**SAN DIEGO 2018**

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The

Survivors AccessAbility

 Partnership

**Needs Assessment Plan**

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Acronyms:

ASL American Sign Language

AT Assistive Technology

CCS Center for Community Solutions

D/HH Deaf/Hard of Hearing/Late Deafened/Deaf Blind

DCS Deaf Community Services

DV Domestic Violence

IDD Intellectual and Developmental Disability

IPV Intimate Partner Violence

OVW Office on Violence Against Women

SA Sexual Assault

SDRC San Diego Regional Center

TOR Terms of Reference

Vera Vera Institute of Justice

# Introduction

In San Diego, 9.7% of the population are persons living with one or more disabilities.[[1]](#footnote-1) According to Disability Rights California, a partner of San Diego Regional Center, 50% of persons with intellectual and developmental disabilities are victims of IPV and SA at some point in their lives. Moreover, Deaf/Hard of Hearing persons are 1.5 times more likely to be victims of DV or SA.[[2]](#footnote-2)

With the support of the Office on Violence Against Women Disability Grant, coordination among three service organizations, Center for Community Solutions (CCS), San Diego Regional Center (SDRC) and Deaf Community Services (DCS), has resulted in the establishment of a collaboration that shares the same values, vision and aims to enhance services through inclusiveness and complementation of roles.

The Partnership’s project will have a special focus on survivors of IPV, SA, dating violence, and stalking with intellectual and developmental disabilities (IDD) or persons who are Deaf/Hard of Hearing, Late Deafened, and DeafBlind (D/HH). Through integration of best practices and knowledge shared among the partner organizations and system, CCS, DCS and SDRC anticipate enhancing their organizational capacities to support survivors living with IDD or persons whom are D/HH. The ultimate aim is to enhance appropriate service provision as well as increase accessibility to the targeted populations in trauma-informed and culturally responsive ways that ensure equality and equity to all.

The Survivors AccessAbility Partnership - hereinafter referred to The Partnership - is comprised of representatives from:

* **Center for Community Solutions (CCS) -** a nonprofit nongovernmental organization supporting survivors of sexual assault, intimate partner violence, dating violence, and/or stalking – as the lead agency.
* **San Diego Regional Center (SDRC) -** a nonprofit organization serving individuals with intellectual and development disabilities.
* **Deaf Community Services (DCS) -** a nonprofit organization serving individuals who are Deaf, Hard of Hearing, Late Deafened or DeafBlind.

The Partnership was built between these three agencies because of expertise in their respective fields and their commitment to addressing the intersection of these particular accessibility challenges with the needs of victim/survivors of IPV, SA, dating violence and stalking. The goal is to share best practices across agencies in an effort to provide the best possible services for client/survivors from the target populations.

## Collaborative members and their organizations



Since its establishment in 1969, Center for Community Solutions (CCS) has been marked by innovation, foresight, and dedication.

CCS is known in San Diego for its high-quality services and prolonged commitment to systems change regarding sexual and intimate partner violence, from a survivor perspective. In fiscal year 2018, CCS served nearly 23,000 adults and children through intervention and prevention programs related to intimate partner and sexual violence.

CCS operates the only rape crisis center in the city of San Diego along with a countywide 24-hour bilingual (Spanish/English) crisis hotline. The nonprofit agency also provides emergency domestic violence shelters, hospital and court accompaniment, as well as legal and counseling services for those affected by IPV, SA and stalking.

CCS also works with local community groups and schools to provide innovative prevention programs to promote healthy relationships. As part of The Partnership, CCS anticipates enhancing its services to reach survivors who experience barriers to accessing services because of D/HH or IDD.

San Diego Regional Center (SDRC) was established in 1969 to support persons with intellectual and/or developmental disabilities (IDD) and their families in locating and developing services and programs within their communities. SDRC serves people living within the geographic boundaries of San Diego and Imperial counties.

The organization is one of 21 Regional Centers supporting persons with developmental disabilities in the State of California and is known as a non-profit organization dedicated to serving and empowering persons with IDD and their families to achieve their goals with community partners in San Diego and Imperial Counties.

Serving over 28,000 clients per year, SDRC is a focal point in the community for information and services for persons with IDD, which includes intellectual disabilities, cerebral palsy, epilepsy, autism, or other conditions requiring the same type and support as someone with an intellectual disability. The primary goal of SDRC is to support services where each client is provided with opportunities to participate in everyday experiences and develop to their highest potential

**Deaf Community Services (DCS)** is the only nonprofit organization in San Diego County specifically dedicated to serving the Deaf Community. DCS' mission is “to advocate, educate and serve as partners within our community to achieve full access and inclusion of, by, and for Deaf, Hard of Hearing, DeafBlind and Late Deafened people”.

Since 1984, DCS has strived to remove the communication barriers that D/HH people face in their daily lives. DCS provides a variety of culturally and linguistically appropriate services that are matched to the individual’s needs. Services offered include employment, literacy, behavioral health, counseling, drug and alcohol recovery, interpreting, advocacy, information and referral, community education and youth and family programs.

Collaborations and partnerships are an integral part of service provision for DCS. Currently, DCS has partnerships with California State University at Northridge to provide family ASL classes and culture classes, Big Brothers and Big Sisters of San Diego for a youth mentor program, and Rescue Agency to provide an afterschool program to D/HH youth. This is in addition to other collaborations, including Center for Community Solutions, and San Diego Regional Center in an effort to provide inclusive and meaningful services.

# The Partnership Vision and Mission

The Survivors AccessAbility Partnership envisions all persons achieving complete self-determination without barriers or restrictions. It envisions a service delivery system that is responsive to different needs and is fully accessible to all survivors equally. The vision conceives an informed and supportive community in which every survivor is able to express their own choices freely and confidently.

The Partnership’s mission is to create holistic change within each agency’s culture to embrace and develop a responsive implementation plan that results in culturally humble service provision to all survivors, regardless of societal/community barriers. Our aim is to create a collaborative service delivery system that can produce a positive and progressive impact in the lives of all survivors who are D/HH and/or living with IDD in San Diego County.

# Needs Assessment Purpose

The purpose of the Needs Assessment is to identify the gaps and potential improvements within the Partnership agencies’ service capacity, commitment and delivery in order to achieve accessible, inclusive and responsive services for all DV/IPV/SA/stalking survivors who experience barriers to service.

# Needs Assessment Goals

* To identify current organizational policy, procedure and practice gaps along with barriers that impede the service delivery to victim/survivors who are D/HH or living with IDD at the three Partnership organizations, CCS, SDRC and DCS.
* To identify opportunities and corresponding supports for each organization’s culture regarding readiness to provide accessible and responsive services to the targeted communities.
* To identify the current capacities, skills, and knowledge of staff throughout each Partnership organization, highlighting their level of comfort and readiness to provide accessible and responsive services to the targeted communities.
* To identify, from a survivor perspective, competencies and limitations of each Partnership agency, looking to improve and enhance accessible and responsive services to the targeted communities with meaningful engagement of those with lived experience. “Nothing about us, without us.”

# Methodology

Due to differences among Partnership agencies and their clientele, each organization chose the best method of gathering information from people and groups.

## Data gathering

### Existing Data

In April 2018, with the support of OVW technical assistance provider, Vera Institute for Justice (Vera), the Partnership completed a Performance Indicators analysis. Performance Indicators are provided by OVW through Vera to enhance the project’s monitoring and evaluation from a results-based management lens to support initial identification of an organization’s capacities and policy gaps and to explore the readiness of each agency to serve D/HH survivors and survivors living with IDD. Through this initiative, the Partnership is learning how challenges may intersect and the complexities of working with each other’s populations, while acknowledging the importance of working collaboratively to improve service delivery.

Each Partnership organization has completed its initial assessment, obtaining a baseline analysis of current agency status with regard to the provision of safe, accessible services and policies that consider all of the aspects of service delivery to the targeted communities. Under “capacity”, agencies assessed material, programmatic and human resources. Under “commitment”, agencies assessed responsibilities, partnerships and policies.

The Performance Indicators analysis will be repeated by the fourth quarter of 2018 and will be compared to the April scores. The Partnership will repeat the Performance Indicators analysis every six months. The aim is to use these scores to assist each agency in implementing changes during the strategic planning and implementation phases of the project, and to allow tracking each agency’s progress within the grant timeframe.

Analysis of the current indicators:

As expected, the overarching baseline score of the Partnership was low. Some scores varied from agency to agency depending on capacity and mandate. The average of the Partnership’s Performance Indicators in both commitment and capacity sectors is 47% (CCS is 49%, SDRC is 50% and DCS is 42%).

|  |  |  |  |
| --- | --- | --- | --- |
| Avg. Partnership | Avg. CCS | Avg. SDRC | Avg. DCS |
| 47% | 49% | 50% | 42% |
| By Agency |  |  |  |
| Organization | Commitment  | Capacity  | Avg. % |
| CCS | 62% | 36% | 49% |
| SDRC | 56% | 43% | 50% |
| DCS | 46% | 38% | 42% |

With the support of the OVW Disability Grant, the Partnership aims to improve its organizational policies to increase culturally humble, trauma-informed and accessible services to survivors of DV, IPV, SA and stalking who are D/HH or living with IDD.

The below charts illustrate each Partnership agency’s Performance Indicators scores in both commitment and capacity sectors. The scores shown above are an average of both scores for each agency.

1. Center for Community Solutions
2. San Diego Regional Center (SDRC
3. Deaf Community Services

### New Data

The Partnership has agreed that methods of information gathering will vary depending on the characteristics of each agency or groups within each agency. The Partnership believes that, by giving the participants the option to decide how they will engage in the process, more transparent and accurate information will result.

Although the focus group is the most common method that will be utilized by the Partnership organizations, the Partnership has also taken into consideration cultural aspects that may hinder obtaining accurate data in a group setting. If an individual wants to provide input, but doesn’t feel comfortable in a group setting, each agency will be prepared to offer another engagement option to that individual. Examples of options include an in-person interview, paper interview or online survey.

During the Needs Assessment process, the Partnership will focus on gathering information from agency clients and frontline service providers. This will allow better understanding of victims/survivors’ challenges and enhance the progress of the Partnership’s performance moving forward. Information will be gathered in the survivor’s or service provider’s preferred language using professional interpretation when required.

CCS will utilize group discussion/focus groups and online surveys for clients and for all staff regardless of role within the organization. SDRC will use both group discussion and in-person interviews with its clients to increase access and encourage participation of those they serve and focus groups or online surveys for staff. DCS will use in-person interviews with D/HH persons and online surveys with most staff.

## Sample Size/Identification of participants

|  |
| --- |
| **Center for Community Solutions**  |
| Participants | Approx.# |   |
| 1. STAFF (3 Groups) |  |   |
| Executives and CEO | 4 | Focus group  |
| Board | 5 | Focus group or Interviews |
| Residential, Prevention, Sexual Assault Response Team (SART), Legal, Admin, and Counseling Staff.  | 32 | Focus group \*Survey Monkey will be the last option to consider. |
| 2. Clients (2 Groups) |  |   |
| Clients of Residential, Counseling, Sexual Assualt Services, and Legal. | 20 | Focus group or Interviews\*Survey Monkey will be the last option to consider. |

|  |
| --- |
| **San Diego Regional Center** |
| Participants | Approx.# |   |
| STAFF (1 Group) |  |  |
| Executives and CEO | 7 | Focus group |
| Vendors/residential staff | 20 | Paper Survey  |
| Support staff and SCs | 75 | Paper or Survey Monkey  |
| Clients (1 Group) | 15 | Focus group and interviews |

|  |
| --- |
| **Deaf Community Services**  |
| Participants | Approx.# |  |
| 1. STAFF (2 Groups) |  |   |
| Executives and CEO | 9 | Group discussion  |
| Counseling, Admin & Support staff | 40 | Group discussion and Survey Monkey |
| Freelance interpreters  | 25 | Survey Monkey  |
| 2. Clients  | 10 | In-person interviews |

## Focus groups

**Center for Community Solutions**

CCS is a nonprofit that provides services to nearly 23,000 survivors of IPV, SA and stalking survivors per year. It is also the only rape crisis center in the city of San Diego. CCS will conduct **four (5) focus groups,** as follows: **one (1) for its executives and directors, one (2) for staff, and two (2) for clients**. In-person recruiting will be used, primarily, for client outreach. The process will be explained through direct invitations for clients visiting CCS premises, in addition to phone contact for current clients as long as their contact information indicates a safe number to call. If clients are interested, they will be invited to join a focus group. CCS will offer the option of responding to the online survey (Survey Monkey), if preferred by staff or clients.

During the week of January 7th, and for a whole week timeframe, the counselors and the legal staff member at CCS will end each private session with an invitation to participate in the focus group, using the script provided. For each client, the counselor and the legal staff member will assess based on their own knowledge of the client whether the focus group is appropriate for that particular client. Similarly, at the same week, the shelter administration staff will communicate with clients the invitation followed by the RSVP form for those who have the interest to participate.

**San Diego Regional Center**

SDRC was the third Regional Center established in California to assist persons with intellectual disabilities and their families in locating and developing services and programs within their communities. SDRC will use **one (1) focus group for directors and one (1) for clients and/ or interviews**. Although SDRC provides several different support services to this population, it is not a direct service provider itself. SDRC utilizes many agencies and vendors that provide direct support in training, daily living skills, monitoring health and safety, community mobility, vocational support, and other direct support needs. Therefore, By the week of January 7th , and for a full week using the invitation scripts provided, SDRC service coordinators and vendors will communicate the invitation to the clients they serve. SDRC will identify persons living with IDD who are not conserved and can knowingly consent to participate in the Needs Assessment process. These individuals will participate in focus groups or one-on-one interviews.

**Deaf Community Services**

DCS is the only nonprofit organization in San Diego County specifically dedicated to serving the Deaf Community, serving over 5,000 individuals per year. Based on Deaf cultural considerations and DCS client feedback, DCS will not conduct focus groups with clients; instead, they will **conduct in-person interviews.**

DCS will facilitate **one (1) focus group for its directors** **and executives** **and** **one (1) focus group for the counseling staff,** **in addition to offering the online survey option**. For staff, and freelance interpreters, DCS will utilize the online survey to obtain information. By involving the interpreters, the Partnership will have another layer of information that can benefit the strategic planning and policy revision phases. During the week of January 7th, and for a full week, DCS administrative staff will ask every client who checks in or upon check out, if they would like to participate in a group, using the invitation script provided in the appendix.

The Partnership agreed to use focus groups to gather information from executives and staff. The Partnership believes focus groups are the most efficient way to effectively engage groups in a short amount of time. These groups will engage each agency’s executives and staff to discuss their opinions, perspectives, and skills as they respond to different open-ended questions. The groups will encourage freethinking to explore alternatives for challenges or complexities that arise during the sessions. Each Partnership agency has carefully examined its Performance Indicators scores and has formed sets of customized questions addressing current policy and service gaps identified in the baseline record*. (Please refer to pages 9-12.)*

## Interviews

Since SDRC outsources most of its services, vendors are one of the primary direct service contacts for their client population of people living with IDD *(please refer to page 15)*. Accordingly, SDRC will offer paper-based surveys as an option in order to obtain second-hand data from vendors on how best the agency can serve people with IDD. SDRC will distribute online or paper questionnaires to gather information from 20 different vendors about current culture surrounding their work and the frequent barriers and challenges they or their clients face, and what Partnership vendors need to enhance support to survivors living with IDD.

## Client Interviews

Based on cultural considerations, both SDRC and DCS will facilitate in-person (one-to-one) interviews with its clients. CCS will also have this option open to all participants, clients and staff. This method may provide increased confidentiality and safety for participants who prefer not to engage in a group setting. CCS will set interview appointments when requested for in-person one-on-one engagement.

The Partnership’s goal is to collect information about accessibility and individual client cultures. We hope to elicit clients’ ideas, expectations and suggestions on how Partnership agencies can best support them and meet their needs.

### Persons Living With IDD

Persons with IDD are experts in their own lives and should be afforded the agency and power to speak about their needs and expectations when receiving services from Partnership agencies. The Partnership’s goal is to make our agencies more accessible, culturally aware, knowledgeable and trauma-informed. By engaging people with a cross-section of developmental disabilities, we hope to gain information about the following:

* What makes a service provider accessible and comfortable for people with IDD?
* What are the best methods of outreach to people with IDD about accessible and disability-informed services?
* What are the barriers to services?
* What do culturally responsive services look like for IDD survivors?
* What are the best practices for serving people with IDD, including staff behavior, knowledge and skills?

### People Who Are D/HH

Deaf and Hard of Hearing individuals often have a unique sense of identity and culture. They often share social beliefs, behaviors, art and literary traditions, history and values. Most use sign language as their main means of communication. With their lived experience, they are the experts of their own culture and stories. Therefore, it is of paramount importance to engage this community and ask them directly what their personal expectations are when receiving services. In this way, we hope to create a more accessible and appropriately responsive service hub for D/HH people, and create a service-responsive model that improves recognition of unique perspectives for all clients. DCS has chosen to conduct in-person interviews to discover more about the following:

* What makes a service provider accessible and comfortable for people who are D/HH?
* What are the barriers to services?
* What do culturally responsive services look like for D/HH survivors?
* What are the best methods of outreach to D/HH people of the available services?
* What are the best practices for serving people who are D/HH, including staff behavior, knowledge and skills?

### Survivors of Domestic Violence and IPV

The Partnership believes that survivors of DV/IPV are the experts of their own lives and should be afforded the agency and power to speak to their needs and expectations. They are able to inform us as to what constitutes accessible and appropriately responsive services and how they would like to receive them. By engaging victims/survivors of DV/IPV, we hope to gain information about the following:

* How can organizations communicate that they are a welcoming and safe place for victims/survivors to disclose or report their experiences of DV/IPV?
* What makes service providers accessible, approachable, safe, and comfortable?
* What are the barriers to services?
* What are the best methods of outreach to victims/survivors of DV/IPV regarding available services?
* What is the importance and value of confidentiality as a safety tool?
* What are best practices for serving victims/survivors, including staff behavior, knowledge and skills?
* What impact does DV/ IPV trauma have on someone’s willingness to seek services?

### Survivors of Sexual Assault (SA)

We believe that victims/survivors of SA are the experts of their own lives and should be afforded the agency and power to speak to their own needs and expectations. Therefore, it is imperative to ask them directly what their personal expectations are when receiving services, to inform the Partnership on developing more accessible, responsive and trauma-informed practices and policies. By engaging victims/survivors of SA, we hope to gain information about the following:

* How can organizations communicate that they are a welcoming and safe place for victims/survivors to disclose or report their experiences of SA?
* What makes service providers accessible, approachable, safe, and comfortable?
* What are the barriers to services?
* What are the best methods of outreach to victims/survivors of SA to available services?
* What are best practices for serving SA victims/survivors, including staff behavior, knowledge and skills?
* What impact does SA trauma have on someone’s willingness to seek services?

## Focus Groups and Interviews Procedure

1. 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.
2. CCS will conduct five focus groups, one (1) for its executives and one (2) for staff. CCS will conduct two (2) focus groups for its clients who are survivors of DV/IPV and/or SA. (3) Facilitators will be assigned from CCS to conduct the focus groups. To ensure further assessment transparency, CCS Facilitators will be from the administration staff whose positions are not client-service based to ensure an environment that has no conflict for clients to talk about their service experience within the organization. The Facilitators and the Notetakers will not be mandated reporting personnel. If a one-to-one interview is preferred by a client, the Facilitator will give them two meeting options as illustrated in the RSVP form.
3. All SDRC personnel are mandated reporters. SDRC identified two Interviewers from its administration staff in their Sexual Health Committee and one Facilitator for each group (2 service coordinators and the behavioral health services’ manager). All will have the required expertise working with persons with IDD and are knowledgeable about conducting focus groups and interviews.
4. All DCS personnel are mandated reporters. DCS will assign one Interviewer for clients from their administration staff who was selected to ensure a neutral environment for clients to talk about services, and a Facilitator to work with their executives.
5. Each focus group will utilize a Facilitator, a Notetaker, a Floater, and a counselor/advocate.
6. If a one-on-one interview is requested instead of participation in a focus group, there will be a Notetaker present with the Interviewer so that the Interviewer can be fully engaged with the participant. There will be a counselor/advocate available, if needed.
7. All management, staff and vendors will be assured that participation is optional, and their decision whether or not to participate will not impact their standing with the respective agency. For staff, participation (or lack thereof) will not impact their employment; for vendors, participation (or lack thereof) will not impact their contracts; and for clients, participation (or lack thereof) will not impact their services.
8. A list of local community resources (crisis lines and others) will be available at all focus groups and interviews should any participant need information on how to obtain support. The counselor or advocate present may assist in reaching out to services if needed or desired.
9. For all focus groups, an on-site counselor or advocate from each agency will be available in the event participants request emotional support during or following the group engagement. Referral information for follow-up counseling will be provided as needed.

At the beginning of each focus group, the following orientation information will be discussed:

* Passive consent and voluntary participation.
* The purpose of the focus group and premise that participants are being called upon as experts to assist us.
* Confidentiality and exceptions to confidentiality, including mandatory reporting requirements.

## Online surveys

As part of the Partnership’s values, we believe that every person has the right to make informed choices that will best serve them and meet their needs for safety. These choices should be respected by all. We are also committed to ensuring that our collective services are made available in a culturally and linguistically responsive manner to all people, including those who are D/HH and/or living with IDD. Therefore, an online response option was agreed upon by all partners and will be made available for both staff and clients at the three organizations.

The Partnership has agreed to use Survey Monkey ([www.surveymonkey.com](http://www.surveymonkey.com)) as its online method of survey. To ensure data accuracy and transparency, the Partnership agreed on the following:

* No identifying information or demographics, such as name, religion, race or ethnicity, or address will be requested.
* Identification of age and gender will be optional.
* Each organization will have two customized survey platforms, one for clients and one for staff.
* Participation is anonymous and only representatives of the Partnership will be able to access the survey portals.
* Each organization is responsible for disseminating the survey link to its staff and clients. Online surveys will be the last option to use, unless requested by staff or clients. For CCS, a desktop computer will be available at all locations for clients to conduct the online survey. Recruiters in each organization will have the link ready for those who ask about an online survey option.

## Personnel Identification

All personnel who the Partnership identifies as Recruiters and Participants for the Needs Assessment will be provided with specific Terms of Reference (TOR), as illustrated below. The TOR includes a description of requirements, rights and responsibilities to ensure that each Recruiter has a clear understanding of their mandate. Prior to any Needs Assessment engagement, all Recruiters and Facilitators, unless they are members of the Partnership, will be required to complete a one-hour preparatory training on the following:

1. An overview of the Disability Grant and the Needs Assessment objectives and process.
2. An overview on best practices developed by previous collaborations regarding how to manage special circumstances during the process.
3. Information about their role, rights and expectations.
4. Information about safety, confidentiality, reporting requirements and accommodations.

### Facilitator and Recruiter

* 1. **CCS will assign three Facilitators and three Recruiters**. Two CCS administrative staff will conduct the two client and the two staff focus groups as Facilitators and a CCS Department Director will facilitate a focus group with the CCS Board of Directors. As Recruiters, CCS staff will reach out to clients and staff to invite them to the focus groups or interviews. One therapist, one legal staff and one shelter staff will be the Recruiters for CCS. (Page 15&16)
	2. **SDRC will assign three Facilitators** comprised of two administrative staff from SDRC and one Partnership staff representative. The Partnership staff representative will facilitate the executive focus groups while the other Facilitators will lead the client focus groups and in-person interviews. SDRC will have two of their client support staff and four of the vendors as Recruiters.
	3. **DCS will assign two Facilitators** comprised of a therapist who will facilitate the executive and staff focus groups and one administrative staff to facilitate client in-person interviews. This Facilitator will explain mandated reporting and confidentiality to each participant prior to the interviews. DCS will recruit Participants through its client support staff.

#### Facilitator Role

The Facilitator’s role is to conduct focus groups and/or interviews, taking into consideration the following:

* 1. The Facilitators will refer to pages 70-78 for more information about their role.
	2. Welcome Participants and introduce the Notetaker and any other Partnership partner or personnel assigned for the Needs Assessment.
	3. Briefly explaining the purpose of the assessment and its objectives.
	4. Prior to beginning the questionnaire and prompts, the Facilitator will review general housekeeping details and will address safety and confidentiality issues using the script created by the Partnership.
	5. Ensure people feel the environment is comfortable and safe and explain that participants can leave at any time. Facilitators will also ensure participants agree to participate before starting.

### **Note Taking**

The Partnership’s project manager/ coordinator will be the Notetaker at all focus groups and interviews. CCS will secure interpreters for anyone requesting a language other than English, who can also facilitate accurate translation for notetaking.

#### **The Notetaker Role:**

The Notetaker is to take notes during focus groups and/or interviews, taking into consideration the following:

1. Objectively take notes of the discussion.
2. Not participate in the discussion and sit in a part of the room that will be the least distracting for participants, when possible.
3. Record what is said without paraphrasing or including identifying information, and record when emotions such as frustration, anger, or happiness are expressed.
4. May ask that something be repeated by raising their hand.
5. Not link any information shared to specific participants.
6. Be responsible for ensuring that all written information and notes are stored in a secure location, in a locked file cabinet, at CCS’s office that only the Program Director and the Project Manager can access.
7. At the end of each focus group/interview, the Notetaker will debrief the session with the Facilitator, jointly identifying themes, significant comments, and new information related to the goals of the Needs Assessment. If the stand-by counselor/advocate is interested in contributing, they may do so.

### **Floater (Focus groups only)**

The primary responsibility of the Floater is to ensure that the Facilitator and the Notetaker have what they need to conduct the meeting.

#### **The Floater Role:**

1. Assist with room setup and ensure that focus group participants feel safe and comfortable.
2. Escort Participants who wish to speak with the stand-by counselor/advocate or their personal care attendant, or need to leave the room/building for any reason.
3. Assist with keeping track of time when not assisting individual Participants.

### **Counselor/Advocate**

CCS will have a counselor or advocate present in all focus groups to provide emotional support, when requested, either during or after the group session. A counselor/advocate will also be available for in-person interviews as well. Both CCS and DCS will identify two counselor/advocates from their agencies to fill this role. The counselor/advocate will not participate in the focus groups. All Participants will be informed that the counselor/advocate is available if desired. Counselors/advocates will be staff members who have experience working with victims/survivors of DV, IPV, SA and stalking.

#### **The Counselor/Advocate will:**

1. The counselor/advocate will be a member of CCS staff who is a certified DV/SA Counselor by the California Office of Emergency Services (CALOES) and have completed the Crisis Intervention Training (CIT), including more than 66.5 hours of training on topics pertaining to trauma-informed care, disability awareness, DV/ IPV/SA prevention, and crisis intervention techniques.
2. The counselor/advocate will meet with participants in a private and accessible space to ensure confidentiality and safety.
3. All will have lists of local resources to assist Participants with warm referrals.

# **Recruitment Plan**

The Partnership will follow certain steps to support the process of recruiting participants and members of the Partnership will act as primary recruiters for each group.

## **Identification of Facilitator, Recruiter, Floater and Counselors/Advocates**

Each agency decided who will be their facilitators, recruiters, floaters and counselor/advocates. Before the process starts, an email will be sent to the selected individuals as the Needs Assessment Staff. This email will include an overview of the project, the Needs Assessment process, and an outline of the role and responsibilities of each required support position. Once the staff members confirm their availability, each organization, in consultation with the Partnership, will arrange for a one-hour training and begin preparations for the Needs Assessment process.

## **Identification of participants**

### **Executives and staff**

Each member organization has identified lead executives who are the primary decision makers involved in the project and will direct the required agency changes.

The primary representative of each member organization in the Partnership will be responsible for communicating the process with the lead executives, ensuring their interest in the project and data collection results from focus groups, in-person interviews and online survey.

Each Partnership representative will lead the executive focus group discussion, accompanied by the Notetaker. The Partnership’s project manager will coordinate the timing of the focus groups to ensure Notetaker attendance at all groups, unless otherwise agreed to by the Partnership.

The representatives of each member organization will ensure email and calendar invitations are sent to staff. This will include an overview of the process in addition to some suggested dates/times for the focus groups/interviews and the option of the online survey. Each Partnership staff representative is responsible for collecting data and forwarding it to the Partnership’s project coordinator within the agreed timeframe.

### **Clients**

Each member organization has a unique mission and mandate; therefore, clients’ needs and expectations vary from one organization to another. Consequently, the Partnership decided to have customized methods of approaching each organization’s clients, with the goal of ensuring comfort, transparency and a safe process for all participants.

**Center for Community Solutions (CCS)** will recruit IPV and SA survivors. With the support of its staff, CCS will choose two front-line service providers to accomplish the client outreach and recruitment. Outreach will be accomplished using:

1. Telephone calls if there is prior information that such contact is safe.
2. In-person invitations through front-line service staff, such as therapists, SA and IPV advocates, administrative office staff, shelter staff and attorneys. A simple brochure/invitation will be made available and will be disseminated to clients.
3. A brochure and/or flyer posted in every CCS reception area.

**San Diego Regional Center (SDRC)** will recruit people living with IDD. This will be done in coordination with SDRC Service Coordinators as well as families and vendors when appropriate. SDRC believes participants with IDD may prefer to be accompanied to interviews or focus groups by someone who they know and trust. Offering this option may ensure that client participants are more at ease with the unfamiliar process. The Recruiter and Facilitator will inform clients of the need to hear their opinions and lived experiences in order to evaluate current service delivery. Participants will have a choice of participating in a focus group or an in-person (one-on-one) interview.

SDRC will conduct outreach and recruitment by:

1. Verifying client interest and any needed accompaniment assistance.
2. Contacting identified Vendors and announcing the opportunity for participation.
3. In-person phone calls made by the assigned Facilitator.
4. A simple brochure and/or flyer posted in office reception areas and delivered to a representative sample of SDRC Service Coordinators.

**Deaf Community Services (DCS)** will recruit people who are D/HH. DCS will approach its clients through their events and distribution of information flyers by staff members, including frontline client service staff. Those who express interest will then become part of the focus group or in-person interviews and will be asked to complete the recruitment materials *(as illustrated on pages 43-46).*The recruitment materials will include an RSVP form (Appendix I) that will list accommodation options, and invitees will be instructed to complete the form and return it directly to the Recruiter. This is to ensure that each potential participant is comfortable with the Needs Assessment and their role in the process. The recruiter will monitor the RSVP process carefully and will be prepared to provide clarity or additional information to anyone who requires it. All invitees will be assured that participation is optional, and the decision to participate or decline will not affect the services they receive from the agency in any way.

# **Recruitment process**

The Recruiter will follow the recruitment scripts developed by the Partnership for the targeted audiences. The Recruiter will:

1. Review the recruitment materials, including RSVP form.
2. Inform Participants that all focus groups will be transcribed by the Notetaker.
3. Alert the invitee of the Partnership’s mandated reporting status (if applicable) and what that means under California Law.
4. Discuss the compensation Participants will receive.
5. Inform staff that they will NOT receive compensation for participation in the interviews/groups.
6. Review date, time and location of the focus groups and, if the Participant requests a reminder, confirm the best way to provide that reminder, considering safety concerns.
7. Review accommodation options.
8. Confirm whether or not the individual is willing to participate.
9. Provide the invitee with an RSVP form and request that they complete the form while the Recruiter is present.
10. The Recruiter will go through each section of the RSVP form, explaining what is needed and ensuring that the invitees understand what they are committing to.
11. Offer an individual interview for those who 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 date/time offerings.
12. The Recruiter will ensure that this date and time is listed on the RSVP form and answer any additional questions.

Tools

The Recruiter will make sure that every document is clear and understood by all. Recruiters will utilize the following tools during recruitment:

1. **RSVP Form**

All invitees will receive an RSVP form. The RSVP form will ask for the invitees’ names or initials, whichever is preferable by them. It will also include a question on how they prefer to participate in the Needs Assessment process (focus group/interview or online survey), and what accommodations they may need (if any). Initials collected from the RSVP forms will be utilized to connect participants with any needed accommodations, if requested.

The Project Manager will be the designated point person for keeping track of all RSVP responses and accommodation requests for all focus groups and interviews. The Project Manager will ensure that all RSVP forms are destroyed within one day following the focus group. The Recruiter and Project Manager will be the only individuals to view the names/initials of Participants. The Participants’ initials will not be linked to any information shared during the focus group/interview and will not refer to the person’s identity.

1. **Meeting Card Reminders**

Because we recognize that Participants may want a meeting reminder, we will provide all invitees with the option of taking a meeting reminder card with them (Appendix I). This will be the only written material that people can take with them from the recruitment process. This card will be the size of a business card and will only have a blank space to fill in the date/time of the meeting. It will not state anything about the project or the location address recognizing safety concerns of the DV/SA survivors involved.

**Trainings**

Although Partnership members will act as Facilitators for their group discussion/interviews, other staff members will also act as Needs Assessment Facilitators and Recruiters from each of the three member organizations.

If a staff person will be recruiting, a formal training will be required. All trainings shall be conducted by a Partnership member and it will last no more than one hour. The training will include the following topics:

* 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 how to keep track of the size limitations of each group
* For Recruiters of people living with IDD: Recruiters will verify through the SANDIS database individuals who are independent decision makers (unconserved).
* Ensuring accommodations are met and interpretation is arranged for languages other than English.
* The compensation being provided and how they can choose to have compensatory gift cards held for future use by the Project Manager. (See Appendix X for Gift Card Policy & Procedure.)

**Compensation**

During all client focus groups/interviews, the Partnership will provide light refreshments. The Facilitator of these groups, in coordination with the Project Manager, will make accommodations for any food/drink restrictions and requirements as needed.

Additionally, we will provide all clients with a $25 Visa/Mastercard gift card to cover their time and travel to the focus group/interview. Individuals will be told during recruitment and at the beginning of each focus group/interview that a gift card will be provided to them. They will also be told that, if they prefer not to take it with them (such as for safety concerns), the Project Manager can keep it 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 the compensatory gift card.

The Notetaker will keep a log and count the number of participants and gift cards given out to keep a record for audit requirements. The Facilitator will sign off that the distribution number is correct after each focus group/interview, acting as a witness and ensuring accuracy.

**Consent and Confidentiality**

1. **Consent**

We will use a Passive Consent Process for all groups and interviews because it provides for stricter confidentiality of participants, prevents a paper trail, and eliminates time spent on administrative matters in the session. Passive consent will be clearly outlined in the Facilitator’s opening remarks. 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. Through passive consent, Participants of focus groups and interviews agree to:

* Participate in a focus groups/interview.
* Have their comments anonymously recorded in writing.
* Have their comments anonymously used in the Needs Assessment report, which will be seen by Project staff, the funder, and technical assistance provider.
* Have their comments anonymously used for developing the Partnership’s strategic plan and implementation activities.

For online participation, any IP addresses or user information (such as email or other identifying characteristics) will be destroyed after including in notes.

**Confidentiality**

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

* Each group/interview session will be given a specific name such as (group A, B, C, etc.) in order to ensure to facilitate group requirements, number of gift cards/refreshments and other specific requirements per session.
* Information that contains personal identification will only be collected during the RSVP process when participants will be asked their names or initials for the purpose of linking them with their unique identifier, requested accommodations and gift card accounting.
* Gift card information, which will be only use the Participant’s group name, will be kept in a locked cabinet in the CCS headquarter office, only CCS Program Director is the designated personnel responsible of that cabinet. However, it is the responsibility of the Project Manager to ensure gift cards distribution in the three locations of the group sessions/interviews.
* In coordination with the Recruiter, the Project Manager will keep a list of any individuals who have requested accommodation or interpretation assigned to their unique identifier and group name. This information will be brought to each focus group/interview as needed, and will be destroyed within one day following the focus group /interview.
* 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 disclose any identifying information about themselves, staff or program participants.
* The recruiters who receive the RSVP forms will keep the RSVP forms in a sealed envelope while in their possession. Immediately after each recruiting session, the Recruiter will contact the Project Manager and arrange for the delivery of RSVP forms within two business days.
* All RSVPs will be destroyed after each focus group/interview.
* Focus group participants will be asked to keep confidential any information discussed or shared during the focus group from anyone who did not participate in their specific group.
* Participants will be asked to not discuss what is said in the group with other group participants once the session is over. However, because we cannot ensure that Participants preserve confidentiality, Participants will also be encouraged to be mindful of what they share.
* The Notetaker will not link personal identifying to comments made during any focus group or interviews.
* Any information gathered through the Needs Assessment process will be kept by the Project Manager in a locked cabinet and stored in a password-protected computer that can be accessed only by the Project Manager and Project Administrator.
* The Project Manager or designee will act as Notetaker and will provide the Partnership members with summaries of the focus groups and interviews.
* With the support of the Project Manager, each Recruiter is responsible to process the accommodation requests following its submission and prior to any session.
* The report will not be shared with anyone outside of the Partnership until it has been reviewed and approved by the Partnership, the Vera Institute of Justice, and the Office on Violence Against Women.
* The Partnership, in coordination with Vera and OVW, will determine who will see this information once it is approved.
* All notes and paperwork related to the Needs Assessment will be destroyed after the Strategic Plan has been approved by OVW; however, we cannot guarantee if a Participant discloses or shares information outside the focus group.

**Mandatory Reporting**

Within the Partnership different services each organization provides may completely differ from its peer agency partner, hence the mandatory reporting shall vary according to different staff roles.

Partnership staff at SDRC and DCS are mandatory reporters.

In consideration of California Evidence Code Sections 1035-1036.2 and 1037.1-1037.2, which define the terms “Domestic Violence Counselor” and “Sexual Assault Counselor” and their roles of data protection under which the communication between victim counselors and clients are confidential, CCS has different mandatory reporting considerations. All CCS staff, with an exception of its therapists, are not mandatory reporters, except in cases of serious child harm or neglect, suicide, or homicide, as outlined in California statute.

The focus group and interview participants will be informed of the mandated reporting requirements during the Facilitator’s opening comments at each session. For DCS and SDRC, the Facilitator shall be prepared to interrupt a person who appears about to disclose to remind them of the mandatory reporting requirements.

**Accessibility Consideration**

The Partnership is committed to providing fully accessible focus groups and interviews for all participants throughout the Needs Assessment process. To the best of our ability, accessibility will be ensured through the following:

* Accessible facility space will be used for all focus groups/interviews. Focus groups will also be offered in space that is commonly used by the participants, so that they are already familiar with the surroundings.
* Reasonable accommodations will be provided to those participating. The RSVP form for focus groups will include a checklist of available accommodations.
* Recruiters and Facilitators will be instructed to attend to the particular needs of each audience and speak/present in a manner that is accessible to all participants.
* All print materials and Needs Assessment tools will be developed using plain language and an accessible font type and size (generally larger than 14).
* Participants who employ Personal Care Aides (PCA) will not be permitted to have them in the room during the focus group; however, if a participant needs to have a PCA in the room, the Partnership will access a PCA from another agency for the focus group. If a Participant requires their PCA be on the premises, but not in the room, the Floater will escort the Participant requesting PCA assistance out of the room and to that individual (outside of the focus group area but on the premises).

**Safety Considerations**

Physical and psychological safety is a primary consideration of the Partnership, while recognizing 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 Partnership 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 Partnership agencies and the services they provide. Questions are not intended to gather personal experiences related to violence, abuse, or neglect.
* For people served: If the discussion of services or accessibility brings up memories or intense feelings and/or if a Participant appears likely to disclose, a counselor/advocate will be available at each focus group for survivors and people with disabilities to provide emotional support as needed either during or following the session. A private, accessible space will be made available to ensure confidentiality and safety. Participants will be told that the counselor/advocate is available and where the counselor/advocate is located, and they can request an escort to the counselor/advocate.
* For people served: Lists of local resources will be available to anyone requesting one.
* Anyone may discontinue participation in the process at any point if they feel uncomfortable.
* No one has to answer any question that causes discomfort.
* There will be no consequence to employment/services for anyone who chooses or not to participate in the Needs Assessment process.
* No personally identifying information will be linked to those participating in the process, other than to assure for the provision of requested accommodations.
* We will be offering individual interviews to anyone who would prefer to participate outside of a group setting.
* For people served: A client participant has the option for their gift card to be held for future use in a locked cabinet by the Project Manager until they are ready to retrieve it.

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 Partnership agencies. The phone number listed on the card has a confidential voicemail.
* We will ask for the initials of all participants on the RSVP form for the purpose of connecting individuals with their requested accommodations and will not be linked to any other identifying information.
* We will ask for contact information from those who request a meeting reminder. This information will be destroyed as soon as the reminder is made and prior to the focus group/interview.
* Any print materials and signage utilized for focus groups and interviews for clients will not list Partnership agency names or use language regarding the intersection of intimate partner or sexual violence and disabilities.
* An individual’s Personal Care Attendant (PCA) will not be permitted in the room during focus groups or interviews; however, accommodations will be made for anyone requiring the assistance of a PCA.
* 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 clients feel safe. Generally, sites will be selected based on where participants already have a routine so as not to bring attention to the group or interview.
* We have taken special considerations when selecting people we will be engaging, particularly with regard to people with disabilities and survivors:
	+ To avoid a situation where clients would have to disclose their group participation, and potentially putting them at risk, we are only recruiting people with disabilities who are their own guardians.
	+ CCS will not recruit anyone who we know to be currently in a potentially vulnerable or dangerous situation.

**Work plan**

|  |  |  |
| --- | --- | --- |
| Activity | Timeframe | Indicator |
| Hiring the Project Manager | February-March, 2018 | PM in place by mid-March |
| Partnership meetings slated | February-March, 2018 | Regular meetings in place |
| Vera site visit planned | April, 2018 | Visit conducted |
| First charter draft shared with Vera for comments | May-June 2018 | Draft document in place |
| Charter draft finalized and submitted for approval | July-August 2018 | OVW receipt confirmation |
| Focusing memo submitted  | August-September 2018 | Memo in place  |
| Needs assessment planned and discussed with Vera | September-October 2018 | First draft shared with Vera for comments |
| Site visit on strategic planning conducted  | October, 2018 | Pending |
| Needs assessment Finalized and submitted | November 2018 | OVW |
| Needs assessment Approved | Dec2018- Jan 2019 | OVW |
| Needs assessment conducted | Jan 2019 |  |
| Needs assessment draft report shared with Vera for further consultation | Feb 2019 | Draft report in place |
| Needs assessment report submitted  | Feb 2019 | OVW |
| Needs assessment report approved  | Feb-March 2019 | OVW |
| Strategic plan drafted  | March 2019 | Draft shared with Vera for comments |
| Strategic plan submitted  | April 2019 | OVW |
| Implementation phase started | April-May 2019 | All docs approved for implementation  |

Appendix I

Checklists and Forms

## Recruitment Session Checklist

\_\_\_\_\_\_\_\_ Scripts

\_\_\_\_\_\_\_\_ RSVP Forms

\_\_\_\_\_\_\_\_ Accommodation Forms

## Focus Group and Interview Checklist

\_\_\_\_\_\_\_\_Opening Remarks

\_\_\_\_\_\_\_\_Questions

\_\_\_\_\_\_\_\_Gift cards distribution log

\_\_\_\_\_\_\_\_Copy of questions for Notetaker

\_\_\_\_\_\_\_\_Refreshments (if applicable)

\_\_\_\_\_\_\_\_Meeting debrief sheet

## RSVP Form

Please complete this form and return it to the person who shared this information with you. All information you provide is confidential. Your answers will not affect your services or employment. This form will be destroyed after the meeting date.

Initials:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 I wish to participate in a focus group

Date: Friday 01/18/2019 Time: 10:30 am

OR

I wish to participate in a one-to-one interview

Date: Monday 01/21/ 2019 Time: 9:00am

I would like a meeting reminder:

Card

Phone

Email

It is safe to leave a message?

**Do you need any assistance in order to participate?**

\*If yes, please fill the accommodation request form.

## Accommodation Request Form

This form has to be with the corresponding RSVP form

Please let us know what type of accommodation you need during the session. All accommodations are provided free of charge.

Please check all that apply for you.

**Accommodations:**

American Sign Language (ASL)

Other Sign Language (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spoken language interpretation (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assistive listening device

Large print

Braille

Personal Care Aid

Other

Please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any other information you want us to know:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Reminder Cards

**FRIENDLY MEETING REMINDER**

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Time\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FRIENDLY MEETING REMINDER**

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Time\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FRIENDLY MEETING REMINDER**

****

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Time\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FRIENDLY MEETING REMINDER**

****

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Time\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

## Gift Card Tracker Form

CCS’ gift card log must be completed for all gift cards distributed

Date\_\_\_\_/\_\_\_\_/\_\_\_\_ Time\_\_\_\_\_\_\_\_\_\_AM/PM

Location\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Facilitator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Number of cards received  | Number of cards used | Number of cards remaining |
|  |  |  |

Participants who choose to have their card held for future use:

|  |  |
| --- | --- |
| Unique Identifier  | Card Retained |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

Facilitator Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date / /

Project Director Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date / /

## Gift Card Disbursement Log



## Focus Group and Interview Debriefing Template

Organization:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Focus Group/Interview: / /

Group:

 Victim/Survivor of intimate partner violence/sexual assault

 Persons with disabilities

 Executive Staff

 Staff

Facilitator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notetaker: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Floater: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Common Observations:

Memorable Quotes:

What are the strengths in services?

What are the gaps in services?

Other notes?

# Appendix II

# Recruiters Training

Any person that is not a Partnership member and is acting as the Recruiter, Facilitator or Notetaker must attend a one hour preparatory training conducted by the Partnership prior to their involvement in the Needs Assessment practice.

**Training Script**

**A brief overview on the project and the Partnership members**

With the support of an Office on Violence Against Women Disability Grant, coordination amongst three service organizations in San Diego, Center for Community Solutions, San Diego Regional Center and Deaf Community Services, has resulted in the establishment of a Partnership that shares the same values, vision and aims to enhance services through inclusiveness and complementation of roles.

The focus of the Needs Assessment is on our organizations’ service accessibility in general. As part of that needs assessment, we are looking at ways we provide services, and, in particular, the gaps of service in each agency.

**Why the Needs Assessment? What is the goal?**

The Needs Assessment will help the Partnership agencies by learning from clients and staff members who have information and ideas to support improvements in the Partnership agencies’ service delivery. This practice will support the Partnership to improve their agency’s ability to provide accessible, inclusive and responsive services.

**An Overview of the Focus Group and Interviews**

* Focus groups will have between 10-20 participants. Recruiters should allow for possible no shows by recruiting 20 participants for each group so that the minimum of 5-10 per group will be present. The sessions will last approximately 90 minutes.
* One-to-one interviews should not last more than 45 minutes.
* Recruiters working with persons with disabilities will only recruit persons that do not have legal guardians.
* We will use a Passive Consent Process for all groups and interviews because it provides for stricter confidentiality of participants, prevents a paper trail, and eliminates time spent on administrative matters in the session itself. Passive consent is clearly outlined in the Facilitator’s opening remarks. Participants 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.
* Compensation is provided to all participants and will be in the form of a $25.00 Visa/Mastercard gift card. At the beginning of all focus groups/interviews, during the check-in process, the Facilitator will provide each participant with the gift card to cover their time and travel to the focus group/ interview. Individuals must be told that if they prefer not to take the gift card with them, the Project Manager will keep it for them in a secure locked place until they are ready to retrieve it.
* Individuals can discontinue their participation at any time during the focus group/interview, without losing the gift card.

**An Overview of Confidentiality**

* Personally identifying information will only be collected during the RSVP process when participants will be asked their initials for the purpose of linking them with their requested accommodations and accounting for gift cards via a unique identifier.
* Gift card tracking information, which document the unique identifier, will be kept in a securely locked cabinet in the CCS office. The Project Manager will ensure that each Facilitator has the correct allotment of gift cards according to the list provided by the recruiter/ facilitator.
* Individuals who request accommodations will be identified by their initials. This information will be brought to each focus group/interview, as needed, and will be destroyed within one day following the focus group/ interview.
* In focus groups and interviews, participants will be asked not to provide any identifying information about themselves, staff or program participants. We cannot guarantee whether a participant may disclose any information outside the group.
* The Recruiters who receive the RSVP forms will keep the RSVP forms in a sealed envelope while in their possession. Immediately after each recruiting session, the Recruiter will contact the Project Manager and arrange for the delivery of RSVP forms within two business days of the recruiting session.
* There will be no adverse effects on any client services or staff employment 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 group. Additionally, participants will be asked to not discuss what is said in the group with other group participants once the session is over. However, because we cannot ensure that participants preserve confidentiality, participants will also be encouraged to be mindful of what they share.
* The Notetaker will not link personal identifying information to comments made during any focus group or interviews.

**An Overview of Mandatory Reporting**

The Focus group/interview participants will be informed of the mandated reporting requirements in the Facilitator’s opening comments at the beginning of each session. For DCS and SDRC, the Facilitator shall be prepared to interrupt a person who seems about to disclose a new incident of suspected abuse or neglect. This will be explained in plain language. The facilitator may immediately inform a client that any new incident should not be disclosed here, but if they had previously disclosed that incident, it will not trigger a new mandatory report. The facilitator may also remind clients that the focus of the group or interviews is not about specific incidents of abuse; rather, the focus should be on services. All CCS staff, with exception of its therapists, are not mandatory reporters, except in cases such as serious child harm or neglect, suicide, or homicide, as outlined in California statute.

**An Overview of Accessibility Considerations**

The Partnership will work to the best of its ability to meet the accessibility requirements of staff and clients. The Recruiter shall handle both the RSVP and accommodation request forms for any Participant. If a Participant requests an accommodation, the Recruiter should coordinate with the Facilitator and the Project Manager to ensure all accommodations are met prior to any focus group or interview. The Project Manager is the person responsible to ensure all requests are met prior to any session; however, general accessibility considerations will be undertaken by the Partnership members and the Project Manager including:

* Accessible space for all focus groups/interviews. Focus groups will take place in a space that is commonly used by the participants, so that they are already familiar with the surroundings.
* Accessible bathroom and emergency exit access will be adjacent to the group/interview location.

**An Overview of Safety Considerations**

The Partnership understands that safety is defined differently for each individual. Every effort will be made to protect the safety of individuals participating in a focus group or interview. During recruitment, and at the beginning of each focus group or interview, the following will be made clear to participants:

* Questions are intended to elicit information about the participants’ experiences accessing services. This information will then be used by the Partnership to improve respective agency services to victims/survivors who are persons with disabilities.
* Questions are NOT intended to gather personal experiences related to violence, abuse or neglect.
* 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 and an advocate will be available at each focus group for victims/survivors and persons with disabilities to provide emotional support for anyone needing it either during the session or just following the session.
* A private, accessible space will be made available to insure confidentiality and safety.
* Before each focus group, participants will be told that the counselor is available, where the counselor will be located, and that they can request an escort to the counselor (the Floater will do that).
* Lists of local resources are available.
* Anyone can discontinue at any time if they feel uncomfortable.
* No one has to answer any question that causes discomfort.
* There will be no consequences to anyone based on their choice to participate or not.
* No personal identifying information will be linked to those participating in the group, other than initials or names to provide them with their requested accommodations and gift cards.
* We offer optional individual interviews to anyone who would prefer to participate outside of a group setting.
* Anyone has the option to leave their gift card with the Project Manager for future use.
* We will be taking back all forms at the end of the recruitment process.
* We will take names or initials only of all participants on the RSVP form for the purpose of connecting individuals with their requested accommodations and the gift card log and it will not be linked to any individually identifying information.
* Any print materials and signage at focus groups/interview meeting sites will not list the Partnership or use language regarding the intersection of domestic violence and/or sexual assault and disabilities.
* An individual’s own Personal Care Aide (PCA) will not be permitted in the room during focus groups/interviews. However, we will make the required accommodations for anyone asking the assistance of a PCA.
* Sites selected for focus groups/interviews will be conducted in locations where people feel safe. As possible, sites selected will be ones in which participants already have a routine, so their presence will not be out of the ordinary or bring attention.

Additionally, we have taken special considerations when selecting the groups to engage, including the following:

* CCS will not recruit anyone known to be currently in a potentially vulnerable or dangerous situation.
* To avoid a situation where clients would have to disclose their group participation to a guardian, which may put them at risk, we are only recruiting people with disabilities who are their own guardians.

# Appendix III

# Recruitment Scripts

1. Persons With Disability - IDD

SDRC is part of a group working together to make our services easier to use, safe and welcoming. This group is asking people questions about our services. Can I tell you a little more about it to see if you want to join? [If yes, continue.]

**Project overview:**

The name of our group is The Partnership. We came together because of a three-year federal grant.

The grant provides a chance for our groups to develop a strong team that will work together to improve our services.

We want to learn from you what it is like for a person to receive services from SDRC. Our goal is to make services welcoming, safe and easy for you to be here.

Your answers and ideas will really help us do that. We will ask you what you think helps you when you get services.

We will write a report based on the information that we get. We will use the report to develop a plan for how our agencies can work together to improve our services. Your name will not appear in that report, but your words might. Anything you say will be not be connected to you.

Do you want to hear more? [If yes, continue.]

**Invitation:**

I would like to invite you to be part of a group with other people who come to SDRC. It’s called a focus group, which is when people come together and answer questions. There will be about 6 to 10 people in the group and we want to learn what makes services you receive welcoming, safe and easy to use.

We will only ask about your experiences as a person who gets services from SDRC.

If you would like to share your ideas, but do not want to be part of a group, you can have a one-on-one interview.

**Information about Groups:**

* Focus groups will last no more than 1½ hours (90 minutes).
* Interview will last no more than 45 minutes.
* Being in the focus group is completely up to you. None of the services you receive now or will receive in the future will change because of your choice. Participating is completely up to you.
* You can change your mind at any time and decide not participate. Even if you go to the focus group/interview, you can choose to leave at any time. You do not have to finish the interview/focus group.
* You can choose which questions you want to answer and which ones you do not want to answer.
* It is possible that you may know someone in the group. Everyone involved must keep the information about the group confidential.
* There will $25 gift cards and refreshments for all participants. You can choose to take the gift card, not to take the gift card, or ask to have it saved for you to retrieve later.
* You do not have to sign anything to be in the group. If you come to the focus group/interview, you are telling us that you agree to participate in the focus group/interview.

**Confidentiality and Safety**

* There will be someone taking notes on a computer, but no one will record your name. Your name will not be connected to anything you say.
* Only people from the Partnership see the notes. After the project is finished, we will tear up all the notes.
* We will make it very clear to everyone in the focus group that it is important to respect people’s privacy and not tell others what has been talked about.
* Staff at the focus groups and interviews may be mandated reporters. This means staff may need to tell someone outside the group [in protective services], if you tell them that someone under 18 or disabled is abused. We will talk to you first before talking to others.
* If you tell staff that you are thinking of hurting yourself or someone else, the staff may need to call 911.
* If you feel that being in the focus group will make you feel unsafe or uncomfortable, we suggest that you don’t participate.

Do you have any questions?

**Confirming Interest To Participate**

After hearing this information, are you interested in participating?

* **If the invitee would like to think about it**, let them know they can contact you if they decide they are interested.
* **If the invitee has questions that you cannot answer**, let them know you can get the answer from the Project Manager and you will contact them. Obtain information about the safest way to reach them.

**RSVP**

**If the invitee is interested in participating,** review the RSVP form with them. The invitee can fill out the form or you can fill out the form. If the invitee is not interested in participating, you do not need to fill out an RSVP form.

Key notes for RSVP form:

* The invitee only needs to fill out their initials. This helps to protect the invitee’s privacy.
* The invitee should check-off either a focus group or an interview.
* If the invitee answers yes to needing an accommodation, then fill out the accommodation request form.

**Conclusion**

Would you like a reminder card with the date and time of your focus group/interview?

Thanks so much for your interest in being in the group. Remember that participation is completely up to you. Once again, if you choose not to participate, your services will not be affected in any way. You can also change your mind at any time. If you do change your mind, please contact\_\_\_\_\_\_\_\_\_\_\_\_ (insert name of Recruiter) and let them know.

1. Survivors of DV/IPV and SA

CCS is part of a group working together to make our services easy to use, safe and welcoming for survivors of DV/SA. The organizations part of this group are SDRC, DCS and CCS.

For this project, we are asking people to help us learn and improve our services. We are asking people what worked and what didn’t work when receiving our services. Can I tell you a little more about it to see if you are interested in participating? [If yes, continue.]

**Project overview:**

The name of our group is the Partnership. We came together because of a three-year federal grant from the Office on Violence Against Women.

The grant provides a chance for our groups to develop team that will work together to improve our services.

In order to learn how to improve services, we are trying to understand what people need to make our services better. We will be talking to you about our services – not discussing your experiences related to DV/SA.

We will write a report based on the information that we gather. We will use the report to develop a plan for how our agencies can work together to improve our services to everyone. Your name will not appear in the report but your words might. Anything you say will be not be connected to you.

Your answers and ideas will really help us do that. We will ask you what you think helps when you get services.

**Invitation for Victims/Survivors**

I would like to invite you to be part of a focus group with other victims/survivors.

There will be about 6 to 10 people in the group and we will ask about your thoughts for improving services for victims/survivors of domestic violence/ sexual assault.

We will only ask about your experiences in receiving services.

We will not ask you to share any specific experiences related to domestic violence or sexual assault that you (or someone you know) has been through. If you would like to share your ideas, but do not want to be part of a group, you can have a one-on-one interview. If you don’t want to be in the focus group or do an interview, you have an online survey option.

**Information About Groups/ Interviews:**

* Focus groups will last no more than 1½ hours (90 minutes).
* Interview will last no more than 45 minutes.
* Being in the focus group is completely up to you. None of the services you receive now or will receive in the future will change because of your choice. Participating is completely up to you.
* You can change your mind at any time and decide not participate. Even if you go to the focus group/interview, you can choose to leave at any time. You do not have to finish the interview/focus group.
* You can choose which questions you want to answer and which ones you do not want to answer.
* It is possible that you may know someone in the group. Everyone involved must keep the information about the group confidential.
* There will be $25 gift cards and refreshments for all participants. You can choose to take the gift card, not to take the gift card, or ask to have it saved for you to retrieve later.
* You do not have to sign anything to be in the group. If you come to the focus group/interview, you are telling us that you agree to participate in the focus group/interview.
* Staff at the focus group/interview will not ask you any questions about personal experiences with violence and you are encouraged not to share these experiences in the focus group/interview. Our focus is on your experience with agency services, not on past experiences of people in the group.
* There will be a counselor at the focus group/interview. Whether or not you have personal experience with domestic violence/sexual assault we know that the discussion may bring up feelings for you. You can speak to the counselor any time during or right after the focus group/interview or request the support of the advocate who will be present in the group discussion to provide emotional support.
* The counselors at CCS are mandated reporters. They will keep what you say confidential except when you tell them that someone under 18 is being abused, abandoned or neglected or a vulnerable adult is being abused, neglected or exploited. Also, if you tell them that you are suicidal or have a plan to harm someone else, they may need to call 911.
* A list of resources will also be available to all participants.

**Confidentiality and Safety**

* There will be someone taking notes on a computer, but no one will record your name. Your name will not be connected to anything you say.
* Only people from the Partnership see the notes. All written notes will be stored in a private, secure place and will be destroyed after we finish this part of our plan (about two months later from today).
* In our notes and in the report, we will say something like “A victim/survivor says…” We will not use anyone’s name or anything else identifying.
* Project staff who will lead the focus groups/interviews are not mandated reporters. However, if you tell them that you are suicidal or have a plan to harm someone else, they may need to call 911.
* We will ask all participants to not share anything that was shared by others in the group, but we cannot guarantee that everyone will honor this.
* If you feel that being in the focus group will make you feel unsafe or uncomfortable, we suggest that you do not participate.

Do you have any questions?

**Confirming Interest to Participate**

After hearing this information, would you be interested in participating?

* **If the invitee would like to think about it**, let them know they can contact you if they decide they are interested.
* **If the invitee has questions that you cannot answer**, let them know you can get the answer from the Project Manager and you will contact them. Obtain information about the safest way to reach them.

**RSVP**

**If the invitee is interested in participating,** review the RSVP form with them. The invitee can fill out the form or you can fill out the form. If the invitee is not interested in participating, you do not need to fill out an RSVP form.

Key notes for RSVP form:

* The invitee only needs to fill out their initials. This helps to protect the invitee’s privacy.
* The invitee should check-off either a focus group or an interview.
* If the invitee answers yes to needing an accommodation, then fill out the accommodation request form.

**Conclusion**

Would you like a reminder card with the date and time of your focus group/interview?

Thanks so much for your interest in being in the group. Remember that participation is completely up to you. Once again, if you choose not to participate, your services will not be affected in any way. You can also change your mind at any time. If you do change your mind, please contact\_\_\_\_\_\_\_\_\_\_\_\_ (insert name of Recruiter) and let them know.

1. People who are D/HH (Interviews only)

DCS is part of a group working together to make our services easy to use, safe and welcoming for survivors of DV/SA. The organizations part of this group are SDRC, DCS and CCS.

For this project, we are asking people to help us learn and improve our services. We are asking people what worked and what didn’t work when receiving our services. Can I tell you a little more about it to see if you are interested in participating? [If yes, continue.]

**Project overview:**

The name of our group is the Partnership. We came together because of a three-year federal grant from the Office on Violence Against Women.

The grant provides a chance for our groups to develop a team that will work together to improve our services.

In order to learn how to improve response and services, we will be trying to understand what people need to make our services better.

We will write a report based on the information that we gather. We will use the report to develop a plan for how our agencies can work together to improve our services to everyone. Your name will not appear in the report but your words might. Anything you say will be not be connected to you.

Your answers and ideas will really help us do that. We will ask you what you think helps when you get services.

**Invitation:**

I would like to invite you to an interview where we will ask about your experiences as a person who is D/HH person while getting services.

**Information about the Interview:**

* Focus groups will last no more than 1½ hours (90 minutes).
* Interview will last no more than 45 minutes.
* Being in the focus group is completely up to you. None of the services you receive now or will receive in the future will change because of your choice. Participating is completely up to you.
* You can change your mind at any time and decide not participate. Even if you go to the focus group/interview, you can choose to leave at any time. You do not have to finish the interview/focus group.
* You can choose which questions you want to answer and which ones you do not want to answer.
* It is possible that you may know someone in the group. Everyone involved must keep the information about the group confidential.
* There will be $25 gift cards and refreshments for all participants. You can choose to take the gift card, not to take the gift card, or ask to have it saved for you to retrieve later.
* You do not have to sign anything to be in the group. If you come to the focus group/interview, you are telling us that you agree to participate in the focus group/interview.

**Confidentiality and Safety**

* There will be someone taking notes on a computer, but no one will record your name. Your name will not be connected to anything you say.
* Only people from the Partnership see the notes. All written notes will be stored in a private, secure place and will be destroyed after we finish this part of our plan (about two months later from today).
* In our notes and in the report, we will say something like “A victim/survivor says…” We will not use anyone’s name or anything else identifying.
* Project staff who will lead the focus groups/interviews are not mandated reporters. However, if you tell them that you are suicidal or have a plan to harm someone else, they may need to call 911.
* We will ask all participants to not share anything that was shared by others in the group, but we cannot guarantee that everyone will honor this.
* If you feel that being in the focus group will make you feel unsafe or uncomfortable, we suggest that you do not participate.

Do you have any questions?

**Confirming Interest**

Would you be interested in participating?

* **If the invitee would like to think about it**, let them know they can contact you if they decide they are interested.
* **If the invitee has questions that you cannot answer**, let them know you can get the answer from the Project Manager and you will contact them accordingly. Obtain information about the safest way to reach them.

**RSVP**

**If the invitee is interested in participating,** review the RSVP form with them. The invitee can fill out the form or you can fill out the form. If the invitee is not interested in participating, you do not need to fill out an RSVP form.

Key notes for RSVP form:

* The invitee only needs to fill out their initials. This helps to protect the invitee’s privacy.
* The invitee should know that only interviews are provided for D/HH people.
* If the invitee answers yes to needing an accommodation, such as for an interpreter, then fill out the accommodation request form.

**Conclusion**

Would you like a reminder card with the date and time of your interview?

Thanks so much for your interest in sharing your ideas. Remember that participation is completely up to you. Once again, if you choose not to participate, your services will not be affected in any way. You can also change your mind at any time. If you do change your mind, please contact\_\_\_\_\_\_\_\_\_\_\_\_ (insert name of Recruiter) and let them know.

# Appendix IIII

# Facilitator Scripts

## **Facilitator Script for Victims/Survivors of DV/SA Focus Group**

1. **Introduction:**

Welcome the group and thank them for participating in this focus group for [insert group]. Introduce self and role facilitating conversation.

Facilitator covers basic housekeeping (e.g. location of bathrooms, temperature of room, etc.).

1. **Overview:**

I’d like to start by reviewing who we are and why we’re here today. CCS would like to ask you questions to improve services for people impacted by domestic violence and sexual assault. In order to know how to do this, we are talking to you today and your input will help us make our services safer, more welcoming and easier to use.

**The focus of our conversation** will be to learn from you the best ways for us to respond people who have had experiences of domestic violence or sexual assault and how to make services more comfortable and safe for victims/ survivors. We will be talking to you about what is helpful and what can be improved in these areas.

**We will not be discussing** your or anyone else’s experience with domestic violence/sexual assault or any other form of violence/abuse during the focus group. Please do not share your or anyone else’s experiences with domestic violence or sexual assault during the focus group. If you need to discuss your personal experiences, you will be able to see an onsite counselor/advocate.

1. **Introduction of other staff:**

**Notetaker**

This is [insert name]. [Insert name] will take notes on what is said during the group discussion. [Insert name] will not write down any names or identifying information in the notes. The notes from all the groups will be used to write a report to help our organizations develop a plan for improving services. This report will be seen by people within our organizations, our technical assistance provider who will assist us with writing the report, and our funder, OVW. Again, your names will not be used; if we quote something you say, we will not include your name or any other identifying details. Instead, we will use the term survivor or client if we share a quote from anyone.

**Counselor**

This is [insert name]. They are a counselor. We are not going to talk about anything that happened to you that was an incident of domestic violence or sexual assault. We are going to talk about how easy or hard it is to get services. Talking about this may bring up feelings. The counselor is here for any of you who would like to talk during or after the group today. [Insert name] will be located [insert location].

Please feel free to leave the group to speak with them or take a break to take care of yourself, if you need it. We also have a list of local resources available for you, if you want it.

**Floater**

This is [insert name]. They will be helping out in different ways during our discussion. Please ask [insert name] if you need any assistance like adjusting the temperature in the room, showing you where the counselor is, etc.

1. **Confidentiality**

Let’s go over some important information about keeping people’s information private - sometimes also called confidentiality.

We will not use names of the people who are here or connect anything you say to your name. This may make the conversation feel awkward but this is for your own safety and confidentiality. We also ask that all of you do not share the identity of anyone present or anything that is said here. We want everyone to feel safe to share their ideas and comments.

We acknowledge that although we are asking all of you to keep everything confidential, we are not able to guarantee this. Please keep this in mind when sharing.

If you talk to the counselor she will not tell anyone else, including [name of Notetaker and/or Floater] and myself what you talked about. There are a couple of exceptions though. In order to keep you and others safe, we may have to break confidentiality and tell someone else, such as protective services, if you tell us that you want to harm yourself or others. We will talk to you first before talking to others.

1. **Consent**

We assume that if you choose to stay, you are freely agreeing to participate. If at any time you don’t wish to continue, you may leave the discussion. Nothing negative will happen if you choose not to participate. You will be able to keep your gift card whether or not you finish the discussion.

1. **Questions**

I’ll be asking you some questions to help guide the conversation. There are no right or wrong answers. I will not call on people.

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.

I ask that you respect what each person has to say even though you might not agree with it.

I ask that you allow a person to finish speaking before you speak.

Please take turns, keeping in mind the amount of time you speak, so that everyone who would like to speak gets the opportunity.

If you agree with these guidelines, please show me you understand by either nodding your head, giving me a thumbs up, or telling me in some other way that you agree to this.

Does anyone have any questions before we begin?

1. **Concluding Statement**

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

## **Facilitator Script for Persons with IDD for Focus Group/Interviews**

1. **Introduction:**

Welcome the group/person and thank them for participating in this focus group/interview. Introduce yourself and your role facilitating the conversation. Facilitator covers basic housekeeping (e.g. location of bathrooms, temperature of room, etc.).

1. **Overview:**

I’d like to start by telling you who we are why we are here today. Three organizations in San Diego are working together to support better services for persons with IDD.

We are here today to find out from you what you think about services you have had in your community. We want to know what is helpful and not helpful when you seek help.

We are asking you these questions so we can learn what we can do better.

We will use the information you give us to create a plan for how to make our services better.

We are talking about your experiences in getting help - not your personal experiences. If you need to discuss your personal experiences, you will be able to see an onsite counselor/advocate.

1. **Introduction of Other Staff in Focus Group/ Interview:**
2. **Notetaker**

This is [insert name]. [Insert name] will take notes on what is said during the group discussion. [Insert name] will not use your name in the notes, and you will not be identified in these notes.

The notes from all the groups will create a report to help us make a plan for better services. This report will be seen by people within our organizations.

1. **Counselor**

This is [insert name]. [Insert name] is a counselor. We are going to talk about how easy or hard it is to get services. Talking about this may bring up feelings. The counselor is here for any of you who would like to talk during or after the group today. [Insert name] will be located [insert location].

1. **Floater (Focus groups only)**

This is [insert name]. [Insert name] will be helping out in different ways during our discussion. Don’t hesitate to ask [insert name] if you need any assistance, like adjusting the temperature in the room, showing you where the counselor is, etc.

1. **Confidentiality**

Let’s go over some important information about keeping people’s information private - sometimes also called confidentiality.

If you have any questions, please ask me.

We will not talk about the names of the people who are here or connect anything you say to your name.

We also ask that all of you not to share the names of anyone here or what they say.

We want everyone to feel safe to share their ideas and comments.

We will do our best to keep everything said here private and confidential.

We need to respect each other’s privacy. You must not talk about anything said in this group after you leave. We cannot guarantee that people won’t share what they hear in this group.

We will prepare a report from all the groups. This report will have no names in it and will be sent to our funders and our three agencies.

The services you receive will not change because of anything said in the group.

If you talk to the counselor, she will not tell anyone else, including [name of Notetaker and/or Floater] and myself what you talked about.

There are a couple of reasons we might have to tell someone, in order to keep you and others safe, we may have to break confidentiality and tell someone else [like protective services], if you tell us that you are being abused, neglected or exploited.

We may also have to break confidentiality if we learn that someone under 18 is being abused, abandoned or neglected. We will talk to you first before talking to others.

1. **Consent**

Remember you can leave at any time if you change your mind or for any other reason. Nothing negative will happen if you choose to leave. You will be able to keep your gift card regardless of whether you finish the group. We assume that if you are staying that you are freely agreeing to participate.

1. **Questions**

I’ll ask you some questions. There are no right or wrong answers. You may choose to answer or not answer any question.

I’ll pause in between each question to make sure that anyone who wants to speak has a chance. (Focus groups only)

I ask that you respect what each person has to say, even though you might not agree with it. (Focus groups only)

Do not interrupt other people before they finish talking. (Focus groups only).

Please take turns and keep in mind the amount of time you speak, so that everyone who would like to speak gets the chance. (Focus groups only)

If you agree with these things, please tell me or show me you understand by either nodding your head, giving me a thumbs up, or telling me in some other way that you agree to this.

Any questions before we start?

1. **Concluding Statement**

Thank you so much for helping us. Thank you for answering our questions and sharing your opinions and ideas. If you would like any additional information, please ask one of us before you leave today and we will be glad to help.

## **Facilitator Script for D/HH Interviews**

1. **Introduction:**

Welcome the person and thank them for participating to this interview. Introduce self and role facilitating conversation. Facilitator covers basic housekeeping (e.g. location of bathrooms, temperature of room etc.).

1. **Overview:**

I’d like to start by telling you who we are why we are here today. Three agencies in San Diego are working together to support better services to D/HH persons.

We are here today to find out from you what you think about services you have had in your community. We want to know what is helpful and not helpful for you when you seek services.

We are asking you these questions so we can learn what we can do better to help the people we serve.

We will use your ideas to make a plan for how to make our services better.

Our focus is on services. If you need to discuss your personal experiences outside of getting services, you will be able to meet an onsite counselor/advocate.

1. **Introduction of Other Staff in Focus Group/ Interview:**
2. **Notetaker**

This is [insert name]. [Insert name] will be taking notes on what is said during the group discussion. [Insert name] will not write down any names in the notes.

The notes from all the groups will be used to write a report that will help our agencies make a plan for better services. This report will be seen by people within our organizations.

1. **Counselor**

This is [insert name]. [Insert name] is a counselor. We are going to talk about how easy or hard it is to get services. Talking about this may bring up feelings. The counselor is here for any of you who would like to talk during or after the group today. [Insert name] will be located [insert location].

1. **Confidentiality**

We will not use names of the people who are here or connect anything you say to your name. This may make the conversation feel awkward but this is for your own safety and confidentiality. We also ask that all of you do not share the identity of anyone present or anything that is said here. We want everyone to feel safe to share their ideas and comments.

We acknowledge that although we are asking all of you to keep everything confidential, we are not able to guarantee this. Please keep this in mind when sharing.

If you talk to the counselor she will not tell anyone else, including [name of Notetaker] and myself what you talked about. There are a couple of exceptions though. In order to keep you and others safe, we may have to break confidentiality and tell someone else, such as protective services, if you tell us that you want to harm yourself or others. We will talk to you first before talking to others.

We will be preparing a final report of all the groups we are doing. This report will have no names in it and will be sent to our funders and our three agencies. The services you receive will not change because of anything said in the group. If you talk to the counselor she will not tell anyone else, including [name of Notetaker] and myself what you talked about.

1. **Consent**

We assume that if you are staying that you are freely agreeing to participate. If at any time you don’t wish to continue, you may leave the discussion. Nothing negative will happen if you choose not to participate. You will be able to keep your gift card regardless of whether you finish the discussion. We will assume that if you are staying that you are freely agreeing to participate.

1. **Questions**

I’ll ask you some questions. There are no right or wrong answers. You may choose to answer or not answer any question.

Any questions before we start?

1. **Concluding Statement**

Thank you so much for helping us. Thank you for answering our questions and sharing your opinions and ideas. If you would like any additional information, please ask one of us before you leave today and we will be glad to help.

# Appendix IV

# Questions/ Needs Assessment Questionnaire

## **Questions for DV/IPV Survivors**

We are going to ask you some questions today to listen to your ideas and wisdom as survivors of IPV. We ask that when you answer, please think about these questions through your own experience as a survivor of IPV. We recognize and appreciate that you all have experiences that shape who you are, but as much as possible during our limited time together today, please try and focus through the lens of being a survivor of IPV.

1. **I’d like to begin, by asking you about how or where you learned about services available to survivors of IPV?**
* Where are good places to distribute or provide information about the services available? (For example: phonebook, online or hard copy, church/temple bulletins, library, retail stores?)
* 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?
1. **What has an agency or service provider done that made any part of your experience with them positive or a negative?**
	* What about the physical space or location was negative?
	* What about the staff behavior or information were negative? Did they do anything to make you feel unsafe? Did they seem like they knew what they are doing? What helped and what didn’t help when dealing with staff?
	* What about confidentiality? What makes you concerned? Do you have an experience with us or another service provider that you want to share?
	* What about privacy? What has worked and didn’t worked? Do you want to give some examples?
	* What about the overall feeling of the space at the agency? Did you feel comfortable? Did you feel welcomed, as if you could ask for what you needed?
	* What about materials/resources? Were they helpful? Easy to follow and understand?
	* What about culture and language? Did you feel these were included in your services?

We’d now like to spend some time gathering your ideas about safety and comfort, which are often important to survivors of IPV when they seek out services or share their experiences. We want learn from you what things agencies and providers do or don’t do that help you to feel safe and comfortable enough to talk about your experiences of IPV. Also, we want to learn about what might make you feel unsafe or afraid to talk about your experiences of IPV.

1. **What does safety mean to you?**
	* What does safety mean to you when seeking services?
	* What have service providers done to help you feel safe?
2. **What have agencies or service providers done that helped you feel comfortable talking about your experience of IPV?**
* What made you feel as if you could trust the organization or service providers enough to share?
* What made you feel comfortable in sharing your experience with the agency?
1. **What have agencies or service providers done that have made you feel unsafe?**
* What did they do that made you worried about trusting them or having confidence in them?
* What made you feel as if you could not share your experience with the agency or provider?

Now that we have learned about what safety, comfort, and confidentiality mean to you as survivors of IPV, we’d like to gather your insights on what organizations in the community can do to make you feel safer and more comfortable when accessing their services. Services may include routine doctor’s appointments, public transportation, libraries, etc.

1. **When accessing services, what worked and what didn’t work to help you seek the service from us or other providers?**
* What about the hours of operation? Were the office hours of operation helpful to your schedule?
* What about transportation? Have you ever seen this as a barrier? If so, did the agency help you with transportation?
* What about the location of services? Are we too far? Too close to a place that you don’t feel comfortable to be around?
* What about the type of service provider? Have you experienced specific challenges with another service provider that you want to share? Such as, you wanted a specific service but for some reason it wasn’t easy to get?
* What about the skills of service provider? Did you ever switch service providers? What made it good what made it bad? Did they help you or did you need to go somewhere else?
* Now think about the building. What about the building did you like?
	+ Is it easy to get around? If yes, what makes it easy to get around?
	+ Is it easy to find what you are looking for? If yes, what makes it easy?
* Is there anything else that makes you feel uncomfortable about that place?
1. **What would you like community service providers (such as doctors, therapists, or community agencies) to know about how to best support survivors of IPV?**
* What is the one thing you consider most important that must be addressed regarding services to survivors of IPV?
1. **Do you have any other feedback for us about what the ideal service delivery system would look like for individuals that are survivors of IPV?**

## **Questions for SA Survivors**

We are going to ask you some questions today to listen to your ideas and wisdom as survivors of SA. We ask that when you answer, please think about these questions through your own experience as a survivor of SA. We recognize and appreciate that you all have experiences that shape who you are, but as much as possible during our limited time together today, please try and focus through the lens of being a survivor of SA.

1. **I’d like to begin, by asking you about how you learned about services available to survivors of SA?**
* Where are good places to distribute or provide information about the services available? (For example: phonebook, online or hard copy, church/temple bulletins, library, retail stores?)
* In your opinion, which of these ways is the best choice when reaching out to survivors of SA to let them know of services available to them?
1. **What has an agency or service provider done that made any part of your experience with them positive or a negative?**
	* What about the physical space or location was negative?
	* What about the staff behavior or information were negative? Did they do anything to make you feel unsafe? Did they seem like they knew what they are doing? What helped and what didn’t help when dealing with staff?
	* What about confidentiality? What makes you concerned? Do you have an experience with us or another service provider that you want to share?
* In what instances would it be okay to share identifying information and the details of your experience of with other organizations?
	+ What about privacy? What has worked and didn’t worked? Do you want to give some examples?
	+ What about the overall feeling of the space at the agency? Did you feel comfortable? Did you feel welcomed, as if you could ask for what you needed?
	+ What about materials/resources? Were they helpful? Easy to follow and understand?
	+ What about culture and language? Did you feel these were included in your services?

We’d like to spend some time gathering your ideas about safety and comfort, which are often important to survivors of SA when they seek out services or share their experiences. We want learn from you what things agencies and providers do or don’t do that help you to feel safe and comfortable enough to talk about your experiences of SA. Also, we want to learn about what might make you feel unsafe or afraid to talk about your experiences of SA.

1. **What does safety mean to you?**
	* What does safety mean to you when seeking services?
	* What have service providers done to help you feel safe?
2. **What have agencies or service providers done that helped you feel comfortable talking about your experience of SA?**
* What made you feel as if you could trust the organization or service providers enough to share?
* What made you feel comfortable in sharing your experience with the agency?
1. **What have agencies or service providers done that have made you feel unsafe?**
* What did they do that made you worried about trusting them or having confidence in them?
* What made you feel as if you could not share your experience with the agency or provider?

Now that we have learned about what safety, comfort, and confidentiality mean to you as survivors of SA, we’d like to gather your insights on what organizations in the community can do to make you feel safer and more comfortable when accessing their services. Services may include routine doctor’s appointments, public transportation, libraries, etc.

1. **When accessing services, what worked and what didn’t work to help you seek the service from us or other providers?**
* What about the hours of operation? Were the office hours of operation helpful to your schedule?
* What about transportation? Have you ever seen this as a barrier? If so, did the agency help you with transportation?
* What about the location of services? Are we too far? Too close to a place that you don’t feel comfortable to be around?
* What about the type of service provider? Have you experienced specific challenges with another service provider that you want to share? Such as, you wanted a specific service but for some reason it wasn’t easy to get?
* What about the skills of service provider? Did you ever switch service providers? What made it good what made it bad? Did they help you or did you need to go somewhere else?
* Now think about the building. What about the building did you like?
	+ Is it easy to get around? If yes, what makes it easy to get around?
	+ Is it easy to find what you are looking for? If yes, what makes it easy?
* Is there anything else that makes you feel uncomfortable about that place?
1. **What would you like community service providers (such as doctors, therapists, or community agencies) to know about how to best support survivors of SA?**
* What is the one thing you consider most important that must be addressed regarding services to survivors of SA?
1. **Do you have any other feedback for us about what the ideal service delivery system would look like for individuals that are survivors of SA?**

## **Questions for people living with IDD**

We are going to be asking you some questions today to learn about how you have services as a person living with IDD.

1. **Let’s start by asking you how you find out about services in your community? (For example, how do you find places to help you with services you want?)**
* Where are some places that you like and think it would be good to share with other people living with IDD? (Prompts: Church/Temple Bulletin? Library? Stores? Internet?)
* Who helps you find this information? (Prompts: staff, friend, family, co-worker, counselor, case manager, or someone else?)

Sometimes agencies or providers do things that make it hard for people to get the information they need about services that are available to them.

1. **What kinds of things do agencies do that make it hard for you to get what you need?**
* What would help a person with IDD get information that they need?
* Can you read the papers given to you? Was the information easy to read or understand? Is it easier to get pictures or written information?
* When things didn’t go well, what happened?
* Was it easy to get to the place? What about accommodations?

I’d like to ask you to think about a place in your community where you feel comfortable and you can trust the people that work there. For example: things they do that make it easy for you to share your needs, requests, or talk about any issues you have.

1. **First, think about the people who work there. What do they do to make you feel comfortable?**
* Do they know what they are doing? If so, how do you know?
* Now think about the building. What about the building do you like?
	+ Is it easy to get around? If yes, what makes it easy to get around?
	+ Is it easy to find what you are looking for? If yes, what makes it easy?
* Is there anything else that makes you feel comfortable about that place?

Now, I’d like to ask you to think about a place in your community that makes you feel uncomfortable and that you cannot trust the people that work there. For example, things that people do that make it hard for you to share your needs, requests, or any issues you might have.

1. **Think about the people who work there. Do the people do something that makes you uncomfortable?**
	* What do they do to make you feel uncomfortable?
* Now think about the building. Is there something about the building or space that you don’t like?
	+ Is it hard to get around? If yes, what makes it hard to get around?
	+ Is it hard to find what you are looking for? If yes, what makes it hard?
* Is there anything else that makes you feel uncomfortable about that place?

Now I’m going to ask you questions about getting help. We all need help, but sometimes it can be hard to ask for help from others. Some examples of things to ask for help are help to someone, help reading papers, or help getting somewhere.

Think about the last time you needed help from someone who works at (insert appropriate staff they may work with).

1. **What made it easy for you to ask for help?**
	* Did that person ask if you needed help?
	* Do you like it when people ask if you need help?
	* Is there anything else these people do to make it easy to ask for help if you want it?
2. **When you get services and people don’t understand you or what you need, what is that like?**

What happens?

How do you know they do not understand you?

How do you know they don’t understand your disability?

What didn’t you like about what the person did to help?

1. **What would you like us to know about how to best help people who have a disability?**
* What is the most important thing you would teach them?
1. **Do you have any else to say for how to make it better to get help for people with disabilities?**

## **Questions for people who are D/HH**

We are going to ask you some questions today to listen to your ideas and wisdom as D/HH individuals. We ask that when you answer, please think about these questions through your own experience as a D/HH individuals. We recognize and appreciate that you all have experiences that shape who you are, but as much as possible during our limited time together today, please try and focus through the lens of being a D/HH individual.

1. **Let’s begin today by talking about how you find out about services available to you in your community?**
* Where are good places to distribute or provide information about the services available? (For example: phonebook, online or hard copy, church/temple bulletins, library, retail stores?)
* In your opinion, which of these ways is the best choice when reaching out to D/HH individuals to let them know of services available to them?
* Who, if anyone, helps you find this information? (Prompts: staff, friend, family, co-worker, counselor, case manager, or someone else?)

Sometimes agencies and service providers do things that make it a positive and welcoming experience for you when you contact them for assistance. For the next set of questions, please think about a good experience you have had when you contacted a social service agency for assistance.

1. **What makes it easy for you to contact a D/HH service provider? (Prompts: understanding D/HH culture? Videophone access? Communicating in ASL? Access to ASL interpreters?)**
* What makes it easy for you to contact a hearing service provider? (Prompts: Videophone access? Access to ASL interpreters? D/HH-friendly messaging in their outreach?)

Sometimes agencies and service providers do things that make it difficult for D/HH individuals to get the information they need about services that are available to them.

For the next set of questions, please think about a negative experience you have had when you contacted a social service agency for assistance.

1. **What makes it difficult for you to contact a D/HH service provider? What would cause you not to contact a D/HH service provider? (Prompts: lack of explicit confidentiality? Lack of understanding of my needs outside of being D/HH? Physical space?)**
* What makes it difficult for you to contact a hearing service provider? What would cause you to not contact a hearing service provider? (Prompts: communication difficulties? No access to Videophone? No access to ASL interpreters? Lack of understanding of D/HH culture? Fear of confidentiality being violated?)

Now I’d like to ask you to think about a place in your community where you feel comfortable and that you can trust the staff who work there. For example, things staff do that make it easy for you to share your needs, communication preferences, any challenges you may face, physical space, or personal information.

I’m going to ask you a series of questions to explore what organizations and their staff can do to help D/HH individuals feel comfortable and that they can trust the organization. Please think about this place when answering these questions.

1. **Think about the people who work there. How does the staff do to make you feel welcome and comfortable?**
* Do they have access to a videophone? Do they have the ability to meet in-person? Do they have access to ASL interpreters? Is communication confidential? Do they demonstrate an understanding of D/HH culture? If so, how?
* What about the physical space? Line of sight? Lighting? Visual materials and information?
* Is there anything else that makes you feel comfortable about that place?

Now, I’d like to ask you to think about a place in your community that makes you feel uncomfortable and that you cannot trust the people who work there. For example, things they do that make it difficult for you to share your needs, communication preferences, any challenges you may face, the physical space, or personal information.

1. **Think about the people who work there. Do the people do something that makes you uncomfortable or that cannot trust them?**
* How has staff made you feel unwelcome and uncomfortable?
* Does the staff have a lack of confidentiality? A lack of understanding of your unique needs? A lack of understanding of Deaf culture? No access to ASL interpreters?
* What about the physical space? Line of sight issues? Lighting? Lack of visual materials and information?
* Is there anything else that makes you feel uncomfortable or that you cannot trust this place?
1. **If you could help us design the best way for agencies to provide the highest quality services for D/HH individuals, what would you want to include?**
* What is the most important thing an agency needs to know when they are helping a D/HH individual?
* What should happen when a D/HH individual contacts an agency for help? Via videophone? In-person?
* What should not happen?
* What would happen that would make you want to come back to the agency again?
1. **Is there something you have not had a chance to tell us that you really want us to know about services for D/HH individuals?**

## **Interview/ Focus Group Questions for Executives**

I’m \_\_\_\_\_\_ and I’m here with The Partnership for our focus group/ interview today. Please allow me to give you an overview of the project:

**Project Overview:**

The name of our group is The Partnership and it has three organizations working together: CCS, SDRC and DCS. We came together because of a three-year federal grant from the Office on Violence Against Women. The grant provides a chance for our groups to develop a strong team that will work together to improve our services.

In order to learn how to improve services, we are conducting a Needs Assessment. We are talking to executives and staff from all partner agencies and also people who identify themselves as a:

* Victim/Survivor of intimate partner violence or sexual assault
* People living with IDD
* People whom are D/HH

We will write a report based on the information that we gather. We will use the report to develop a plan for how our organizations can improve our services to everyone, including survivors whom are D/HH and those who live with IDD.

**Do you have any questions about the project and our purpose here today?** [Allow time for questions and answers]

Before we get started, we have a few important points to make about confidentiality:

* We would like you to refrain from using names in this process. For example, if you relate an experience that involves a colleague, survivor or individual you serve, please do not say that person’s name when describing it.
* Although we will not use your individual name in our Needs Assessment Report, because of your unique position and perspectives, your comments may be noted as representative of the executives in the organization and reviewed by others. Similar to how we will write, “a survivor stated” we will also write, “an executive stated.”
* We ask that when responding to these questions, think about your role and responsibility within the organization. Speak to any experience where your programs or staff worked with someone with a disability or who is D/HH. Additionally, think about a hypothetical situations where you, your programs, or staff may work with an individual with a disability or who is D/HH.
* While you do not have to comment on every question, your participation is greatly encouraged and appreciated. We are eager to hear from you and appreciate your full participation.

Let’s start by asking about the challenges your organization faces in serving persons with disabilities.

1. **Are there any policies and procedures that impact your organization’s ability to serve this population?**
* Are there any formal protocols or practices in place for staff to determine if someone needs an accommodation?
* Is there anything regarding your organization’s culture that creates challenges to serving people, such as bias or assumptions?
* What are some changes that you think should be made to meet any of the challenges noted to give your organization more support in responding and providing services to persons with disabilities?
* What barriers do you foresee to making those changes?
1. **How does change happen at your organization?**
* What is the decision-making process?
* How are policies and procedures created or changed?
* How are decisions made regarding hiring personnel?
* How are decisions made about resource allocations?
* Funding or other resources?
* Policies and procedures?
* Organizational structure?
* Accommodations?

**For SDRC:**

1. **How familiar is SDRC with the issue of intimate partner violence/sexual assault with persons living with IDD?**
* How well do the organization’s policies address this issue?
* How well is intimate partner violence/sexual assault prioritized within the organization?
1. **Is there anything about the organization’s culture that could create a barrier to persons with disabilities?**
2. **Is there anything about the organization’s culture that could create a barrier to someone who is living with IDD and is D/HH who are also victims of intimate partner violence or sexual assault?**
3. **Would you be open to outsource services that support DV/IPV/SA survivors?**
* Would you consider spending time to develop new resources for DV/IPV/ SA?
* Would you consider purchasing services to accommodate DV/IPV/SA survivors whom are living with IDD?
* Would you consider purchasing services to accommodate DV/IPV/SA survivors whom are D/HH?
* Would you be willing to dedicated further resources to enhance safety?
1. **Would you consider adding to your data collection process to include information about DV/IPV/SA survivors?**
2. **Would you consider a commitment to an ongoing collaboration to support DV/IPV/SA survivors?**
* How open are you to create a communication platform with other service providers to address DV/IPV/SA issues and support your clients?
* Would you consider facilitating opportunities to survivors whom are living with IDD?
1. **Do you have any additional comments and/or feedback?**

**For DCS:**

1. **How familiar is DCS with the issue of intimate partner violence/sexual assault for survivors whom are D/HH?**
* How well do the organization’s policies address this issue?
* How well is intimate partner violence/sexual assault prioritized within the organization?
1. **Is there anything about the organization’s culture that could create a barrier to persons with disabilities? How abut those living with IDD and are D/HH?**
2. **Is there anything about the organization’s culture that could create a barrier to someone who is D/HH who are also victims of intimate partner violence or sexual assault?**
3. **Would you be open to outsource services that support DV/ IPV/SA for D/HH survivors?**
* Would you consider spending time to develop new resources for DV/IPV/ SA?
* Would you consider purchasing services to accommodate DV/IPV/SA for D/HH survivors?
* Would you be willing to dedicated further resources to enhance safety?
1. **Would you consider adding to your data collection process to include information about DV/IPV/SA survivors?**
2. **Would you consider a commitment to an ongoing collaboration to support DV/IPV/SA survivors?**
* How open are you to create a communication platform with other service providers to address DV/IPV/SA issues and support your clients?
* Would you consider facilitating opportunities to survivors whom are D/HH?
1. **Do you have any additional comments and/or feedback?**

**For CCS:**

1. **(a) How familiar is CCS with the issue of DV/IPV/SA with persons living with IDD?**

**(b) How familiar is CCS with the issue of DV/IPV/SA with persons whom are D/HH?**

* How well do the organization’s policies address this issue?
* How well is DV/IPV/SA of persons with disabilities prioritized within the organization?

**2. Is there anything about the organization’s culture that could create a barrier to persons with disabilities or who are D/HH who are also victims?**

**3. Would you consider purchasing services to accommodate IPV/SA survivors whom are D/HH or living with IDD?**

**4. Would you be willing to dedicated further resources to enhance safety for survivors who are D/HH and/or living with IDD?**

**5. Would you consider adding to your data collection process to include information about survivors who are living with IDD or are D/HH?**

**6. Would you consider a commitment to an ongoing collaboration to support survivors whom are D/HH or living with IDD?**

* How open are you to create a communication platform with other service providers to address D/HH or IDD issues and support your clients?
* Would you consider facilitating opportunities to IDD/D/HH survivors?

**7. Do you have any additional comments and/or feedback?**

**Interview Questions for Staff**

Thank you for being a part of this group. Your feedback and opinions are very important to our Partnership.

I’m \_\_\_\_and I’m here to facilitate our group today. I’d like to give you a brief overview of the Partnership between CCS, SDRC and DCS.

The Partnership was formed to help each of the organizations to improve our services for community members who are D/HH and those living with intellectual or developmental disabilities who are also victims/survivors of IPV/SA. The purpose of the project is to identify and create sustainable, systemic changes within our organizations to create responsive services to all survivors equally.

We are at the stage of gathering information on our service delivery from many people, including clients, managers, directors, frontline staff, and the board. This will happen through interviews, focus groups, and online surveys.

**Does anyone have any questions about The Partnership and our purpose here today?**

Before we get started, we have a few important points to make about group guidelines and confidentiality:

* Your participation in this focus group will not affect your status as an employee, neither positively nor negatively.
* Although your personal identity will be kept confidential, the opinions and perspectives you share may be used in a Needs Assessment Report that will be available to the staff of the three organizations. Your name will not be used, though we will state, “a staff member stated.”
* It is highly encouraged that you all respect each other’s confidentiality; however, The Partnership is not responsible for the actions of others, either inside or outside of the focus group process.
* We ask that what is said in this session stays in this session. Please do not speak about anyone’s involvement in the group as that would break their confidentiality.
* We encourage you not to reveal personal information that you wish not to be shared with others.
* Regarding confidentiality, we would like everyone to refrain from using names in this process. For example, if you relate an experience that involves a colleague, survivor or individual we serve, do not say that person’s name when describing it.
* When one person is talking, all should refrain from interrupting or speaking over others. This enables everyone the opportunity to share their ideas and thoughts.
* No one must comment on every question, but your participation is greatly encouraged and appreciated. We are eager to hear from everyone and full participation is our hope.
* We will be together for about an hour. If you need to take a break, feel free to do so.
* We ask that you refrain from using your cell phone during this time so as not to distract yourself or others. Please take a moment now to set your phone settings appropriately.
* Are there any group guidelines that you would like to add or any questions?

[Allow time for participants to provide input]

To begin, I have some questions I would like to ask about your organization and the services you provide, as they relate to serving D/HH persons and those living with disabilities.

**For CCS staff:**

Think about your direct experience working with clients who have experienced IPV/SA. In addition, think of any experiences you have had working with clients who also are D/HH or living with IDD. If you haven’t had the experience, we invite you to think about what you might do in hypothetical situations.

1. **What exists within your organization to help you to identify that you are working with someone living with IDD?**
* What about current policies and procedures? Are they helpful? Why? If not, why not?
* What about the intake process? Is it helpful? Why? If not, why not?
* What about the process for clients to request accommodations?
* What about staff trainings? Do they address specific topics on how to deal with survivors whom are living with IDD or are D/HH?
1. **What exists within your organization to help you to respond to the needs of a D/HH person or someone living with IDD?**
* Are you provided trainings that support your role on responding to survivors whom are D/HH or living with IDD?
* What resources are available at your organization?
* Do you feel supported by your supervisor? In what ways? What have they done that was helpful and what was not helpful?
* What about other community relationships?
* How accessible are the services that your organization provides?
* What about the ability to meet the client’s accommodation requests?

For the next set of questions, I would like you to think about a time in this organization when you responded to or served an individual you feel may have had IDD or a person who is D/HH and things did not go well. Once again, don’t share the details of the situation itself, but rather think about it in relation to what types of things within your organization had an impact on the situation. Examples include: policies and procedures, intake, training, knowledge, resources, attitudes and bias.

1. **(a) What types of things within your organization impacted your ability to best respond to and meet the needs of a D/HH person?**

**(b) What types of things within your organization impacted your ability to best respond to and meet the needs of someone living with IDD?**

* Lack of or inadequate training?
* Lack of knowledge of resources?
* Lack of accessibility of services?
* Lack of knowledge of community partnerships?
* Lack of the ability to meet the client’s accommodation requests?

Did the type of disability impact your ability to deliver services? If so, how?

* Was there a dynamic of also working with a guardian in that situation? If so, what were those dynamics like and how did they create barriers to serving the person?
* Anything else?

For the next set of questions, I’d like to ask you about any challenges your organization faces in serving persons with disabilities.

1. **(a) What are some changes that you think should be made to give your organization more support in providing services to persons with IDD?**

**(b) What are some changes that you think should be made to give your organization more support in providing services to persons whom are D/HH?**

* What barriers do you foresee to making those changes?
1. **(a) What do you want D/HH service providers to know about how to best serve victim/survivors of DV/IPV/SA?**

**(b) What do you want IDD service providers to know about how to best serve victim/survivors of DV/IPV/SA?**

* If you were going to train their staff, what would you put in the training to ensure they had the basics for serving victims/survivors?
1. **What additional comments or feedback do you have for our Partnership?**

**For SDRC and DCS staff:**

Please think about your direct experience working with clients whom are living with IDD or are D/HH people. In addition, think of any experiences you have had working with clients who have also disclosed that they have experienced IPV/SA. If you haven’t had the experience, think about what you may do in hypothetical situations.

1. **What exists within your organization, to help you to identify that you are working with an DV/IPV/SA survivor?**
* What about current policies and procedures? Are they helpful? Why? If not, why not?
* What about the intake process? Is it helpful? Why? If not, why not?
* What about the process for clients to request accommodations?
* What about staff trainings? Do they address specific topics on how to deal with survivors whom are living with IDD or are D/HH?
1. **What exists within your organization to help you meet the needs of a D/HH person or someone living with IDD whom are survivors of DV/IPV/SA?**
* Are you provided any trainings that support your role on responding to IPV/SA survivors whom are D/HH or someone living with IDD?
* What resources were available at your organization?
* Do you feel supported by your supervisor? In what ways? What do they do that is helpful and what is not helpful?
* What about other community relationships?
* How accessible are the services that your organization provides?
* What about the ability to meet the client’s accommodation requests?

For the next set of questions, I would like you to think about a time in this organization when you served an individual who was or had been harmed by IPV or SA and things did not go well. Please don’t share the details of the situation itself, but rather think about it in relation to what types of things within your organization had an impact on the situation. Some examples include: policies and procedures, intake, case review, training, knowledge, resources, attitudes and bias.

1. **What types of things within your organization impacted your ability to best meet the needs of a DV/IPV/SA survivor whom is D/HH or living with a disability?**
* Lack of or inadequate training?
* Lack of knowledge of resources?
* Lack of accessibility of services?
* Lack of knowledge of community partnerships?
* Lack of the ability to meet the client’s accommodation requests?

Did the type of disability impact your ability to deliver services? If so, how?

* Was there a dynamic of also working with a guardian in that situation? If so, what were those dynamics like and how did they create barriers to serving the person?

Anything else?

For the next set of questions, I’d like to ask you about any challenges your organization faces in serving IPV/SA survivors for persons living with IDD or are D/HH.

1. **What are some changes that should be made to give your organization more support in providing services to DV/IPV/SA survivors with IDD or who are D/HH?**
* What barriers do you foresee to making those changes?
1. **What do you want IPV/SA service providers to know about how to best serve people living with IDD or who are D/HH?**
* If you were going to train DV/IPV/SA staff, what would you put in the training to ensure they had the basics for serving victims/survivors living with IDD or who are D/HH?

**6. What additional comments or feedback do you have for our Partnership?**

# Online Survey Questions

**CCS Staff profile**

Thank you for your participation in this survey. By answering these questions, you will help Center for Community Solutions (CCS), San Diego Regional Center (SDRC) and Deaf Community Services (DCS) to provide better services.

Acronyms:

D/HH Deaf, Hard of Hearing, Late Deafened, Deaf Blind

IDD Intellectual and Developmental Disability

DV/IPV/SA Domestic Violence/Intimate Partner Violence/ Sexual Assault

1. **What exists within your organization will help you to identify that you are working with someone living with IDD?**
2. **What about current policies and procedures? Are they helpful?**

 Helpful Not Helpful

**Please explain your response.**

1. **What about the intake process? Is it helpful?**

Helpful Not Helpful

**Please explain your response.**

1. **What about the process for clients to request accommodations?**

**4. Do staff trainings address specific topics on how to deal with survivors whom are living with IDD or are D/HH?**

Yes Somewhat No

**Please explain your response.**

1. **Do you feel supported by your supervisor?**

Yes Somewhat No

**What has your supervisor done that was helpful and what was not helpful?**

**6. Has your organization supported your ability to respond to and meet the needs of a D/HH person?**

Yes Somewhat No

If not, what are the reasons? (check all that apply)

Lack of or inadequate training?

Lack of knowledge of resources?

Lack of accessibility of services?

Lack of knowledge of community partnerships?

Lack of the ability to meet the client’s accommodation requests?

Anything else?

**7. Has your organization supported your ability to respond to and meet the needs of someone living with IDD?**

Yes Somewhat No

If not, what are the reasons? (check all that apply)

Lack of or inadequate training?

Lack of knowledge of resources?

Lack of accessibility of services?

Lack of knowledge of community partnerships?

Lack of the ability to meet the client’s accommodation requests?

Anything else?

**8.What about the dynamic of working with a guardian of an IDD survivor– have this created any challenges for you to work with the survivor?**

Yes Somewhat No

**If so, what were those dynamics like and how did they influence your work with the survivor?**

**9.What are some changes that you think should be made to give your organization more support in providing services to persons with IDD?**

**10.What are some changes that you think should be made to give your organization more support in providing services to persons whom are D/HH?**

**11**. **If you were going to train a D/HH or IDD staff, what would you put in the training to ensure they had the basics for serving victims/survivors?**

**Any additional comments or feedback do you have for our Partnership?**

**SDRC and DCS Staff**

Thank you for your participation in this survey. By answering these questions, you will help Center for Community Solutions (CCS), San Diego Regional Center (SDRC) and Deaf Community Services (DCS) to provide better services.

Acronyms:

D/HH Deaf, Hard of Hearing, Late Deafened, Deaf Blind

IDD Intellectual and Developmental Disability

DV/IPV/SA Domestic Violence/Intimate Partner Violence/ Sexual Assault

1. **What exists within your organization (SDRC or DCS) that helps you to identify that you are working with an DV/IPV/SA survivor?**
2. **What about policies and procedures? Are they helpful?**

Helpful Not Helpful

**Please explain your response.**

1. **What about the intake process? Is it helpful?**

Helpful Not Helpful

**Please explain your response.**

1. **What about the process for clients to request accommodations? Is it helpful?**

Helpful Not Helpful

**Please explain your response.**

1. **Do staff trainings address specific topics on how to deal with survivors of domestic violence or sexual assault whom are living with IDD or whom are D/HH?**

Yes Somewhat No

**Please explain your response.**

1. **Do you feel supported by your supervisor?**

Yes Somewhat No

**What has your supervisor done that was helpful and what was not helpful?**

**7. Has your organization supported your ability to respond to and meet the needs of a D/HH person?**

Yes Somewhat No

If not, what are the reasons? (check all that apply)

Lack of or inadequate training?

Lack of knowledge of resources?

Lack of accessibility of services?

Lack of knowledge of community partnerships?

Lack of the ability to meet the client’s accommodation requests?

Anything else?

**8. Has your organization supported your ability to respond to and meet the needs of a survivor of domestic violence or sexual assault?**

Yes Somewhat No

If not, what are the reasons? (check all that apply)

Lack of or inadequate training?

Lack of knowledge of resources?

Lack of accessibility of services?

Lack of knowledge of community partnerships?

Lack of the ability to meet the client’s accommodation requests?

**Anything else?**

**9. What about the dynamic of working with a guardian of an IDD client– has this created any challenges for you to work with the client?**

Yes Somewhat No

**If so, what were those dynamics and how they influence your work with the client?**

**10.How do you rate your organization to meet the needs of a survivor of domestic violence and sexual assault who is D/HH?**

1. Poor
2. Fair
3. Good
4. Excellent

**11.How do you rate your organization to meet the needs of a survivor of domestic violence and sexual assault who is a person living with IDD?**

1. Poor
2. Fair
3. Good
4. Excellent

**12.What are some changes that you think should be made to give your organization more support in providing services to a survivor of domestic violence or sexual assault who is living with IDD?**

**13. What are some changes that you think should be made to give your organization more support in providing services to a survivor of domestic violence or sexual assault who are D/HH?**

**14.If you were going to train domestic violence and sexual assault agency staff, what would you put in the training to ensure they had the basics for serving who are D/HH or living with IDD?**

**Any additional comments or feedback do you have for our Partnership?**

**CCS Clients- DV and SA**

Thank you for your participation in this survey. By answering these questions, you will help Center for Community Solutions (CCS), San Diego Regional Center (SDRC) and Deaf Community Services (DCS) to provide better services.

For your safety and confidentiality, please do not provide your name, initials or the name of any other person, including the employee(s) that provided services.

1. **How did you learn about services available to survivors of domestic violence or sexual assault?**
2. **Where are good places to distribute or provide information about the services available? Some examples:**

Phonebook

Online

Flyers or brochures

Church/Temple/Mosque

Library

Retail stores

Social media

Other

1. **When you received services, were they positive, negative, or both?**

**Check all that apply:**

**positive negative both**

**Please explain your answer.**

1. **Was the physical space or location what you needed?**

Yes No

**If not, please describe what would have made it better.**

1. **Did staff do anything to make you feel unsafe?**

Yes No

**If you felt unsafe, please describe more:**

1. **Did they seem like they knew what they are doing?**

Yes No

1. **What helped and what didn’t help when dealing with staff?**
2. **What about confidentiality? What makes you concerned? Do you have an experience with us or another service provider that you want to share?**
3. **What about privacy? What worked and didn’t work?**
4. **What about the overall feeling of the space at the agency?**

**I felt comfortable.**

**I felt welcomed, as if I could ask for what I needed.**

**I had a negative experience.**

**Please tell us more:**

1. **What about materials/resources? Were they helpful? Easy to follow and understand?**

**Helpful Not helpful**

**If not helpful, why?**

1. **What about culture and language? Did you feel these were included in your services?**

**Yes No**

**Please explain how?**

1. **What does safety mean to you when seeking services? What have service providers done to help you feel safe?**
2. **What have agencies or service providers done that helped you feel comfortable talking about your experience of domestic violence or sexual assault?**
3. **What made you feel as if you could trust the organization or service providers enough to share?**
4. **What did they do that made you worry about trusting them or having confidence in them?**
5. **When accessing services, what worked and didn’t work to help you seek the service from us or other providers?**

Were the office hours of operation helpful to your schedule?

Yes No

Were the hours of operation a barrier?

Yes No

Did the agency help you with transportation?

Yes No

What about the location of services? Were they too far?

Yes No

Too close to a place that you didn’t feel comfortable?

Yes No

1. **What about the skills of service provider? Did you ever switch service providers? Did they help you or did you need to go somewhere else?**
2. **What about the building?**
* **Is it easy to get around?** Yes No

**Please describe why:**

* **Is it easy to find what you are looking for?** Yes No

**Please describe why:**

1. **What would you like community service providers (such as doctors, therapists, or community agencies) to know about how to best support survivors of DV and SA?**
2. **What is the one thing you consider most important that must be addressed regarding services to survivors of DV and SA?**
3. **Do you have any other feedback for us about what the ideal service delivery system would look like for individuals who are survivors of DV and SA?**

A list of community resources and brochures shall be made available at the three locations, CCS, SDRC, DCS. The list contains all important hotline numbers and the available resources of each organization of the collaboration and its surrounding community.

1. San Diego County, population percent estimates 2017 [↑](#footnote-ref-1)
2. Eight-year survey of college students at Rochester Institute of Tech. [↑](#footnote-ref-2)