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**Needs Assessment Plan**



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**Introduction**

Day One of Cornerstone (Day One®) and Communication Service for the Deaf (CSD) began working together in 2001 in order to respond to gaps and barriers in service delivery for Deaf women seeking shelter. From 2002-2005, CSD led a partnership which included Day One (which was then a standalone statewide organization), Cornerstone and others, that launched a landmark training and technical assistance project sponsored by Office on Violence Against Women (OVW). The focus was on enhancing access to domestic violence emergency shelters and the project was successful. However, due to staff turnover, advancements in technology and high expenses for on-line interpreting services, after 2008 the agencies were unable to sustain much of what was put in place. These were vital lessons learned and will be addressed in this grant. For this project, Day One of will be the lead agency partnering with CSD.

The collaboration is comprised of a multi-disciplinary team of staff from both agencies, and has been given the responsibility of creating models, protocols, and practices which can be found within the charter.

**Collaborative Partners**

***Day One of Cornerstone****:* Cornerstone was founded in 1983 to serve victims of domestic violence in South Hennepin County. The organization started with a 24-hour crisis line staffed by dedicated, well trained volunteers. In January of 1985, Cornerstone established the first Hotel/Motel safe housing program in Minnesota. During the 1990’s the agency implemented many more innovative services that were firsts in the state for victims and their children. In 2001, due to service demands and agency growth, the Board of Directors made the decision to conduct a capital campaign to build a facility that would house both a 35 bed Emergency Shelter and our community-based services. The agency was able to move into the Sheila Wellstone Center in 2004 and retire the mortgage in 2005 – the same year Day One® was acquired. At the request of additional communities, our geographic footprint began to expand in Northwestern Hennepin County in 2012. Although the agency serves anyone in imminent danger, as of January 2014, Cornerstone now has ten Minnesota target cities: Bloomington, Richfield, Eden Prairie, Edina, St. Louis Park, Brooklyn Park, Brooklyn Center, Robbinsdale, Crystal, and Maple Grove.

Day One actually began in 1995 as a collaboration between ten metropolitan domestic violence shelters, Allina Foundation and United Way. In the beginning, the direction of the collaboration was determined by holding focus groups which were conducted with women staying at domestic violence shelters. Participants stated that they placed between 8-15 phone calls when trying to find safety. For many, after being told the shelters were full and to try another number, they gave up their search until the next time they were hurt or afraid. In response Day One® set out to provide the right service, at the right place, at the right time - on “Day One.”

By 1999, the Day One project had grown to include 28 shelters across the state and the Minnesota Domestic Violence Crisis Line was established resulting in victims receiving safety in one call. Our model of services was founded, incorporating collaboration, best practices, and real-time technology. Today, under Cornerstone’s leadership, the Day One network has expanded to over 68 agencies representing domestic violence, sexual assault and anti-trafficking programs. In 2008, the City of Seattle approached Cornerstone about replicating the work from Minnesota in their region. Today the City of Seattle and surrounding regions has grown to a network of 22 agencies utilizing the Day One model.

***Communication Service for the Deaf****:* CSD opened its doors in 1975 with a mission to both advocate for and create access to essential programs and services that make the world more equal for Deaf and Hard of Hearing individuals. CSD began its journey as a small but passionate grassroots movement in South Dakota, and has evolved in the decades since into an international organization that has positively affected millions of lives. For nearly 40 years, CSD has worked to challenge convention by championing innovation, which has transformed the communications experience for deaf and hearing people. CSD – Minnesota has been an integral part of the Deaf Community for nearly twenty-five years providing Adult Education and in the last ten, spearheading efforts to provide advocacy programming specifically for deaf survivors of domestic violence.

**Vision Statement**

We are collaborating to improve access and create social change, as well as improve safety and service.

* The Vision of the collaboration is that all D/HH persons experiencing domestic violence will have access to services that are safe, just and sustainable. Survivors, when seeking services at either mainstream or D/HH agencies, will experience environments that are welcoming, accessible and culturally competent. Community and systems (medical, law enforcement, social services, etc.) will have enhanced readiness when encountering D/HH survivors of domestic violence.

**Mission Statement**

The mission of A.D.DV.O.C.A.+E is to create a collaborative service delivery system for all D/HH persons experiencing domestic violence that is accessible, empowering and welcoming by identifying gaps in service delivery and:

* Building capacity within our collaboration and other service providers
* Formalizing our relationships
* Enhancing services
* Sharing our expertise
* Educating ourselves and other service providers
* Creating awareness

**Goals**

The Needs Assessment is our opportunity to identify gaps and barriers in our co-advocacy model of service provision to Deaf survivors of domestic violence.  Within that scenario our goals for the Needs Assessment are to:

* Identify barriers that take place from initial contact to service delivery which interfere with consumers’ sense of safety, comfort, and accessibility
* Evaluate the knowledge, awareness, and communication skill of staff on how to respond to Deaf persons experiencing domestic violence
* Identify existing organizational policies and procedures that are successful and what could be improved in serving Deaf persons who have experienced personal violence
* Determine what constitutes safe, welcoming, and accessible quality services for Deaf persons experiencing domestic violence

**Work Plan**

**January 2014-March 2014 (3 mos)**

* Define Conflict Resolution, Confidentiality and Communication Agreements
* Agree on Decision Making Process
* Define our Commitments, Assumptions and Values
* Develop Title
* Start Glossary

**April 2014-July 2014 (4 mos)**

* Develop Vision, Mission, and Goals of Project
* Complete Charter

**August 2014-October 2014 (3 mos)**

* Create Needs Assessment

**November 2014-February 2015 (4 mos)**

* Conduct Needs Assessment

**March 2015-May 2015 (3 mos)**

* Analyze Data and Create Needs Assessment Report

**June 2015-August 2015 (3 mos)**

* Develop Strategic Plan

**September 2015-September 2016 (12 mos)**

* Implement Strategic Plan

**Existing Information**

From the work Day One and CSD did in years past, several gaps in service delivery were identified. These gaps included:

* Lack of awareness surrounding Deafness within hearing agencies.
* Insufficient accessibility relating to communication (ie. videophones, TTYs, etc.) while survivors are in shelter.
* Emergency personnel (ie. Police, First Responders, etc.) having limited and/or insufficient knowledge about Deafness.
* High turnover of agency staff, meaning we need more sustainable training.
* A lack of outreach to the Deaf Community: program capacity needs to be built in order for programs to hire and work with Deaf/Hard of Hearing (D/HH) individuals from the Deaf Community.
* Interpreters
  + How/when to use interpreters.
  + How to get interpreters.
* Gaps within the Deaf Community
  + The community needs more awareness surrounding issues of domestic violence (DV).
  + It is a very private community; they don’t like talking about sensitive topics.
  + The awareness and education of the Deaf Community needs to be addressed by a person within the Deaf Community versus solely bringing in a hearing agency for educational purposes.
* The Hearing Community lacks awareness of DV in the Deaf Community.
* A lack of disability awareness in general by service providers.
* Service providers do not always recognize the intersection of oppression (ie. Deaf and low income, or Deaf and LGBTQ, etc.).
  + Mainstream agencies lack cultural competency.
* A lack of funding for the CSD program which inhibits the opportunity to improve services and as a direct result of the limited funding, there is only a part time advocate available to serve victim/survivors.
* The location of the CSD offices are inaccessible to public transit.

The 2012 and 2013 censuses conducted by the National Network to End Domestic Violence surveyed local domestic violence programs for a predetermined 24-hour period. The 2012 census surveyed 33 out of 63, or 52%, of Minnesota programs and it was found that 1,272 victims found refuge in emergency shelters or transitional housing and 458 hotline calls were answered. There were also 447 unmet requests for services during the 24-hour period.

In comparison, 31 out of 52, or 60%, of local programs were surveyed in 2013. The survey found 1,296 victims were served in one day, 372 hotline calls were answered and there were 276 requests for services that went unmet. Of the 276 unmet requests 193, or 70%, were requests for housing. The 2013 survey also reported that from 2012-2013, across Minnesota there were 48, or 7%, of staff positions eliminated, most eliminated positions were direct services such as shelter or legal advocates.

**Overview of Methods**

Project A.D.DV.O.C.A+E will collect data utilizing focus groups, and individual interviews. Through the ability of having a group discussion, focus groups will provide the best opportunity for survivors to speak about their experiences and opinions to inform this project; Focus groups will also be utilized for surveying staff. The individual interviews were chosen as a method because of the close knit nature of the Deaf community; the collaboration as a whole agreed that we would get better feedback and responses in a one-on-one interview versus a group setting.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Agency* |  | *Audience* |  | *Number of Participants* |
|  |  | ***Survivor and Deaf Participants*** |  |  |
| Cornerstone |  | Community Groups |  | 5-7 |
| Cornerstone |  | Shelter Groups |  | 10-18 |
| Cornerstone |  | CORE Group (Transitional Housing) |  | 4-5 |
| CSD |  | Current Clients |  | 3-4 |
| CSD |  | Deaf Adult Basic Education Learners |  | 11-18 |
|  |  | Estimated Total Number of Participants: |  | 33-42 |
|  |  |  |  |  |
|  |  | ***Leadership Participants*** |  |  |
| Cornerstone |  | Managers Group |  | 6 |
| Cornerstone |  | Coordinators Group |  | 10 |
| Cornerstone | Administrative Group | 3 |
| CSD |  | Director of Minnesota Programs |  | 1 |
| CSD |  | Vice President of National Programs |  | 1 |
|  |  | Estimated Total Number of Participants: |  | 21 |
|  |  |  |  |  |
|  |  | ***Staff Participants*** |  |  |
| Cornerstone |  | Crisis Staff |  | 20 |
| Cornerstone |  | Primary Advocates |  | 3 |
| Cornerstone |  | Receptionist |  | 1 |
| Cornerstone |  | CYF Therapists |  | 3-4 |
| Cornerstone |  | Youth Counselors |  | 4 |
| Cornerstone |  | Youth Advocate |  | 1 |
| Cornerstone |  | Parenting Specialist |  | 1 |
| Cornerstone |  | Community Advocates |  | 7-8 |
| CSD |  | Deaf DV/SA Advocate |  | 1 |
| CSD |  | Previous DV/SA Advocate |  | 1 |
| CSD |  | ABE Staff |  | 5-7 |
| CSD |  | Interpreter Referral Staff |  | 2 |
|  |  | Estimated Total Number of Participants: |  | 48-53 |

***Total Number of Participants: 102-111***

**New Information**

The audience we will be engaging for our focus groups and individual interviews are hearing and Deaf survivors, leadership, and staff from both Cornerstone and CSD.

Included in the Survivor and Deaf participant audience, we have a Community Group, a Shelter Group, and a CORE Group (transitional housing) from Cornerstone. All groups meet on a weekly basis. The Shelter Group participants are women who are currently in the Cornerstone shelter, while the Community Group and the CORE Group are women who are not currently in shelter but continue to receive the support services of Cornerstone. These participants have the expertise and knowledge of their experience seeking services and safety.

From CSD, we will be doing individual interviews with current clients, as well as Deaf Adult Basic Education Learners. The current clients will be able to share their knowledge about being Deaf and seeking support and services, informing us of the barriers they face, and where information is shared within the community. Individual interviews will be conducted with the Deaf Adult Basic Education Learners because most of these students have recently immigrated to the United States. These participants will bring the expertise of navigating a system that is completely unknown compounded with communication barriers.

In the leadership participant audience, we will be conducting focus groups with Administrators, Managers, and Coordinators of Cornerstone. The Administrators group is made up of the Executive Director, the Chief Financial Officer, and the Director of Day One. This group is important because this is where organizational change decisions are made.

The staff participant group is the largest and is inclusive of staff from CAS: Crisis Staff, Primary Advocates, the front desk Receptionist, CYF Therapists, Youth Counselors, Youth Advocate, Parenting Specialist, and Community Advocates. Cornerstone is an agency that believes in universal design and understands that there are different points of access for survivors. All of these individuals were selected to participate in the focus groups because they all provide different perspectives and are the ones who are directly supporting the survivors.

Also included in the staff participant group from CSD is the current DV/SA Advocate, the previous DV/SA Advocate, ABE Teachers, and the Interpreter Referral Staff. Both the current and past DV/SA Advocates are being interviewed because they bring different perspectives and experiences to the table, as one is Deaf and the other is hearing. The Interpreter Referral Staff from CSD is being included in this group because often times, they are the first point of contact from survivors, family members, or concerned friends seeking assistance.

***Focus Groups***

**Purpose**

Project A.D.DV.O.C.A+E will conduct focus groups in order to collect qualitative information around survivors seeking services, barriers faced, environment and safety.

**Audience**

Project A.D.DV.O.C.A+E will conduct focus groups of survivors from established support groups at Cornerstone. The participation is completely voluntary for all members of the Cornerstone support groups. Members of the support groups will also have the option of individual interviews if they do not wish to participate in the group setting.

**Numbers**

Project A.D.DV.O.C.A+E anticipates conducting 3-4 focus groups with the number of participants varying. The focus group conducted at the Community Support group has an anticipated number of 5-7 participants, the CORE Support group of clients in transitional housing has an anticipated number of 4-5 participants, and the Shelter support group has the highest anticipated participant number of 10-18.

**Focus Group Schedule**

The focus groups for the established support groups at Cornerstone will take place during their regularly scheduled group time. All group members have the option to opt out of the focus group, as well as have the option to set up a one on one interview. Focus groups will be set up throughout the week in order to accommodate staff schedules, including evening groups.

**Facilitation**

The focus groups will take place in the established space used by the ongoing support group. Each focus group will be anywhere between an hour and a half to two hours. Conducting the focus group will be a team comprised of a facilitator, a recorder, and a support person (advocate or counselor).

**Facilitator**

The role of the Facilitator will be to:

* Create and maintain a safe and comfortable environment for the participants so they feel free to express their experiences and opinions.
* Follow the provided script developed by the collaboration and provide prompts when needed to gain more information, while maintaining neutrality.
* Explain the support person’s role and inform participants of the mandated reporter status of the support person.
* Summarize on a flip chart or white board the participant’s comments in order to make sure the intent of the comment or answer is correctly understood and captured.
* Monitor session time.
* Distribute the gift cards to survivors at the conclusion of the focus group.
* Participate in debriefing session with the recorder at the end of each session to fill out the debriefing form created by the collaboration.

**Recorder**

The role of the Recorder will be to:

* Use a laptop to document the information stated during the focus group.
* Sit in an area of the room to limit distractions and will not participate in any discussions.
* Request any information or statement needing to be repeated by raising a hand.
* Document direct quotes and emotions while keeping all participants anonymous by never documenting names or descriptions of the participants.
* Participate in debriefing session with the facilitator at the end of each session to fill out the debriefing form created by the collaboration.
* Document the number of participants and the number of gift cards distributed at each focus group.

**Support Person**

The role of the Support Person will be to:

* Provide emotional support, safety planning, and/or referrals for services as needed for participants.
* If a participant needs to talk, they will be escorted by the support person to a private location to have a confidential discussion.

***Individual Interviews***

**Purpose**

Project A.D.DV.O.C.A+E will conduct individual interviews with past and current Deaf survivors who sought/are seeking services at CSD, as well as Deaf ABE learners, in order to collect qualitative information around seeking services, barriers faced, environment and safety.

**Audience**

Project A.D.DV.O.C.A+E collaboration members will conduct individual interviews with past and present Deaf clients of CSD and Deaf ABE Learners. All individuals have the option of not participating in the interview. Group setting focus groups are not being given as an option to the participants of the individual interviews due to the small size and close knit nature of the Deaf community.

**Numbers**

Project A.D.DV.O.C.A+E anticipates conducting 14-22 individual interviews with 3-4 interviews being with past or current CSD clients, and 11-18 interviews being conducted with the CSD Deaf ABE Learners.

**Schedule**

Interviews will be scheduled for one and a half hours in duration. The location of the interviews for Deaf ABE Students will be in a private meeting space at the classroom site. Interviews for past and present Deaf clients of CSD will take place at either the Cornerstone or CSD office.

**Support Person**

The role of the Support Person will be to:

* Provide emotional support, safety planning, and/or referrals for services as needed for participants.
* If a participant needs to talk, they will be escorted by the support person to a private location to have a confidential discussion.

**Recruitment Plan**

**Survivors**

Past and present clients of CSD will be recruited by the advocate at CSD. The advocate will consider the safety implications of the survivors prior to reaching out about this project. The Deaf ABE Learner participants will be selected and recruited by their teachers and will be involved in the same process that hearing survivor participants will be in. The process of recruitment of ABE learners via their teachers will consist of:

* The A.D.DV.O.C.A+E Project Coordinator will attend a staff meeting of the ABE teachers and explain the project.
* The Project Coordinator will provide a fact sheet to the teachers as a reference while recruiting their students, as well as a sign up sheet with dates and times the interviews can take place.
* Also being provided to the teachers are Registration forms. These forms will be returned to the Project Coordinator in order to track accommodations which need to be made, as well as the number of gift cards to purchase, after ABE learners have been selected.

The hearing participants for this project will be comprised of members in previously established groups at Cornerstone. The Project Coordinator will present the project to group members to inform them of the project and give them an opportunity to decide whether or not they would like to participate in the focus group which will be conducted a week after the information session.

During each information session, the potential participants will be informed that they will receive a $25 gift card for participating in the focus group and that their answers will only be to inform this project and will have no effect on services they receive through Cornerstone or CSD.

Potential participants will also be informed that refreshments and light snacks will be offered on the day of the focus groups. If any participant has food allergies, they may indicate that on the registration form.

Participants will be given a registration form to fill out prior to the focus group and can indicate if they need additional accommodations. If a participant feels as though an individual interview would be better suited for them, the Project Coordinator will have a list of available dates and times for the interview.

**Leadership and Staff**

Leadership and Staff will be recruited to participate in focus groups for Project A.D.DV.O.C.A+E. Collaboration team members will recruit participants from their individual agencies (See page 8).

Participants will be informed that involvement in the focus groups is supported by the agency, will be conducted during work hours, and no direct supervisors will be a participant in the same group. If possible, focus groups will be held during regularly scheduled meeting times.

Participants will be given a registration form to fill out prior to the focus group. If a participant feels as though an individual interview would be better suited for them, the recruiter will have a list of available dates and times for the interview. During the selection of an interview date, accommodations can be requested.

**Compensation**

We will provide survivors and people with disabilities with a $25 Visa gift card to cover their time and travel. If there is an activation fee associated with the gift cards, Project A.D.DV.O.C.A+E will pay for this fee.

**Access and Safety Considerations**

**Access**

Accessibility for participants is a priority for Project A.D.DV.O.C.A+E. We will ensure facilities, materials, communication, and dietary restrictions will be as accessible as possible. Primary considerations for making the needs assessment process accessible are as follows:

* The registration form will include a space to write in accommodations, as well as dietary restrictions.
* The individual interviews with D/HH survivors will be held using American Sign Language; the facilitator, note taker, and support person will all be fluent in sign language.
* All participants will be asked to use people first language.
* All written material will be written in a size, font, and plain language appropriate for all participants. Large print materials will be made available upon request.
* Focus groups and individual interviews will be held at times and locations that are convenient for the participants.

**Safety**

The well-being and safety of participants for this project are top priority. In providing a safe needs assessment process, primary considerations for making the needs assessment process safe are as follows:

* No material will be mailed to residences.
* Names and identifying information will not be used in documenting the focus group or individual interview.
* Focus group participants will be asked not to speak about other participant’s involvement outside of the focus group.
* Persons outside of the focus group or individual interview, or outside of the collaboration will not be allowed to participate nor be present during the focus group or individual interview.
* Participants can withdraw from any and all discussions during the needs assessment process without being questioned.
* If the participant feels as though their safety could be jeopardized by taking the gift card home, Project A.D.DV.O.C.A+E will hold onto the card until a later date.
* The focus group discussions will include questions based on a participants experience seeking services and agency experience versus questions about the participant’s personal journey/experience. If a participant feels triggered at any time before, during, or after the focus group, there will be a support person available to talk in a private area.

**Confidentiality**

Project A.D.DV.O.C.A+E is fully committed to the confidentiality of all needs assessment participants including survivors, agency staff, and leadership. To safeguard confidentiality the following steps will be taken:

* Participants will be informed during the recruitment session and again prior to the start of the focus group regarding the use of names and descriptions during the note taking process; No names or identifying information will be documented by the note taker during the focus group.
* Participants will be made aware that although their identity will be kept confidential, their opinions, perspectives, and agency experience will be shared in the Needs Assessment Report which will be reviewed by CAS and CSD staff, Vera Institute of Justice (the technical assistance provider), and the Office on Violence Against Women (the grant funder).
* The focus group facilitator will highly encourage participants to respect each other’s confidentiality, but Project A.D.DV.O.C.A+E is not responsible for the actions of the participants in or outside of the focus group process.
* Survivor participants will be informed that while the focus of the discussion will be on seeking services, if disclosure of child abuse or abuse of a vulnerable adult occurs, a report will be made to the appropriate authorities.
* Participant responses recorded during the focus groups will be saved on a password protected computer until the strategic plan has been reviewed and approved by OVW, and will then be deleted.

**Mandated Reporting**

Regarding vulnerable adults, Minnesota law states “The Legislature declares that the public policy of this state is to protect adults, who because of physical or mental disability or dependency on institutional services, are particularly vulnerable to maltreatment; to assist in providing safe environments for vulnerable adults; and to provide safe institutional or residential services, community based services, or living environments for vulnerable adults who have been maltreated.”

Minnesota law does not include Deaf individuals, specifically, under the adult mandatory reporting policy; A.D.DV.O.C.A.+E collaboration members understand this exclusion and agree.

## Cornerstone staff are mandated reporters of abuse. In the event a disclosure happens and a report has to be made, Cornerstone employees must follow the procedures as outlined in the Employee Handbook.

## *Policy*: Cornerstone staff are mandated reporters of abuse. Staff will contact child/adult protection upon becoming aware of the abuse of a child or vulnerable adult.

## *Procedures*:

## Staff are expected to make supervisors aware of any child or adult protection reports.

## Staff shall use the following guidelines and definitions from the State of Minnesota Department of Human Services.

## Staff shall call child protection unless they have official written documentation that a call has already been made regarding the incident.

## Talk to the client about whether she/he would like to make the call.

## In order to minimize the possibility of disclosure, the collaboration has carefully chosen questions that lessen the opportunities for potential disclosures.

## Consent

## Project A.D.DV.O.C.A+E will obtain consent via the use of passive consent in order to uphold confidentiality by means of not documenting participants names or other identifying information. The passive consent process involves verbal or non-verbal permission which is given in person on the day of the scheduled focus group. A consent statement will be read or signed in ASL prior to the start of the focus group. At the conclusion of the consent statement being read or signed in ASL, participants will show consent by remaining in the room and if participants do not want to give their consent, they are free to withdraw from the focus group without any pressure or consequences.

## In the consent statement, the following information will be included:

## the name of the collaboration conducting the needs assessment

## the purpose of the focus group/interview

## a description of steps being taken to ensure confidentiality

## all responses will be recorded anonymously to be included in the needs assessment report in order to develop the strategic plan

## the explanation of mandated reporting policies and the requirement to report child abuse

**Recruitment Script for Deaf Individuals and Victims/Survivors of**

**Domestic Violence**

Project A.D.DV.O.C.A+E is a collaborative effort by Day One Services of Cornerstone and Communication Service for the Deaf to improve our services.

Project A.D.DV.O.C.A+E invites you to participate in a focus group regarding your experience seeking services and provide feedback on what went well and what can be improved upon in the process. We believe you are the expert in knowing your experience and what your needs are, so we ask that you share your knowledge with us. To show our appreciation of your participation, we are also able to provide a $25 gift card to participants.

The focus group or individual interview will take approximately 1.5-2 hours of time and will be held at Cornerstone Advocacy Services in Bloomington or at the ABE Classroom location.

Attached you will find a fact sheet describing the project purpose, confidentiality, mandated reporting, and how the information collected will be used. Your participation is completely voluntary saying yes or no will not affect your services; and you may stop at any time. If you are interested in participating but would prefer a one on one interview, please let the facilitator know and one can be arranged.

In order to identify what we are doing that is working and what needs to be improved upon, we need feedback and are very interested in being involved in the discussion. Please let us know if you have any questions that will help you decide if you would like to participate or not.

Thank you!

**Introduction Script for Focus Groups of Domestic Violence and Abuse**

Welcome! My Name is and I work at .

We thank you for participating in this focus group, as your feedback is very important to our project and making organizational change.

This is and she will be with us taking notes on what we discuss today. Please note that no names or identifying information will be recorded in the notes.

Before we start, we will be giving you the $25 gift card as stated when we asked you to participate. If you feel as though it isn’t safe for you to take the card home with you today, please let us know and we can make arrangements. [Distribute gift cards to participants]

***Confidentiality:***

Project A.D.DV.O.C.A+E is fully committed to the confidentiality of all needs assessment participants including survivors, agency staff, and leadership. To safeguard confidentiality the following steps will be taken:

* No names or identifying information will be documented by the note taker during the focus group.
* Participants will be made aware that although their identity will be kept confidential, their opinions, perspectives, and agency experience will be shared in the Needs Assessment Report which will be reviewed by CAS and CSD staff, Vera Institute of Justice (the technical assistance provider), and the Office on Violence Against Women (the grant funder).
* The focus group facilitator will highly encourage participants to respect each other’s confidentiality, but Project A.D.DV.O.C.A+E is not responsible for the actions of the participants in or outside of the focus group process.
* Survivor participants will be informed that while the focus of the discussion will be on seeking services, if disclosure of child abuse or abuse of a vulnerable adult occurs, a report will be made to the appropriate authorities.

The exception to the confidentiality policy is related to **Mandated Reporting:**

* Minnesota law does not include Deaf individuals, specifically, under the adult mandatory reporting policy; A.D.DV.O.C.A+E collaboration members understand this exclusion and agree.

***Group guidelines:***

* Remember to not use any names, neither your own or names of others.
* When someone is talking, please do not interrupt and allow them to finish.
* You can take a break at any time.
* Please do not use your cell phone during the group time.

Are there any questions or other guidelines you would like to add? [Allow time for participant additions]

As a reminder, we are here today to talk about your experiences regarding working with Cornerstone and Communication Service for the Deaf (CSD), and your experiences seeking services. In addition, you are not required to answer all questions. There are no right or wrong answers, and you may not agree with everyone but remember that everyone has a right to their own opinion and perspective.

In order to maintain confidentiality, we will be using passive consent. No consent forms requiring a signature will be used and you are free to leave at any point during the process. By staying in the room, you are consenting to participate in this focus group/interview and are allowing us to write down and share your feedback, anonymously.

Do you have any questions before we begin? [Allow time for participant input]

Let’s get started with the questions.

**Questions for Deaf Survivors**

1. How did you learn about services available for people who have experienced domestic violence?
   1. Friends
   2. Newspaper
   3. Internet
   4. TV
   5. DHHS (Deaf and Hard of Hearing Services)
   6. Doctor’s Office
   7. Word of mouth
2. If your friend was seeking help, where would you recommend they go and why? What makes you choose that agency or office?
   1. Have you been to that agency before?
   2. Do you know someone who works there?
   3. Have you had a friend or family member go to that agency or office before?
3. What difficulties do you think Deaf survivors have telling someone about domestic violence? What makes it hard to get help?
   1. Are there concerns about privacy and safety?
   2. Do they know who they should talk to?
   3. Do they think it will go through the community grapevine that they are seeking help?
4. Have you heard about Cornerstone? Where did you hear about the agency?
   1. Friends
   2. Newspaper
   3. Internet
   4. DHHS (Deaf and Hard of Hearing Services)
   5. Doctor’s Office
   6. Word of mouth
5. Have you heard about the DV program at CSD? Where did you hear about the agency?
   1. Friends
   2. Newspaper
   3. Internet
   4. DHHS (Deaf and Hard of Hearing Services)
   5. Doctor’s Office
   6. Word of mouth
6. How comfortable were you with the process of seeking assistance? What could have been improved?
   1. Did you know where to look?
   2. Did you call ahead for an appointment or did you walk-in?
      1. Were there issues that came up?
         1. Communication?
         2. Availability?
   3. Were you offered a Deaf advocate?
      1. Did you want a Deaf advocate?
7. Think about the times you’ve requested an interpreter when seeking services from a hearing agency.
   1. What positive experiences have you had?
   2. What negative experiences have you had?
   3. How can a hearing agency address your concerns about working with the interpreter?
8. Think about a good experience you had when you contacted a hearing agency for assistance/service. What made it feel safe and welcoming to you?
9. Do you prefer using both a Deaf and hearing advocate, also known as the co-advocacy model?
   1. Would you prefer ONLY a Deaf or ONLY a hearing advocate?
10. If you chose not to go to an agency, why did you choose not to go?
    1. Were they not knowledgeable about working with Deaf persons?
    2. Did they refuse to provide interpreters?
11. How can an agency demonstrate it is a safe and welcoming space for victims to disclose or seek assistance?
    1. Friendly advocates?
    2. Advocates taking the time to fully explain things and make sure you understand?

**Questions for Hearing Survivors**

1. Privacy and confidentiality are important to many survivors. What concerns do you have about privacy and confidentiality when seeking DV services?
2. How can an agency demonstrate it is a safe and welcoming space for victims to disclose or seek assistance?
   1. Friendly advocates?
   2. Advocates taking the time to fully explain things and make sure you understand?
3. Think about a good experience you had when you contacted an agency for assistance. What made it feel safe and welcoming to you?
   1. The knowledge of the advocates
4. How do you learn about services available to you?
   1. Friends
   2. Newspaper
   3. Internet
   4. DHHS (Deaf and Hard of Hearing Services)
   5. Doctor’s Office
   6. Word of mouth
5. If your friend was seeking help, where would you recommend they go and why?
   1. Have you been to the agency or office before?
   2. Do you know someone who works there?
   3. Have you had a friend or family member go to that agency or office before?
6. What is the best way to share about information and services?
   1. Friends
   2. Newspaper
   3. Internet
   4. DHHS (Deaf and Hard of Hearing Services)
   5. Doctor’s Office
   6. Word of mouth

**Questions for Deaf ABE Learners**

1. Where do you find out about services available to you?
   1. Friends
   2. Teachers
   3. Newspaper
   4. Internet
   5. DHHS (Deaf and Hard of Hearing Services)
   6. Doctor’s Office
   7. Word of mouth
2. Think about a time you’ve requested an interpreter:
   1. What positive experiences have you had?
   2. What negative experiences have you had?
   3. How can a hearing agency better serve your needs?
3. What makes an office feel safe and welcoming to you?
   1. Friendly staff?
   2. Equipment?
      1. Videophone
      2. TTY
   3. Other?
      1. Location
      2. Decor
4. Do you know what services CSD provides outside of ABE classes?
5. Where do you tend to go to get help or services? Now when you think about that place, would you refer your friends or family members to go there as well? Why? Why not?

**Recruitment Script for Agency Leadership and Staff Members**

Project A.D.DV.O.C.A+E is a collaborative effort by Day One Services of Cornerstone and Communication Service for the Deaf. Project A.D.DV.O.C.A+E will collect data utilizing focus groups, and individual interviews. Persons invited to participate in the focus groups are Deaf individuals, victims/survivors of domestic violence, and agency leadership and staff from both collaboration partners.

Project A.D.DV.O.C.A+E invites you to participate in this discussion and provide feedback regarding your knowledge and experience working with Deaf persons experiencing domestic violence.

Attached you will find a fact sheet describing the project purpose, confidentiality, mandated reporting, and how the information collected will be used. Your participation is completely voluntary and you may stop at any time. If you are interested in participating but would prefer a one on one interview, please let the facilitator know and one can be arranged.

Please let us know if you have any questions that will help you decide if you would like to participate or not.

Thank you!

**Introduction Script for Focus Groups for Agency Leadership**

**and Staff Members**

Welcome and thank you for participating in our discussion as your feedback and opinions are important to our project. My name is and I will be facilitating the discussion today.

As I ask our discussion questions today, is here to take notes on what we talk about. No names or identifying information will be recorded, only comments.

Project A.D.DV.O.C.A+E is a collaboration between Day One of Cornerstone and Communication Service for the Deaf. The goals of this needs assessment are:

* Identify barriers that take place from initial contact to service delivery which interfere with consumers’ sense of safety, comfort, and accessibility
* Evaluate the knowledge, awareness, and communication skill of staff on how to respond to Deaf persons experiencing domestic violence
* Identify existing organizational policies and procedures that are successful and what could be improved in serving Deaf persons who have experienced personal violence
* Determine what constitutes safe, welcoming, and accessible quality services for Deaf persons experiencing domestic violence

In addition to meeting separately with agency leadership and staff, we are also meeting with Deaf individuals and victims/survivors of domestic violence.

***Confidentiality:***

Project A.D.DV.O.C.A+E is fully committed to the confidentiality of all needs assessment participants including survivors, agency staff, and leadership. To safeguard confidentiality the following steps will be taken:

* No names or identifying information will be documented by the note taker during the focus group.
* Participants will be made aware that although their identity will be kept confidential, their opinions, perspectives, and agency experience will be shared in the Needs Assessment Report which will be reviewed by CAS and CSD staff, Vera Institute of Justice (the technical assistance provider), and the Office on Violence Against Women (the grant funder).
* The focus group facilitator will highly encourage participants to respect each other’s confidentiality, but Project A.D.DV.O.C.A+E is not responsible for the actions of the participants in or outside of the focus group process.

***Group guidelines:***

* Remember to not use any names, neither your own or names of others.
* When someone is talking, please do not interrupt and allow them to finish.
* You can take a break at any time.
* Please do not use your cell phone during the group time.

Are there any questions or other guidelines you would like to add? [Allow time for participant additions]

As a reminder, we are here today to talk about your experiences regarding serving Deaf victims/survivors. You are not required to answer all questions. There are no right or wrong answers, and you may not agree with everyone but remember that everyone has a right to their own opinion and perspective.

In order to maintain confidentiality, we will be using passive consent. No consent forms requiring a signature will be used and you are free to leave at any point during the process. By staying in the room, you are consenting to participate in this focus group/interview and are allowing us to write down and share your feedback, anonymously.

Do you have any questions before we begin? [Allow time for participant input]

Let’s get started with the questions.

**Questions for CAS Administrators Group (Meg and Mary)**

1. How is organizational change made at Cornerstone?
   1. Who sets priorities for organizational change?
      1. Specific individuals, groups, etc.
2. How is change communicated to staff?
3. What can be a barrier to organizational change within your agency?
   1. Funding
   2. Staff
   3. Resources
   4. Support of the Board
4. How does Cornerstone demonstrate an accessible and welcoming environment to individuals?
   1. Printed materials, images, website, etc.
5. How does Cornerstone demonstrate that it welcomes accommodation requests?
   1. Is there a statement listed on material?
6. How do you obtain qualified interpreters?
   1. Are there policies in place as to who you contact?
   2. Are you contracted to work with any referral agencies for interpreters?
7. How do you budget for interpreter services and assistive technology?
8. What challenges do you think Cornerstone has assisting Deaf survivors?
   1. Have staff brought any concerns to your attention regarding serving Deaf survivors?
      1. If not, why do you think that is?
9. What do you think are the most important changes Cornerstone can make to build capacity to sensitively handle disclosures of DV/SA from Deaf survivors?
   1. Have statements about accommodation requests on printed materials and website, etc.

**Questions for the Director of Day One**

1. How is organizational change made at Cornerstone?
   1. Who sets priorities for organizational change?
      1. Specific individuals, groups, etc.
2. How is change communicated to you?
3. How is change communicated to staff?
4. What can be a barrier to organizational change within your agency?
   1. Funding
   2. Staff
   3. Resources
   4. Support of the Board
5. How does Cornerstone demonstrate that it welcomes requests for reasonable accommodations?
   1. Is there a statement listed on material?
6. How do you obtain qualified interpreters?
   1. Are there policies in place?
   2. Are you contracted to work with a referral agency?
7. How do you budget for interpreter services and assistive technology?
   1. Are the services automatically placed as a line item every year?
8. What challenges do you think Cornerstone has assisting Deaf survivors?
   1. Have staff brought any concerns to your attention regarding serving the Deaf population?
      1. If not, why do you think nothing has been brought to your attention?
9. What do you think are the most important changes Cornerstone can make to build capacity to sensitively handle disclosures of DV/SA from Deaf survivors?
   1. Providing interpreters?
   2. Having printed materials, images, and websites stating that you work with Deaf and hard of hearing?
   3. Staff training?
   4. Policies and procedures?
10. What barriers do you see to implementing this?
    1. Policy barriers?
    2. Political or internal resistance?
    3. Financial barriers?
11. What would it take to overcome the barriers listed above?
    1. An accommodations committee?
    2. Other partnerships?
12. If the co-advocacy model were fully implemented, are there changes that need to be made to policies, human resources practices?
    1. Who supervises the Deaf/DV advocate?

**Questions for CSD Vice President of National Programs**

1. How is organizational change made at CSD?
   1. Who sets priorities for organizational change?
   2. How is change communicated to you?
2. How is change communicated to staff?
   1. Via email?
   2. Via training?
3. What can be a barrier to organizational change within your agency?
   1. Funding
   2. Staff
   3. Resources
   4. Board support
4. What challenges do you think CSD has assisting Deaf survivors?
   1. Have any staff brought any concerns to your attention regarding serving Deaf survivors?
      1. If not, why do you think no concerns have been brought to your attention?
   2. Budget constraints
   3. Staff capacity
      1. Staff knowledge
      2. Staff work load
5. What do you think are the most important changes CSD can make to build capacity to sensitively handle disclosures of DV/SA from Deaf survivors?
   1. Training staff about DV in the Deaf community?
   2. Policies and procedures?

**Questions for CSD Director of Minnesota Programs**

1. How is organizational change made at CSD?
   1. Who sets priorities for organizational change?
   2. How is change communicated to you?
2. How is change communicated to staff?
   1. Via email?
   2. Via training?
3. What can be a barrier to organizational change within your agency?
   1. Funding
   2. Staff
   3. Resources
   4. Board support
4. How does CSD demonstrate an accessible and welcoming environment to Deaf individuals?
   1. Printed materials
   2. Images
   3. Websites
5. How do you obtain qualified interpreters?
   1. Do you go through CSD interpreter referral
   2. Do you have your own list of interpreters
6. How do you budget for interpreter services and assistive technology?
   1. Is this a line item on the budget every year for each program?
7. What do you think are the most important changes CSD can make to build capacity to appropriately handle disclosures of DV from Deaf survivors?
8. What barriers do you see there are to implementing this project?
   1. Policy barriers?
   2. Political or internal resistance?
   3. Financial?
   4. Staff concerns?
9. What would it take to overcome the barriers listed above?
   1. Increased funding?
   2. Increased staffing?
10. If the co-advocacy model were fully implemented, are there changes that need to be made to policies or practices?

**Questions for the Managers Group**

1. How does Cornerstone demonstrate an accessible and welcoming environment to individuals?
   1. Via printed materials, images, websites, etc?
2. What challenges do you think Cornerstone has assisting Deaf survivors?
   1. Is there enough staff training?
   2. Are staff knowledgeable about how to process a video relay call?
3. What do you think are the unique concerns Deaf survivors may have about disclosing or seeking assistance?
   1. Do they call the same number as hearing victims do?
   2. Do you think they have concerns about confidentiality and accessibility?
4. What do you think are the most important changes Cornerstone can make to build capacity to sensitively handle disclosures of DV from Deaf consumers?
   1. Increased training?
   2. Development of policies and procedures?
5. What concerns, if any, have staff brought to your attention when they were assisting a victim/survivor who was Deaf or hard of hearing?
   1. Were there policies and procedures to guide you?
   2. What makes you feel comfortable/confident in the support you give your staff?
6. What would you need to better support staff in providing services to Deaf or hard of hearing individuals?
   1. Training?
      1. What type of training?
         1. How often?

**Questions for the Coordinators Group**

1. How does Cornerstone demonstrate an accessible and welcoming environment to individuals?
   1. How do printed materials, images, websites, etc. demonstrate this?
2. What challenges do you think Cornerstone has assisting Deaf survivors?
   1. Staff knowledge with Deaf culture
3. What do you think are the most important changes Cornerstone can make to build capacity to sensitively handle disclosures of DV from Deaf consumers?
   1. Related to interpreters
   2. More staff training
4. What concerns, if any have staff brought to your attention when they were assisting a victim/survivor who was Deaf?
   1. Were there policies and procedures to guide you?
   2. What makes you feel comfortable/confident in the support you give other staff?
5. What do you think is needed to better support staff in providing services to D/HH individuals?
   1. What types of training should be available to better serve D/HH clients?
      1. How often should the training occur?

**Questions for the Crisis Staff**

1. Have you ever received a relay call? Please describe
   1. If you have not, do you know how to appropriately handle a relay call?
   2. Are there any protocols in place to assist you?
2. How do you provide advocacy when someone is “calling on behalf of”?
   1. Does that look differently for hearing and Deaf victims?
3. Is it ok for a friend or a family member to interpret for the victim/survivor?
   1. Is there a policy or procedure to guide you?
4. What policies and procedures are in place to guide you in providing services to D/HH individuals?
   1. Do you see any changes that need to be made in regards to serving D/HH survivors?
5. How do you determine a victim’s communication preference?
   1. Were you able to communicate effectively with the individual?
   2. What resources or information did you have on hand to assist you?
   3. Do you have a policy to guide you?
      1. Is there a question on an intake form?
6. How do you contact interpreters?
   1. Are there policies to guide you?
7. Think about a time you requested an interpreter
   1. What positive experiences did you have?
   2. What negative experiences did you have?
   3. How can Cornerstone address your concerns about working with an interpreter?
8. Do you receive training specific to Deafness at CAS?
   1. How often?
   2. Who provides the training?
9. Communication equipment (ie. Videophones and TTYs)
   1. Do you know how to use this equipment?
   2. If you had training on this equipment, how often would you like “refreshers”? Quarterly? Yearly?
10. Have you had the opportunity to work with a co-advocate?
    1. Do you have any concerns regarding working with a co-advocate?
    2. What benefits do you see working with a co-advocate?
    3. What makes you comfortable sharing that role?

**Questions for the Primary Advocates**

1. What policies and procedures are in place to guide you in providing services to Deaf individuals?
   1. Do you see any changes that need to be made in regards to serving Deaf survivors?
2. How do you determine their communication preference?
   1. Were you able to communicate effectively with the individual?
   2. What resources or information did you have on hand to assist you?
3. How do you contact interpreters?
   1. Are there policies to guide you?
4. Think about a time you requested an interpreter
   1. What positive experiences did you have?
   2. What negative experiences did you have?
   3. How can Cornerstone address your concerns about working with an interpreter?
5. Do you receive training specific to Deafness at Cornerstone?
   1. How often?
   2. Who provides the training?
6. Communication equipment (ie. Videophones and TTYs)
   1. Do you know how to use this equipment?
   2. If you had training on this equipment, how often would you like “refreshers”? Quarterly? Yearly?
7. Is it appropriate for a family member or friend to interpret for the victim/survivor?
8. What is the protocol regarding interpreters when clients go to appointments? (medical, county, etc.)
9. Have you had the opportunity to work with a co-advocate?
   1. Do you have any concerns regarding working with a co-advocate?
   2. What benefits do you see working with a co-advocate?
   3. What makes you comfortable sharing that role?

**Questions for the Receptionist**

1. What policies and procedures are in place to guide you in providing services to Deaf individuals?
   1. Do you see any changes that need to be made in regards to serving Deaf survivors?
2. In regards to volunteers at the front desk, what needs to be done to train them to be ready to assist Deaf individuals?
3. Are there any barriers at your initial point of contact?
   1. Secured front door/intercom
4. Communication equipment (ie. Videophones and TTYs)
   1. Do you know how to use this equipment?
   2. If you had training on this equipment, how often would you like “refreshers”? Quarterly? Yearly?
5. Have you experienced a relay call? Please describe.
6. What concerns do you have regarding the secure entrance to the building?

**Questions for the Parenting Specialists**

1. What policies and procedures are in place to guide you in providing services to Deaf individuals?
   1. Do you see any changes that need to be made in regards to serving Deaf survivors?
2. How do you determine a client’s communication preference?
3. How do you contact interpreters?
   1. Are there policies to guide you?
4. Think about a time you requested an interpreter
   1. What positive experiences did you have?
   2. What negative experiences did you have?
   3. How can Cornerstone address your concerns about working with an interpreter?
5. Do you receive training specific to Deafness at Cornerstone?
   1. How often?
   2. Who provides the training?
6. Communication equipment (ie. Videophones and TTYs)
   1. Do you know how to use this equipment?
   2. If you had training on this equipment, how often would you like “refreshers”? Quarterly? Yearly?

**Questions for the Community Advocates**

1. What policies and procedures are in place to guide you in providing services to Deaf individuals?
   1. Do you see any changes that need to be made in regards to serving Deaf survivors?
2. How do you determine a client’s communication preference?
   1. Were you able to communicate effectively with the individual?
   2. What resources or information did you have on hand to assist you?
3. How do you contact interpreters?
   1. Are there policies to guide you?
4. Think about a time you requested an interpreter
   1. What positive experiences did you have?
   2. What negative experiences did you have?
   3. How can Cornerstone address your concerns about working with an interpreter?
5. Do you receive training specific to Deafness at Cornerstone?
   1. How often?
   2. Who provides the training?
6. Communication equipment (ie. Videophones and TTYs)
   1. Do you know how to use this equipment?
   2. If you had training on this equipment, how often would you like “refreshers”? Quarterly? Yearly?
7. Have you had the opportunity to work with a co-advocate?
   1. Do you have any concerns regarding working with a co-advocate?
   2. What benefits do you see working with a co-advocate?
   3. What makes you comfortable sharing that role?

**Questions for the CYF Therapists**

1. How does Cornerstone demonstrate an accessible and welcoming environment to individuals?
   1. How do printed materials, images, websites, etc. demonstrate this?
2. What challenges do you think Cornerstone has assisting Deaf survivors?
3. What concerns, if any have other staff brought to your attention when they were assisting a victim/survivor who was Deaf?
   1. Are there policies and procedures to guide you?
4. What do you think is needed to better support staff in providing services to Deaf individuals?
5. What types of training should be available for staff to better serve Deaf clients?
   1. How often should the training occur?
6. Is it acceptable for a friend or a family member to interpret for the victim/survivor?
7. How do you contact interpreters?
   1. Are there policies to guide you?
8. Have you had the opportunity to work with a co-advocate?
   1. Do you have any concerns regarding working with a co-advocate?
   2. What benefits do you see working with a co-advocate?
   3. What makes you comfortable sharing that role?
9. What can be a barrier to organizational change within your agency?
   1. Funding, staff, resources, board support, etc.
10. If you are working with a Deaf survivor, would your intervention approach remain the same or change?
    1. If it would change, how so?

**Questions for the Youth Counselors**

1. How does Cornerstone demonstrate an accessible and welcoming environment to individuals?
   1. How do printed materials, images, websites, etc. demonstrate this?
2. What challenges do you think Cornerstone has assisting Deaf survivors?
3. What concerns, if any have other staff brought to your attention when they were assisting a victim/survivor who was Deaf?
   1. Are there policies and procedures to guide you?
4. What do you think is needed to better support staff in providing services to Deaf individuals?
5. What types of training should be available for staff to better serve Deaf clients?
   1. How often should the training occur?
6. Is it acceptable for a friend or a family member to interpret for the victim/survivor?
7. How do you contact interpreters?
   1. Are there policies to guide you?
8. Have you had the opportunity to work with a co-advocate?
   1. Do you have any concerns regarding working with a co-advocate?
   2. What benefits do you see working with a co-advocate?
   3. What makes you comfortable sharing that role?
9. What can be a barrier to organizational change within your agency?
   1. Funding, staff, resources, board support, etc.
10. If you are working with a Deaf survivor, would your intervention approach remain the same or change?
    1. If it would change, how so?

**Questions for the Youth Advocate**

1. How does Cornerstone demonstrate an accessible and welcoming environment to individuals?
   1. How do printed materials, images, websites, etc. demonstrate this?
2. What challenges do you think Cornerstone has assisting Deaf survivors?
3. What concerns, if any have other staff brought to your attention when they were assisting a victim/survivor who was Deaf?
   1. Are there policies and procedures to guide you?
4. What do you think is needed to better support staff in providing services to Deaf individuals?
5. What types of training should be available for staff to better serve Deaf clients?
   1. How often should the training occur?
6. Is it acceptable for a friend or a family member to interpret for the victim/survivor?
7. How do you contact interpreters?
   1. Are there policies to guide you?
8. Have you had the opportunity to work with a co-advocate?
   1. Do you have any concerns regarding working with a co-advocate?
   2. What benefits do you see working with a co-advocate?
   3. What makes you comfortable sharing that role?
9. What can be a barrier to organizational change within your agency?
   1. Funding, staff, resources, board support, etc.
10. If you are working with a Deaf survivor, would your intervention approach remain the same or change?
    1. If it would change, how so?
11. What challenges are there to working with a child of a Deaf adult or a Deaf child with hearing parents?

**Questions for the Deaf DV/SA Advocates (Stephanie and Becky)**

1. How is organizational change made at CSD?
   1. Who sets priorities for organizational change?
   2. How is change communicated to you?
2. How is change communicated to staff?
3. What can be a barrier to organizational change within your agency?
   1. Funding, staff, resources, board support, etc.
4. Think about a time you requested an interpreter
   1. What positive experiences did you have?
   2. What negative experiences did you have?
   3. How can CSD address your concerns about working with an interpreter?
5. Do you receive training specific to domestic violence in the Deaf community?
   1. How often?
   2. Who provides the training?
6. Have you had the opportunity to work with a co-advocate?
   1. Do you have any concerns regarding working with a co-advocate?
   2. What benefits do you see working with a co-advocate?
   3. What makes you comfortable sharing that role?
7. Do you think it is beneficial to attend domestic violence training for hearing individuals?
8. Do you provide training to hearing agencies/advocates?
   1. Do you find this is helpful?
9. Have you ever been asked to interpret for your survivor?
   1. How did you respond?
      1. How did the hearing individual respond/react to your response?
10. Have you ever requested an interpreter and a “signer” was provided?
    1. What did you do?
11. What barriers do you face advocating for the D/HH community?

**Questions for the ABE Staff**

1. Think about a time when you suspected you might be working with a learner who was experiencing DV.
   1. How did you assist that individual?
   2. What made you suspect the individual was experiencing DV?’
   3. How comfortable were you addressing the subject with the individual? What made you feel comfortable (had you received training)? What would have helped? Did you tell someone (your supervisor for instance) at CSD? Why or why not?
   4. If needed, who would you contact for assistance? Why that agency or person? What is most important when you are referring someone to other services (that they are accessible, that they understand the culture of the individual, cost or other concerns?)
   5. What do you need to better serve victims of DV?
   6. Are you familiar with the work of Cornerstone Advocacy Services? Would you feel comfortable sending a learner to Cornerstone?
2. What do you think would make it difficult for a Deaf individual to get help for DV?
3. If a learner comes to you and discloses that they are experiencing DV, what would you do?
   1. Are there any policies in place to help you handle the situation?
4. How does CSD get information to you about changes in policies, or training opportunities?
5. Are you able to take advantage of trainings and learning opportunities? Why or why not?

**Questions for Interpreter Referral Staff**

1. How does CSD demonstrate an accessible and welcoming environment to Deaf individuals?
   1. Printed materials
   2. Images
   3. Websites
2. What do you think are the most important changes CSD can make to build capacity to appropriately handle disclosures of DV from Deaf survivors?
3. Are there any barriers at your initial point of contact?
   1. An individual calling through relay
   2. Other?
4. What concerns do you have assisting a victim/survivor who was Deaf or hard of hearing?
   1. Are there policies and procedures to guide you?
5. Do you receive training specific to domestic violence in the Deaf community?
   1. How often?
   2. Who provides the training?
6. Think about a time when you suspected you might be speaking with a Deaf individual who was experiencing DV.
   1. How did you assist that individual?
   2. What made you suspect the individual was experiencing DV?’
   3. How comfortable were you addressing the subject with the individual? What made you feel comfortable (had you received training)? What would have helped? Did you tell someone (your supervisor for instance) at CSD? Why or why not?
   4. If needed, who would you contact for assistance? Why that agency or person? What is most important when you are referring someone to other services (that they are accessible, that they understand the culture of the individual, cost or other concerns?)
   5. What do you need to better serve victims of DV?
   6. Are you familiar with the work of Cornerstone Advocacy Services?
7. Are you able to take advantage of trainings and learning opportunities? Why or why not?

**Focus Group Debriefing Form**

Immediately following the close of each session, the facilitator and note-taker will participate in a debriefing session. Completed forms will be given to the Project Coordinator.

Focus Group:

Date: Time:

Location: Number of Participants:

Number of gift cards distributed:

Facilitator:

Note-taker:

*Observations*:

Memorable Quotes:

Areas of conflict or tension:

*Evaluation*:

Observations about the process:

Successful strategies:

Shortcomings:

Recommended changes for future groups:

Additional observations/comments:

Registration Form

Project A.D.DV.O.C.A+E

The focus group will be held at 1000 E. 80th Street during your regularly scheduled group time. The focus group will be approximately one and a half hours (1.5 hours) and will include a 10 minute break. During the focus group time, light refreshments will be provided and all persons who choose to participate will receive a $25 gift card.

If you choose to participate in this focus group, it will not change any of the services you currently receive.  Your participation is voluntary and there will be no identifying information asked of you during the focus group.

Please select from the options below:

Yes, I choose to participate in the focus group.

Yes, I choose to participate but only in the optional individual interview. ***Please see Project Coordinator to arrange a date and time.***

...................................................................................................................................

\*Please list any accommodations (large print materials, etc.):

\*Please list any food allergies:

……………………………………………………………………………………………………………………………….

**Focus Group Date: Time:**

**Project A.D.DV.O.C.A+E**

**Fact Sheet**

*What is Project A.D.DV.O.C.A+E?*

A collaboration between Day One of Cornerstone and Communication Service for the Deaf.

*What is the purpose of the needs assessment?*

To assess the current capacity and state of services for each agency to determine what can be improved upon to enhance services survivors receive.

*How long will the focus group or individual interview last?*

The anticipated length of time for focus groups or individual interviews is anywhere between 1-2 hours, depending on how many participants are involved.

*How will confidentiality be maintained?*

* No documentation of names or identifying information during the focus groups or individual interviews
* No names or signatures on the registration forms
* Utilization of passive consent instead of a written and signed consent form

*How does mandatory reporting apply?*

The purpose of the focus group is to have discussions around seeking services, barriers faced, and agency experience. If during this time disclosure of child or vulnerable adult abuse is disclosed, a report will be made to the appropriate authorities.

*How will information be used?*

All information during focus groups and individual interviews will be compiled into a report. The report will serve as a guide in creating a strategic plan to make necessary changes within the organizations.

*Who sees the report of information shared?*

Upon completion of the report, the information will be shared with the collaboration members within Project A.D.DV.O.C.A+E, Vera Institute of Justice (the technical assistance provider), and The Office on Violence Against Women (the grant funder).

*Who do I contact with questions or concerns?*

Becky Callahan, Project A.D.DV.O.C.A+E Coordinator at [beckyc@dayoneservices.org](mailto:beckyc@dayoneservices.org) or 952-646-6529 (voice)