project Manager will make accommodations for any food/drink restrictions and requirements as needed.

Additionally, at the beginning of each focus group/interview with people with disabilities and survivors of sexual assault, during the check-in process with each individual participant the Project Manager will be providing a \$10 gift card to Target. Individuals will be told during recruitment and at the beginning of each focus group/interview that a gift card will be provided to them and that if they prefer not to take it with them, the Project Manager will give it to the recruiter to keep for them until they are ready to use it. Individuals will also be told that they can discontinue their participation at any time during the focus group/interview, without losing their gift card.

The note taker will count the number of participants and gift cards given out and keep a record of this aggregate data for potential auditing requirements. The facilitator will sign off that this number is correct after each focus group/interview as a witness and to ensure accuracy.

H. CONFIDENTIALITY CONSIDERATIONS

i. Preserving Confidentiality

The following information outlines the specific considerations we have made to preserve confidentiality.

- Personally identifying information will only be collected during the RSVP process, when individuals will be asked their first name for the purpose of linking individuals with their accommodations, and contact information to provide optional meeting reminders. The Project Manager will keep a list of any individuals who request accommodations and their first names. This information will be brought to each focus group/interview as needed, and will be destroyed within one business day following the focus group/interview. The Project Manager will keep RSVP forms for those who request a meeting reminder call/email only until a reminder is made. Immediately after, the Project Manager will destroy the RSVP form, so as not to maintain any identifying information.
- The number of participants who attend focus groups and interviews will be aggregated for the needs assessment report. No other RSVP information will be aggregated or shared.
- In focus groups and interviews, participants will be asked not to provide any identifying information about themselves, specific staff, or program participants. (See Appendices B-D & H-I for Recruitment and Facilitation scripts)
- The recruiters who receive the RSVP forms will keep the RSVP forms in a sealed envelope while they have it. The recruiter will call the Project Manager after every recruitment session and coordinate with the Project Manager to arrange for RSVP pickup within three days of recruiting.
- All RSVPs will be destroyed after each focus group/interview.
- There will be no adverse ramifications for employment/services due to any information shared.
- Focus group participants will be asked to keep confidential any information discussed or shared during the focus group with anyone who did not participate in their specific focus group. Additionally,

participants will be asked to not discuss what is said in the group with other group participants once the group is over. However, because we cannot ensure that participants preserve confidentiality, participants will also be encouraged to be mindful of what they share.

- The note taker will not link personal identifying information to comments made during any focus groups or interviews.
- The final needs assessment report will identify trends, barriers, and strengths, linked to what each organization and group as a whole stated during the needs assessment process in summary form. In order to make systemic changes at both organizations, it is imperative to identify strengths and needs to enrich the development of our strategic plan.
- Any information gathered through the needs assessment process will be kept by the Project Manager in a locked cabinet and/or stored in password-protected computers that only the Project Manager has access to.
- In the event that there is an emergency preventing the Project Manager from accessing these documents, the collaboration team member from MESA will also have access to the password and/or file cabinet key.
- If the note taker is someone other than the Project Manager, the Project Manager will receive all notes from the note taker to create the summary.
- The note taker will provide collaboration team members with summaries of the focus groups and interviews. The note taker will be identifying themes, patterns, and issues that emerge utilizing information from meeting notes and debriefing sessions with the facilitator and floater following each focus group and interview to ensure all information is captured and consistent.
- Draft copies of the needs assessment report will be kept in a locked cabinet and/or stored in password protected computers that only the collaboration team members have access to.
- The report will not be shared with anyone outside of the collaboration until it has been reviewed and approved by the collaboration, Vera, and the Office on Violence Against Women.

- All notes, records, and anything else in writing that is related to the needs assessment will be destroyed after the strategic plan has been approved by Office on Violence Against Women and both Imagine! and MESA have signed off on it.

ii. Exceptions to Confidentiality

There are three exceptions to maintaining confidentiality.

- *Mandatory Reporting*

Imagine! and MESA are both required by State statute to report the suspected abuse or neglect of a child under the age of eighteen, or if the perpetrator of a person over eighteen who was the victim of childhood abuse is still in a position of trust. Reporting is required if the professional obtains information that would identify anyone involved, such as names, addresses, and phone numbers.

Therefore, all persons conducting focus groups and interviews (recruiters, facilitator, note taker, floater, and counselor) will be considered mandatory reporters. As a result, during all steps of the needs assessment process, the mandatory reporting requirements will be clearly disclosed and explained at the beginning of all communication with participants. Should a participant disclose the current abuse or neglect of a child under eighteen, or knowledge of a perpetrator currently in a position of trust, all those conducting focus groups and interviews will be trained on how to immediately respond and provide that participant with information on what steps will be taken and to see if that person would like to participate in the reporting process (see Appendices T-W).

If a report is required during the needs assessment process, this information will not be shared with the opposite agency, and will only be shared within the reporting agency on a need to know basis.

- *Mistreatment, Abuse, Neglect, and Exploitation (M.A.N.E.) Reporting*
Imagine! employees are required by the Colorado Division of Developmental Disabilities to report M.A.N.E. for any person who receives Imagine! services. In order to avoid triggering a M.A.N.E.

report, for all focus groups and interviews for Imagine! employees and clients, no one from Imagine! will be present, and those conducting the meeting (from MESA) are not required to follow Imagine's M.A.N.E. reporting procedure (see Appendix V).

If information is shared during the needs assessment process that meets M.A.N.E. reporting requirements, MESA staff will not share this information with Imagine! staff.

- *Intent to Harm*

Colorado state statute requires all mental health employees to report the intent to harm self or others, should threats reach criteria of imminent threat. Factors to consider are:

1. The seriousness of the threat to the health or safety of the client or others.
2. The need of the information to meet the emergency.
3. Whether or not the parties to whom the information is disclosed are in the position to deal with the emergency.
4. The extent to which time precludes obtaining authorization.

All those conducting focus groups and interviews will be required to assess any individuals that make an immanent threat to harm themselves or others. For all suicide threats reaching imminent threat, a report will be made to Emergency Psychiatric Services. For all threats toward others that reach imminent threat, a report will be made to the police and the person the individual is threatening. (See Appendix W.)

If a report is required during the needs assessment process, this information will not be shared with the opposite agency, and will only be shared within the reporting agency on a need to know basis.

iii. Steps taken to avoid disclosures during recruitment and during focus groups/interviews include:

- Stating the expectations of what the needs assessment focus groups/interviews are for.
- Reminding all participants that we do not want to discuss any stories of known experienced violence, both personal and otherwise.
- Reviewing our reporting requirements for Mandatory Reporting, M.A.N.E., and Intent to Harm.
- *For Imagine! staff/leadership/board members only:* Reminding all participants that any stories shared regarding clients will be assumed to have already been reported.
 - At the beginning of all focus groups and interviews, the facilitator will remind participants of Imagine! policies regarding M.A.N.E. reporting. If a situation arises in which a participant shares information regarding an Imagine! client's experience of violence that meets criteria for a M.A.N.E. report, those conducting the focus group or interview will keep that information confidential, as it is the expectation and assumption that all Imagine! policies and protocols have already been followed. Those conducting focus groups and interviews will not be responsible or expected to follow-up with that participant regarding how the situation was managed, nor will they be responsible for reporting the specific information of that incident to Imagine! management.
- We will not be asking any questions regarding instances of violence or abuse.
- If during the focus groups/interviews someone begins to disclose, the facilitator will quickly intervene and either redirect to the discussion or support them in getting to the counselor.
- *See Recruitment and Facilitation Scripts: Appendices B-D & H-I.*

I. SAFETY CONSIDERATIONS

Physical and psychological safety is a primary consideration of Intersections. We understand that safety is defined differently for each individual. Every effort will be made to protect the safety of individuals participating in the needs assessment process. The collaboration will also make every effort to develop tools and processes to maximize the safety of all involved.

During recruitment and at the beginning of each focus group and interview, it will be made clear to participants that:

- Questions are intended to elicit information about MESA and Imagine! and the services they provide. Questions are not intended to gather personal experiences related to violence, abuse, or neglect.
- *For survivors/people with disabilities:* If the discussion of services or service access brings up memories or intense feelings and/or if a participant appears likely to disclose, a counselor will be available at each focus group for survivors and people with disabilities to provide emotional support for anyone needing it either during or just following the session. A private, accessible space will be made available to insure confidentiality and safety. Participants will be told that the counselor is available and where the counselor will be located, or they can request an escort to the counselor.
- *For survivors/people with disabilities:* Cards that list local resources will be made available to anyone requesting one.
- Anyone can discontinue at any point if they are feeling uncomfortable.
- No one has to answer any question that makes them uncomfortable.
- There will be no consequence to employment/services for anyone who chooses to participate or not participate in the needs assessment process.
- No personally identifying information will be linked to those participating in the group, other than to provide them with their requested accommodations.
- We will be offering optional individual interviews to anyone who would prefer to participate outside of a group setting.

- *For survivors/people with disabilities:* Anyone has the option for their gift card to be kept by their recruiter until they are ready to use it.
- *For survivors/people with disabilities:* We will be taking back FAQ forms at the end of the recruitment process.

Additionally, the following steps will be taken to help ensure safety for all participants:

- The meeting reminder card will not have the location of the meeting or any information linking the meeting to Intersections or MESA. The phone number listed on the card is linked to a confidential Imagine! voicemail. (See Appendix G.)
- We will be asking for the first name of all participants on the RSVP form for the purpose of connecting individuals with their requested accommodations and will not be linked to any individually identifying information.
- We will be asking for contact information from those who request a meeting reminder. This information will be destroyed as soon as the reminder is made, prior to the focus group/interview.
- Any print materials and signage at focus groups and interviews for survivors and people with disabilities will not list Intersections or use language regarding the intersection of sexual assault and disabilities.
- An individual's own Personal Care Attendant (PCA) will not be permitted in the room during focus groups or interviews. However, we will make special accommodations for anyone requiring the assistance of a PCA (see Access Considerations, p. 39).
- An additional staff member from either organization will be on site during all focus groups and interviews in the event that an emergency occurs and additional support is needed.
- To the best of our ability, sites selected for focus groups and interviews will be where people will feel safe. Mostly, sites will be selected based on where participants already have a routine so as not to bring attention to this group.
- We have taken special considerations when selecting the groups we will be engaging, particularly with regard to people with disabilities, survivors, and family caregivers:

- We are only recruiting people with disabilities who are their own guardians, so as not to create a situation where they would have to disclose to another of their participation and potentially put them at risk.
- We are only recruiting survivors who do not receive services from Imagine!, so that if an Imagine! employee facilitates focus groups or interviews with these individuals, there will not be the need for a M.A.N.E. report.
- We are only recruiting family caregivers who do not have their family member with a disability living with them on a regular basis. Therefore, there is additional organization involvement and oversight in these families' lives to mitigate any potential safety risks for the people they are caregivers for.
- We are engaging clients and staff from group homes and Supported Living Services, versus other types of residential supports (such as PCA's and Host Homes) because it ensures that a variety of supervision and oversight is provided to the clients receiving these services.
- We have created a specific process for recruiting survivors to ensure that we are recruiting them in the safest way possible within MESA's already existing structure for communicating with clients:
 - All MESA clients within the past year have completed a discharge form when they end services, which includes questions regarding if they want to be contacted in the future for further opportunities at MESA, what the best way to contact them is, and if it is okay to leave a message.
 - We will only reach out to those who have received ongoing services within the past year.
 - MESA recruiters will look at each individual's discharge information and only contact those former clients who agreed to being contacted by MESA in the future.
 - Only the method of contact indicated by the client will be used.
 - For contacts by telephone, Intersections will use a blocked or otherwise unidentifiable number.
 - Messages will be left only with those who agreed that this would be safe for them.

- Former clients will be contacted by their primary provider of services whenever possible. If this is not possible, another staff person from MESA will serve as the recruiter.
- MESA will not recruit anyone who we know to be currently in a potentially vulnerable or dangerous situation.

J. ACCESS CONSIDERATIONS

The collaboration is committed to providing fully accessible focus groups and interviews for all organization staff, board members, volunteers, interns, clients, and other participants throughout the needs assessment process. To the best of our ability, accessibility will be ensured through the following:

- Accessible space will be used for all focus groups and interviews. Focus groups and interviews will take place in a space that is commonly used by the participants, so that they are already familiar with the space and assumedly have been provided with what is needed for accessibility.
- Reasonable accommodation will be provided to those participating. The RSVP form for focus groups and interviews will include a checklist of available accommodations. The Project Manager will be responsible for overseeing requested accommodations.
- Recruiters and facilitators will be instructed to attend to the particular needs of each audience and speak in a manner that is accessible to all participants.
- All print materials will be in plain language and 14pt. font.
- Because participants' own Personal Care Attendants (PCAs) will not be permitted in the room during focus groups or interviews, the floater will escort participants requesting their PCA out of the room to that individual. If it is determined in advance that a participant will need a PCA during the focus group or interview, we will accommodate this by providing an alternate PCA.
- Questions for people with disabilities have been written to enhance accessibility for those with cognitive delays by using concrete examples and plain language (non-abstract) language. They were created through partnering with people with disabilities as well as employees of Imagine! who have expertise and skill at adapting

- language to meet the needs of people with developmental disabilities.
- *For a list of all accommodations invitees can request, please refer to the RSVP form (Appendix E).*

VII. WORK PLAN

The following timeline will guide the major activities of the collaboration. It has been revised as our work has progressed to reflect new target completion dates for all upcoming deliverables.

Work Plan Outline	
Activity	Timeframe
Hire a Project Manager	November – February 2010
Vera* site visit with a focus on charter building	March 2010
Create collaboration charter	March – August 2010
Vera* site visit with a focus on the needs assessment	September 2010
Plan needs assessment	September 2010 – May 2011
Conduct needs assessment	May – July 2011
Compile findings and analyze themes (ongoing process)	May – July 2011
Write needs assessment report	August – September 2011
Vera* site visit with a focus on strategic planning	September 2011
Create strategic plan	September – October 2011
Implement strategic plan	October 2011 – September 2012

* Vera Institute of Justice is a national organization that provides Intersections with technical assistance and training during the grant period to create the grant deliverables and to ensure the highest quality of systems change.

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Appendix A

A Note about the Appendix

Please note, many of the documents in the appendix are considered to be templates. In an effort to prevent redundancy and repetitiveness for the reader, we have combined many of the forms that would otherwise only vary slightly. For example, we found that the recruitment scripts for survivors, people with disabilities, family caregivers, staff, volunteers, and interns differed minimally. Therefore, we combined all three scripts into one template, highlighting difference based on the audience.

When we implement our needs assessment and use these documents, we will customize the documents for each audience.

The following documents have been combined to serve as a template:

- Recruitment Script: People with Disabilities, Survivors, Family Caregivers, Staff, Volunteers, and Interns
- RSVP Forms
 - Will remove “focus group” option for all interview invitations
 - Will remove “optional interview” option for all individual interview invitations
- “Frequently Asked Questions”: For all groups
- Facilitator Script: Survivors of Sexual Assault, People with Disabilities, and Caregivers, and Staff, Interns, and Volunteers
- Facilitator Scripts: Executive Staff, Leadership
- Questions: Leadership (for both MESA and Imagine!)
- Questions: Board Members (for both MHP and Imagine!)

Appendix B
**Recruitment Script for Survivors, People with Disabilities, Family
Caregivers, Staff, Volunteers, and Interns**

Introduction

Hi, my name is (*name*) and I'm the (*job title*) for (*MESA/Imagine!*).

Overview of the Needs Assessment

I wanted to take a few moments today to ask for your help with a project called *Intersections*. *Intersections* is the name of a collaboration between MESA and Imagine! to improve services for people with disabilities who have been sexually assaulted. (If asked, we define sexual assault/abuse as anything sexual that happens to someone without their permission.)

- *For Imagine! staff, people with disabilities, and family caregivers:* MESA stands for Moving to End Sexual Assault and is the rape crisis center for Boulder and Broomfield counties.
- *For MESA staff/volunteers/interns and survivors:* Imagine! provides support and services for people with developmental disabilities in Boulder and Broomfield counties.

For all:

Both organizations came together because of a three-year federal grant from the Office on Violence Against Women. The grant provides a very unique opportunity for our two organizations to develop a strong partnership that, in the end, will work to provide the best services possible for people with disabilities who've been sexually assaulted.

Both organizations will be conducting a needs assessment and we're asking a number of different groups of people to participate, either by being in a focus group or by doing an individual interview. The people we're including in the needs assessment are:

- Board members
- Management and executive staff
- Staff members of both agencies
- MESA interns and hotline volunteers

- Sexual assault survivors who are clients of MESA
- People with disabilities who receive services from Imagine!
- Family caregivers of Imagine! clients.

Once the needs assessment is complete, we will be writing a report on the findings that will be shared with collaboration members from both organizations, Vera, who provides our technical assistance, and the Office on Violence Against Women, who provides our funding. After that, we will be developing a strategic plan and then implementing strategies at both organizations to make our services safer and more accessible for survivors of sexual assault with disabilities.

Focus Group Invitation

For staff, volunteers, interns, survivors, and people with disabilities:

So my purpose is to invite you to be part of the needs assessment, by participating in a focus group. [*For survivors/people with disabilities: A focus group is when a group of people get together and answer some questions.*] The focus group will include a minimum of 3 people and a maximum of 8 people, and will be a group of [*insert individual role, such as staff/volunteer/clients/etc.*].

We hope to learn what both MESA and Imagine! can do to improve how we serve people with disabilities who have experienced sexual assault. We will not be asking about any specific experience of sexual violence that you or someone you know has been through. Although you or someone you know may have experienced some kind of abuse in the past, we will not be talking about that during this group.

For staff, volunteers, and interns only:

We want to learn what both organizations are currently doing, and what we can do better in how we respond to survivors with disabilities. We're asking for your help in identifying what you feel is working well and what we could do better at both organizations for clients with disabilities who have experienced sexual assault. Our goal is to make services at both MESA and Imagine! safer, more welcoming, and more accessible. Your input as a [*insert their job title or group they belong to*] will be critical in helping us do that.

It's important to note that we are not recruiting people with disabilities who are survivors of sexual assault. Rather, we'll be talking to groups of Imagine! clients, as well as groups of MESA clients who are survivors, about how they access services generally in the community and what works or doesn't work for them.

For people with disabilities:

We want to learn from you what it is like as a person with a disability to access services in your community. Our goal is to make services at both MESA and Imagine! safer, more welcoming, and more accessible. Your input as a person with a disability will be critical in helping us do that. The purpose of meeting with you will be to find out what you think is helpful to you when you're trying to get services in the community.

For survivors:

The purpose of our focus group with you as a survivor will be to find out what you think is helpful to you when you're trying to get services in the community. We're specifically interested in your experience of seeking services or support in your community for survivors of violence and abuse. Our goal is to make services at both MESA and Imagine! safer, more welcoming, and more accessible. Your input as a survivor will be critical in helping us do that.

For the purpose of this focus group, we will not be recruiting anyone who also receives services from Imagine!. Does this apply to you?

If yes: Continue with script.

If no: Thank them for their time and let them know that there will be other opportunities at MESA in the future that we will let them know about.

Interview Invitation

For family caregivers:

So my purpose is to invite you to be part of the needs assessment, by participating in an individual interview. The purpose of an interview with you is to learn what you think is helpful or not helpful when you're trying to get services in the community as a family caregiver of a person with a limited ability to communicate. Our goal is to make services at both MESA

and Imagine! safer, more welcoming, and more accessible. Your input will be critical in helping us do that.

Although you and/or your family member may have experienced violence in the past, we will not be talking about that during this meeting. We only want to know what it is like for you as a caregiver for a person with a disability in seeking services or support in the community for your loved one.

Our Process

For all:

A few things you should know are:

- [Focus groups will last 1½ hours./Interviews will last 1 hour.]
- *For focus groups only:* The focus group will have about 3-8 people from [MESA/Imagine!]. You may know someone in the group.
- The meeting will take place at: [Date/Time].
- *For staff:* This will be part of regular paid work time.
- *For staff, volunteers, and interns only:* Both MESA and Imagine!'s leadership teams have been involved with this project from the start. They value input and opinions from all layers of the organization and fully support your being a participant in one of the focus groups.
- Being in the [focus group/interview] is completely up to you.
- You can change your mind at any time and decide not to be in the group.
- If you choose to be in a group, you can answer the questions or not answer them.
- *For survivors, people with disabilities, and family caregivers:* There are no consequences to any services you(r family member) receive from [MESA/Imagine!] whether you choose to be in the group or not.
- *For staff, volunteers, and interns:* There will be no consequences to your status with [MESA/Imagine!] whether you choose to participate or not.

- If you come to the [focus group/interview], we assume you are agreeing to participate. You can leave at any time if you don't want to participate anymore.
- *For staff, volunteers, and interns:* For the most part, focus groups will take place during regularly scheduled work hours and last an hour and a half.
- What you say will be kept confidential, which means:
 - There will be someone taking notes on a computer, but no one will write down your name and will not share who said what.
 - Any notes from our meeting will be kept private and only the person who is taking notes will be able to see them.
 - Once the project is finished, the notes will be destroyed.
- *Exceptions to confidentiality:* To ensure that you have all of the information about participating in this group, it's important for you to know that there are some exceptions to confidentiality. While the questions we will be asking you are not intended to elicit any personal or professional stories of violence or abuse, we want you to have all of the information necessary to make an informed decision about participating.
 - **Mandatory Reporting:** Colorado is a mandatory reporting state for people who are under 18 years old. This means that if you talk about a specific instance of abuse or neglect against a minor, I will be required to report this information to law enforcement if I learn about the abuse/neglect of a minor as well as any of your identifying information, such as your name, address, or phone number. I will not be asking you for any of that information today. Also, if you talk about sexual assault against a minor, and the perpetrator is still a person in a position of trust as it relates to children, I will be required to report this information as well. If I need to make a report, I'll let you know.

For Imagine! employees/caregivers only: Also, your M.A.N.E. reporting requirements are still in place during our meeting today. Although we prefer you not discuss any instances regarding clients of Imagine! here, if you do we will assume you have

already fulfilled your reporting requirements, and will not be reporting this information to Imagine!.

- Threats to yourself or others: If you make a specific threat to harm yourself or someone else that reaches the level that we feel is serious, Colorado statute and MESA require us to report this if there is significant threat, either to Emergency Psychiatric Services, law enforcement or to the person you are threatening.

For survivors and people with disabilities: If you decide you want to report one of these things and you want help with that there will be a counselor that you can talk to in private to help you.

- All of the information we collect will be used for a written report. You will only be identified by the organization and group you work for. For example: “Direct Care staff from Imagine! said...”

Personal Care Assistant

If you have your own personal care assistant/residential counselor, they can bring you to the focus group, but they can't be in the room with you during the group. They can wait for you outside of the group and can be available for you at any time if you need help outside of the group. If you need a personal care assistant during the group, we will provide one for you.

Safety

For survivors and people with disabilities:

As I said before, being in this focus group is completely up to you. If you feel that being in the focus group will make you feel unsafe or uncomfortable, we suggest that you don't participate. During the focus group, we will not be asking anyone to share any personal stories they may have of abuse or assault. Again, the focus will be on your experience in trying to get help and services in the community.

If you'd like to help but don't want to be in a group, you can be in a one-on-one interview instead.

We also want you to know that if you would like to talk to someone for emotional support or for any other reason during or after the group, a counselor will be available in a private area.

For staff, volunteers, interns, and family caregivers:

As I mentioned before, participation in this [focus group/interview] will be completely up to you. Just like participation is voluntary and confidential for you, it's also voluntary and confidential for the people you serve. To ensure everyone's privacy is protected, we request that you don't ask those you serve or work with if they choose to participate or not, or anything else about what they say.

FAQ

For staff, volunteers, interns, and family caregivers:

(Hand out FAQ form) I am now going to hand out a list of Frequently Asked Questions. This form will provide you with answers to any questions you have. Please feel free to read this now or take it with you. You may use it to refer to any questions you may have about this process. You are also welcome to contact the Project Manager of this grant if you have additional questions. Her information is listed on the final page of this document.

For survivors, people with disabilities:

I am now going to start handing out some forms regarding our process. I am going to ask for all of these forms back today before I leave. The first form is the Frequently Asked Questions. *(Hand out the FAQ.)* This form will provide you with answers to many of the questions you may have. However, if you have any other questions after today you are welcome to contact the Project Manager for this project. I'll give you her contact information in a moment. Feel free to take a few minutes to read through this. *(Let invitee read through the document and ask any questions they have.)*

Registration

Now I'd like to talk about how you can sign up for either a focus group or individual interview. I've brought a sign-up form.

(Hand out the RSVP form, then read through them with the individual.)

Please note, we will ask for your first name on this RSVP form. This form will go directly to the Project Manager for the grant, who will keep it locked up at all times. This way we can know you're coming and can make sure you get what you need when you arrive at the meeting. The RSVP forms will be shredded before the meeting, and there will be no record that you were there in order to maintain your anonymity.

So, on the RSVP form, you see that you can agree to participate in the focus group, in an individual interview, or not participate. Again, **participation is totally voluntary**.

Do you know right now if you want to participate? (y/n)

For focus group invitations:

- *If yes:* Do you want to be in the group or do you want a one-on-one interview?
 - *If they agree to participate in a focus group: Indicate this on the RSVP form and move to next section.*
 - *If they prefer a one-on-one interview: Go over the list of optional dates/times of individual interviews and indicate this on the RSVP form.*
- *If no: Go to concluding remarks.*

For family caregivers:

- *If yes: Please indicate this on the RSVP form and move to next section.*
- *If no: Go to concluding remarks.*

Meeting Reminder Options

Please be sure to indicate if you would like a reminder for the meeting.

(Show Meeting Reminder Card.) If you'd like, you can take this card with you as a reminder of the date/time of the meeting and the Project Manager's first name and phone number in case you think of any questions or need to reschedule. The Project Manager's voicemail is confidential in case you want to leave a message. Would you like to take a card?

(If the invitee would like the card and has agreed to participate in a focus group or interview, complete the date, time, and location directly on the card before handing it to them.)

For family caregivers:

If you have any other questions or need to cancel or reschedule for any reason, I can give you the number to the Project Manger of this grant. The Project Manager's phone number is to a voicemail at Imagine!, which is confidential in case you want to leave a message.

Accommodations

Please be sure to indicate any accommodations that you would like.

(Review the Accommodations section on the RSVP form.)

If you need someone to be in the room with you to provide you any help, like using the restroom, getting refreshments, finding a comfortable place to sit, or anything else, just a reminder, your own personal care assistant cannot be in the room with you, but can wait outside. If you would like us to provide an alternate PCA for you, check "PCA" on the RSVP form. You can still have your own PCA at the meeting waiting outside, and you don't need to check anything.

Incentives

For survivors and people with disabilities only:

As a thank you for participating, we will give you a \$10 gift card to Target at the beginning of the meeting. You will receive this gift card at the beginning of the meeting. If you'd rather not take it with you at that time, I or another staff person can hold on to it for you and you can get it back at any time.

Refreshments will be offered during the meeting also.

For staff, volunteers, and interns:

Now, the most important thing you need to know is that for all of the focus groups, we'll provide refreshments!

(Give time for registration forms to be completed and collected.)

For family caregivers: No incentives will be provided.

What questions do you have?

(Give time for RSVP forms to be completed and collected.)

Conclusion

For all:

Thank you so much for your time.

Appendix C

Recruitment Email Template for Leadership and Executive Staff

The following email will be sent by the Project Manager.

Dear **[name]**,

The purpose of this email is to invite you to be part of a needs assessment for Intersections, the collaboration between Moving to End Sexual Assault (MESA) and Imagine!.

My name is (Project Manager's name) and I am the Project Manager for Intersections. As you know, MESA and Imagine! received a three year grant from the U.S. Office on Violence Against Women to improve services in Boulder and Broomfield Counties for people with developmental disabilities who have been sexually assaulted. This grant provides a unique opportunity for our two organizations to develop a strong and sustainable partnership.

We are now in the second year of the grant and beginning a comprehensive needs assessment to find out what both MESA and Imagine! are currently doing well and what we could do better to create safe, accessible, and responsive services for sexual assault survivors with disabilities.

We are asking a number of different groups of people to participate in the needs assessment, either by being in a focus group or interview. They include board members, leadership, and staff members of both organizations, in addition to sexual assault survivors, family caregivers, and people with developmental disabilities. The findings from the needs assessment will help us develop the goals for our strategic plan, which will provide the foundation for the service improvements for both organizations.

For individual interview requests only:

Because of your position as the *(insert job title)*, we would value your unique insights on this project. We would appreciate the opportunity to hear your thoughts through an individual interview. The interview will cover areas such as organizational culture, policies and procedures, organizational challenges, and staff training as they relate to meeting the needs of survivors with disabilities. The interview will be scheduled at your convenience within the next four weeks.

For small group interview requests:

Because of your position as the *(insert job title)*, we would value your unique insights on this project. We would appreciate the opportunity to hear your thoughts. Specifically, we would like to invite you to participate in a small group interview with *[name(s) of other invitee(s)]*. The interview will cover areas such as organizational culture, policies and procedures, organizational challenges, and staff training as they relate to meeting the needs of sexual assault survivors with disabilities. The interview will be scheduled within the next four weeks.

In addition, we would like you to know the following logistics about the interview:

- Interviews will last approximately [*For executive staff: one hour/for leadership: one and a half hours*].
- There will be someone at each interview typing up all of the comments, but you will not be personally identified or linked to any specific comment.
- We will take all of the information we collect and put it into a summary report. You will only be identified by the organization and group you work with. For example: “Leadership from Imagine! said...”
- All of the information gathered will be kept in either a password protected computer or a locked file at MESA. That information will be used in summary form for the written needs assessment report.
- The findings from the needs assessment will help us develop the goals for our strategic plan, which will provide the foundation for service improvements at both MESA and Imagine!.

- While we will not be asking you questions about personal or professional stories regarding violence or abuse, we would like to remind you of the exceptions to confidentiality. Those are: Mandatory Reporting of child abuse or neglect and Threats to Self or Others. [For Imagine! only: Also, if you mention anything that meets M.A.N.E. reporting requirements, we will assume you have already reported this information and will not be doing so on your behalf.]

For small group interview requests: If you'd like to participate but prefer an individual interview for any reason, please let us know and we will be happy to arrange it.

I have attached an FAQ sheet with more details, or just email me if you have additional questions.

RSVP to this invitation:

- If you know now that you'd like to attend, please reply to this email with the best date/time for your interview. See below for a list of all available dates/times.
- *For interviews with more than one person:* If you prefer to participate in an individual interview rather than participate with your colleague, please specify that in your email back.
- If you would like to receive a reminder of the date/time we schedule our interview, please specify in your reply, as well as the best way to reach you.
- To ensure that our process is as accessible as possible for all participants, we are making the following accommodations available to all invitees. If you would like to request any of these, please specify in your email back to me.

Available Accommodations:

- American Sign Language (ASL) Interpretation
- Spanish Interpretation
- Other language interpretation (please specify)
- Listening device
- Large print
- Wheelchair accessibility
- Alternate Personal Care Attendant (PCA)

- Please note: If you need any personal support during this meeting, check “PCA” on the RSVP form. The person we provide you with will not be your own personal care attendant, and instead will be another person to help you during the meeting. You are welcome to bring your own PCA, but they will not be permitted in the room during the meeting. You can utilize them any time outside of the meeting.

Scheduling our interview

Please review the dates/times below and choose the time that works best for your schedule. If none of the times work for you, please let me know and I can send alternatives.

List dates/times for interviews here.

Your participation is critical to the success of this project. I thank you in advance for your commitment to our work. I look forward to hearing from you.

Sincerely,

Name of Project Manager

Title(s)

Appendix D
Recruitment Email Template for Board Members

The following email will be sent by the Project Manager.

Dear **[name]**,

My name is (Project Manager's name) and I am the Project Manager for Intersections. Moving to End Sexual Assault (MESA), the local rape crisis center for Boulder and Broomfield Counties and Imagine! have received a three-year grant from the U.S. Office on Violence Against Women to improve services in Boulder and Broomfield Counties for people with developmental disabilities who have been sexually assaulted. The name of our project is *Intersections*. This grant provides a unique opportunity for our two organizations to develop a strong and sustainable partnership.

The first task we were assigned was to develop a collaboration Charter, which outlined our agreements for working together. We are now in the second year of the grant and beginning a comprehensive needs assessment to find out what both MESA and Imagine! are currently doing well and what we could do better to create safe, accessible, and responsive services for sexual assault survivors with disabilities.

We are asking a number of different groups to participate in the needs assessment including board members, executives, leadership, and staff members of both organizations, in addition to sexual assault survivors, family caregivers, and people with developmental disabilities. The findings from the needs assessment will help us develop the goals for our strategic plan. This plan will guide our implementation activities for creating systemic changes for improved service delivery at both organizations going forward.

Since you are a member of the [Services Committee/Executive Committee] of the [Imagine!/MHP] Board of Directors, we would appreciate the opportunity speak to you for 30 minutes at the start of your committee meeting on (*date*). We would like to ask for your support of this project and get any input you may have toward its success.

Before the meeting, we would like you to know the following:

- Your participation is strictly voluntary. If you choose not to participate, please refrain from coming to the first 30 minutes of the meeting.
- If you agree to be at the meeting, you can participate at whatever level you're comfortable with.
- In addition to the meeting facilitator, there will be a note taker writing down all of the comments, but no participant will be personally identified or linked to any specific comment.
- The information we collect today will be put it into a summary and linked to the organization and group you are in. For example: "Board members of from Imagine! said..."
- All of the information gathered will be kept in either a password protected computer or a locked file at MESA.
- The findings from the needs assessment will help us develop the goals for our strategic plan, which will provide the foundation for service improvements at both MESA and Imagine!.
- While we will not be asking you questions about personal or professional stories regarding violence or abuse, we would like to remind you of the exceptions to confidentiality. They are Mandatory Reporting, (*for Imagine! only*: M.A.N.E. Reporting), and Imminent Threats to Self or others.

If you'd like to participate but prefer an individual interview for any reason, please let us know and we will be happy to arrange it.

I have attached a Frequently Asked Questions sheet with more details, or just let me know if you have additional questions.

RSVP to this invitation:

- If you know now that you'd like to attend, please reply to this email.
- If you prefer to participate in an individual interview, rather than in a group, please specify that in your email back.
- If you would like to receive a reminder of the date/time of our attendance at your board committee meeting, please specify in your reply, as well as the best way to reach you.

- To ensure that our process is as accessible as possible for all participants, we are making the following accommodations available to all invitees. If you would like to request any of these, please specify in your email back to me.

Available Accommodations:

- American Sign Language (ASL) Interpretation
- Spanish Interpretation
- Other language interpretation (please specify)
- Listening device
- Large print
- Wheelchair accessibility
- Alternate Personal Care Attendant (PCA)
 - Please note: If you need any personal support during this meeting, check “PCA” on the RSVP form. The person we provide you with will not be your own personal care attendant, and instead will be another person to help you during the meeting. You are welcome to bring your own PCA, but they will not be permitted in the room during the meeting. You can utilize them any time outside of the meeting.

Your participation is critical to the success of this project. I thank you in advance for your commitment to our work. I look forward to hearing from you.

Sincerely,

Name of Project Manager

Title(s)

Appendix E

Group: _____ Recruited by: _____

Focus Group/Interview RSVP Form

Please complete this form. All the information you provide is confidential. Once you fill out this form, please return it to your recruiter.

1st Name Only: _____

Please check **ONE** of the following:

___ I wish to participate in a [**focus group/interview with my colleague**]
on:

_____ at _____ at _____.
(date) (time) (location)

___ I wish to participate, but only in a **one-on-one interview**.

Date/time/location of one-on-one interview: __/__ @ __:__ @
_____. *(Pick a date/time from list provided.)*

___ I do **not** wish to participate.

Meeting Reminder Options:

___ I would like a Meeting Reminder Card.

___ I would like a meeting reminder from the person who recruited me.

Best way to contact me (Phone/Email): _____

Best time to contact you: _____ Is it safe to leave a message: Yes/No

PLEASE SEE THE BACK FOR ACCOMMODATION REQUESTS!

We will do our best to make every accommodation necessary to ensure your full participation.

Please place a check next to any accommodation that you would like during your focus group/interview. Check all that apply for you.

Yes, I need this accommodation.	Accommodation:
	American Sign Language (ASL) interpreter
	Spanish interpreter
	Other language interpretation (for individual interviews only): _____
	Listening device
	Large print
	Wheelchair accessible
	Alternate personal care attendant (PCA)*
	Dietary concerns/food allergies (for focus groups only) (please specify): _____

* Your own PCA is not permitted in the room during the focus groups/interviews.

Questions: Audrey Reich @ 720.406.3633 or areich@mhpcolorado.org

Appendix F

Frequently Asked Questions

What is INTERSECTIONS?

For board members, executive staff, leadership, staff, volunteers, and interns:

Intersections is a collaboration between Moving to End Sexual Assault (MESA), the rape crisis center for Boulder and Broomfield Counties, and Imagine!, the Community Center Board and service provider for people with disabilities in Boulder and Broomfield counties. Intersections has been created to improve and enhance services for people with disabilities who have experienced sexual assault. Intersections has received a three-year federal grant from the Office on Violence Against Women. The grant funding provides a unique opportunity for our two organizations to develop a strong, long-term partnership and to assess our two organizations to determine what we are doing well and how we can improve our current systems to best serve individuals with disabilities who have experienced sexual violence.

For survivors, people with disabilities, and caregivers:

Intersections is a collaboration between Moving to End Sexual Assault (MESA), the rape crisis center for Boulder and Broomfield counties, and Imagine!, the Community Centered Board and service provider for people with disabilities in Boulder and Broomfield counties. Intersections has been created to improve and enhance services for people with disabilities who have experienced sexual assault or abuse.

Why is this important to our community?

For all:

Sexual abuse of people with disabilities is at epidemic levels. Research shows that 83% of women with developmental disabilities have been sexually assaulted at some point in their lives.⁶ Of those individuals with developmental disabilities who have been sexually assaulted, 49% experienced 10 or more abusive incidents in a lifetime,⁷ and 96% knew the

⁶ Johnson, I., Sigler, R. 2000. "Forced Sexual Intercourse Among Inmates," *Journal of Interpersonal Violence*. 15 (1).

⁷ Valenti-Heim, D., Schwartz, L. 1995. *The Sexual Abuse Interview for Those with Developmental Disabilities*.

perpetrator.⁸ In addition to facing an increased risk for sexual assault, women with disabilities may face difficulties escaping abusive situations because they often depend on their abuser to help them with daily routines and basic life skills. This dependency, on top of potential physical limitations, communication barriers, fear, and isolation, can make leaving an abusive situation and reporting abuse extremely difficult.

Why are both organizations committed to this project?

For all:

Intersections envisions that sexual assault survivors with disabilities will be met with trauma-informed and disability-aware services. Services will be responsive, seamless, and fully accessible, provided by a network of highly-skilled professionals who are comfortable working with and honoring the choices of people with disabilities who survive sexual assault. Sexual assault survivors with disabilities will feel safe, in control, valued, heard, and respected. Our community will understand the impact and complexities of sexual assault and will share ownership for supporting survivors with disabilities. If we are successful in our collaborative efforts, it will benefit both MESA and Imagine!, the people we serve, and our community.

What are the main goals of *Intersections*?

For all:

- Formalize the connections between MESA and Imagine! to open both organizations' systems to each other's resources and knowledge in order to build a seamless and dynamic system of support for sexual assault survivors with disabilities.
- Identify, develop, and enhance policies and procedures within both organizations to improve our "response-ability" and accessibility to sexual assault survivors with disabilities to receive timely information, advocacy, and support.
- Increase the awareness, skills, and comfort level of staff and volunteers at MESA and Imagine! to work directly with sexual assault survivors with disabilities.

⁸ Nosek, M. & Howland, C.(1998, February). *Abuse and Women with Disabilities*. Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/ Pennsylvania Coalition Against Domestic Violence. Retrieved from: <http://www.vawnet.org>

Who has been doing the work on this project?

For all:

Our collaboration is made up of a core team of representatives from each organization, who have been meeting weekly for over a year.

Additionally, for board members, executive staff, leadership, staff, volunteers, and interns:

Team member from MESA: Marti Hopper, Training and Education Coordinator. Team member from Imagine!: Julie Hartman, Assistant Director of Family Services. Additionally, leadership from both organizations meet with the team members once per month. Executive Committee members from MESA: Jill McFadden, MESA's Team Leader and Emily Tofte, Program Manager. Executive Committee members from Imagine!: Mark Emery, Executive Director and CEO; Jan Rasmussen, Director of Family Support; Hanni Ruehrdanz, Staffed Homes Manager; and Marianne Nick, Director of Case Management. The Project Manager for this grant is Audrey Reich, who is employed by MESA but equally represents both organizations.

Why do a needs assessment?

For all:

We hope to gain knowledge about strengths and areas for improvement regarding the current response systems and services for individuals with disabilities who have experienced sexual violence.

Who are we asking to participate?

For all:

A wide variety of clients and staff from both organizations will be asked to participate in either a focus group or individual/group interview. Specifically included will be MESA and Imagine! leadership; MESA staff, Imagine! staff (group home staff/coordinators and case managers.); Imagine! Board of Directors (Services Committee); Mental Health Partner's Board of Directors (Executive Committee); MESA hotline volunteers and super group leaders; and MESA clinical interns. Additionally, we will be engaging survivors of sexual assault who are clients of MESA and individuals with developmental disabilities who are clients of Imagine!.

Why do you need my input?

For executive staff and leadership:

We are looking for information on safety, accessibility and areas in need of change in both organizations. Your unique perspective as part of leadership with [MESA/MHP/Imagine!], it is crucial to understand how this project fits into the strategic direction of your organization.

For staff, volunteers, and interns:

We are looking for information on safety, accessibility and areas in need of change in both organizations. In order to make improvements, it is important that we hear from [specific group we are engaging] who are familiar with the organization; current training, policies, and procedures; current services being provided; and ideas about how things can be improved.

For survivors, people with disabilities, and caregivers:

We are looking for information on safety, accessibility and areas in need of change in both organizations. For improvements to be made, it is important to include input from the people receiving services who can talk about what makes a service safe, accessible, and comfortable. That way we can ensure that the changes we make are informed directly from the voices of those we serve.

For board members:

For improvements to be made, it is imperative that we hear your feedback and ideas. It is only through your commitment to our work that we will be successful in our endeavors to improve services for sexual assault survivors with developmental disabilities.

What are the expectations of my involvement?

For survivors, people with disabilities, caregivers, executive staff, leadership, staff, volunteers, and interns:

Participate in a [*focus group or interview*] on a date and time selected by Intersections. Participation includes answering questions from your own personal knowledge and experience and providing any ideas you may have on how things could be improved. *For focus groups only:* We also ask that

you maintain confidentiality of what is shared by others if you are in a meeting with other participants.

For board members:

Participate in a 30 minute discussion at the beginning of your next committee meeting. Participation includes answering questions from your own personal knowledge and experience of your organization and providing any ideas you may have on how things could be improved. We also ask that you maintain the confidentiality of what is shared by others during your participation. During this meeting we will ask for your formal support of our project through the making of a motion within the Board.

Additionally for focus groups/interviews with more than one person only: If you would like to participate but do not want to be in a group, you have the option to participate in an individual interview instead.

Do I have to answer every question?

For staff, volunteers, interns, people with disabilities, survivors, and family caregivers:

You are welcome to answer or skip any question that is asked. You can discontinue participation and leave at any time. We hope you will talk about how we can make changes in our organizations to improve our ability to provide safe, assessable, and welcoming services at both the MESA and Imagine!.

This question/answer will not be provided to leadership, executive staff, and board members.

When and where will the focus groups/interviews be held?

For survivors, people with disabilities, caregivers, staff, volunteers, and interns:

Dates/times are pre-determined and yours will be held on: _____ at ____:_____ at (location).

For board members:

We will attend the first 30 minutes of your next committee meeting on _____.

This question will not be offered to caregivers, executive staff, and leadership, as we will be individually scheduling with each participant.

Who should I contact if I can't come?

For all:

Please contact the person who recruited you from your organization or the Project Manager (information below) if any conflicts arise. If possible, we will arrange an alternate time and date.

Are responses confidential?

For board members:

Your typical board meeting documentation process will still be in place.

(Insert this answer in with the following:)

For focus groups:

All individual responses will be kept confidential by those conducting the meeting and recording notes. All participants are encouraged not to provide personal information that they do not wish to have shared with the group or others. All participants are asked to respect each other's confidentiality. The collaboration will not require signed written consent forms and will not keep written records of participation.

For all:

During the meeting, there will be a note taker who will be typing information on a laptop. Names and other personally identifying information will not be used or linked to what is said in any of the written information. Any information typed up will be summarized by group based on themes and not based on individual responses. Once this information has been collected, it will be shared with the collaboration members prior to being put into a report of all needs assessment findings. All RSVP forms and other notes will be secured in a lock file cabinet at MESA and will be destroyed once the needs assessment has been completed.

What if I want to help but don't want to be in a group?

For focus groups/interviews that involve more than one participant only:

If possible, we prefer that you participate in a [focus group/interview with your colleague] with individuals from your similar field and expertise.

However, we respect and understand that that is not always comfortable or possible. In such cases, we are happy to schedule an individual interview with you, which will include only you, the facilitator, and a note taker. Your participation and individual information/responses will be kept confidential (see "Are responses confidential?"). If you would prefer an individual interview, please speak with your recruiter or the Project Manager (see below for information).

This question/answer will not be provided to anyone recruited for an individual interview.

What should I tell people about this group if they ask?

For Staff, Volunteers, Interns, Survivors, People with Disabilities, and Caregivers:

You can tell them that you are helping MESA and Imagine! by providing information on how we can provide better services for everyone at both organizations. To ensure that we are respecting everyone's privacy and confidentiality, we ask that you not share with others what anyone talked about during the [interview/focus group] you participated in and that you keep all participation information confidential.

This question/answer will not be provided to leadership, executive staff, and board members.

How is this information going to be used?

For all:

Intersections will be using the information gained from the needs assessment to create a summary report. We will then use this information to develop our strategic plan, which will guide us in creating and implementing ways in which we will make our services and organizations safer, more accessible, and more responsive for individuals with disabilities who have experienced sexual assault. Once the strategic plan has been

developed, both organizations, including staff and leadership, will be involved in implementing the goals from the strategic plan.

Who will get the information?

For all:

A summary of each focus groups and interview will be provided to collaboration members at both organizations while we are in the process of collecting information. As stated earlier, identifying information on participants will be kept completely confidential by those conducting meetings. Once the needs assessment is complete, the collaboration will write a summary report. This report will go to our funding source, which is the US Department of Justice Office on Violence against Women, along with Vera Institute of Justice (who provides our collaboration with technical support). The needs assessment report will also be shared with the collaboration members from both organizations.

The choice of whom to further share the summary report with at each organization is up to the collaboration. When we begin to make changes in our organizations, we plan to share the changes that we are making with the public, through media outlets such as press releases, newsletters, or social media.

Will you be referring to the organizations by name in the final report?

For all:

In the final report, which will be for internal use in planning and also will be shared with the Office on Violence Against Women, we will be referring to each organization by name. The needs assessment is a pro-active process designed to help both organizations make the changes necessary to provide seamless services to people with disabilities who have experienced sexual assault. In order to effect such changes, the results will need to be linked to the appropriate organization.

What is mandatory reporting and how does it apply?

For all:

Questions asked during the needs assessment are not intended to illicit stories of your own experience of violence or stories of violence involving specific individuals you may have worked with.

For board members, executive staff, leadership, staff, volunteers, and interns:

If you are a mandatory reporter due to your status with [MESA/Imagine!] your requirements will apply during the needs assessment process. *[For board members only:* If you are not a mandatory reporter, please keep in mind that those who are participating in the [focus group/interview] with you will be mandatory reporters. Individuals conducting [focus groups/interviews] may be mandatory reporters as well.

For all:

Colorado is a mandatory reporting state for people who are under 18 years old. This means that if you talk about a specific instance of abuse or neglect against a minor, those conducting the meeting will be required to report this information to law enforcement if they learn about the abuse/neglect of a minor as well as any of your identifying information, such as your name, address, or phone number. Also, if you talk about the abuse or neglect of a minor, and the perpetrator is still a person in a position of trust as it relates to children, they will be required to report this information as well. If a report does need to be made, those making the report will let you know.

Additionally, for Imagine! Board Members, executive staff, leadership, staff, volunteers, and interns:

Also, your Mistreatment/Abuse/Neglect/Exploitation (M.A.N.E.) reporting requirements are still in place during our meeting. Although those conducting the meeting prefer you not discuss any instances regarding clients of Imagine! during the meeting, if you do, it will be assumed that you have already fulfilled your reporting requirements and it will not be further reported to Imagine!.

What are “intent to harm” and “duty to warn” and how do they apply?

For board members, executive staff, leadership, staff, volunteers, and interns:

Another exception to confidentiality is “intent to harm self or others”. Questions asked during the needs assessment are not intended to illicit stories of personal violence involving specific individuals you may know.

However, if those facilitating these meetings learn of an imminent threat to self or others, they will be required to report this.

For survivors/people with disabilities/family caregivers:

Questions asked during the needs assessment are not intended to illicit stories of your own experience of violence or stories of violence involving specific individuals you may know. If you make a serious threat of imminent harm toward yourself or another specific person, Colorado statutes and our organizational policies require us to report to law enforcement and to the person you are threatening.

If you believe that your participation in this group might escalate thoughts of suicide or harming others, we ask that you skip the group and take care of yourself. If you need additional support please speak to your counselor or call Emergency Psychiatric Services at 303-447-1665.

What are the safety considerations for my participation?

For survivors, people with disabilities, and family caregivers:

We are making every effort to make this process safe and comfortable for everyone. But if you feel uncomfortable or unsafe for any reason, you may leave at any time. Because the nature of this topic can be emotionally triggering, we will have a list of local resources, should you find that you would like additional support.

Additionally for survivors and people with disabilities:

Additionally, at each focus group and optional interview, a trained counselor will be immediately available if you find you are in need of emotional support. The counselor will be in a separate room from the focus group and whatever is discussed will be kept confidential, with the exception of mandatory reporting/duty to warn requirements.

This question/answer will not be provided to staff, leadership, executive staff, and board members.

What accommodations are available to support my participation?

For all:

If you choose to participate, we ask that you [complete an RSVP/reply to this email] form. All available accommodations are listed, and you are welcome to check all that apply to you. Please feel free to contact the Project Manager (information below) if you have any questions or if you have a request that is not listed. We will make every effort to accommodate those participating.

If I have a Personal Care Attendant (PCA) can they come with me?

For all:

Your PCA is welcome to bring you and we will have a separate room or space for them to wait for you. If you need someone with you while you are in the meeting, we can provide you with an alternative PCA. [Please check this accommodation on the RSVP form if this applies to you./Please alert us of this need in your email response.]

How do I participate?

For all:

We ask that you [complete a RSVP form and turn it in to your recruiter/respond to this email] prior to your involvement in this needs assessment].

What will I get in return?

This will not be included for board members, as we will not be providing refreshments or incentives for their participation given that we are joining their meeting.

This will not be included for caregivers, executive staff, and leadership, as we will not be providing refreshments or incentives to those participating in interviews.

For focus groups with staff, volunteers, and interns:

Light refreshments will be provided for all focus group participants. We will not be providing refreshments for optional interviews.

For survivors/people with disabilities:

As a thank you for your participation in the focus group or optional interview, we will provide you with a \$10 gift card to Target. We will be handing these out at the beginning of the focus group/interview. If you decide to leave at any point, you can still keep the gift card no matter what.

Also, light refreshments will be provided for all focus group participants. We will not be providing refreshments for optional interviews.

What if I lose my gift card?

For survivors and people with disabilities only

Once we give you the gift card it will be up to you to keep it safe. We cannot give you a new one if it is lost or stolen.

Who do I contact if I have any additional questions / concerns?

For all:

Project Manager:

Audrey Reich

720.406.3633

areich@mhpcolorado.org

Your Recruiter:

Recruiter name: _____

Recruiter contact info:

Appendix G

Meeting Reminder Card

To be given out during recruitment



CONTACT INFO:
Audrey
Project Manager
720.406.3633

**MEETING
REMINDER**

Date: _____

Time: _____

Appendix H

Facilitator Script for
Survivors of Sexual Assault, People with Disabilities, Family Caregivers,
Staff, Volunteers, and Interns

Check-In Process

*For people with disabilities, survivors, staff, volunteers and interns:
Prior to participants entering the room, the Project Manager will greet each participant and ask for their first name. The purpose for this is to link each individual with any accommodations they have requested.*

*Additionally, for **survivors and people with disabilities**:*

The Project Manager will also provide them with their \$10 Target gift card. The Project Manager will then direct them to the room where the focus group will be held and where the food is.

Entering the Room

The facilitator will greet participants as they enter the room and thank them for coming.

Introductions and Overview

For all

Hi and welcome. My name is [*insert name*], and I'll be the leading our conversation today. Thank you so much for coming.

For survivors, people with disabilities, and caregivers:

The purpose of our conversation today is to find out from you what you think is helpful or not helpful when you're trying to get services in your community.

We're specifically interested in what you think from your lens as a [*survivor of sexual assault, person with a disability, family caregiver*].

For staff, volunteers, and interns:

The purpose of our conversation today is to find out from you what strengths and barriers exist at your organization, and what suggestions you may have for us to improve services for people with disabilities who have experienced sexual assault.

For all:

I'd like to provide you with a brief overview of who we are and why we're here today. As mentioned during your recruitment, MESA and Imagine! have come together to look at how both agencies are currently serving people with disabilities who have experienced sexual assault or abuse.

For survivors and MESA staff, volunteers, and interns:

As a reminder, Imagine! is one of the primary service providers for people with disabilities in Boulder and Broomfield Counties

For people with disabilities, caregivers, and Imagine! staff:

As a reminder, MESA is the rape crisis center for Boulder and Broomfield Counties.

For all:

We are conducting a needs assessment in order to learn what both organizations are currently doing and what we can do better in how we respond to survivors with disabilities. We are holding focus groups and interviews with board members, leadership, staff and volunteers at both organizations, as well as people with disabilities who receive services from Imagine! and survivors of sexual assault who receive services from MESA.

With your input, we'll create a plan for how to improve our services for people with disabilities who have experienced sexual assault. Our goal is to make services at both MESA and Imagine! safer, more welcoming, and more accessible. We're asking for your help in identifying what you feel is working well and what we could do better for clients who use our services.

Who We Are and What We're Doing Here

For all focus groups

As I said, my name is [*insert name*]. I'll be the facilitator and will be asking you the questions. I'd also like to introduce the others who are helping with the group today.

This is [*insert name*], who is here as a "floater" to provide overall help in case any of us need anything during the focus group. Don't hesitate to ask

the floater for any assistance you need, such as leaving the room or getting more food.

This is [insert name], who will be the note taker. [Insert name] will be taking notes on the laptop about what is said during the group discussion. Although [insert name] will be typing what people are saying, [insert name] will not be recording anyone's name or linking anyone to what they say.

For survivors only:

This is ([insert name], who is our counselor for today. Even though we will be focusing on services and not talking about specific instances of sexual assault, we know that these discussions can be difficult for anyone. As a result, the counselor is here for any of you who would like to talk before, during, or after the group today. [Insert name] will be (give location). Our floater today, [insert name], will be happy to show you to the room if you decide you'd like to talk to [insert name]. We will also have a list of local resources available for you, should you want further support after this meeting.

For people with disabilities only:

This is ([insert name], and is our counselor for today. We want you to be comfortable and feel safe during our talk. We will be focusing our conversation today on services in your community. If at any point before, during, or after our meeting you would like to leave the room and talk to the counselor, you are welcome to. [Insert name] will be available in (give location). Our floater today, [insert name], will be happy to show you the room if you decide you'd like to talk to the counselor. The counselor will also have a list of local resources available for you, should you want further support after this meeting.

For all focus groups:

Don't hesitate to ask us for any assistance you need.

Who We Are and What We're Doing Here

For Optional Interviews/Interviews with Caregivers

As I said, my name is [insert name]. I'll be the facilitator and will be asking you the questions.

I'd also like to introduce the other person who is helping with our meeting today. This is [insert name], and she will be the note taker for today. [Insert name] will be taking notes on the laptop about what is said during the discussion. Although [insert name] will be typing what you are saying, [insert name] will not be recording your name. Rather, what you say will be grouped with others.

Don't hesitate to ask us for any assistance you need.

Housekeeping

For all:

If at any point during our conversation today you decide you'd like to leave, feel free to leave the room. The restrooms are located [insert location information here]. If you are here with a Personal Care Attendant who is waiting outside for you and you need them for any reason, please let [*For focus groups: insert name of floater/for interviews: insert "me"*] know and they will escort you to them.

For focus groups:

Please feel free to help yourself to more refreshments at any time. The focus group will last approximately 1½ hours.

For interviews:

The interview will last approximately 1 hour.

Consent, Mandatory Reporting, Confidentiality, & Safety

I'd like to review some important information about consent, mandatory reporting and confidentiality. If you have questions, please be sure to stop me and ask.

1. We will be asking for your ideas and opinions. Because we are not conducting formal research, you will not need to sign a consent form for participating. We are assuming that you are freely choosing to volunteer your time and participate since you came here today. You may leave at any time if you change your mind about being here or if you simply decide you want to leave.
2. I'll be asking a variety of questions. You may choose to answer or not answer any of the questions.
3. We will not be asking you to share any information about any forms of violence or abuse that you or someone you know may have personally experienced. In fact, we prefer that you not share those stories. *For survivors and people with disabilities:* Rather, we will be asking you about what works and doesn't work for you when seeking services in your community as a [person with a disability/survivor of sexual assault]. *For caregivers:* : Rather, we will be asking you about how community service providers can best serve people who are non-verbal. *For staff, volunteers, and inters:* : Rather, we will be asking you about strengths and barriers to providing services to survivors with disabilities at your organization.

For focus groups with survivors and people with disabilities:

However, if you feel you'd like to talk to someone about any form of abuse that has impacted you, as a reminder, we have a counselor, [*name*], who is in [*room*] that you can talk to at any time. We also have a list of local resources available for you to take with you.

For optional interviews with survivors and people with disabilities:

However, if you feel you'd like to talk to someone about any form of abuse that has impacted you, I am a trained counselor and am happy to talk with you once this meeting is over. We also have a list of local resources available for you to take with you.

4. The people working on this project will keep the information that is collected confidential. What I mean by that is that what you say

will be recorded and linked to the type of group you are in, but it will not be linked to you individually. For example, “[MESA/Imagine!] clients said ...” Even if we quote something you say, we will not include your name. No names will be used in anything that [*name of note taker*] is taking down or in any written reports. Also, there will be no consequences for what you say here, either good or bad.

5. As part of this grant, we are required to let you know about any exceptions to keeping what you say confidential. Colorado is a mandatory reporting state for people who are under 18 years old. This means that if you talk about a specific instance of sexual assault against a minor, I will be required to report this information to law enforcement if I learn about the abuse/neglect of a minor as well as any identifying information, such as your name, address, or phone number. I will not be asking you for any of that information today. Also, if you talk about sexual assault against a minor, and the perpetrator is still a person in a position of trust as it relates to children, I will be required to report this information as well. If I need to make a report, I’ll let you know.

The other thing I need to mention is that if you make a specific and significant threat to harm yourself or someone else I may need to report this to law enforcement and/or to the person you are threatening.

For Imagine! employees/caregivers only: Also, your M.A.N.E. reporting requirements are still in place during our meeting today. Although we prefer you not discuss any instances regarding clients of Imagine! here, if you do we will assume you have already fulfilled your reporting requirements, and we will not be reporting this information to Imagine!.

6. [*For focus groups only*] We ask that you respect the privacy of others. Please do not talk about anything that is said in our conversation after you leave today. We want everyone to feel free to share their ideas and comments. With that, we cannot ensure

that your peers here will keep what is said confidential after you leave here. Therefore, we encourage all of you to be mindful of what you choose to share.

7. The information collected from all the group discussions and interviews will be put into a final report. This report will go to our collaboration, the US Office on Violence Against Women, our funding source, and Vera, our technical support for the grant.
8. *[For focus groups only]* We ask that you respect what each person has to say even though you might not agree with it. We also ask that you allow a person to finish speaking before you speak and to be respectful of everyone here. Finally we ask that you take turns and allow everyone to speak who wants to.

What questions does anyone have before we get started?

Again, we assume that you are freely choosing to participate by being here today. As a reminder, you may leave at any time if you change your mind about being here or if you simply decide you want to leave. We are about to begin the questions so if you'd like to discontinue before we get started, you are welcome to leave now with no consequences.

Questions

I'll be asking you some questions which will help guide the conversation. There are no right or wrong answers.

[For focus groups only] I won't be calling on people, and you may choose to answer or not answer any particular question. I'll be sure to pause in between each question to make sure that anyone who wants to speak has a chance.

INSERT FOCUS GROUP OR INTERVIEW QUESTIONS HERE.

Concluding Statement

Thank you so much for your time today and for your help in answering these questions. If you would like any additional information, please ask one of us before you leave today and we will be glad to help.

Appendix I

**Facilitator Script for
Executive Staff, Leadership, and Board Members****Check-In Process**

For Executive Staff/Leadership:

Prior to the start of the interview, the Project Manager will greet the participant(s) and link each individual with any accommodations they have requested, if necessary.

For Board Members:

Prior to participants entering the room, the Project Manager will greet each participant and ask for their first name. The purpose for this is to link each individual with any accommodations they have requested, as needed. The Project Manager will then direct them to the room where the focus group will be held.

Introduction and Overview

For all:

Hi and thank you so much for meeting with us today. My name is [*insert facilitator name*] and this is [*insert note taker name*], and we're both here representing Intersections. I'm [*insert facilitator's job title and organization*] and will facilitate the discussion today, and [*note taker*] will be the note taker.

As you know, [*Moving to End Sexual Assault (MESA)/Imagine!*] received a grant from of the U.S. Office on Violence Against Women to help us improve our services for people with disabilities who have experienced sexual assault.

For MESA/MHP:

Our collaborative partner is Imagine!, one of the primary providers of services for people with cognitive disabilities in Boulder County.

For Imagine!:

Our collaborative partner is Moving to End Sexual Assault (MESA), the rape crisis center for Boulder County].

For MHP Boards only:

Moving to End Sexual Assault (formerly the Boulder County Rape Crisis Team) has been a team of Mental Health Partners since MESA was founded 38 years ago. Imagine! is one of the primary providers of services for people with cognitive disabilities in Boulder and Broomfield Counties and was founded 48 years ago.

For MESA Executive Staff and Leadership only:

Imagine! is one of the primary providers of services for people with cognitive disabilities in Boulder and Broomfield Counties and was founded 48 years ago.

For Imagine! only:

MESA (formerly the Boulder County Rape Crisis Team) has been a team of Mental Health Partners since it was founded 38 years ago.

For both Boards only:

We're here today to ask for your support of this project and to get any thoughts or feedback that you might have for us. As board members, your support and unique insights are critical to the success of the project.

For all:

The meeting today is part of the broader needs assessment that we're doing to find out what is working and not working at each organization, with the ultimate goal of learning how to best serve sexual assault survivors with disabilities. We'll be conducting interviews and focus groups at both organizations with Board Members, executive staff, leadership, staff, volunteers, and interns. We will also be talking with clients of MESA who are sexual assault survivors and clients of Imagine! who are people with disabilities.

With the information that we get from all of these groups, MESA and Imagine! together will create a strategic plan that will identify what both organizations need to do in terms of systems change, such as training, policies, and procedures, to make services at both MESA and Imagine! safer, more welcoming, and more accessible.

Housekeeping

For Executive Staff and Leadership:

This meeting will last approximately one hour.

For Board Members:

This meeting will last approximately 30 minutes.

Consent, Mandatory Reporting, Confidentiality, Safety

For all:

I'd like to review some important information about consent, mandatory reporting and confidentiality. If you have questions, please be sure to stop me and ask.

1. I will not be asking you to share any information about any forms of violence or abuse that you or someone you know may have personally experienced. In fact, we prefer that you not share those stories.
2. The people working on this project will keep the information that is collected confidential. What I mean by that is that what you say will be recorded and linked to the type of group you are in, but it will not be linked to you individually. For example, "MESA/Imagine! leadership said ..."
3. As a reminder, there are some exceptions to confidentiality. Those are: Mandatory Reporting of child abuse or neglect and Threats to Self or Others. [For Imagine! only: Also, if you mention anything that meets M.A.N.E. reporting requirements, we will assume you have already reported this information and will not be doing so on your behalf.]
4. The information collected from all the group discussions and interviews will be put into a final report. This report will go to our collaboration, the US Office on Violence Against Women, our funding source, and Vera, our technical support for the grant.

What questions do you have before we get started?

Questions

For Board:

I won't be calling on people, and you may choose to answer or not answer any particular question.

(Proceed with questions.)

Concluding Statement

Thank you so much for your time today and for your help in answering these questions. If you would like any additional information, please ask one of us before you leave today and we will be glad to help.

Appendix J

Questions for Sexual Assault Survivors

1. How did you learn about services available to survivors of sexual assault?
 - a. Where are good places to distribute or provide information about the services available? (Prompts: Yellow pages online or hard copy, church/temple bulletins, library, retail stores, internet search?)
 - b. In your opinion, which of these ways would be the best choice when reaching out to survivors to let them know of services available to them?

2. As a survivor, think about a time when you sought services in your community. What did the agency or service provider do to help make your experience positive?
 - a. Physical space/location
 - b. Staff behavior, competency, and knowledge
 - c. Confidentiality
 - d. Privacy
 - e. Overall atmosphere, comfort level, and approachability
 - f. Materials/resources

3. On the other hand, what has an agency or service provider done that contributed to making any part of your experience with them a negative one, as a survivor?
 - a. Physical space/location
 - b. Staff behavior, competency, and knowledge
 - c. Confidentiality
 - d. Privacy
 - e. Overall atmosphere, comfort level, and approachability
 - f. Materials/resources

4. An important consideration for many survivors of sexual assault is safety.
 - a. As a survivor, what does safety mean to you?

- b. When you sought services as a survivor, what have service providers done to help you feel safe?
 - c. What did they do that to help you feel more comfortable disclosing or talking about your experience of violence?
 - d. What did they (or other service providers) do that might have made you feel unsafe?
 - i. What did they do that prevented you from trusting them or having confidence in them?
5. I'd like to focus now on confidentiality in the context of seeking services as a survivor of sexual assault.
 - a. First of all, what does confidentiality mean to you?
 - b. How important is confidentiality when you're seeking or receiving services?
 - c. In what instances would it be okay to share identifying information and the details of your sexual assault with other organizations?
 - i. After signing a one-time release of information as part of an intake process, allowing the organization to release your information to anyone they deem necessary?
 - ii. Or do you prefer to be asked prior to each time your information is going to be released, providing you with a choice as to whom you want the information released to?
 - iii. Or, are you fine with an organization sharing your information any time?
6. Now think about times when you use community services that are not related to your experience of sexual violence. When you became a survivor, what, if anything, changed for you when using services in your community that were not related to sexual assault? (Services may include routine doctor's appointments, public transportation, libraries, etc.)
 - a. Some examples might be how you consider: hours of operation, transportation needs, location of services, type of service provider, skills of service provider, need to disclose your assault, when accessing services.

7. What would you like community service providers (such as doctors, therapists, or community agencies) to know about how to best support survivors of sexual assault?

8. Do you have any other feedback for us?

Appendix K

Questions for People with Disabilities

1. How do you find out about services available to you in your community?
For example, how did you find your dentist?
 - a. Let's say you want to take a new class at the recreation center. Where would you look for this information? (On the internet, in the mail, at the library, at your day program, at home, someplace else?)
 - b. Who, if anyone, helps you find this information (staff, friend, family, co-worker, counselor, case manager, or someone else)?

2. Think about a place in your community that you go that makes you feel comfortable. What place comes to mind?
 - a. Think about the people who work there. What do they do to make you feel comfortable?
 - i. Do they know what they are doing? If so, how do you know?
 - b. Now think about the building. What about the building do you like?
 - i. Is it easy to get around? If yes, what makes it easy to get around?
 - ii. Is it easy to find what you are looking for? If yes, what makes it easy?
 - c. Is there anything else that makes you feel comfortable about that place?

3. Now, think about a place in your community that makes you feel uncomfortable. What place comes to mind?
 - a. Think about the people who work there. Do the people that work there do something that makes you uncomfortable?
 - i. What do they do to make you feel uncomfortable?
 - b. Now think about the building. Is there something about the building or place that you don't like?
 - i. Is it hard to get around? If yes, what makes it hard to get around?

- ii. Is it hard to find what you are looking for? If yes, what makes it hard?
 - c. Is there anything else that makes you feel uncomfortable about that place?

- 4. We all need help sometimes but it can be hard to ask for help from others. Think of the last time you needed help from someone such as someone who works at the Rec center or Imagine! staff. Some examples of things to ask for help on are: help with calling someone; help reading papers; help getting somewhere. What made it easy for you to ask for the help you needed?
 - a. Did that person ask if you needed help?
 - b. Do you like it when people ask if you need help?
 - c. Is there anything else that these people do that make it easy to ask for help if you want it?

- 5. Think of a time when you made an important decision about your life. One example might be when you agree to your IP goals. How did you get the information you needed to make that decision?
 - a. What did the staff do to give you enough information?
 - b. When you are asked sign a paper to give your permission for something, like at your IP, do you feel like you have enough information so you understand what you are signing?
 - i. What did the staff do to make sure you understand what you are signing?
 - ii. What can staff do better to make sure you understand what you are signing?
 - iii. If you don't understand what you're agreeing to, does someone help you? What do they do to help you understand what you're signing?
 - c. Have you ever felt pressured to agree to something or sign something?
 - i. What about the situation made you feel pressured?
 - ii. What would make it easier?

6. What would you like people in the community to know about how to best support people with disabilities?
 - a. What would be the most important thing you would teach them?

7. Do you have any other feedback for us?

Appendix L

Questions for Family Caregivers

Facilitator will say: When we say “family member” we are specifically referring to your family member with a disability that receives Imagine! services.

1. What is the most important thing you look for in a service provider for your family member?
 - a. They were referred by someone you trust?
 - b. They have a history of serving people with disabilities?
 - c. They are known by your community/family?
 - d. What do the staff do well?
 - e. That the staff appear to be knowledgeable and comfortable in working with your family member?
 - i. If so, what did they do to demonstrate this?
 - f. The physical space, such as the comfort or accessibility it provides?
 - i. If so, what makes it comfortable or accessibly for your family member?
 - g. How do you learn about service providers for your family member? (Some examples may be internet, community bulletin, or referrals.)

2. What are some important considerations when a service provider is working with a person who is non-verbal that has a guardian?
 - a. Who should the service provider talk to about options/services?
 - b. What’s the best way to obtain informed consent?
 - c. How do they navigate personal privacy needs?
 - d. Anything else?

3. We recognize that seeking services for someone with a disability can come with unique challenges. For example, you may need to request special accommodations or you may need for the service to be offered in a way that looks different. We’d like to know what your experience has been like when requesting the specific services or accommodations

you need for your family member. So, thinking back to a time when your family member received excellent services:

- a. What are some of the specific needs or accommodations you've needed when seeking services for your family member?
 - i. Respite care
 - ii. Specific accommodations
 - iii. Adaptive equipment
 - iv. Adaptation to approach of providing the service
 - v. Environmental needs (such as setting for services, physical considerations, sensory considerations)
 - b. How were the staff helpful in asking you what your family member's unique needs were?
 - c. Was there anything in place that made requesting support or accommodations for your family member easy for you? For example, providing you with a check-list of available accommodations or asking you during the intake process?
 - d. Is there anything that would make asking for supports or accommodations for your family member easier?
4. Think about a place in the community where you feel that your family member has received poor services.
- a. What did the staff do poorly?
 - b. What is your perception of the staff's knowledgeable and comfort level in working with your family member? What did they do to demonstrate this?
 - c. Is there anything about the physical space that makes finding services there more difficult, such as any discomfort or inaccessibility issues?
 - d. Anything else that this organization did not do well?
5. What do you want service providers in your community to know about how to best support people with cognitive disabilities that interfere with their ability to communicate their needs with service providers?
- a. What would be the most important things you would teach the staff there?

- b. What would be in place to make it easier for you to seek what you needed on your family member's behalf?
- 6. Do you have any other feedback for us?

Appendix M

Questions for MESA Staff, Interns, and Hotline Volunteers

When we say “working with or providing a service to” please think about your own job and role with MESA. Speak to any experience where you may have worked with someone you thought had a disability. If you haven’t yet, think about any hypothetical situations where you may work with someone with a disability or you may be the first point of contact for that person you think has a disability at MESA.

1. What inspires you about [*working/volunteering/interning*] at MESA?
2. Think about a time when things went well when you were working with or providing a service to someone that you feel may have had a disability. What things were in place within your organization to help you?
 - a. Staff Training?
 - b. Resources?
 - c. Supervisor support?
 - d. Other community relationships?
 - e. Accessibility of services MESA provides?
 - f. Ability to meet the client’s accommodation requests?
 - g. Policies and procedures?
3. Tell me about a time when things did not go well for you in working with or providing a service to someone that you feel may have had a disability. What types of things had an impact on the situation?
 - a. Lack of or inadequate training?
 - b. Lack of knowledge of resources?
 - c. Lack of accessibility of services?
 - d. Lack of knowledge of community partnerships?
 - e. Lack of the ability to meet the client’s accommodation requests?
 - f. Did the type of disability impact your ability to deliver services?
If so, how?
 - g. (*For Client Services only*) Was there a dynamic of also working with a family member/guardian in that situation? If so, what

- were those dynamics like and how did they create barriers to serving the survivor?
- h. *(For Client Services only)* Did the relationship between the survivor and the perpetrator impact your service delivery? If so, how?
 - i. Anything else?
4. What is in place at MESA to let you know that you are working with someone with a disability?
- a. Policies and Procedures
 - b. Intake Process
 - c. Process for clients to request accommodations
 - d. Staff training
5. The next set of questions is about how a person with a disability can access services from MESA. By access, we mean: Services that meet each individual's physical, emotional, cognitive, financial, and cultural needs to acquire appropriate resources, advocacy, and safety. What does MESA currently do that ensures services are accessible to people with disabilities?
- a. What processes does MESA have that create an opportunity for a person with a disability to request an accommodation?
 - b. What are some ideas about how your intake and service delivery process can create an opportunity for a client to request an accommodation?
 - c. What do you think MESA could do to improve its accessibility to better serve people with disabilities?
 - d. Do you feel staff have what they need to meet accommodation requests?
6. What policies and procedures do you have available at MESA to guide you in responding to a survivor with a disability who has experienced sexual assault?
- a. What are the strengths of your policies and procedures?
 - b. What are some weaknesses?
 - c. Do you receive training in following these policies and procedures?

- d. How does your agency provide support to you in following these policies and procedures?
 - e. What are some changes that you think could be made to give you more guidance in providing services to survivors with disabilities.
7. What do you see as MESA's biggest barriers to providing services for people with disabilities?
- a. Anything regarding the organizational culture or atmosphere? For example, are there any stigmas or assumptions about people with disabilities who tell you that they've experienced sexual assault?
 - b. How about the training your team received?
 - c. Anything else?
 - d. What do you wish you had in place at your organization to assist you in serving people with disabilities?
 - i. A system to understand someone's disability/accommodation needs?
 - ii. Training?
 - iii. Resources?
 - iv. Community partnerships?
 - v. Specific policies and procedures?
8. Have you ever partnered with [Imagine!/MESA] in the past to support a survivor with a disability?
- a. If so, how did it go?
 - b. What were the strengths of this partnership?
 - c. What could be improved?
9. What do you want disability service providers to know about how to best serve survivors of sexual assault?
- a. What does Imagine! need to know about the impact trauma has on survivors? Some examples could be:
 - i. Timeline for when survivors choose to disclose assault.
 - ii. Impact trauma has on behavior.
 - iii. Impact trauma has on personal relationships

- iv. Other “typical” experiences, such as flashbacks, nightmares, triggers, etc.
 - b. If you were going to train Imagine! staff, what would you put in the training curriculum to ensure they had the basics for responding to and serving sexual assault survivors?
- 10. Do you have any other feedback for us?

Appendix N

Questions for Imagine! Staff

When we say “working with or providing a service to” please think about your own job and role with Imagine!. Speak to any experience where you may have worked with someone you thought was a survivor of sexual assault. If you haven’t yet, think about any hypothetical situations where you may work with a survivor with a disability or you may be the first point of contact for that person at Imagine!.

1. What inspires you about working at Imagine!?
2. Think about a time when things went well when you were helping a client that experienced sexual assault. What things were in place within your organization to help you?
 - a. Staff Training?
 - b. Case Management resources?
 - c. Supervisor support?
 - d. Resources?
 - e. Other community relationships?
 - f. Policies and procedures?
 - g. Anything regarding MANE reporting requirements?
 - h. Follow-up provided to the client?
 - i. Safety planning?
3. Tell me about a time when things did not go well for you in providing services to a client that experienced sexual assault. What things had an impact on that situation?
 - a. Inadequate or a lack of training?
 - b. Lack of resources?
 - c. Lack of knowing of Community partnerships?
 - d. Lack of policies and procedures?
 - e. Concerns about confidentiality or safety?
 - f. Lack of follow-up support for the client?
 - g. Did the relationship between the survivor and the perpetrator impact your service delivery? If so, how?

- h. Did having/not having a guardian impact your ability to serve the client?
- 4. What is in place at Imagine! to let you know when you are working with a survivor of sexual assault?
 - a. Policies and Procedures
 - b. Intake Process
 - c. Case review process
 - d. Process for clients to disclose history of abuse
 - e. Staff training
- 5. What are some factors in place at Imagine! that make it comfortable and safe for a client to freely disclose their experience of sexual assault?
 - a. What exists at the agency to either support or inhibit eliciting disclosures?
 - b. What about the intake or service delivery process creates an opportunity for a client to disclose experiences of violence and abuse?
 - c. What does your organization do to support you and your team in responding to and handling disclosures of sexual assault?
- 6. What are some factors in place at Imagine! that might prevent a client from feeling comfortable or safe to disclose sexual assault?
 - a. Anything regarding the organizational culture or atmosphere? For example, are there any stigmas or assumptions about people with disabilities who tell you that they've experienced sexual assault?
 - b. Do you think there are any safety concerns your clients are dealing with?
 - c. Do you think confidentiality is a concern for clients when choosing to disclose or not?
 - d. What are some ideas you have about how your intake or service delivery process can change to create an opportunity for a client to disclose experiences of violence and abuse?

7. What policies and procedures do you have available at Imagine! that guide you in responding to a person with a disability who has experienced sexual assault?
 - a. What are the strengths of your policies and procedures?
 - b. What are some weaknesses?
 - c. Do you receive training in following these policies and procedures?
 - d. How does your organization provide support to you in following these policies and procedures?
 - e. What are some changes that you think could be made to give you more guidance in providing services to sexual assault survivors with disabilities?

8. What do you see as Imagine!'s biggest barriers to providing services to survivors of sexual assault?
 - a. How about the training or knowledge?
 - b. Anything regarding organizational culture?
 - c. Does M.A.N.E. reporting requirements challenge your ability to serve clients who have been sexually assaulted? If so, how?
 - d. Other resource needs?
 - e. What do you wish was in place at Imagine! to improve your ability to serve survivors of sexual assault?
 - i. Training?
 - ii. Resources?
 - iii. Community partnerships?
 - iv. Policies and procedures

9. Have you ever partnered with [Imagine!/MESA] in the past to support a survivor with a disability?
 - a. If so, how did it go?
 - b. What were the strengths of this partnership?
 - c. What could be improved?

10. What do you want sexual assault service providers to know about how to best serve people with disabilities?
 - a. What does MESA need to know about how to accommodate the needs of people with disabilities? Some examples could be:

- i. Communication considerations
- ii. Behavior considerations
- iii. Way you work with someone with a disability
- b. If you were going to train Imagine! staff, what would you put in the training curriculum to ensure they had the basics for serving people with disabilities?

11. Do you have any other feedback for us?

Appendix O

Questions for MESA and Imagine! Leadership

1. What does [Imagine!/MESA] do well in responding to and meeting the needs of people with disabilities who have experienced sexual assault? Some examples are: Staffing, budget and financial resources, other resources, policies and procedures, training, and accommodations.
2. What challenges does [Imagine!/MESA] face in serving people with disabilities who have experienced sexual assault? Some examples are: Staffing, budget and financial resources, policies and procedures, other resources, and training.
 - a. Are there any challenges within the culture of your organization that impact serving people with disabilities who have experienced sexual assault, such as stigma, attitudes, and assumptions regarding [for MESA: people with disabilities/for Imagine!: sexual assault survivors]?
 - b. (Imagine! only) Do M.A.N.E. reporting requirements challenge your ability to serve this population? If so, how?
 - c. Does guardianship challenge your ability to serve this population? If so, how?
 - d. (*For MESA only*) Does the type of disability impact your ability to provide services? If so, how?
 - e. Does the relationship to the perpetrator impact your ability to provide services? If so, how?
 - f. Is there anything you wish Imagine! had to better support people with disabilities who have experienced sexual assault? Some examples might be training, resources, or community relationships.
 - i. Is this an area you feel your organization should further invest in?
3. (*For MESA only*) What is in place at MESA to let you know when you are working with someone with a disability?
 - a. Policies and Procedures
 - b. Intake Process
 - c. Process for clients to request accommodations
 - d. Staff training

(For *Imagine!* only) What is in place at *Imagine!* to let you know when you are working with a survivor of sexual assault?

- a. Policies and Procedures
- b. Intake Process
- c. Case review process
- d. Process for clients to disclose history of abuse
- e. Staff training

4. (For MESA only) The next set of questions is about how a person with a disability can access services from MESA. By *access*, we mean: Services that meet each individual's physical, emotional, cognitive, financial, and cultural needs to acquire appropriate resources, advocacy, and safety. What does MESA currently do that ensures services are accessible to people with disabilities?

- a. What does MESA currently do that ensures services are accessible to people with disabilities?
- b. What processes does MESA have that create an opportunity for a person with a disability to request an accommodation?
- c. What do you think MESA could do to improve its accessibility to better serve people with disabilities?
- d. Do you feel staff have what they need to meet accommodation requests?

(For *Imagine!* only) The next set of questions is about the level of comfort and safety a person with a disability feels about disclosing their experience of sexual violence to *Imagine!* staff.

- a. What are some factors that make it comfortable and safe for a client to freely disclose their experience of sexual assault?
 - i. Anything regarding the organizational culture or atmosphere? For example, are there any stigmas or assumptions about people with disabilities who tell you that they've experienced sexual assault?
 - ii. How about staff skills?
 - iii. What does your organization do to support you and your team in responding to and handling disclosures of sexual assault?

- iv. What exists at the agency to either support or inhibit eliciting disclosures?
 - b. What are some factors that might prevent a client from feeling comfortable or safe to disclose their sexual assault?
 - i. Anything regarding the organizational culture or atmosphere?
 - ii. How about staff skills?
 - iii. What exists at the agency to either support or inhibit eliciting disclosures?
- 5. Are there policies and procedures available at [MESA/Imagine!] that guide you and your staff in responding to a person with a disability who has experienced sexual assault?
 - a. What are the strengths of those policies and procedures?
 - b. What are some limitations?
 - c. Is training on these policies and procedures required for leadership or management?
 - d. How are policies and procedures created or changed?
 - e. How are new or existing policies and procedures implemented?
 - i. What kind of training do staff [MESA only: and volunteers] receive to implement these policies and procedures?
 - ii. How do you and/or other supervisors ensure quality assurance of your staff [MESA: and volunteers] in implementing these policies and procedures?
- 6. What are some changes that you think should be made to any of the challenges you've listed so far to give your organization more support in responding and providing services to people with disabilities who have experienced sexual assault?
 - a. What barriers do you foresee to making those changes?
- 7. What local or statewide partnerships does [Imagine!/MESA] currently hold that might be helpful to our goal of better serving people with disabilities who have experienced sexual assault? Think about both formal (like case review teams) and informal (like calling a community expert and asking a question).

- a. Have you ever partnered with [Imagine!/MESA] in the past to support a survivor with a disability?
 - i. If so, how did it go?
 - ii. What were the strengths of this partnership?
 - iii. What could be improved?
8. To what degree do you think the collaboration between Imagine! and MESA aligns with [MESA/Imagine!]’s:
 - a. Mission or vision?
 - b. Strategic goals?
9. In a time of limited resources, in what ways do you think [MESA/Imagine!] is able to support systems change to better serve people with disabilities who have experienced sexual assault?
 - a. Funding or other resources
 - b. Policies and procedures
 - c. Organizational structure
 - d. Accommodations
10. What additional comments or feedback do you have for our collaboration?

Appendix P

Questions for MHP and Imagine! Executive Staff

1. (For MHP) What sets MHP apart from other community mental health organizations in Colorado in responding to and meeting the needs of its clients?

a. What is MHP doing well to serve the community?

(For Imagine!) What sets Imagine! apart from other CCBs and Service Providers in responding to and meeting the needs of its consumers?

2. (For MHP only) What role does MHP play in MESA's ability to provide services to people with developmental disabilities who have experienced sexual assault?

- a. MHP policies and procedures
- b. Budget and financing streams
- c. MHP organizational structure
- d. Accommodations
- e. Other resources
- f. Hiring Practices

3. What does [Imagine!/MESA] do well in responding to and meeting the needs of people with disabilities who have experienced sexual assault? Some examples are: Policies and procedures, budget and financial resources, other resources, training, staffing, and accommodations.

4. (For MHP) What challenges does MESA face in serving people with developmental disabilities who have experienced sexual assault?

- a. Are there any policies and procedures that impact MESA's ability to serve this population?
- b. Are there any challenges to meeting clients' accommodation requests?
- c. Is there anything regarding MESA's culture that creates challenges to serving people at the intersection, such as stigma or assumptions?

(For Imagine!) What challenges does Imagine! face in serving people with disabilities who have experienced sexual assault? Some examples are: Policies and procedures, budget and financial resources, other resources, training, staffing, and accommodations.

- a. Are there any policies and procedures that impact your ability to serve this population?
 - b. Does MANE reporting requirements challenge your ability to serve this population? If so, how?
 - c. Does guardianship challenge your ability to serve this population? If so, how?
 - d. Does the type of disability impact your ability to provide services? If so, how?
 - e. Is there anything you wish you or your team had to better-support people with disabilities who have experienced sexual assault? Training? Resources? Community relationships?
 - i. Is this an area you feel your organization should further invest in?
5. What local or statewide partnerships does Imagine! currently hold that might be helpful to our goal of better serving people with disabilities who have experienced sexual assault?
6. How does change happen at [MHP/Imagine!]?
 - a. What is the decision-making process?
 - b. How are policies and procedures created or changed?
 - c. How are decisions made regarding hiring personnel?
 - d. How are decisions about resource allocations made?
7. To what degree do you think the collaboration between Imagine! and MESA aligns with [MHP/Imagine!]'s:
 - a. Mission or vision?
 - b. Strategic goals?
8. In a time of limited resources, in what ways do you think [MHP/Imagine!] is able to support systems change to better serve people with disabilities who have experienced sexual assault?
 - a. Funding or other resources

- b. Policies and procedures
- c. Organizational structure
- d. Accommodations

9. What additional comments or feedback do you have for our collaboration?

Appendix Q

Questions for Board Members

We are here today to seek your support of the collaboration between Imagine! and MESA. Specifically, we're asking if you would be willing to make a motion to adopt the following statement:

[Imagine!/MHP] Board of Directors supports Intersections in making systems change at MESA and Imagine! to better serve people with developmental disabilities who have been impacted by sexual assault.

We define *systems change* as the development and enhancement of your organization's capacity to address the needs and barriers facing survivors of sexual assault with disabilities that will result from this collaboration. Examples of system change include, but are not limited to enhanced accessibility, policies, procedures, protocols, structural changes, training, cultural changes, sharing expertise and resources, and working together.

1. What benefits do you see [Imagine!/MHP] gaining from the collaboration's work?
2. What challenges, if any, do you see for [Imagine!/MHP] in supporting the collaboration and its efforts to better serve people with developmental disabilities who have experienced sexual assault?
3. **If you support our goals for systems change, would you be willing to make a motion to adopt this statement?**
4. Do you have any additional feedback for *Intersections*?

Appendix R

Terms as Defined by Intersections

To be given out during focus groups and interviews as a resource. This document will be taken back at the end of all focus groups and interviews.

Accessibility: Services that meet each individual's physical, emotional, cognitive, financial, and cultural needs to acquire appropriate resources, advocacy, and safety.

Accommodation: Modifications or adjustments to a program/service, work environment, or job description that make it easier for a person with a disability to participate in the same manner as other people.

Confidentiality: The ethical principle and legal right that a professional will hold all information relating to a client private and in confidence, unless the client gives consent permitting disclosure or unless disclosure is required by the law.

Culture: The knowledge, experience, beliefs, values, attitudes, meanings, hierarchies/ positions of power, roles, and concepts of a group of people coming together for a common purpose.

Disability: This collaboration has adopted the definition created by Accessing Safety Initiative, which defines "disability" as "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." Accessing Safety Initiative has adapted their definition based on the World Health Organization, who identifies "disability" as "an umbrella term" used to define the "interaction between features of a person's body and features of the society in which [the individual] lives."⁹ This includes, but is not limited to, developmental delays and cognitive disabilities, such as autism, cerebral palsy, Downs syndrome, and mental retardation.

⁹ http://www.accessingsafety.org/index.php/main/appendix_menu/glossary#D

Disability-aware: To become comfortable and fluent in understanding and responding to the unique needs and challenges faced by individuals with disabilities, including the individual responses to the impact of sexual assault as well as the needs for healing in its aftermath.

Informed Consent: The ability to make a decision for oneself based having received proper and sufficient information, without external pressures.

Resources: Not only an organization's budget, but also additional supports for clients, such as staff training, the number of employees, employee skills and knowledge, services for clients (such as therapy, community activities, and peer supports), brochures/printed materials/information, and community resources.

Sexual Abuse: The wide spectrum of violent behaviors that may or may not result in criminal charges but are harmful and can be a pattern of perpetrated behavior. Examples include criticizing someone's body, making accusations about someone's sexuality, using sexually degrading names, coerced nudity, harmful and/or unnecessary genital "care," or any form of coerced sexual behavior or unwanted sexual contact.

Sexual Assault: Any nonconsensual or coerced sexual activity.

Survivor: This collaboration chooses to use the term "survivor" when referring to the primary individual who has been sexually assaulted. However, this definition is used with caution, as we do not intend to determine where survivors are in their healing process or how they choose their identity as a result of the violence they have experienced. Individuals may choose to use different terms that best describe their own experience (for example, "victim").

Systems change: The enhancement, development or changes that may occur as a result of both organizations in this collaboration addressing the needs and barriers facing survivors of sexual assault with disabilities. Examples of systems change include, but are not limited to enhanced accessibility, policies, procedures, protocols, structural changes, training, cultural changes, sharing expertise and resources, and working together.

Trauma-informed: The awareness of how a trauma survivor's behavior, actions, and needs may be in response to the trauma they have experienced. Professionals who are trauma-informed understand the neurological, biological, physiological, and social effects of trauma their clients may be experiencing. As a result, such professionals are able to make decisions about organizational structure, programming, protocols and services that take such considerations into account.

Vera Institute of Justice: Vera Institute of Justice is a national organization that provides Intersections with technical assistance and training during the grant period to create the grant deliverables and to ensure the highest quality of systems change.

Appendix S
Resource List

Adult Protective Services (APS) investigates reports of abuse, neglect, or financial exploitation of at-risk adults. These services may include case coordination, short-term case management, guardianship or representative payee, and information and referral. (Boulder County) 303-441-1000 or <http://www.bouldercounty.org/help/adults/pages/hhsadultprotrsrserv.aspx>

Association for Community Living (formerly local ARC) The ACL is an advocacy organization for children and adults with developmental disabilities. (Boulder and Broomfield Counties) <http://www.aclboulder.org/> 303.527.0888

Blue Sky Bridge is a child advocacy center providing services to sexually abused children and their families. Also provides prevention education programs to the community. (Boulder County) <http://www.blueskybridge.org/> 303.444.1388

Boulder County Network of Care is an online link to community resources, services, and programs, including links to specific sites for Seniors & People with Disabilities; Behavioral Health & Wellness; Children, Youth, & Families; and a general, community Resource Book. (Boulder County) <http://www.bouldercountyhelp.org/>

DOVE provides culturally appropriate and fully accessible services for Deaf, Deaf-Blind, and Hard-of-Hearing victims of sexual assault and domestic violence; provides 24-hr crisis intervention, information and referral, and advocacy. 303.831.7874 or 303.831.7932 (TTY)

Emergency Psychiatric Services (EPS) is a team of Mental Health Partners and provides emergency psychiatric support, such as crisis intervention, suicide assessments, psychiatric evaluations, and referrals within MHP and in the community. (Boulder and Broomfield Counties) 303.447.1665

Mental Health Partners (Formerly the Mental Health Center for Boulder and Broomfield Counties) Partnering to improve quality of life as a nonprofit organization dedicated to mental health and wellness. (Boulder and Broomfield Counties) <http://www.mhcbc.org/> 303.413.6263

Moving to End Sexual Assault (MESA) The rape crisis center for Boulder and Broomfield Counties provides services for sexual assault survivors including a 24-hour anonymous hotline and low-cost individual and group therapy. MESA also provides prevention education programs to the community. (Boulder and Broomfield counties)
<http://www.movingtoendsexualassault.org/> **24-hour hotline: 303.443.7300**

National Domestic Violence Hotline: 1-800-799-SAFE

National Sexual Violence Resource Center serves as the nation's principle information and resource center regarding all aspects of sexual violence. (National) <http://www.nsvrc.org/>

Office for Victims Programs ensures that victims of Victim Rights Act crimes are afforded their rights. (Statewide) <http://dcj.state.co.us/ovp/>
303.239.5719

Rape, Abuse, Incest National Network (RAINN) operates a confidential, online sexual assault hotline. (National) <http://www.rainn.org>

Safehouse Progressive Alliance for Nonviolence (Boulder Safehouse) offers support and advocacy safety to victims of domestic violence. (Boulder and Broomfield Counties) <http://safehousealliance.org/> 24 Hour Crisis Line: 303.444.2424

Safe Shelter of St. Vrain Valley provides programs and services to address the needs of victims of domestic violence. (Longmont/St. Vrain Valley)
<http://www.safeshelterofstvrain.org/> 24 Hour Crisis Line: 303.772.4422

Special Transit - Special Transit's mission is to promote independence and self-sufficiency for people with limited mobility by providing caring, customer-focused transportation options. (Boulder)
<http://specialtransit.org/> 303.447.2848 - for TTY, call 711

University of Colorado-Boulder, Office of Victim Assistance - Free, confidential information, support and short term counseling to students, faculty and staff at CU-Boulder and their significant others. The office is not a part of the police department. (University of Colorado-Boulder)
<http://cuvictimassistance.com/> 303.492.8855

WINGS offers support groups for adult survivors of childhood sexual abuse. Groups are available for both men and women. (Boulder, Denver, Colorado Springs) <http://www.wingsfound.org/> (303)-238-8660

Appendix T

Colorado Mandatory Reporting Requirements: Colorado Revised Statutes

Obligation to Report Child Abuse or Neglect**C.R.S. 19-3-304. Persons required to report child abuse or neglect.**

(1)(a) Except as otherwise provided by section [19-3-307](#), sections [25-1-122](#) (4) (d) and 25-4-1404 (1) (d), C.R.S., and paragraph (b) of this subsection (1), any person specified in subsection

(2) of this section who has reasonable cause to know or suspect that a child has been subjected to abuse or neglect or who has observed the child being subjected to circumstances or conditions that would reasonably result in abuse or neglect shall immediately upon receiving such information report or cause a report to be made of such fact to the county department or local law enforcement agency.

(b) The reporting requirement described in paragraph (a) of this subsection (1) shall not apply if the person who is otherwise required to report does not:

(I) Learn of the suspected abuse or neglect until after the alleged victim of the suspected abuse or neglect is eighteen years of age or older; and

(II) Have reasonable cause to know or suspect that the perpetrator of the suspected abuse or neglect:

(A) Has subjected any other child currently under eighteen years of age to abuse or neglect or to circumstances or conditions that would likely result in abuse or neglect; or

(B) Is currently in a position of trust, as defined in section [18-3-401](#) (3.5), C.R.S., with regard to any child currently under eighteen years of age.

(2) Persons required to report such abuse or neglect or circumstances or conditions shall include any:

- a) Physician or surgeon, including a physician in training;
- b) Child health associate;
- c) Medical examiner or coroner;
- d) Dentist;
- e) Osteopath;

- f) Optometrist;
- g) Chiropractor;
- h) Chiropodist or podiatrist;
- i) Registered nurse or licensed practical nurse;
- j) Hospital personnel engaged in the admission, care, or treatment of patients;
- k) Christian science practitioner;
- l) Public or private school official or employee;
- m) Social worker or worker in any facility or agency that is licensed or certified pursuant to part I of article 6 of title 26, CRS;
- n) Mental health professional;
- o) Dental hygienist;
- a) Psychologist;
- b) Physical therapist;
- c) Veterinarian;
- d) Peace officer as described in section 16-2.5-101, CRS
- e) Pharmacist
- f) Commercial film and photographic print processor as provided in subsection (2.5) of this section;
- g) Firefighter as defined in section 18-3-201 (1), CRS;
- h) Victim's advocate, as defined in section 13-90-107 (1) (k) (II), CRS
- i) Licensed professional counselors;
- j) Licensed marriage and family therapists;
- k) Unlicensed psychotherapists;
- (aa) (I) Clergy member

(II) The provisions of this paragraph (aa) shall not apply to a person who acquires reasonable cause to know or suspect that a child has been subjected to abuse or neglect during a communication about which the person may not be examined as a witness pursuant to section [13-90-107](#) (1) (c), C.R.S., unless the person also acquires such reasonable cause from a source other than such a communication.

(III) For purposes of this paragraph (aa), unless the context otherwise requires, "clergy member" means a priest, rabbi, duly ordained, commissioned, or licensed minister of a church, member of a religious order, or recognized leader of any religious body.

(bb) Registered dietitian who holds a certificate through the commission on dietetic registration and who is otherwise prohibited by 7 CFR 246.26 from making a report absent a state law requiring the release of this information;

(cc) Worker in the state department of human services;

(dd) Juvenile parole and probation officers;

(ee) Child and family investigators, as described in section [14-10-116.5](#), C.R.S.;

(ff) Officers and agents of the state bureau of animal protection, and animal control officers;

(gg) The child protection ombudsman as created in article 3.3 of this title.

(2.5) Any commercial film and photographic print processor who has knowledge of or observes, within the scope of his or her professional capacity or employment, any film, photograph, video tape, negative, or slide depicting a child engaged in an act of sexual conduct shall report such fact to a local law enforcement agency immediately or as soon as practically possible by telephone and shall prepare and send a written report of it with a copy of the film, photograph, video tape, negative, or slide attached within thirty-six hours of receiving the information concerning the incident.

(3) In addition to those persons specifically required by this section to report known or suspected child abuse or neglect and circumstances or conditions which might reasonably result in abuse or neglect, any other person may report known or suspected child abuse or neglect and circumstances or conditions which might reasonably result in child abuse or neglect to the local law enforcement agency or the county department.

(3.5) No person, including a person specified in subsection (1) of this section, shall knowingly make a false report of abuse or neglect to a county department or local law enforcement agency.

(4) Any person who willfully violates the provisions of subsection (1) of this section or who violates the provisions of subsection (3.5) of this section:

(a) Commits a class 3 misdemeanor and shall be punished as provided in section [18-1.3-501](#), C.R.S.;

(b) Shall be liable for damages proximately caused thereby.

Mandatory Reporting of At-Risk Adults

C.R.S. 26-3.1 Part I: Protective Services for At-Risk Adults

101. Definitions.

As used in this article, unless the context otherwise requires:

- (1) "At-risk adult" means an individual eighteen years of age or older who is susceptible to mistreatment as such term is defined in subsection (4) of this section or self-neglect as such term is defined in subsection (7) of this section because the individual is unable to perform or obtain services necessary for the individual's health, safety, or welfare or lacks sufficient understanding or capacity to make or communicate responsible decisions concerning the individual's person or affairs.
- (2) "Caretaker" means a person, as such term is defined in subsection (5) of this section, who is responsible for the care of an at-risk adult, as such term is defined in subsection (1) of this section, as a result of a family or legal relationship or who has assumed responsibility for the care of an at-risk adult.
- (3) "Least restrictive intervention" means acquiring or providing services, including protective services, for the shortest duration and to the minimum extent necessary to remedy or prevent situations of actual mistreatment or self-neglect.
- (4) "Mistreatment" means an act or omission which threatens the health, safety, or welfare of an at-risk adult, as such term is defined in subsection (1) of this section, or which exposes the adult to a situation or condition that poses an imminent risk of death, serious bodily injury, or bodily injury to the adult. "Mistreatment" includes, but is not limited to:
 - (a) Abuse which occurs:
 - (I) Where there is infliction of physical pain or injury, as demonstrated by, but not limited to, substantial or multiple skin bruising, bleeding, malnutrition, dehydration, burns, bone fractures, poisoning, subdural hematoma, soft tissue swelling, or suffocation;
 - (II) Where unreasonable confinement or restraint is imposed; or

- (III) Where there is subjection to nonconsensual sexual conduct or contact classified as a crime under the "Colorado Criminal Code", title [18](#), C.R.S.;
- (b) Caretaker neglect which occurs when adequate food, clothing, shelter, psychological care, physical care, medical care, or supervision is not secured for the at-risk adult or is not provided by a caretaker in a timely manner and with the degree of care that a reasonable person in the same situation would exercise; except that the withholding of artificial nourishment in accordance with the "Colorado Medical Treatment Decision Act", article [18](#) of title [15](#), C.R.S., shall not be considered as abuse; (c) Exploitation which is the illegal or improper use of an at-risk adult for another person's advantage.
- (5) "Person" means one or more individuals, limited liability companies, partnerships, associations, corporations, legal representatives, trustees, receivers, or the state of Colorado, and all political subdivisions and agencies thereof.
- (6) "Protective services" means services provided by the state or political subdivisions or agencies thereof in order to prevent the mistreatment or self-neglect of an at-risk adult. Such services include, but are not limited to: Receiving and investigating reports of mistreatment or self-neglect, the provision of casework and counseling services, arranging for coordinating, delivering where appropriate, and monitoring services, including medical care for physical or mental health needs, protection from mistreatment, and assistance with application for public benefits, referral to community service providers, and initiation of probate proceedings.
- (7) "Self-neglect" means an act or failure to act whereby an at-risk adult substantially endangers the adult's health, safety, welfare, or life by not seeking or obtaining services necessary to meet the adult's essential human needs. Choice of lifestyle or living arrangements shall not, by itself, be evidence of self-neglect.

102. Reporting requirements.

- (1) (a) An immediate oral report of abuse should be made or caused to be made within twenty-four hours to the county department or during non-business hours to a local law enforcement agency responsible for investigating violations of state criminal laws protecting at-risk adults by any person specified in paragraph (b) of this subsection (1) who has

observed the mistreatment or self-neglect of an at-risk adult or who has reasonable cause to believe that an at-risk adult has been mistreated or is self-neglected and is at imminent risk of mistreatment or self-neglect.

(b) The following persons are urged to make or initiate an initial oral report within twenty-four hours followed by a written report within forty-eight hours:

- (I) Physicians, surgeons, physicians' assistants, or osteopaths, including physicians in training;
- (II) Medical examiners or coroners;
- (III) Registered nurses or licensed practical nurses;
- (IV) Hospital and nursing home personnel engaged in the admission, care, or treatment of patients;
- (V) Psychologists and other mental health professionals;
- (VI) Social work practitioners;
- (VII) Dentists;
- (VIII) Law enforcement officials and personnel;
- (IX) Court-appointed guardians and conservators;
- (X) Fire protection personnel;
- (XI) Pharmacists;
- (XII) Community-centered board staff;
- (XIII) Personnel of banks, savings and loan associations, credit unions, and other lending or financial institutions;
- (XIV) State and local long-term care ombudsmen; and
- (XV) Any caretaker, staff member, or employee of or volunteer or consultant for any licensed care facility, agency, home, or governing board.

(c) In addition to those persons urged by this subsection (1) to report known or suspected mistreatment or self-neglect of an at-risk adult and circumstances or conditions which might reasonably result in mistreatment or self-neglect, any other person may report such known or suspected mistreatment or self-neglect and circumstances or conditions which might reasonably result in mistreatment or self-neglect of an at-risk adult to the local law enforcement agency or the county department. Upon receipt of such report, the receiving agency shall prepare a written report within forty-eight hours.

(2) Pursuant to subsection (1) of this section, the report shall include: The name and address of the at-risk adult; the name and address of the at-risk

adult's caretaker, if any; the age, if known, of such at-risk adult; the nature and extent of such at-risk adult's injury, if any; the nature and extent of the condition that will reasonably result in mistreatment or self-neglect; and any other pertinent information.

(3) A copy of the report prepared by the county department in accordance with subsections (1) and (2) of this section shall be forwarded within twenty-four hours to the district attorney's office and the local law enforcement agency. A report prepared by the local law enforcement agency shall be forwarded within twenty-four hours to the county department and to the district attorney's office.

(4) No person, including a person specified in subsection (1) of this section, shall knowingly make a false report of mistreatment or self-neglect to a county department or local law enforcement agency. Any person who willfully violates the provisions of this subsection (4) commits a class 3 misdemeanor and shall be punished as provided in section [18-1.3-501](#), C.R.S., and liable for damages proximately caused thereby.

(5) Any person, except a perpetrator, complicitor, or coconspirator, who makes a report pursuant to this section shall be immune from any civil or criminal liability on account of such report, testimony, or participation in making such report, so long as such action was taken in good faith and not in reckless disregard of the truth or in violation of subsection (4) of this section.

(6) No person shall take any discriminatory, disciplinary, or retaliatory action against any person who, in good faith, makes a report of suspected mistreatment or neglect of an at-risk adult.

(7) (a) Except as provided in paragraph (b) of this subsection (7), reports of the mistreatment or self-neglect of an at-risk adult, including the name and address of any at-risk adult, member of said adult's family, or informant, or any other identifying information contained in such reports, shall be confidential, and shall not be public information.

(b) Disclosure of the name and address of an at-risk adult or member of said adult's family and other identifying information contained in a report shall be permitted only when authorized by a court for good cause. Such disclosure shall not be prohibited when a criminal complaint, information, or indictment based on the report is filed or when there is a death of a suspected at-risk adult from mistreatment or self-neglect and a law

enforcement agency files a formal charge or a grand jury issues an indictment in connection with the death.

(c) Any person who violates any provision of this subsection (7) is guilty of a class 2 petty offense and, upon conviction thereof, shall be punished by a fine of not more than three hundred dollars.

C.R.S. 26.3.1 Part II: Protection Against Financial Exploitation of At-Risk Adults

201. Definitions.

As used in this part 2, unless the context otherwise requires:

(1) "At-risk adult" means an individual eighteen years of age or older who is susceptible to financial exploitation because the individual is unable to perform or obtain services necessary for the individual's health, safety, or welfare or lacks sufficient understanding or capacity to make or communicate responsible decisions concerning the individual's person or affairs.

(2) "Caretaker" means a person who is responsible for the care of an at-risk adult as a result of a family or legal relationship, including, but not limited to, a conservator or a guardian or a person with a fiduciary duty to an at-risk adult.

(3) "County department" means a county or district department of social services

(4) "Financial exploitation" means the illegal or improper use of an at-risk adult's financial resources for another person's profit or advantage.

(5) "Financial institution" means an organization authorized to do business under state or federal laws pertaining to financial institutions and includes, but is not limited to, a bank, trust company, building and loan association, savings and loan company or association, and credit union.

(6) "Person" means one or more individuals, limited liability companies, partnerships, associations, corporations, legal representatives, trustees, receivers, or the state of Colorado, and all political subdivisions and agencies thereof.

204. Reporting.

(1) (a) Any person specified in paragraph (b) of this subsection (1) who observes an at-risk adult being subjected to circumstances or conditions

that may reasonably result in the financial exploitation of the at-risk adult or who has reasonable cause to know or suspect that an at-risk adult has been financially exploited is strongly urged to submit, within twenty-four hours after such observation or after obtaining such reasonable cause, an oral report of known or suspected financial exploitation. Said person may submit the report to the county department of the county in which the at-risk adult resides, if known, or, during non-business hours, to the local law enforcement agency for the jurisdiction in which the at-risk adult resides.

(b) The following persons are strongly urged to report known or suspected financial exploitation of at-risk adults, as provided in paragraph (a) of this subsection (1):

- (I) Physicians, surgeons, physicians' assistants, or osteopaths, including physicians in training;
- (II) Registered nurses or licensed practical nurses;
- (III) Hospital and nursing home personnel engaged in the admission, care, or treatment of patients;
- (IV) Dentists;
- (V) Psychologists and other mental health professionals;
- (VI) Social work practitioners;
- (VII) Law enforcement officials and personnel;
- (VIII) Court-appointed guardians and conservators;
- (IX) Pharmacists;
- (X) Community-centered board staff;
- (XI) Personnel of financial institutions;
- (XII) State and local long-term care ombudsmen; and
- (XIII) Any caretaker, staff member, or employee of or volunteer at or consultant for any licensed care facility, or nursing facility;
- (XIV) Attorneys, so long as such reporting does not violate the Colorado rules of professional conduct.

(c) In addition to those persons who are strongly urged under paragraph (b) of this subsection (1) to report known or suspected financial exploitation of an at-risk adult, any other person may report such known or suspected financial exploitation of an at-risk adult to the local law enforcement agency or the county department of the jurisdiction in which the at-risk adult resides. The receiving agency shall prepare a written report within forty-eight hours after receipt of such a report.

(2) The written report made by a receiving agency pursuant to paragraph (c) of subsection (1) of this section at a minimum shall include:

- (a) The name and address of the at-risk adult;
- (b) The name and address of the at-risk adult's caretaker, if any;
- (c) The age, if known, of such at-risk adult;
- (d) The nature and extent of such at-risk adult's financial injury, if any
- (e) The nature and extent of the condition or circumstance that is likely to result in financial exploitation; and
- (f) Any other pertinent information

(3) A copy of the written report prepared by the county department in accordance with subsections (1) and (2) of this section shall be forwarded within twenty-four hours after receipt of an oral report made pursuant to subsection (1) of this section to the district attorney's office and the local law enforcement agency of the jurisdiction in which the at-risk adult resides. A copy of the written report prepared by the local law enforcement agency in accordance with subsections (1) and (2) of this section shall be forwarded within twenty-four hours after receipt of an oral report made pursuant to subsection (1) of this section to the county department and to the district attorney's office.

(4) No person, including a person specified in subsection (1) of this section, shall knowingly make a false report of known or suspected financial exploitation to a county department or local law enforcement agency.

(5) Any person, except a perpetrator, complicitor, or coconspirator, who makes a report pursuant to this section shall be immune from any civil or criminal liability on account of such report, testimony, or participation in making such report, so long as such action was taken in good faith and not in reckless disregard of the truth or in violation of subsection (4) of this section.

(6) No person shall take any discriminatory, disciplinary, or retaliatory action against any person who, in good faith, makes a report of known or suspected financial exploitation of an at-risk adult.

(7) (a) Except as provided in paragraph (b) of this subsection (7), subsections (1), (2), and (3) of this section, and 26-3.1-205 (2), reports of the known or suspected financial exploitation of an at-risk adult, including the name and address of any at-risk adult, member of said adult's family, or

informant and any other identifying information contained in such reports, shall be confidential and shall not be public information.

(b) Disclosure of the name and address of an at-risk adult or member of said adult's family or other identifying information contained in a report shall be permitted only when authorized by a court for good cause. The court shall not prohibit such disclosure when a criminal complaint, information, or indictment based on the report is filed.

(c) Any person who violates any provision of this subsection (7) is guilty of a class 2 petty offense and, upon conviction thereof, shall be punished by a fine of not more than three hundred dollars.

Appendix U

**MESA Policy and Procedure:
Mandatory Reporting****Determining Obligation to Report**

- If a volunteer receives a call from or regarding a survivor under the age of 18, that individual is to immediately notify the on-call supervisor to determine if there is an obligation to report and receive guidance on how to move forward.
- If a volunteer receives a call regarding a perpetrator in a position of trust to those under the age of 18 (regardless of the current age of the survivor), that individual is to immediately notify the on-call supervisor to determine if there is an obligation to report and to receive guidance on how to move forward.
- If you suspect that you have received information that will require filing a mandatory report, inquire as to the immediate safety of the survivor and/or any other potential child victims.
- Other than doing a safety assessment, refrain from asking too many follow-up questions. It is the job of law enforcement to investigate.

Once Obligation to Report is Determined

As a counselor/advocate, it is important for us to be as transparent as possible so that survivors can make decisions about what is right for them given their personal experience and situation.

- If you are on the hotline, let the caller know of your mandate to report the assault.
- Explain the process of reporting and what typically happens with a mandatory report. These situations do not always happen the same way, but generally explain:
 - A supervisor from MESA will call the proper authorities (law enforcement or social services) to make a report that within 24 hours.
 - Law enforcement will most likely attempt to contact the parents or legal guardians of the minor before questioning the survivor.
 - Law enforcement may open an investigation and talk to other people who may be witnesses to the incident or have information about the assault.

- Law enforcement may decide to take no action.
- If you are talking to a survivor under 18, it is important to give them as much control as possible in a situation that may suddenly feel very out of their control. Options you can offer are:
 - Ask them if they want to talk to their non-offending parents or legal guardian before you call law enforcement. If they choose to do this, explain that MESA will make the report within 24 hours. Ask how you can be supportive when they disclose to a safe adult.
 - Ask them if they would like you to call their non-offending parents or legal guardians before you call law enforcement. If the survivor chooses this option, it is preferred (but not necessary) that s/he is in the room with you when you make the call.
 - If logistically possible and desired by the survivor, the survivor can be in the room while you make the mandatory report. It can be empowering for them to know what you are saying to law enforcement.
- Explain Victim's Rights to the survivor and/or non-offending parents or legal guardians.
 - While MESA staff and advocates have a legal obligation to call and talk to law enforcement, survivors and/or their non-offending parents or legal guardians are not legally obligated to speak with law enforcement. They can simply say "I choose not to speak with you regarding this matter right now."
 - It is within the rights of the survivor and/or their non-offending parents or legal guardians to choose not to cooperate with law enforcement either immediately and/or at any time during the investigation.
- Ask them if they have any additional questions. If you are uncertain of the answer, tell them you will have someone follow-up with answers.
- Provide resources, especially the MESA 24-hour hotline number (303-443-7300).
- Ask if they want someone to follow-up with them in a few days to check in.
- If it seems appropriate, you can mention that mandatory reporting can create opportunities for additional support, like counseling, and that talking about abuse can be a powerful tool in the healing journey.

Making the Report

- All counselors are to call the on-call supervisor immediately after receiving a call from someone under 18 or regarding an individual under the age of 18. The supervisor on-call will determine if a report needs to be made.
- All reports will be made by a supervisor, even if the disclosure was made to a volunteer.

Agencies to Report to

- Perpetrator is a family member: Boulder County Department of Housing and Human Services (303.443.1000) between the hours of 9-5pm, Monday through Friday. If it is outside of this time, call the law enforcement agency where the sexual assault occurred.
- Perpetrator is outside the family: Law enforcement agency where the sexual assault occurred.

What Needs to be Reported

- Identifying information that you have about the survivor, including name, age, gender, and contact information, as well as any information known about the perpetrator, location, ages, or facts of the assault.
- ***Report needs to be made as immediately as possible and no later than 24-hours after the disclosure.***

Reminder to All Staff and Volunteers:

- **When you encounter a situation that needs to be reported, contact the supervisor on-call.**

Appendix V

Imagine!- Reporting Procedure for Mistreatment, Abuse, Neglect and Exploitation

Imagine!, as the Case Management Agency, has the responsibility to monitor the health and safety of people with developmental disabilities receiving services in Boulder and Broomfield Counties. As part of that responsibility, the Imagine! Case Management Department will monitor the process and outcomes of all abuse, neglect, mistreatment or exploitation investigations conducted by service agencies in Boulder and Broomfield Counties. Each service agency will have procedures for investigating allegations of abuse, neglect, mistreatment or exploitation that are in compliance with the Rules and Regulations of the State Department of Human Services. These procedures must include a provision that the Imagine! Case Management Department must be notified, at least verbally, of the allegation within 24 hours of the time the Director of the service agency receives the report of the allegation. A completed incident report must be sent to the Case Manager no later than 72 hours after the initial report of the incident. Each service agency will follow its internal procedures for investigating allegations of abuse, neglect, mistreatment or exploitation, ensuring also that reports are made as appropriate and required to Boulder County Housing and Human Services/Broomfield County Health and Human Services, local law enforcement and the Colorado State Health Department.

Reporting Responsibility: A staff person who has reason to suspect abuse, neglect, exploitation or mistreatment of an adult receiving services through Imagine! will make a report immediately upon discovery to a supervisor and/or the designated case manager for the consumer, regardless of the suspected source of abuse, neglect, exploitation or mistreatment. Incidents involving a child under 18 must also be reported to the county's protective services unit.

Internal Reporting:

- A staff person or volunteer who has reason to suspect mistreatment abuse, neglect, or exploitation of an adult receiving services through

Imagine! will make an internal incident report immediately upon discovery.

- M.A.N.E. includes:
 - **Physical Abuse** which includes but is not limited to such actions as striking, pulling, pushing, twisting body parts, or inflicting any physical injury to a consumer by any means. Physical abuse includes directing one consumer to physically abuse another consumer.
 - **Sexual Abuse** which includes but is not limited to sexual assault, rape, fondling, sexual exploitation or any sexual interaction between staff and consumers.
 - **Mental Abuse** which includes any action which creates mental anguish for the consumer. These actions include but are not limited to discriminatory remarks, belittlement, derogatory name calling, teasing, and unreasonable exclusion from conversation or activities and verbal abuse.
 - **Neglect** which includes the denial of meals, medication, habilitation and other necessities.
 - **Exploitation** includes any illegal or improper action affecting a person or use of the person's resources for another person's profit or advantage.
- This report will be routed to a supervisor and/or the designated case manager for the consumer, regardless of the suspected source of abuse, neglect, exploitation or mistreatment.
- This report is also routed to that program's supervisor and/or director, the client's case manager, the director of case management, and any other persons or departments associated with that client.

External Reporting:

- Additionally, dependent on the nature and unique details of the incident, an external report may be necessary, called a "Critical Incident Report".
- This would be routed to the Division of Developmental Disabilities, and may also be routed to the Department of Public Health and Environment.
- This report may also require the following internal investigation:

- Interview with victim(s) of alleged abuse, neglect, exploitation or mistreatment
- Interview with person(s) making allegations
- Interview with alleged perpetrator(s)
- Interviews with witnesses to alleged incident (may include other consumers, staff family members, etc.,)
- Other interviews pertinent to incident
- Documentation of any physical evidence pertinent to the investigation
- Results of investigations of any external agencies that may be available
- A summary of findings and actions taken
- Depending on the severity and/or nature of the suspected abuse, neglect, exploitation or mistreatment, the information that the consumer is able to provide and the suspected source of the abuse, neglect, exploitation or mistreatment, a report will be made to the local law enforcement agency and/or Adult Protection Services.

Reporting safeguards

Reports may be made by the victim, direct care providers, family, or anyone associated with the consumer. No individual is to be coerced, intimidated, threatened or retaliated against because the individual, in good faith, makes a report of suspected M/A/N/E and assists in any way in the investigation.

Reports to the police

If there is reason to believe a crime has been committed, the law enforcement agency with jurisdiction where the incident occurred will be contacted by your supervisor. Some examples of crimes to be reported are: assault, sexual assault, false imprisonment, suspicious death/homicide, criminal negligence.

Reporting procedure policy

The supervisor and/or case manager will ensure that the incident is documented according to Imagine!'s procedure for Incident Reporting and that a verbal report of the incident is made as quickly as possible to the department director and case manager. Case management will determine if

Adult Protective Services is to be notified. The incident report will be completed no more than 24 hours after the incident.”

Parent/Guardian

The parent of a minor, a guardian, or an authorized representative of the individual will be notified as soon as possible, but within at least 24 hours of a report of abuse/neglect.

Safety to Consumer

The direct care staff, supervisor or designee are responsible to ensure the safety of an individual suspected of being subject to mistreatment, abuse, neglect, exploitation. It may be necessary to seek immediate medical care or mental health support. It may be necessary to remove the person to a different setting or residence until an investigation is completed.

HRC (Human Rights Committee) Reporting

Imagine! case management is responsible to provide a copy of the incident report and written documentation to the human rights committee (see HRC CBL). The official Imagine! investigation report will contain the HRC’s review of the investigation, including recommendations and follow-up actions.

Appendix W

**MESA Policy and Procedure:
Threat to Self or Others****Policy:**

There are various situations where MESA may request that law enforcement perform a welfare check for individuals in the community. Welfare checks should only be requested if there is sufficient evidence to suggest that the individual is demonstrating a serious threat of imminent danger to themselves or imminent physical violence against a specific person(s).

In these situations, release of confidential information without prior authorization by the client should include only information required by health, safety, law enforcement, or emergency personnel to protect the health or safety of the client or others. Factors to consider are:

- a. The seriousness of the threat to the health or safety of the client or others.
- b. The need of the information to meet the emergency.
- c. Whether or not the parties to whom the information is disclosed are in the position to deal with the emergency.
- d. The extent to which time precludes obtaining authorization.

Procedure:

If a MESA staff person or volunteer, while in their professional role, concludes that an individual is an imminent risk to self or others, the MESA staff person or volunteer should alert their supervisor or MESA's Program Manager to determine the appropriate response plan.

- a. For threats to self: Contact Emergency Psychiatric Services (EPS) OR law enforcement.
- b. For threats to others: Notify law enforcement AND the person they are threatening.

If an interested party (such as a relative, friend, or employer) contacts MESA with concerns about an individual, the MESA staff or volunteer should advise the caller to contact Emergency Psychiatric Services (EPS) or request a welfare check by the appropriate law enforcement agency.