

Collaboration Charter

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Northern Utah's Choices Out of Violence (NUCOV)

Prevention of Violence and Improved Services for People with Disabilities in Utah

Collaborating Partners

- Community Abuse Prevention Services Agency (CAPSA) – Jill Anderson, Kathryn Monson, Richard D. Baer (Baer Management)
- Utah State University, Center for Persons with Disabilities (CPD) – Gordon Richins
- OPTIONS for Independence (OPTIONS) – Cheryl Atwood
- Utah Division of Services for People with Disabilities, Northern Region (DSPD) – Deb O'Dell

Vision

Northern Utah's Choices Out of Violence (NUCOV) envisions a future where a lasting collaboration of public and private entities work together to ensure people with disabilities and Deaf people who experience violence are aware of and have access to comprehensive services. We believe that as a result of this collaboration, people will have access to services, no matter where they enter the system, and the option to live free of fear and violence.

Mission

To ensure people with disabilities and Deaf people living in Cache and Rich Counties of Utah who are victims of violence are aware of and have access to appropriate services, it is the mission of NUCOV to:

- Enhance the capacity of victim and disability service agencies to reach out and provide the protections and services needed, and
- Improve the coordination of supports and services between victim and disability service agencies.

Values & Assumptions

NUCOV operates under certain values and assumptions that are shared jointly by all partners. Our collaboration is guided by the following:

1. People with disabilities and Deaf people deserve respect and should be able to live free from violence and be safe in their homes and

- communities. They should have choices and the right to self-determination regarding dealing with violence and should be able to live independently and be self-sufficient. They should be able to live in the community setting of their choice.
2. NUCOV believes that violence against people with disabilities and Deaf people is a community problem. NUCOV agencies are committed to working together to examine and change individual agency policies and procedures in order to provide coordinated, comprehensive services.
 3. NUCOV recognizes the diversity in people's experiences with disability, violence, and system response. It is committed to a person-centered philosophy and to creating system responses which respect each victim's individuality.
 4. NUCOV believes that safe services should be available to all victims with disabilities and Deaf victims. Safety of victims is a primary concern for collaborative partners and includes protection from abuse, neglect and exploitation. Disability providers will have the information necessary to safely respond to disclosures of interpersonal violence by the people they serve. Organizations that serve victims of violence will have the information needed to respond to victims with disabilities. Partners will be transparent about Utah's mandatory reporting laws, in order to allow victims to have power to navigate their own safety options.
 5. Victims with disabilities and those who are Deaf should have access to services that are physically, culturally, programmatically, and attitudinally accessible. NUCOV partners value universal access and are committed to an ongoing process of examining organizational language, attitudes, documents and other products, policies and procedures, physical structures and social environments. Universal access is not a destination. It requires a commitment to continually re-examining one's own system and honest dialogue about barriers.
 6. Confidentiality is essential to the work of the collaboration. Historically, neither survivors of sexual assault or domestic violence nor individuals with disabilities have had control over their own information. Honoring an individual's confidentiality is central to the sexual assault, domestic violence and independent living movements. Confidentiality is also paramount in building trust. Each partner has committed to maintaining the confidentiality of collaboration discussions as well as strict confidentiality with any victim's information. Except as precluded by law, victims with disabilities and Deaf victims have a right to confidentiality.
 7. A common language and purposeful communication is critical to collaborative work. Collaboration requires intense working relationships

that connect and enhance organizational cultures. NUCOV examines language deliberately to ensure partners have a shared understanding of complex issues and terminology. It will remain open to changes in language and how particular communities choose to have themselves known.

8. Sustained system change is created through careful collaboration with attention to process, confidentiality and respect. Key to the collaboration's foundation is a commitment to respect each individual, each partner organization and each movement's history and culture. Dedication to change is essential to a lasting quality of life for those we serve.

Key Terms¹

- **Confidentiality** – Confidentiality is creating deliberate protections for information about individuals or organizations. It is not shared without specific permission from the individual or organization that owns the information. We safeguard the information entrusted to and among us as a collaborative. (See confidentiality plan on page 10.)
- **Deaf** - The term “Deaf” is defined by the individuals who consider themselves a part of Deaf culture. Individuals who self identify as Deaf may or may not self identify as a person with a disability. However, we recognize that Deaf individuals also face serious barriers in seeking and receiving services and we strive to include them in our work.
- **Disability** - An individual with a disability is a person who has a sensory, physical, cognitive or mental impairment which substantially limits one or more major life activities. NUCOV believes that disability is a condition of human life for many people, a matter of degree rather than kind, and derives its meaning from the surrounding culture.

The following definition of disability from the Accessing Safety Website is consistent with NUCOV's belief system.

According to the newest definition developed by the World Health Organization, disability is not something that a person has but, instead, something that occurs outside of the person – the person has a functional limitation. Disability occurs in the interaction between a person, his or her functional ability, and the environment. A person's environment can be the physical environment,

¹ The definitions for “Deaf” and “Systems Change” as well as the first sentence in the definition for Victim/Survivor were taken from the document: Vera Institute of Justice (undated). Elements of a collaboration charter. New York NY.

communication environment, information environment, and social and policy environment.

This new definition helps us to understand that disability is a matter of degree. One is more or less disabled based on the intersection between herself, her functional abilities, and the many types of environments with which she interacts. Moreover, the experience of disability can be minimized by designing environments to accommodate varying functional abilities and providing individualized solutions when needed.

- **Domestic violence** - Domestic violence includes any pattern of behavior that has as its goal the domination of another person. This can include abuse that is physical, sexual, emotional, verbal, financial or psychological, as well as behaviors such as stalking, property damage, and neglect. Domestic violence can occur between spouses or former spouses, any family members, parents of a child, or live-in caregivers and roommates.
- **Mandatory reporting** - Utah statute sets forth the requirements of reporting in UCA 76-5-111.1 and UCA 62A-3-305.
 - “Any person who has reason to believe that any vulnerable adult has been the subject of abuse, neglect, or exploitation shall immediately notify the nearest peace officer, law enforcement agency, or Adult Protective Services Intake.” The law further states that anyone who makes that report in good faith is immune from civil and criminal liability in connection with the report or other notification.
- **Responsiveness** – Responsiveness involves providing a comprehensive array of services which empower victims with disabilities or Deaf victims to evaluate reasonable options and make decisions on which actions they wish to take. Responsiveness includes sensitivity by service providers to each individual’s unique needs and circumstances.
- **Safety** – Safety is freedom from physical, psychological, emotional, mental, or financial danger. Danger is different for everyone; for example women may have risks related to their gender and people with disabilities may have their safety compromised based on their disability. We also understand the need for protection from additional trauma from institutions, including the service, cultural, legal, and religious systems, in order to promote healing and well-being.
- **Self-determination** – Self-determination is the philosophy of empowering victims to develop and make their own choices. Every individual has the

inherent human right to direct their own destiny, make choices, and to define their own experiences.

- **Sexual violence** - Sexual violence is any unwanted sexual contact or behavior. Sexual violence can include forced or pressured sexual acts, rape, object rape, sodomy, unwanted use of pornography, unwanted photographing or videotaping of sexual acts, forced sexual interaction with others, or forced sexual acts with animals. Sexual violence is often used in conjunction with physical violence and always includes emotional abuse. A great amount of sexual violence is by coercion and threat as opposed to force.
- **Systems Change** - Systems change is grounded in the belief that growth and change is good. The past system is valued and provides the foundation for future efforts. The goal of changing the system to be more responsive is a core element of the NUCOV collaboration. It may include changing policies, procedures, or resource allocations of the partner organizations.

Systems change is a comprehensive planning and program development approach that focuses on strengthening the service delivery system infrastructure in order to enhance the effectiveness and efficiency of services. A systems change approach involves extensive, on-going collaboration among all partners, including consumers. The ultimate goal of systems change is to integrate sustainable change into the service delivery system that has a positive impact on the quality of life for consumers.

- **Universal Accessibility** – Universal accessibility refers to the ability of all people to have equal opportunity and access to services or programs from which they can benefit. Barriers to accessibility may be attitudinal, cultural, communication, programmatic or environmental. Each of these is complex, varies from situation to situation, and needs to be considered in specific context.
- **Victim/Survivor** - These words are used interchangeably when referring to individuals who have experienced domestic or sexual violence. Generally, a person is referred to as a victim immediately following the violence while the term survivor would be used later in the process of recovery. It is up to individuals to decide whether to refer to themselves as victims or survivors, and NUCOV will mirror the language individuals choose.
- **Vulnerable Adult** - Vulnerable adult means an elder adult, or an adult 18 years of age or older who has a mental or physical impairment which substantially effects that person's ability to:

- Provide personal protection
- Provide necessities such as food, shelter, clothing, or medical or other health care
- Obtain services necessary for health, safety or welfare
- Carry out the activities of daily living
- Manage the adult's own resources, or
- Comprehend the nature and consequences of remaining in a situation of abuse, neglect, or exploitation (Utah Code Annotated 76.5.111).

Roles & Responsibility

NUCOV is a collaboration of four organizations which work closely together to achieve systems change that will improve services for victims with disabilities and Deaf victims. Project direction is provided by CAPSA through Baer Management in cooperation with the Office on Violence Against Women (OVW) and the Vera Institute of Justice (Vera). Each of NUCOV's collaborative organizations and representatives are committed to the following roles and responsibilities:

Project Oversight and Direction

CAPSA

- CAPSA will provide administrative oversight, fiscal management, and administrative interface with OVW.
- Under contract with CAPSA, Baer Management will provide the services of Richard D. Baer as project director for the collaboration. Dr. Baer will:
 - Schedule and develop agendas for collaboration meetings
 - Facilitate collaboration meetings
 - Produce and review summaries of collaboration meetings
 - Provide programmatic interface with OVW and Vera
 - Follow up to complete assignments as agreed to in collaboration meetings
 - With direction from collaborative partners, write and prepare deliverables as outlined by OVW and Vera.

Organizational Roles and Responsibilities

The collaborative partners will ensure the voices of victims with disabilities and Deaf victims are heard. Each organization will:

- Assign a representative to participate in the collaboration.
- Participate in an assessment of organizational accessibility and, as necessary, take steps to improve accessibility

- Review policies and procedures related to trauma informed screening and assessment and revise as appropriate
- Participate in implementing a strategic plan designed to effect systems change in their respective organizations that will:
 - Enhance the capacity of victim and disability service agencies to reach out and provide the protections and services needed, and
 - Improve the coordination of supports and services between victim and disability service agencies.

Individual Roles and Responsibilities

CAPSA, CPD, OPTIONS, and DSPD representatives will:

- Attend and participate in collaborative meetings to develop a collaboration charter, narrow project focus, conduct a needs assessment, and develop a strategic plan
- Take the lead in implementing strategic plans in their respective organizations
- Attend and participate in national projects meetings sponsored by OVW and Vera
- Follow up to complete assignments as agreed to in collaboration meetings
- Report to their respective boards/administrations on activities of the project
- After reporting to their respective boards/organizations, report back to the collaboration.

Conflict Resolution

Philosophy

In the course of working collaboratively, NUCOV expects that conflicts will arise. It believes that most conflicts can be resolved through respectful, informal discussion. Each individual involved is expected to behave in a professional manner, to treat others with dignity, to be responsible for their own behaviors, and to attempt to resolve the conflict. Recognizing that collaborative partners include highly experienced mental health and human services professionals with sophisticated communication skills, NUCOV expects it will be able to resolve most conflicts in a manner that supports the work of the collaboration.

Process

- When conflict arises, it is expected that the collaborator(s) experiencing the conflict will clearly state to the other collaborator(s) involved the nature of and reasons for the conflict. It is expected that all parties will put forth a good faith effort to resolve the conflict.

- If a conflict cannot be resolved through good faith efforts by the collaborators, assistance can be sought from the project director.
- If the project director cannot resolve it, it will be brought to the collaborative as a whole.
- If the collaboration cannot resolve it, it will be brought to a program associate at Vera.
- If a conflict cannot be resolved with assistance from Vera, additional assistance will be sought from OVW.

Communication Plan

NUCOV understands that good communication is critical for systems change. The following plan includes three levels which describe communication (1) among collaborating partners, (2) between the partners and their organizations, and (3) with organizations outside the collaboration.

Internal – Level I – Communication Among Collaborating Partners

- Collaborating partners will attend weekly collaboration meetings, for 2.5 hours per week and longer as necessary, that will allow for frequent face-to-face communication.
- Summaries of collaboration meetings will be produced and emailed to collaborating partners. These summaries will document discussions and decisions of the collaboration.
- The summary from the prior meeting will be reviewed, modified, and approved at each collaboration meeting. Approved summaries will be emailed to Vera technical assistants.
- Collaborating partners will communicate with each other as necessary via phone, email, writing, and other means.
- Collaborators, Vera, and OVW may communicate with each other as they deem necessary. However, generally, Dr. Baer will provide programmatic interface with both national organizations. He will forward email communications with both organizations to collaborating partners and, as necessary, report verbally at collaboration meetings.

Internal – Level II – Communication Between Collaborating Partners and Their Organizations

- Staffs – CAPSA, OPTIONS, and DSPD each have staffs that will need to be kept abreast of collaboration activities:
 - Jill Anderson/Kathryn Monson will keep CAPSA staff informed through periodic updates.
 - Cheryl Atwood will keep OPTIONS staff informed through periodic updates.
 - Deb O'Dell will keep DSPD staff informed through periodic updates.

- Supervisors:
 - Deb O'Dell reports to John Schoenfeld, DSPD, Northern Region Director and Georgia Badley, DSPD Director. She will keep them informed of collaboration activities through periodic updates.
 - Gordon Richins reports to Bryce Fifield, CPD Director, He will keep him informed by describing collaboration activities in periodic staff meetings.
- Boards of Directors / Administrations
 - Jill Anderson reports to the CAPSA Board of Directors. She will keep her board informed and seek input around key decision points for systems change by describing collaboration activities in periodic board meetings.
 - CPD administration includes a director, associate director, assistant director, and Gordon Richins, consumer liaison, as well as a number of division directors. CPD administration also interacts with an advisory board, composed of university administrators and staff, and a consumer advisory board composed of consumers of services for people with disabilities. Gordon Richins will keep these groups informed and seek input around key decision points for systems change by describing collaboration activities in periodic staff/board meetings.
 - Cheryl Atwood reports to the OPTIONS Board of Directors. She will keep her board informed and seek input around key decision points for systems change by describing collaboration activities in periodic board meetings.
 - DSPD has a state director, Georgia Badley, who reports to the DSPD Board of Directors. Deb O'Dell will keep these parties informed and seek input around key decision points for systems change by describing collaboration activities in periodic administrative staff meetings.

External – Communication with Organizations Outside of the Collaboration Organizations

- CAPSA has a close working relationship with the Utah Coalition Against Sexual Assault, the Utah Domestic Violence Council and various local coalitions and service providers. Jill Anderson/Kathryn Monson will keep these groups informed regarding collaboration activities through periodic updates at regularly scheduled meetings.
- CPD administration reports to the Dean of the College of Education. Gordon Richins will keep the dean informed by describing collaboration activities at periodic board meetings that the dean chairs.
- OPTIONS has a close working relationship with the Utah Statewide Independent Living Council, the Association for Independent Living of Utah and Utah State Office of Rehabilitation. Cheryl Atwood will keep

these groups informed regarding collaboration activities through periodic updates at regularly scheduled meetings.

- DSPD has a close working relationship with agencies throughout the Department of Human Services, provider agencies serving people with disabilities, health care providers, the Developmental Disabilities Council and self-advocacy groups. Deb O'Dell will keep these groups informed regarding collaboration activities through periodic verbal and written updates.

Media

- Proactive – Press releases and articles will be drafted by collaborating partners as assigned. They will be reviewed and, where necessary, revised consistent with the collaboration's rules for decision making before being released to the media.
- Reactive – When collaborating partners are approached by the media they may discuss the vision, mission, and values of the collaboration. However, with regard to specific questions, they will explain that, because of the nature of the collaboration, no position will be expressed until the partners have met to formulate a response. Once a response is formulated, a point person will be assigned to address the specific question(s).

Decision Making

Authority

As in all communications, during discussions and decision making, NUCOV is committed to providing open and safe communication environments. The collaborative partners will have ultimate responsibility for all major decisions. The project director is empowered to make decisions about the day-to-day functions and activities of the project.

Decisions will be made with due respect for the law, obligations of the collaboration under its cooperative agreement with OVW, and the policies and procedures of the collaborating organizations.

Protocol

Consensus decision making will be used. The small size of our group allows for thorough discussions until we are able to reach consensus. To structure our decision making, we will utilize gradient decision making. The gradient scale will be a five point scale (1=absolutely do not agree; 2=don't like it but will go along; 3=neutral; 4=am OK with it but not 100% in agreement; 5=total agreement). Members will be asked to rate the decision. If all ratings are at 3 or above, the decision will be adopted. If any votes are below 3, discussion will continue until

resolution is reached. Once a decision has been reached, members agree to fully support it, regardless of how they themselves rated the decision.

Confidentiality Plan

The collaboration acknowledges that confidentiality plays a key role in promoting the safety of survivors. Each partner organization has shared their own organization's confidentiality policies with others in the collaboration. The organizations' policies are highly compatible and the partners have agreed that no communication, documentation or other information that could identify a victim/survivor shall be shared without a signed release from the individual.

Collaborative representatives sharing information with the collaboration about their organizations will declare in advance how sensitive the information is and the degree of confidentiality desired. The other partners will commit or not commit to respecting the confidentiality of the information prior to receiving the information. The collaborative representatives agree to respect the level of confidentiality they declared prior to receiving the information.

The subject of "mandatory reporting" raises complex issues and is worth discussing here. Utah state law requires any person who suspects abuse or neglect of "vulnerable adults" to report such to Adult Protective Services or law enforcement.

As all members of the NUCOV collaboration have mandatory reporting requirements, the collaboration recognizes that these requirements may eliminate or compromise some choices a survivor may choose to make. Therefore, prior to engaging in any discussion of issues of domestic or sexual violence when a vulnerable adult may be present, the collaborative will take the following steps.

1. The individual who may be a vulnerable adult shall be made aware of mandatory reporting requirements and potential implications.
2. This communication shall be conducted in a manner ensuring that the individual understands the law and its implications, and has an opportunity to decide whether to continue the conversation.

Work Plan

The following activity timeline will guide collaboration activities. It will be reviewed in periodic collaboration meetings and revised as experience dictates.

Activity	Completion Date
Submit collaboration charter to OVW	7/22/08
Submit narrowing of focus memo to OVW	8/12/08
Vera site visit to plan needs assessment	8/20 & 21/08
Write needs assessment plan and submit to Vera/OVW	9/21/08
Conduct needs assessment	11/30/08
Submit needs assessment report to Vera/OVW	12/31/08
Vera site visit for strategic planning	1/09
Write strategic plan	2/15/09
Submit strategic plan to Vera/OVW	2/28/09
Strategic plan approved	3/15/09