

H.O.P.E. COLLABORATIVE
Haywood County, North Carolina

STRATEGIC PLAN

2009

H.O.P.E. COLLABORATIVE STRATEGIC PLAN

The H.O.P.E. Collaborative of Haywood County, North Carolina was formed in 2007 as a mechanism to move our agencies toward the provision of a seamless system of services for individuals with disabilities and Deaf persons that experience violence and abuse. The following is a report outlining the work and progress of the Collaborative in designing this responsive system. This strategic plan will guide us as we move forward with our initiatives in the county to provide this seamless system for the individuals we serve.

I. INTRODUCTION TO THE H.O.P.E. COLLABORATIVE

The H.O.P.E. Collaborative of Haywood County, a three year project funded in October 2007 by the Department of Justice, Office on Violence against Women’s Education, Training, and Enhanced Services to End Violence Against and Abuse of Women with Disabilities Grant, is located in the Appalachian Mountains of Western North Carolina. It is a Collaborative group of six agencies joining together to improve the way that we respond, both as individual organizations and as an inter-connected system, to persons with disabilities and Deaf persons who experience violence and abuse in our county. The acronym “H.O.P.E.” means “Helping Our People Emerge....from crisis to healing,” reflecting our community and our sense of shared responsibility.

The H.O.P.E. Collaborative brings together six agencies, and a consultant with statewide adult protective services experience. Five of these organizations directly serve persons with disabilities and survivors of violence and abuse. They have pledged to be sites of change, working together to remove barriers to services and supports for persons with disabilities and Deaf persons experiencing violence or abuse and promoting universal accessibility. The sixth agency is the convening agency. These agencies are:

- **REACH of Haywood County**, the local domestic violence-sexual assault agency, which assists victims and survivors of domestic violence, sexual assault, stalking and rape;



- **Haywood Vocational Opportunities**, a non-profit organization providing work force training and employment for persons with disabilities;



- **The Arc of Haywood County**, offering group homes, transitional and independent living apartments for persons with developmental disabilities in Haywood County;



- **The Haywood County Department of Social Services**, which receives and evaluates reports concerning adults with disabilities alleged to be abused, neglected or exploited;



- **Smoky Mountain Center**, a Local Mental Health Management Entity of the North Carolina Department of Health and Human Services, Division of Mental Health, Developmental Disability and Substance Abuse Services. The agency manages a provider network for mental health, developmental disability and substance abuse services.



The sixth agency in the Collaborative is the **Thirtieth Judicial District Domestic Violence-Sexual Assault Alliance**, a nonprofit, regional coalition based in Haywood County that provides education, outreach, and community capacity building to improve the response to victims and survivors of domestic violence, sexual assault, stalking and elder abuse. The Alliance acts as the convening agency of the H.O.P.E. Collaborative.



The Vision for the H.O.P.E. Collaborative

Organizations in Haywood County take collective responsibility to provide a seamless system of quality, inclusive, and responsive services that empower persons with disabilities and Deaf persons who experience violence and abuse to move from crisis to healing.

The Mission of the H.O.P.E. Collaborative

The H.O.P.E. Collaborative will remove barriers to services and supports for persons with disabilities and Deaf persons who experience violence and abuse by fostering agency collaboration, creating a collective response, and changing organizational policies and procedures, which will be fully integrated into the culture of our agencies.

Development of the H.O.P.E. Collaborative Collaboration Charter

During the process the first step toward our goal was to strengthen our Collaborative and develop our processes for working together and ultimately creating a collaboration charter. Through the

development of our Collaborative charter we established the functions and organizational structure necessary to move our organizations toward becoming an inter-connected system. The collaboration charter became the foundation for the development of our shared values and guiding principles. The process of the charter development provided a time to embrace the important role each partner would play in promoting safety and addressing barriers and challenges that people with disabilities and Deaf persons may encounter if they are experiencing violence and abuse. The time spent in the development of the Collaborative charter was a time for learning and growing as a Collaborative. The H.O.P.E. Collaborative Charter was completed in May of 2008.

The H.O.P.E. Collaborative Areas of Focus

Following the development of the Charter, the H.O.P.E. Collaborative members moved forward in undergoing the process of narrowing the focus to better assist the Collaborative in reaching their vision. The H.O.P.E. Collaborative agreed to focus on persons with all types of disabilities and Deaf persons residing in Haywood County, North Carolina who have experienced violence and abuse. The Collaborative members are concentrating on sustainable, substantial systems change. They desire to create agency environments which encourage disclosures of violence and abuse and a seamless, collective response when disclosures are made. They will work to change not only their agencies' policies and procedures but also their organizational cultures. The agencies have the capacity and expertise to create this change, as well as the vision and commitment to expand this project in the future to additional counties in this rural, mountainous region of Western North Carolina. The 30th Judicial District Domestic Violence-Sexual Assault Alliance, Inc. will not serve as a site of change but will be the convener for the H.O.P.E. Collaborative member agencies.

The next step for the Collaborative was to develop a comprehensive needs assessment plan to assess the challenges and needs of persons with disabilities and Deaf persons experiencing violence and abuse, to determine appropriate resources and services available, to study accessibility, and to assess current policies, procedures and practices. Following the planning phase, the collaboration moved forward into implementing our needs assessment which resulted in a report of the findings. The following is an overview of the process implemented to gain the information.

II. NEEDS ASSESSMENT PLANNING, IMPLEMENTATION AND REPORT

Planning and Development

The H.O.P.E. Collaborative felt that by studying the current system and with feedback from leadership and management, front line staff, persons with disabilities, survivors of violence and abuse, volunteers, and boards chairs, the H.O.P.E. Collaborative would be able use the information obtained from the needs assessment to inform the work of the Collaborative, to identify unmet needs and ultimately, to guide the comprehensive strategic planning process. The Needs Assessment Plan was approved in November 2008 and this launched the implementation of the actual Needs Assessment.

The planning and development included the following elements:

- Global Needs Assessment Questions to act as guideposts for the process
- A review of information sources, both existent and new
- An Overview of Methods to be used in the needs assessment process
- Identification of participating audiences
- Recruitment methodology
- Process for Facilitation
- Identification of the Facilitation Team
- Consent, Access and Safety considerations
- Client & Personnel Confidentiality
- Mandatory Reporting
- Development of Assessment Tools
- Data storage and the Needs Assessment Report

Implementation

Following the approval of the Needs Assessment Plan, the needs assessment implementation began in December of 2008. The needs assessment was conducted over a two month period with data gathered by the end of January 2009. Key members of the H.O.P.E. Collaborative were responsible for recruitment of participants and issued invitation letters, R.S.V.P. forms, and Frequently Asked Question sheets. In addition, the key members were responsible for transportation issues, scheduling and room reservation, and meeting any accommodations needed with the assistance of the Project Directors.

The needs assessment process was based on four global questions. These four questions were decided upon to demonstrate the highest priorities for the work of the Collaborative and were the guide posts for the focus groups and interviews used throughout the needs assessment. The four questions were:

1. What services, policies, procedures, practices, knowledge and relationships do our organizations currently have for survivors with disabilities as they move from crisis to healing?
2. What do our organizations still need to effectively work with survivors with disabilities?
3. What are the barriers survivors with disabilities face in accessing and receiving services?
4. What opportunities exist or can be created that will lead to seamless, inclusive, and responsive services that empower persons with disabilities who experience violence and abuse to move from crisis to healing?

Two methods were chosen to obtain information during the needs assessment; focus groups and interviews. These methods were chosen based on what would work best for each audience. Audiences participating in the needs assessment process included: Leadership & Management, Front Line Staff, Survivors of Violence and Abuse, Persons with Disabilities, Volunteers, and Board Chairs. Interview and Focus Group Facilitation was completed by the two Co-Project Directors for the H.O.P.E. Collaborative from the 30th Judicial District Domestic Violence-

Sexual Assault Alliance and an independent consultant who is currently part of the H.O.P.E Collaborative. The facilitation team members were not affiliated with any of the partner agencies who participated in the actual assessment, and acted as outside, objective observers.

A passive consent process was chosen for all participants. Since this was not a formal research project and the Collaborative was only seeking to gain insights, opinions and ideas, no consent forms were signed. Guidelines for the passive consent process were read to each group or individual prior to beginning the focus group or interview. Each individual choosing to stay was effectively giving their consent to participate.

Confidentiality was reviewed with all participants. Although confidentiality could not be guaranteed in the focus group setting, participants were assured that the facilitation team would keep information confidential and requested that group members do this as well. Personal care attendants were not permitted to attend and individuals that had personal care attendants were offered the option of having an alternate attendant.

The mandatory reporting statute of North Carolina was reviewed. This let participants know that North Carolina is a mandatory reporting state and that if an individual disclosed current violence or abuse that was personally happening to them, the group leaders may be required to report this information to Adult Protective Services (APS). They were also told that if they needed to report violence or abuse that was happening to them that they could report this for themselves by contacting Adult Protective Services. That number as well as a list of resources was available for them at the conclusion of the meeting.

All interviews and focus groups were held in accessible locations within the community. For survivors and persons with disabilities, the needs assessment was conducted at the location where they were receiving services. Individuals were recruited by the Collaborative staff at their respective agencies. An R.S.V.P. form, filled out by each participant, allowed them to request needed accommodations. If the individual needed assistance in completing any of the forms, assistance was provided by the agency staff member recruiting them. The facilitation team was responsible for filling the accommodation requests. All survivors and persons with disabilities received a \$20 gift card from Wal-Mart for coming to the focus group or interview.

Safety considerations for participants included having the potential participant return all written information to the recruiter after it had been read, having participants provide contact information that they felt would be safe for them, providing a resource list for individuals in the group if they wanted more information, having a R.E.A.C.H. advocate available at focus groups for persons with disabilities and survivors, and offering to keep the gift card at the sponsoring agency if the participant was afraid to take it home.

The Collaborative agencies had a target of 154 participants for inclusion in the focus groups and interviews. The final total of participants was 135 for an 88% participation rate. Most of the groups and interviews were completed as scheduled and only a few minor changes were needed to work around the holiday activities and Collaborative agency conflicts. The following two sections reflect the process and outcomes of the focus group method and the interview method.

The *focus group method* was chosen to gather information specific to practices, attitudes, cultures, barriers and systems response from persons with disabilities and survivors of violence

and abuse. Persons with disabilities, survivors of violence and abuse, front line staff and management who did not wish to participate in the focus group method were offered an individual interview as an alternative method. Participants recruited for the focus groups were not screened based on disability and/or issues of violence and abuse. Every effort was made to recruit the broadest range of participants. All focus groups required approximately one to one and one-half hours to complete. The facilitators followed a script in each setting for uniformity.

There were nineteen projected groups and eighteen actual groups that were held. The anticipated number of participants was 131 and 102 actually participated. Group types participating in the focus groups were: Leadership & Management, Front Line Staff, Survivors, and Persons with Disabilities.

The *interview method* was chosen in order to gather information specific to agency policies, practices, attitudes, strengths, weaknesses, and commitment to the initiative from the partner agency leadership. Interviews were used for agency executive directors, Board chairs, some management positions and some front line staff and volunteers. Interviews were also given as an optional method for survivors, persons with disabilities, front line staff and management. All interviews required approximately one hour to complete. The facilitators followed a script in each setting for uniformity. Two facilitators completed each interview with one facilitator asking the interview questions and the other facilitator acting as recorder.

Seven interviews were completed with Leadership and Management on-site at each of their respective organizations. Eight interviews were projected. One agency executive director requested an additional briefing on the project prior to participation in the interview process. This briefing was completed by the facilitators and the interview was then accomplished.

There were ten projected interviews for front line staff and volunteers. Ten were completed. Front line staff interviews were all held on-site at respective agencies. Interviews with volunteers were held in different locations in the community to meet the needs of the participants.

We were not able to project numbers of survivors and persons with disabilities and/or staff that would choose an interview as their option. Ultimately, four staff members and seven survivors requested interviews rather than focus group participation.

The next section will present the key findings of what was learned from the needs assessment participants and how, through the strategic planning process, the H.O.P.E. Collaborative will create sustainable systems change to address the needs of the individuals with disabilities and Deaf persons in our county that experience violence and abuse.

Report of Key Findings and Implications

The H.O.P.E. Collaborative sought to capture information about the beliefs, attitudes and experiences of survivors, persons with disabilities and service providers. All data from the focus groups and the interviews were computer documented and reviewed for themes, key findings, strengths, and areas in need of improvement. Seven key findings were determined. The areas of key findings were:

Key Finding #1: We found that in order for survivors to feel comfortable in disclosing domestic violence, abuse and the presence of a disability, they needed a welcoming environment. We found that agencies had a varying degree of welcoming environments.

Key Finding #2: We found that there are areas for improvement in our agencies in how accessible services are for survivors with disabilities. We found accessibility issues to be present in different contexts including physical, programmatic, and transportation.

Key Finding #3: We found that not all agencies were aware of the safety mechanisms important for dealing with issues of domestic violence and abuse.

Key Finding #4: We found a lack of awareness regarding what services were available for survivors with disabilities and how to access them.

Key Finding #5: We found a gap in the comprehensive knowledge base for working specifically with survivors with disabilities.

Key Finding #6: We found that there was a lack of policies, procedures and protocols for responding to the specific needs of survivors with disabilities.

Key Finding #7: We found a gap in the relationship with law enforcement and the judicial system in Haywood County for assisting survivors with disabilities.

III. THE STRATEGIC PLAN

Using the key findings from the needs assessment and the common themes and the gaps in the services that have been identified, we moved forward into our strategic planning process in March 2009. By assessing the implications and exploring the range of possible initiatives that address each finding, we have developed the following list of short-term proposed initiatives that will enable the Collaborative members to create the sustainable changes in our agencies necessary to provide a seamless service delivery system for individuals we serve that experience violence and abuse.

Finalizing, Prioritization and Sequencing of Initiatives

Through a process of reviewing our guidelines and guiding principles for the grant and the vision and mission of our Collaborative, we assessed each finding for the range of possible initiatives. The range of initiatives explored by the Collaborative was:

- Policies and protocols to promote disclosure of violence
- Policies and protocols to promote requests for accommodations
- Policies and protocols if the guardian is the abuser
- Policies and protocols if serving the survivor and the perpetrator
- Create workplace policies on Domestic Violence (staff is survivor)
- Explore issues of mandatory reporting and confidentiality
- Conduct Accessibility Reviews
- Conduct Responsiveness Reviews
- Build/enhance relationships amongst all levels of organizations
- Enhance outreach of partner organizations

- Training activities through Collaborative organizations
- Enhance current training to incorporate abuse and disability
- Create peer to peer trainings for people with disabilities

From this list of initiatives, we began to narrow down the possible initiatives to those that can be done well within the time frame of the grant. Several guiding principles and strategies underlie our proposed initiatives and activities that will be used to accomplish the initiatives. The guiding principles include: All activities should promote systems change; suggested activities focus on changing organizational culture and fostering change in both domestic violence services and disability services; and all activities should result in sustainable, long-lasting change. The Collaborative is also cognizant of working towards integrating and enhancing existing services, as opposed to creating any new, perhaps non-sustainable, services. The Collaborative is committed to involving individuals with disabilities and survivors. The Collaborative is also aware and respectful of differences and challenges, and hopes to be responsive to provider fears and the general stigma associated with the topic of violence against women with disabilities. The Collaborative strongly believes that we must first focus on change within our own agencies in order to provide agencies outside our Collaborative with an example to follow.

Through our consensus process and being mindful of the guiding principles, we were able to develop six comprehensive short-term initiatives we feel will move the Collaborative through sustainable change that will lead to a seamless service delivery system for persons with disabilities and Deaf survivors.

Initiative 1: Create accessible, responsive and welcoming environments in our domestic violence agencies.

Initiative 2: Create a responsive and welcoming environment in our disability agencies.

Initiative 3: Create policies and procedures that promote disclosures of violence and abuse and linkages to services.

Initiative 4: Create policies and protocols that promote requests for accommodations.

Initiative 5: Build/Enhance relationships and resources among staff of all Collaborative organizations.

Initiative 6: Explore issues of mandatory reporting and confidentiality.

It is clear that there is an enormous amount of work to be done in Haywood County in order for the H.O.P.E. Collaborative to achieve our vision of changing the mindset in the county resulting in a sustained, collaborative response that provides competent, respectful, accessible, empowerment based services to survivors with disabilities. However, the above initiatives were chosen because they strive to do just this. These initiatives will help build the foundation for improving services for the individuals with disabilities that we serve and increasing accountability for both our domestic violence and disability service providers.

The following section provides an overview of why each initiative was chosen, the activities which will lead to the systemic change, a review of how each initiative will be sustained, and the evaluation and monitoring of activities we will utilize to move each initiative forward.

Short-term Initiatives and Action Plans (Appendix A)

In order to provide a more comprehensive overview of the work plans and time lines associated with the initiatives, a “Strategic Plan At- A- Glance” document has been developed (Appendix A). This document shows what is happening each month during the implementation phase. In Appendices B through G, the initiatives will be shown in greater detail to better inform the work of the Collaborative and each sub-group leading each initiative.

INITIATIVE 1: Create accessible, responsive and welcoming environments in our domestic violence agencies.

Activity: Create and implement a review process for accessibility: physical, attitudinal, programmatic, and communication (Appendix B).

Of primary importance to the work of this Collaborative is to ensure that the domestic violence agencies are accessible to individuals with disabilities that experience violence and abuse. In order to address the need for increased accessibility of services for survivors with disabilities, the Collaborative agencies have developed the strategic plan objectives that follow.

The primary activities around this initiative will be based on the development of a work group comprised of Collaborative members, disability agency staff, individuals with disabilities, and disability advocates. This group will be led by the executive director of the Arc of Haywood County. The group will explore existing models and tools for reviewing agency accessibility and will seek additional guidance through our technical assistance providers and associates. Ultimately the work group will produce a tool which can be used to review accessibility (physical, attitudinal, programmatic, and communication) for R.E.A.C.H. and the 30th Judicial District Domestic Violence-Sexual Assault Alliance.

Once the work group has developed the tools and they are approved by OVW, we will bring in associates and Vera Institute of Justice to train this team on how to conduct an accessibility audit and review. Our goal is to create a “*Trained Accessibility Team*” in Haywood County. Once the team is developed and trained, we will be able to use the team to conduct reviews of agencies throughout our region. This will enable us to look beyond our Collaborative members and assist other programs in the region that are looking to become more responsive to individuals with disabilities or Deaf individuals that experience violence and abuse.

When we have completed the review of R.E.A.C.H. and the 30th Judicial District Alliance, recommendations will be made that will provide greater access to domestic violence services for survivors with disabilities and Deaf survivors. R.E.A.C.H. and the Alliance will determine short and long-term priorities based upon the reported findings of the review. Once the Collaborative has reviewed the priorities, funding will be allocated and R.E.A.C.H. and the Alliance will make the changes. Any changes that do not fall within the scope of this grant will be placed in the

long-term priority category. The work group will also assist with the identification of possible funding sources that may support these other long-term priorities.

Evaluation and Monitoring:

The evaluation and monitoring will be completed by the Project Directors. Outcome measures have been developed and are listed as components of Appendix B of the strategic plan. Monthly meetings will be held with the work group leader to provide support and to assess the progress toward completion of the outcome measures as indicated in the plan. Through monthly Collaborative meetings any adjustments to the time line can be made.

Systems Change and Sustainability:

Through the creation of the Accessibility Team, we will begin the systemic changes in our Collaborative agencies that will lead to the organizational changes that will make agencies more accessible to survivors with disabilities. Our teams will be made up of a cross section of members of our Collaborative and individuals with disabilities. The team will function independently of any agency and will be large enough to have no dependence on any one program or agency. Sustainability of the Accessibility Team will not be dependent on funding or specific staff positions but a collective responsibility of our Collaborative. By creating a local Accessibility Team, audits can be conducted locally, organizations can learn what needs to be done, and changes will be created within the organizations. These changes in turn will withstand leadership change and will become embedded into the everyday practices and culture of the organizations.

Experiences for survivors will improve as this initiative will create and initiate changes that are necessary to enable survivors to easily access programs and receive services within our Collaborative agencies. We will remove the barriers by creating accessible and responsive programs.

Following our initial training of Collaborative agencies, the team will also be able to assist other programs in the region with a goal of becoming more responsive to individuals with disabilities or Deaf individuals that experience violence and abuse. The Accessibility Team will be available to provide an accessibility audit of these other agencies which will provide even greater opportunities to ensure that survivors with disabilities in our region receive the services that need.

Through the comprehensive evaluation of accessibility needs and the subsequent development of both short and long-term objectives, we will create changes that will meet the immediate needs for accommodations for survivors with disabilities and Deaf survivors. The long-term objectives will also be prioritized and through the assistance of the work group, additional funding will be explored to complete all of the objectives identified.

INITIATIVE 2: Create a responsive and welcoming environment in our disability agencies.

Activity: *Create and implement a review process for responsiveness to meeting the needs of survivors with disabilities (Appendix C).*

Parallel to ensuring that our domestic violence agencies are accessible to survivors with disabilities, the Collaborative also wants to ensure that our disability agencies are responsive to individuals that experience violence and abuse. In order to address the need for increased responsiveness of services for survivors with disabilities, the Collaborative agencies have developed the strategic plan objectives that follow.

The activities around which this initiative will be based involve the development of a work group comprised of Collaborative members, domestic violence agency staff, and survivors. This work group will be led by the executive director of the domestic violence direct service agency in Haywood County (REACH). The group will explore existing models and tools for reviewing agency responsiveness and will seek additional guidance through our technical assistance providers and associates. Ultimately the work group will produce a tool which can be used to review the responsiveness (attitudinal, programmatic, and communication) for disability service agencies to better serve survivors with disabilities.

The review will be conducted by a trained team and technical assistance associates. Recommendations will be made that will provide greater responsiveness of disability service providers for survivors with disabilities and Deaf survivors. The disability service agencies will determine short and long-term priorities based upon the reported findings of the review. Once the Collaborative has reviewed the priorities, funding will be allocated and the agencies will make the changes. Any changes that do not fall within the scope of this grant will be placed in the long-term priority category. The work group will also assist with the identification of possible funding and other sources that may support these other long-term priorities.

Evaluation and Monitoring:

The evaluation and monitoring will be completed by the Project Directors. Outcome measures have been developed and are listed as components of Appendix C of the strategic plan. Monthly meetings will be held with the work group leader to provide support and to assess the progress toward completion of the outcome measures as indicated in the plan. Through monthly Collaborative meetings any adjustments to the time line can be made.

Systems Change and Sustainability:

By ensuring that our disability agencies improve their responsiveness to survivors with disabilities, we will be removing barriers and improving access to these necessary services for this population. Additionally, by making the changes outlined in this initiative, issues of violence and abuse will be paramount in our disability organizations and shift the culture and practice of these organizations. Ultimately, this will lead to sustainable change within these organizations not conditional on funding from this grant program or specialized staff.

Our goal is to create a trained Responsiveness Team in Haywood County. This Responsiveness Team will parallel the Accessibility Team. Once the team is developed and trained, we will be able to use the team to conduct reviews of agencies throughout our region. This will enable us to look beyond our Collaborative members and assist other programs in the region that are looking to become more responsive to disclosures by survivors with disabilities or Deaf individuals. By sharing responsibilities on this team, the audit function will not be dependent on funding, on one individual, nor on one agency.

INITIATIVE 3: Create policies and procedures that promote disclosures of violence and abuse and linkages to services.

Activities: *Revise intake information to include questions on violence and abuse; create protocols to guide staff in screening for violence and abuse; and protocols guiding staff response to disclosures (Appendix D).*

Our Collaborative disability agencies all expressed a desire to be more responsive to individuals with disabilities that experience violence and abuse. In order to be more responsive, the agencies will first need to have a mechanism to learn about the violence and abuse that is occurring in the lives of the individuals they serve and also be able to teach/train/direct staff on how to respond to these disclosures.

The activities around which this initiative will be based involve the development of a work group comprised of Collaborative members, domestic violence agency staff, and survivors. This work group will be convened and led by the Collaborative Adult Protective Services consultant. The group will review what others have done and will review best practices in the area of intakes that screen for violence and abuse. The team will also review any existing intake forms, policies and protocols that are in place at each disability service agency in the Collaborative relating to response to violence and abuse. The team will review intake forms, policies and protocols that exist in disability organizations in other programs across the country. They will seek additional guidance through our technical assistance providers and associates. Once reviews are complete, the team will draft intake forms and policies and protocols that will guide the disability service staff in responding to any disclosures of violence and abuse made to staff at their agencies. The draft policies and protocols will be submitted to OVW for approval. After approval by OVW, the policies and protocols will be presented to the agency directors and boards of directors of each agency for their approval.

Once the responsiveness and accessibility reviews have been completed at each agency (initiatives 1 and 2) and accommodations are in place, the Collaborative will choose one agency to pilot the training on the new intakes and response systems. This pilot will assess the readiness of R.E.A.C.H. in providing for needs of survivors with disabilities and will also assess the protocols that the disability staff will follow in providing services. By using a piloting approach with one disability agency, we will be able to make the necessary adjustments to policies and protocols if there are any unintended consequences that are learned from the pilot.

After the pilot is completed and we are sure that all systems and supports are place for basic responsiveness and accessibility, training for the additional agencies will take place on policies and procedures and we will roll out the entire package.

Evaluation and Monitoring:

The evaluation and monitoring will be completed by the Project Directors. Outcome measures have been developed and are listed as components of Appendix D of the strategic plan. Monthly meetings will be held with the work group leader to provide support and to assess the progress toward completion of the outcome measures as indicated in the plan. Through monthly Collaborative meetings any adjustments to the time line can be made.

Systems Change and Sustainability:

By creating and adopting policies and protocols in each agency, the service changes will be put in place regardless of any changes in current or future leadership or staff. The policies and protocols will create the foundation of service provision for survivors with disabilities in each agency and that will ultimately change and improve the experiences of survivors as well as the organizational culture and capacity. Policies and procedures will become embedded in the design of the organization.

In addition, there will be trainings offered as a vehicle for the application of the policies and protocols so that current staff and those that are hired in the future will be aware and comfortable with the procedures and processes in working with survivors with disabilities. This will lead to the more consistent use of the policies and protocols so that they will be sustainable and provide a consistent response to survivors with disabilities. As the policies become an integral part of the organization, those policies will create the sustainability.

INITIATIVE 4: Create policies and protocols that promote requests for accommodations.

Activities: *Revise intake information to include requests for accommodations by survivors with disabilities and Deaf individuals and create protocols to guide staff in responding to any need for accommodations (Appendix E).*

Parallel to the initiative for disability agencies, the Collaborative also wanted to ensure that our domestic violence agency is able to respond to requests for accommodations and understand the need for accommodations. In order to be more responsive, the agencies will first need to have a mechanism to learn about what accommodations may be needed by survivors with disabilities in Haywood County. The agency will also need to teach/train/direct staff on how to respond to requests for accommodations.

The activities around which this initiative will be based involve the development of a work group comprised of Collaborative members, disability agency staff, consumers, and disability advocates. This group will be led by a representative from Smoky Mountain Mental Health who is a member of our Collaborative. The group will review what others have done or best practices in the area of intakes and will also research statutes that may impact changes that are proposed.

They will seek additional guidance through our technical assistance providers and associates. Ultimately the work group will draft a new intake form for R.E.A.C.H. The intake form will be submitted for approval to OVW. After approval we will wait until all systems are in place (accommodations, protocols and training) to begin using the new form.

Concurrently, the team will review any existing policies and protocols that are in place at R.E.A.C.H. relating to the provision of accommodations at both the main office and the shelter. The team will review policies and protocols that exist in other domestic violence-sexual assault organizations. They will seek additional guidance through our technical assistance providers and associates. Once reviews are complete the team will draft policies and protocols that will guide the R.E.A.C.H. staff in responding to any accommodation needs. The draft policies and protocols will be submitted for approval. After approval by OVW, the policies and protocols will be presented to the R.E.A.C.H. Board for their approval. The Collaborative will budget to put accommodations in place at R.E.A.C.H., as appropriate to the scope of the grant. Accommodations will not include building or facility renovations but will be used for adaptive equipment such as screen readers, TTY, assistive hearing devices, accessible materials, etc.

Training will be held to familiarize staff on the new intake form and the policies and protocols. After accommodations have been purchased and the training has been completed, the new form as well as policies and protocols will be operational. Following this training, there should be an increase in the numbers of survivors requesting or discussing accommodations.

Evaluation and Monitoring:

The evaluation and monitoring will be completed by the Project Directors. Outcome measures have been developed and are listed components of Appendix E of the strategic plan. Monthly meetings will be held with the work group leader to provide support and to assess the progress toward completion of the outcome measures as indicated in the plan. Through monthly Collaborative meetings any adjustments to the time line can be made.

Systems Change and Sustainability:

By creating and adopting policies and protocols in each agency, the service changes will be put in place regardless of any changes in leadership or staff. The policies and protocols will create the foundation of service provision for survivors with disabilities in each agency and that will ultimately change and improve the experiences of survivors with disabilities as well as organizational culture and capacity.

In addition, there will be trainings created to support the policies and protocols so that current staff and those that are hired in the future will be aware and comfortable with the policies and protocols. This will lead to the more consistent use of the policies and protocols so that they will be sustainable and provide a consistent response to survivors with disabilities. Through the implementation of new ways of doing business, there should be a reduction in barriers for survivors who need to ask for accommodations and a more uniform response in working with survivors with disabilities.

INITIATIVE 5: Build/Enhance relationships and resources among staff of all Collaborative organizations.

Activities: *Develop methods for sharing resource information, such as a resource guide, with support staff and a mechanism for organizations to share information about their specialty areas with other agencies (Appendix F).*

Evident throughout the needs assessment was the need to develop relationships and linkages between our domestic violence service provider and disability service providers. For relationships to be built, it will be necessary for our Collaborative to develop a mechanism for Collaborative partners to share their expertise with others in the Collaborative through informal informational opportunities. These opportunities can be created in our community to provide this information. Also, in order to build relationships, the Collaborative feels that it is imperative for the staff of all of our agencies to have a working knowledge of our Collaborative agencies and other community agencies which can be easily and readily shared with individuals we serve. These elements of relationships and resources will be a necessary piece as we move toward a seamless service delivery system for survivors with disabilities.

The activities around which this initiative will be based involve the development of a work group comprised of Collaborative members as well as members of both disability agencies and domestic violence advocates. This work group will be led by the Project Directors of the H.O.P.E. Collaborative. The group will review and collect material on each of the Collaborative agencies as well as information on other disability and support services within the county to be shared in a variety of formats, including a resource guide, agency web access and online resource information. The Collaborative will choose the medium(s) for presentation of information and resources. The information and resources will be used to support the training of staff in the Collaborative agencies according to initiatives three and four.

The Collaborative will explore the best ways for agencies to share information on a regular basis at the first of the quarterly Collaborative meetings during the strategic planning phase. The group will set up the initial programs and develop a format and schedule. The agency shared training will begin during the summer of 2009.

Evaluation and Monitoring:

The evaluation and monitoring will be completed by the Project Directors. Outcome measures have been developed and are listed as components of Appendix F of the strategic plan. These outcome measures will guide the Project Directors in completing the tasks in a timely manner. Reporting will occur at the monthly Collaborative meetings and any adjustments to the time line can be made.

Systems Change and Sustainability:

The resource guide can be updated on an annual basis by the Alliance. The Alliance will be responsible through future initiatives/grants to keep the information updated.

Once the Collaborative has developed a mechanism for sharing information (lunch and learn, printed information, website, presentations, or other venues) the Collaborative will develop a way to perpetuate the program such as an ongoing rotation schedule, etc.

INITIATIVE 6: Explore issues of mandatory reporting and confidentiality

Activities: *The Collaborative will develop a better understanding of mandatory reporting and confidentiality so that we can be better equipped to develop new intakes, procedures, and plans needed to move our initiatives forward (Appendix G).*

Initiative 6 will be an information awareness and exploration piece. It will assist with understanding the process and implications of mandatory reporting. Throughout the needs assessment process there were questions about the North Carolina state wide Mandatory Reporting statute and the impact of the statute on serving survivors with disabilities. Staff of the Collaborative agencies reported awareness of the requirements but were not sure what the criteria were for cases to be accepted by Adult Protective Services. There were also questions on how confidentiality laws and statutes may impact our work as we move forward with the initiatives.

The Collaborative will be the work group for the activities related to this initiative. The Project Directors will collect each agency's mandatory reporting and confidentiality policies. These will be made available to the group of "experts" that will be convened by the Project Directors to review the materials and to discuss/explain the statutes to the group. When all of the information has been reviewed and the group has met with the "experts" the Collaborative members will have a better understanding of mandatory reporting and confidentiality as it pertains to the work of our Collaborative.

Evaluation and Monitoring:

The evaluation and monitoring will be done by the Project Directors. Outcome measures have been developed and are listed as components of Appendix G of the strategic plan. These outcome measures will guide the Project Directors in completing the tasks in a timely manner. Reporting and management of the initiative activities will occur at the monthly Collaborative meetings. Any adjustments to the time line can be made by the group at those meetings.

Systems Change and Sustainability:

Collaborative members will have a greater knowledge of the process and what it means to be a mandatory reporter in North Carolina as well as a greater knowledge and understanding of confidentiality as it pertains to our initiatives. This knowledge will inform the Collaborative members as they lead their work groups in successfully completing their initiatives during our strategic planning process. Understanding the issue of mandatory reporting will lead to enhanced organizational capacity which in turn will help survivors with disabilities that need help.

This above information is a review of the primary short-term initiatives selected by the H.O.P.E. Collaborative of Haywood County, North Carolina. At this time it is anticipated that due to time and funding restraints, not all accessibility and responsiveness recommendations will be implemented at each Collaborative agency. Recommendations will be prioritized and only those feasible to achieve with the time and resources allotted will be completed. Thus, there may also be specific accessibility and responsiveness recommendations that may be carried out in the long-term. The Collaborative has made plans through our work groups to identify other funding streams that will assist us with meeting any accessibility needs that could not be achieved through the current grant. These six short-term initiatives will be accomplished within the grant time frame with a task completion date of Sept 2010. Each of the initiatives will seek to bring a permanent change within each organization for an improved service delivery system for persons with disabilities who are survivors of violence and abuse.

IV. COLLABORATIVE STRUCTURE AND WORK PROCESS.

The Collaborative will implement the above listed short term initiatives through the following Collaborative structure and work process.

Each initiative in the strategic plan will have a corresponding work group which is chaired by one or more of the Collaborative members (Appendix A). These work groups were determined at the Strategic Planning Retreat facilitated by the Vera Institute of Justice in March 2009. Each work group will develop their own meeting schedule, corresponding to the objectives to be accomplished. The groups will meet at least twice monthly and more frequently when necessary. The Project Directors will join the group during at least one of their meetings each month. Each work group will receive a copy of the time line established by the Collaborative and will be responsible for task completion according to this time line.

The chairs of each work group will be responsible for recruiting group members and setting up the group meeting schedule. This roster and meeting schedule will be the first deliverable of each work group.

The Collaborative as a whole will meet once a month to review the progress on each initiative, offer assistance and input, and adjust the timelines if necessary. The work groups will be held accountable by the Collaborative for maintaining the work schedule for timely completion of the initiatives.

V. LONG-TERM INITIATIVES AND FUTURE PLANS

By starting with change within the Collaborative agencies, our long-term goal is to eventually share our lessons learned and experiences with agencies outside the Collaborative. In addition to these short-term initiatives, the Collaborative has identified three specific long-term initiatives:

- Expansion of collaborative efforts and accessibility and responsiveness audits within Haywood county
- Expansion of collaborative efforts and accessibility and responsiveness audits within the Western North Carolina region in a multi-county effort
- Inclusion of law enforcement in our existing Collaborative and future expansion into other counties within Western North Carolina

The H.O.P.E. Collaborative would like to expand its collaboration to include agencies within Haywood County that were not part of the original Collaborative but who are agencies with the potential for valuable contributions. The development of highly qualified accessibility and responsiveness audit teams will be of great value in expanding our focus from the current Collaborative agencies to others in our community in our efforts to provide more accessible and responsive services for survivors with disabilities.

The teams would be available to conduct audits of accessibility and responsiveness using the review tools developed and provide information or training to outside agencies on developing policies and procedures that promote accessibility and responsiveness in their programs. By building this foundation and our own capacity, the Collaborative will be able to step into the role of becoming a technical assistance provider in Haywood County and eventually we will be able to expand our activities to assist others in Western North Carolina and beyond.

The inclusion of law enforcement and the criminal justice system evolved as a high priority, long-term initiative for the H.O.P.E. Collaborative. Our needs assessment clearly showed that the inclusion of law enforcement was an integral piece that will enable us to provide the most responsive services possible to survivors with disabilities. Throughout our discussions with survivors, front line staff and managers, there were concerns voiced regarding how law enforcement interacts or fails to interact in ways that meet the unique needs of survivors with disabilities. Only by including this group as part of our existing Collaborative, will we be able to truly provide the most comprehensive and responsive services to survivors with disabilities and Deaf individuals in Haywood County.

The Alliance and other Collaborative partners will seek the additional funding necessary to pursue these long-term initiatives to create even greater systems changes throughout western North Carolina.