

# **Collaboration Charter**

## **Survivor Empowerment and Access in Louisiana**

### **Collaborative Partners:**

**Judy Benitez, Louisiana Foundation Against Sexual Assault**

**Tamara Indest, Louisiana Foundation Against Sexual Assault**

**Ann Maclaine, Advocacy Center**

**Suzanne Miller, Advocacy Center**

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## **Collaboration Charter**

### **Survivor Empowerment and Access in Louisiana**

This Collaboration Charter is a document that reflects the shared commitments of two agencies, the Advocacy Center (AC) and the Louisiana Foundation Against Sexual Assault (LaFASA), to work together in collaboration for viable, sustainable, systemic change in the service delivery system in Louisiana as it relates to people who have disabilities or are D/deaf who are survivors of sexual violence. Our work will begin within our two agencies and will continue as we select several communities within our state that we will identify as pilot sites in which to focus and build upon our collaborative efforts.

#### **Sec. I. INTRODUCTION**

This document memorializes the structure, organization, and functions of our group (hereafter referred to as Survivor Empowerment and Access in Louisiana - SEAL.) Our Charter is designed to clearly define our Vision and Mission, Values, and Members of the Collaboration along with their Contributions and Commitments to our efforts. Further, our Charter sets out guidelines and processes that we have agreed upon and developed for our work together when making decisions, resolving conflict, communicating with each other and outside the collaboration, as well as respecting confidentiality. We have come together and created a shared list of key terms that reflect our SEAL voices, successfully negotiating our similarities and differences. Finally, a Work Plan has been developed to guide us as we embark on this most important journey.

We acknowledge that this work will be difficult at times. Making change within service delivery systems in Louisiana can be quite challenging. A majority of providers who supply goods and services to people who have disabilities or are D/deaf who have survived sexual violence are "self-governed". These providers develop their own individual policies and procedures in the communities in which they are located, independent of any statewide affiliation.

Many areas of our state continue to recover from damage incurred by three massive hurricanes that have impacted communities over the past four years. Private and non-profit providers of services continue to struggle with a wide variety issues that include funding, availability of qualified and responsive staff, as well as programmatic and physical accessibility and safety for survivors with disabilities.

The national economy has a direct impact on Louisiana's ability to provide state-funded services. Our state government budget is heavily dependent on the oil and gas industry,

with the price of a barrel of oil being a major factor when budget projections are developed.

Louisiana is a state that is rich in cultural diversity. Each area of the state - north, south, central, east, and west - maintains a proud heritage that is unique to that area. We are primarily rural with major cities located mainly in the southern half of the state.

We fully recognize that we need to work together to ensure that people who have disabilities or are D/deaf in Louisiana who have been impacted by sexual violence have full access to appropriate services that ensure safety and responsiveness while empowering survivors with disabilities.

## **Sec. II. VISION**

People with disabilities and D/deaf people in Louisiana, wherever they live, who have survived sexual assault, have timely and coordinated access to services. These services address their needs and empower them, and are provided by skilled, caring, and respectful advocates.

## **Section III. MISSION**

The Mission of the Survivor Empowerment and Access in Louisiana (SEAL) project is to ensure that people with disabilities and D/deaf people in Louisiana, wherever they live, who have survived sexual assault, have timely and coordinated access to appropriate services. This will be achieved by changing organizational cultures within our own agencies on a statewide level, as well as in select local communities, to make issues regarding sexual assault of people with disabilities and D/deaf people a priority through:

- Creating and maintaining sustainable collaborative efforts among disability advocates and the sexual assault service delivery systems, and other entities as appropriate at the statewide, multi-jurisdictional levels;
- Fostering learning, knowledge, and respect among the collaborative partners on issues related to disability, D/deaf culture, and sexual victimization;
- Developing and improving policies and practices within the disability advocacy and victim service delivery systems;
- Working to ensure that voices of survivors with disabilities help shape the design and delivery of services;
- Improving accessibility and responsiveness of disability advocacy and sexual assault service systems for people with disabilities and D/deaf people who are survivors of sexual violence.

## Section IV. VALUES

Our work as a collaborative is guided by these common values. These values will be used as guideposts in all of our work, including the selection of pilot sites. The collaborative partners have pledged to work according to these values and to encourage them in the pilot communities, providing technical assistance that models these values and inspires the members of the pilot site teams to work according to these values as well. These values are of equal importance and thus are listed alphabetically:

### Accessibility

- We believe that all people who have disabilities or are D/deaf and who identify as sexual assault survivors have the right to receive services that they choose without physical, programmatic, or attitudinal barriers that may block their access to those services.
- We believe that anyone working with sexual assault survivors should understand the ways that disability and/or D/deafness affect the lives of people in the disability community, including people with disabilities, D/deaf people, and their families and advocates.
- We believe that anyone working with sexual assault survivors should understand the ways in which people with disabilities and D/deaf people are at increased risk for sexual victimization.
- We believe that all entities working with sexual assault survivors who have disabilities and D/deaf survivors should understand full accessibility, embrace it as a value, and make their work as free from physical, programmatic, and attitudinal barriers as possible.
- We believe that all entities working with sexual assault survivors who have disabilities and D/deaf survivors should receive guidance and Technical Assistance without attitudinal or programmatic barriers blocking access to that guidance.

### Communication

- We believe that the way we communicate among ourselves, with the people with disabilities, D/deaf people and survivors of sexual assault we serve, and with the other entities and the public at large about our work is critical.
- We believe that "people first" and "survivor sensitive" language, as defined below, should be used in all communications.
- We believe that the principles of transparent and ethical communication, as described and defined below, should be followed in all our communications.

## Confidentiality

- We believe that all people who have disabilities or are D/deaf and survivors of sexual assault in Louisiana have the right to decide what they want to disclose and to whom.
- We believe that information about issues involving agencies that may be divisive or controversial should be kept within the collaborative partnership unless the agency has provided specific permission to share the information outside the partnership, or if information is shared in a manner that does not identify the agency involved.
- Additional information regarding confidentiality is provided in the Confidentiality section of this collaborative charter.

## Diversity

- We believe that diversity should be respected and encouraged.
- This includes honoring and welcoming people who come from different races, genders, ages, ethnicities, religions, sexual orientations, gender identities, cultures, socio-economic statuses, nationalities, and abilities.
- We will strive to analyze issues and seek solutions through anti-racist, anti-oppressive lenses.

## Empowerment through Collaboration

- We believe that collaboration is a valuable way to effect systems change and improve services to survivors with disabilities.
- We believe that collaboration is in-depth collective work by individuals and entities who are full and equal partners, with equal voices and decision-making authority, who have jointly developed an agreement that defines their collaboration.  
Statewide collaborative partners are committed to making systemic change within their organizations, are committed to sustaining those changes once this project is over, and are committed to modeling collaboration to local entities and facilitating their development of collaborations for work at the local level.
- We believe that people and agencies can only empower themselves. Another individual or entity cannot empower someone or something else; this implies that one has more power and the other has less. Rather, people and organizations should be encouraged to be agents for change within and for themselves.
- We further believe that through collaboration with community partners, input from the people they serve, and guidance and Technical Assistance from SEAL staff, agencies and programs will be empowered to improve the level and quality of their interactions with survivors.

### Quality, Person-Centered Services

- We believe that services to all survivors of sexual assault should be provided by people who are skilled, caring and respectful.
- We believe that the services should be designed to respond to the unique strengths and needs of those who request their services.

### Recipient Driven Services

- We believe that all people with disabilities, D/deaf people, and sexual assault survivors should be involved in making decisions about the design of services they want and need.
- We believe that all people with disabilities, D/deaf people, and sexual assault survivors are the experts on what they need in order to move forward with their lives.
- We also believe that the power of, to advocate for themselves, and to have an ownership stake in services, should be recognized, respected, and facilitated by the agencies that seek to serve them.

### Safety/Responsiveness

- We believe that anyone working with people with disabilities and D/deaf people should understand the nature of sexual violence trauma and its short- and long-term impact on survivors.
- We believe that anyone working with people with disabilities and D/deaf people should understand the ways in which people with disabilities and D/deaf people are at increased risk for sexual victimization.

### Self-Determination

- We believe that all people with disabilities and D/deaf people and sexual assault survivors in Louisiana have the right to make choices, whenever possible.
- We respect the decisions that individuals make and their right to make them.
- Similarly, agencies and organizations must make their own choices about changes in agency policy or function. They can be guided toward changes that will be more appropriate for sexual assault survivors who have disabilities and D/deaf survivors, but if they do not determine the change themselves, they will not have ownership in them and changes will be in word only, not in deed.

### Systems Change

- We believe that creating long-lasting change in the practices of any system that provides services requires fundamental changes in the philosophy, culture, and values of the system.

- We believe that systems change must be modeled by the leadership of the system, and be shaped and embraced by stakeholders at all levels, to be fully effective.
- We believe that systems may be statewide, local, or regional.
- We believe that collaboration, as described above and below, is the most effective way to achieve systems change across inter-connected systems.
- We believe that systemic changes are possible within agencies that operate autonomously at any given level, provided the leadership and key stakeholders are part of the collaborative effort to make such changes.

### Welcoming Environments

- We believe that anyone working with survivors and/or people with disabilities and D/deaf people should provide a safe and welcoming environment in which they feel comfortable and valued.

## **Section V. COLLABORATIVE MEMBERS AND THEIR ORGANIZATIONS**

The SEAL collaborative is comprised of members from the Advocacy Center and the Louisiana Foundation Against Sexual Assault. The order in which the members of the collaboration are listed below does not in any way imply a hierarchical structure. All members of SEAL share the status of valued individuals and organizations. The collaboration embraces the concepts of inclusion, equality, and respect of all its members. SEAL members and organizations are outlined below alphabetically:

### Advocacy Center

It defines its mission as follows: “The Advocacy Center believes in the dignity of every life, and in the freedom of all people to experience the highest degree of self-determination. Embracing this philosophy, the Advocacy Center protects and advocates for the human and legal rights of persons living in Louisiana who are elderly or disabled.” The Advocacy Center (AC) is the federally designated protection and advocacy agency for the state of Louisiana. It provides legal representation, non-legal advocacy, information and referral, systems advocacy, education and training, self-advocacy development, no cost publications (booklets, flyers, and specialized, in-depth reports) of interest to people with disabilities and senior citizens, and outreach and training to the community. The Advocacy Center began its work in 1977. It is a non-profit organization that is governed by an 18-member Board of Directors, which includes people with disabilities, family members of people with disabilities, as well as professionals and other advocates.

Individuals representing the Advocacy Center include:

Ann Maclaine, Director of Legal Services

Suzanne Miller, SEAL Project Director

## Louisiana Foundation Against Sexual Assault

The Louisiana Foundation Against Sexual Assault (LaFASA) is a statewide non-profit coalition of the state's community-based Sexual Assault Centers and other agencies and individuals concerned about sexual violence. LaFASA's mission is to work toward the elimination of sexual violence, through education, program support, and social change. Founded in 1983, LaFASA is the federally designated sexual assault coalition for the state of Louisiana. The coalition provides training and technical assistance to professionals and agencies working with sexual assault survivors; works to ensure victim-supportive policy; serves as the voice of sexual assault survivors; and provides advocacy, information and referrals to individual survivors and/or their loved ones.

Individuals representing the Louisiana Foundation Against Sexual Assault include:

Judy Benitez, Executive Director, LaFASA

Tamara Indest, Consultant, LaFASA

### **Section VI. COLLABORATIVE PARTNERS' CONTRIBUTIONS & COMMITMENTS**

This SEAL collaborative, made up of representatives from the AC and LaFASA, is firmly committed to our Vision. Each member organization has thoughtfully and purposefully committed to the following:

- Accomplishing organizational change within each of our agencies.
- Promoting and fostering organizational change at the local level.
- Enhancing the service delivery system for survivors with disabilities.
- Communicating the work of SEAL to each of our agency stakeholders, including but not limited to clients/survivors, staff members, Boards of Directors, and member organizations.
- Communicating the meaningful work of each of our agencies back to the collaborative partners.

In addition, SEAL members re-affirm the following commitments:

- To participate in all the elements of the planning, development and implementation phases of this project, including but not limited to Collaboration Charter, Narrowing the Focus and Selection of Pilot Sites, Needs Assessment, Strategic Plan, and Implementation of Initiatives.
- To the further understanding of each partner agency's work by developing and delivering cross training designed to give a basic understanding of the work of each agency.
- To the process by which sustainable, systemic change can be accomplished. This process may include but not be limited to technical assistance opportunities offered

by OVW and the Vera Institute of Justice, as well as attendance and participation at meetings, which will be held twice monthly for a minimum of two hours each. Meetings will be extended or scheduled more frequently should it become necessary in order to meet our projected time line for completion of deliverables.

- To the identification of key allies in local communities to be served by the project, contracting with them, and enlisting their full participation in all areas including but not limited to developing collaborations at the local level, enhancing their service delivery systems, as well as in the Needs Assessment, Strategic Plan, and Implementation of Initiatives.

Although small, this collaboration is ideal because each partner brings one half of the pieces of the puzzle. LaFASA has the knowledge of sexual abuse/assault and contracts with agencies statewide working on that issue. The Advocacy Center has staff at the local level who regularly interact with and advocate for individuals who have disabilities or are D/deaf. In combination, the two agencies bring significant knowledge and extensive relationships and contacts in the social services, disability services, victim advocacy, and law enforcement arenas. The collaborative partners need each other's contributions to effectively address the problem of sexual assault of people who have disabilities or are D/deaf.

#### Advocacy Center Commitments

As a member of the collaborative with specific knowledge of disability-related issues, AC pledges to:

- Review and develop materials related to disabilities, and sexual violence against and abuse of people with disabilities and D/deaf people, with a particular focus on modifying materials for relevance to service providers and people with disabilities and D/deaf people.
- Review/update the Advocacy Center's annual plan (the annual plan that details the work of the AC, including but not limited to case and systems priorities, staffing, and fiscal allocations) and strategic plan (a three year plan that sets broad goals for the agency) to insure that they include full accessibility of its services and programs, as well as understanding and appropriate response to issues involving sexual violence against people with disabilities and D/deaf people.

Further, the AC commits to additional responsibilities as the Lead Agency in this collaborative partnership. These additional responsibilities include:

- Providing leadership for SEAL by hiring and supervising the Project Director. Duties and responsibilities of the Project Director may include but are not limited to:
  - Convening SEAL meetings, development of meeting agendas, distribution of meeting minutes, as well as general coordination of the project.
  - Submitting all materials designed for use by the project for review and

- approval as required by OVW.
  - Maintaining regular contacts with the Vera Institute of Justice technical assistance staff.
  - Producing, developing and submitting program reports to OVW as required.
- Providing fiscal administration of the grant, including but not limited to submission of financial reports to OVW, payments to contractors, and reimbursement to collaborative partners for budgeted expenses. Payment to LaFASA or any other contractor shall be processed as per the terms of the contract and made in a timely fashion.

### Louisiana Foundation Against Sexual Assault Commitments

As a member of the collaborative with specific knowledge of sexual violence issues, LaFASA pledges to:

- Review and develop materials related to sexual violence, stalking and targeted abuse of people with disabilities and D/deaf people, with a particular focus on modifying materials for relevance to service providers and people with disabilities and D/deaf people.
- Review/update LaFASA's annual strategic action plan for accessibility of its services and programs, as well as understanding an appropriate response to issues involving sexual violence against people with disabilities and D/deaf people.
- As a funder and monitor of the community-based sexual assault centers, LaFASA will ensure that issues relating to sexual violence against people with disabilities and D/deaf people are presented throughout the Standards of Service, Ethics, and Training for Sexual Assault Crisis Centers (scheduled for major revision summer 2009 - winter 2010). See Appendix A.
- As the provider of training and technical assistance to the community-based sexual assault crisis centers, LaFASA will ensure that Technical Assistance provided to the Sexual Assault Centers includes issues related to sexual violence against people with disabilities and D/deaf people. Additionally, LaFASA will ensure that training provided to the Sexual Assault Centers is inclusive of issues relating to sexual violence against people with disabilities and D/deaf people. (Examples might include a case scenario involving an assault against someone with a disability, and letting trainers know that people-first language is expected during trainings regardless of the main subject of the training.)
- Develop/submit any documentation/reports to AC as needed to satisfy reporting requirements to OVW.
- Submit requests to AC for financial reimbursement and payment as per the contract terms.

## Individual Contributions

The individual members of this collaborative effort bring a wide variety of talents and abilities to this project. Several members of our collaboration have extensive experience in grant and program administration, as well as systemic reform. All the members of the group have a working knowledge of the people and cultures that make up the very eclectic population of Louisiana. Each member of this group believes that all people have a right to be treated with dignity and respect. The collaborative partners are committed to full participation in this project.

## **Section VII. DECISION MAKING PROTOCOL**

This section of our Collaborative Charter identifies the members and their authority to make decisions and defines the process by which SEAL makes decisions. This Decision Making Protocol also identifies others outside the Collaborative who have an impact on our decisions (Boards of Directors, Executive Directors, etc.)

### Decision Making Authority

The Project Director has the authority to make decisions that include but are not limited to making decisions regarding the coordination and management of grant activities; communicating with the Vera Institute of Justice and OVW; fiscal administration; coordinating meetings; and submission of fiscal and program reports, as well as deliverables, to OVW in a timely manner.

The Collaborative Partners have the authority to make decisions that include but are not limited to setting the direction of the SEAL Collaborative, developing project deliverables (i.e. Collaborative Charter, Narrowing the Focus memo, Selection of Pilot Sites, Needs Assessment Plan and Report, Strategic Plan, and Implementation of Initiatives), budgeting, participating in the consensus process, and determining the need for specific technical assistance from the Vera Institute of Justice.

The Pilot Sites will be consulted as needed to gain their information and ideas related to decisions including but not limited to Needs Assessment, Strategic Planning, and Implementation of Initiatives. The SEAL Collaborative partners ultimately have the authority regarding these decisions, but will use the information gained from the Pilot Sites to inform the decisions and direction we take.

Any policy and procedure changes decided upon by the collaborative related to AC and LaFASA will have to be approved by their Executive Directors and Boards of Directors.

## Decision Making Process

SEAL values consensus in making decisions. We define consensus as collective agreement on a decision, shared by all the members of the collaboration. We agree to be respectful and open to each collaborative partner's opinions, knowing that the decisions we make will have significant impact on our goal of making significant, sustainable change in the service delivery system in Louisiana as it impacts people with disabilities and D/deaf people who are survivors of sexual violence.

In attempting to reach consensus, we will use a five point gradient scale (listed below), which ranges from "Total Disagreement" to "Total Agreement" as a method of exploring our opinions. The facilitator will check-in with each member of the group, who will share with the collaboration where she is on the scale and discuss what she needs to move toward consensus. We acknowledge that moving through the decision making process toward consensus will take the participation of all the members of the group. Further, we accept the fact that this process demands that we take the time necessary to allow group members to express their opinions.

### Five Point Gradient Scale

1 - TOTAL DISAGREEMENT

Can you tell us why you feel this way?

Is there any way you could ever support this proposal?

2 - PARTIAL DISAGREEMENT

What parts of this proposal do you disagree with?

What parts of this proposal do you agree with?

What other information do you need?

3 - NEUTRAL

Do you need any further information?

4 - PARTIAL AGREEMENT

What parts of this proposal do you agree with?

What parts of this proposal do you disagree with?

What other information do you need?

## 5 - TOTAL AGREEMENT

The SEAL collaborative seeks to always reach Total Agreement on decisions made; however, we realistically understand this may not be achievable. We are committed to moving forward in a decision if the responses of the collaborative partners are at a "4" or a "5" on the gradient scale.

When the collaboration is unable to reach immediate consensus on a decision, a group discussion will be initiated, facilitated if possible by a partner who does not have a strong opinion about the issue at hand. If any partner feels that none of the partners is sufficiently neutral to facilitate, we would table the issue and schedule a time with Vera Institute of Justice to serve as facilitator.

### Conflict Resolution

SEAL partners acknowledge that conflict may occur as a by-product of relationship building. To protect the collaborative relationship, the partners commit that any issues that are problematic to a member of the team will be identified, named, and discussed. The process will be as follows:

1. Identify the issue and define it.
2. Clarify the issue.
3. Determine whether the issue is crucial to the project.
4. Brainstorm solutions to the conflict.
5. Discuss "sitting in disagreement."
6. Determine whether the issue can be put on hold or whether it must be resolved immediately.

This will occur either one-on-one or with the full group, as appropriate. This process is necessary to maintain the relationship of trust that is in the best interests of the project and the individuals we seek to assist.

In discussing complex or challenging issues, any partner may propose that the group use Edward de Bono's "Six Thinking Hats" <sup>1</sup>method of discussion, which focuses the discussion on one aspect of an issue -- facts, feelings, pros, cons, brainstorming (out of the box thinking) -- at a time. The sixth "hat" is that of the facilitator, who is chosen from among the group.

For example, if the team was considering whether outreach via churches is a good way to connect with unserved and underserved populations in its pilot site communities, it might

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<sup>1</sup> deBono, Edward. Six Thinking Hats. Little, Brown, & Company. 1985

ask that someone facilitate (blue hat) a discussion using this method. The facilitator might first invite a sharing of known facts (white hat) such as statistics on various groups represented in the community compared to who is actually served, where the underserved groups congregate, whether they are known to be involved in local churches, etc. Once facts were out, the group could switch to a discussion of the "pros" (yellow hat) of outreach via churches -- that most have newsletters and bulletin boards and welcome speakers, that this will connect with people in a place that is meaningful to them, that pastors may have influence in survivor disclosure and reaching out for help. Then the focus could shift to "cons" (purple hat) -- some people won't be reached, some might be offended by an approach through their church community, pastors may not cooperate, churches may prefer that issues of sexual assault be handled internally. Then the focus might switch to emotions (red hat) -- group members' feelings about churches as safe places vs. agents of change, traumas related to church, strong feelings that secular and spiritual issues should be kept separate, etc. Finally, the facilitator may ask that everyone engage in brainstorming or "out of the box" thinking (green hat). This might generate ideas of public service announcements for the general public that tap into a spiritual theme, a flyer on "what every good church community should know about sex" or something else. At the end of the discussion, the group would determine whether it is ready to make a decision on the issue.

Note: the actual process is flexible and does not require that every hat be used, or in a particular order. The goal is shape the discussion so that everyone is focusing on the same aspect of the issue at the same time, rather than one person responding emotionally at the same time someone else is ticking off relevant facts and figures.

More information regarding the "Six Thinking Hats" method can be found in Appendix B.

SEAL is committed to resolving conflict in a way that is fair and respectful to all members of the group. If attempts to resolve a conflict using the above-referenced methods are unsuccessful, the collaboration will consult the Vera Institute of Justice for technical assistance, and work as they recommend until the issue is resolved. Once a conflict has been resolved, collaboration partners commit to process it sufficiently so that they are comfortable moving forward and not continuing to revisit the issue in a negative way.

Additionally, the collaborative partners agree to model this conflict resolution process for the Pilot Sites as the project is implemented.

## **Section VIII. COMMUNICATION**

Members of this collaboration are committed to using the principles of ethical communication. Members will communicate with each other in a respectful, constructive and supportive manner, thereby decreasing the chance for miscommunication and misunderstanding. SEAL members agree to model transparent communication and thus commit that all communication among the partners and OVW will be open and available to the members of the collaborative. Further, collaborative partners commit to the use of

People First Language in all communication, internal and external, oral, signed, or written. These values will be modeled for the Pilot Sites as the project is implemented.

### Internal Communication

This section will address communication as it applies to the exchange of information between members of SEAL and their respective agencies. Specifically, SEAL has identified two different levels of internal communications: 1) Internal communication among the partners (which would include rich and extensive discussions) and 2) Communication back to the partner agencies (in a condensed, concise format) for the purpose of sharing and updating them on the work of the collaborative.

#### *Meetings*

Collaborative members will meet twice monthly for a minimum of two hours at each meeting. The members acknowledge the work ahead will be challenging and may necessitate more frequent and/or longer meeting times. Meetings will be extended or scheduled more frequently should it become necessary in order to meet our projected time lines for completion of deliverables. The partner meetings will be held either in-person, by teleconference, or via the use of an Internet-based web cam/conferencing format. Generally, one of the monthly meetings will be held in person, unless circumstances make this impossible in a particular month, in which case the partners will meet in person as soon as possible the following month.

The collaborative shall rotate meeting locations among Hammond, New Orleans, Baton Rouge, and Lafayette, Louisiana. Meeting agendas will be developed by the Project Director with input from the members of the collaborative. Meeting agendas will be made available via electronic mail no later than 24 hours prior to the pre-determined meeting date.

Meeting minutes or recaps will be made available via electronic mail no later than five (5) days after a meeting date. The Project Director will be responsible for compiling and distributing meeting minutes. Members will perform any follow-up responsibilities in a timely manner, so as to not hinder the work of the entire collaborative.

#### *Document Sharing*

The collaborative members intend to make use of shared document applications as a method of circulation and comment on documents (also referred to as "deliverables") during the Planning and Implementation Phases of the project. All partners commit to regularly review shared documents.

In general, all partners will be copied with all relevant documents/substantive written communications from each other, the Vera Institute of Justice, and/or OVW. No document prepared by one partner will be considered "final" unless the group agrees to delegate its completion to that person.

### *Electronic Mail*

Partners will regularly communicate via e-mail. Any messages containing substantive information and/or needing a response from all readers will be flagged as such by the sender. The partners commit to regularly read all messages, and to respond when requested to do so. If a partner will be unable to check e-mail for more than 72 hours, she will advise the others.

### *Inter-Agency Communication*

The work of the collaborative will be communicated to the Executive Directors, Boards of Directors, any member organizations, and the staff members of each agency. Collaborative partners will make use of newsletters (both electronic and print) and any other forms of intra-agency communication, to provide information regarding the work and progress of the SEAL Project to their respective staffs. Members will, in turn, keep the collaborative informed about any issues or projects being addressed by their organizations that may be relevant to the goals of the SEAL Project.

### External Communication

This section will address communication as it applies to the exchange of information between SEAL and outside parties, including but not limited to OVW, the Vera Institute of Justice, pilot sites and stakeholders. Communication with media (print, visual, electronic) will be detailed in this section as well.

### *OVW*

General: The Project Director will be the primary liaison for communication with OVW. When the Project Director is requested to contact OVW on behalf of the partners regarding any matter, the Project Director will act as a voice of the collaborative and not as an individual. The Project Director will communicate any contact with OVW (as well as any resulting actions) to the members of the collaborative in a timely manner, specifically within three (3) business days. While communication between OVW and any member of this collaborative in regard to this project is not prohibited, we commit that, in the spirit of ethical communication, any proposed contact be shared with the members prior to the communication being initiated, or as soon as possible thereafter.

Reporting: The Project Director will complete and submit all required program reports to OVW in a timely manner but no later than the due date. The Project Director or her designee will submit financial reports to OVW in the same manner. Copies of financial reports will be shared with partners upon request, and program reports will be posted in a read-only format on our shared document site.

### *Vera Institute of Justice*

Technical Assistance: The Vera Institute of Justice has been contracted by OVW to provide pro-active and intensive technical assistance to SEAL at each stage of the project. The Project Director will meet on a weekly basis via telephone with the Vera Institute of Justice representative. A standing agenda item for each SEAL meeting will include a re-cap by the Project Director of the items discussed during these weekly meetings. As described above in reference to communication with OVW, the Project Director will act as the voice of the collaborative, not as an individual, when discussing the progress of our work with the Vera Institute of Justice representative. While communication between the Vera Institute of Justice and any member of this collaborative in regard to this project is not prohibited, we commit that, in the spirit of ethical communication, any proposed contact be shared with the members prior to the communication being initiated, or as soon as possible thereafter. Because of our commitment to transparency, all communication regarding the SEAL project among partners and the Vera Institute of Justice will be open and available to all partners.

Document Sharing: As milestones are reached in our journey, we will memorialize them in certain documents (including but not limited to Collaborative Charter, Narrowing of the Focus memo, Needs Assessment and Report, and Strategic Plan.) The Project Director will share these documents with the Vera Institute of Justice representative for review in an effort to produce documents that best reflect the work of the collaborative. The documents that have been developed by SEAL will be shared with the Vera Institute of Justice only after all members have had an opportunity to develop, comment, and review the documents.

### *Pilot Sites*

The members of the collaborative acknowledge the importance of transparent, ethical communication between SEAL and the pilot sites. Accordingly, we will use the following guidelines when communicating with pilot sites:

- Contact (either in-person, electronically, or by telephone) will be made with the pilot sites at a minimum of weekly during the planning and development as well as implementation phases of the project. This contact will be made by the Project Director.
- The Project Director will provide a summary of all contacts and activities with pilot sites to the members of the collaborative on a monthly basis at regularly scheduled partner meetings. These summaries may include but not be limited to the name of the pilot site(s), contacts or activities, and manner in which the contact or activity was initiated (e.g., telephone, email, on site).
- The Project Director will notify the members of SEAL immediately (within 24 hours, either by telephone or electronic mail) if/when she becomes aware of any situation that may be controversial or problematic in nature, particularly in regard to

personnel or funding issues.

- Communication from the Project Director in the form of electronic mail or written correspondence to any pilot site will be copied to any SEAL partner, as requested.

We recognize that as we move through this process and enter working relationships with our pilot sites and their organizations, we will develop a more specific and detailed plan for communication with them.

### Media Plan

The members of SEAL recognize the need to develop pro-active communications (e.g. SEAL may develop a press release, hold a press conference, or issue a "white paper" for public distribution directed toward issues that affect people who have disabilities or are D/deaf, and violence in Louisiana) as well as reactive responses to media requests (e.g. SEAL may be asked to respond to a specific incident of violence). In developing a plan by which media will be addressed, SEAL seeks to clearly communicate to the general public the work that will be done by the collaborative.

In regard to this project, no one member of the collaborative shall be authorized to speak on behalf of the partners without specific approval from each partner organization. The following process will be used when a member of the media contacts any SEAL member for the expressed purpose of soliciting comment on the work of the collaborative or eliciting comment on an issue that is being addressed by SEAL:

1. Media requests will be forwarded from SEAL members, as well as others within the collaborative partner agencies (Outreach and Training Directors, Executive Directors, or Public Relations Liaisons) to the SEAL Project Director for initial review.
2. The Project Director will bring all media requests to the collaborative partners for review/discussion as soon as possible, no later than 24 hours from the initial contact. The Project Director will be sensitive to the need to contact the collaborative partners as quickly as possible, recognizing media deadlines often require a prompt response.
3. The Project Director will convene a discussion (via electronic format, in-person, or via teleconference) in an effort to formulate a planned, coordinated, unilateral response to the media request.
4. SEAL will determine the most appropriate manner (e.g. press release, public comment, etc.) in which to address the media request and will designate a spokesperson from the members of the collaborative to deliver our message. A spokesperson will be designated each time a media request is addressed; however, the individual designated as the spokesperson may change based upon each unique situation.

SEAL has developed general talking points (see Appendix C) for use internally by members of the collaborative. These talking points serve to act as a guidepost for SEAL members to

assist with sending a unilateral message when speaking of the work that is being done. Talking point usage may include, but not be limited to, discussions with partner agency colleagues, members of boards of directors, survivors, and consumers. The partners may draw upon the information contained in these talking points when a media requests occurs, but they are not intended as a response to a media request and shall not be distributed externally.

All materials developed and distributed will be submitted to OVW for approval prior to dissemination.

## **Sec IX. CONFIDENTIALITY**

This confidentiality statement has been developed by SEAL to facilitate the safe exchange of ideas and to create a transparent atmosphere that encourages trust, both of which are essential to accomplish SEAL's mission, vision and goals. Additional confidentiality policies will be written as necessary to address information gained during the needs assessment and when the project enters the implementation phase.

Each of the collaborating agencies that make up SEAL has its own written policies regarding confidentiality; each of the representatives from these agencies are aware of these policies and will continue to follow them during the course of other duties for their agencies. However, while participating in the tasks and activities of this collaboration, representatives will follow this confidentiality agreement.

This agreement will first address confidentiality in the following areas: 1) Confidentiality of the Individuals We Serve; 2) Confidentiality of Information/Disclosures about State and Local Collaborative Agencies; and 3) Confidentiality of Personal Disclosures Made by Collaboration Members.

### Confidentiality of the Individuals We Serve

Even though providing direct services is outside the scope of this project, collaborative partners expect that in order to create systems change, they will need to share and consider the experiences of, and stories from, survivors, individuals with disabilities, or who are D/deaf. Such information will be shared anecdotally and any identifying information will be omitted as much as possible among the partners, and in all cases where the anecdotes are shared outside the collaborative. Within the collaborative, any specific identifying information about survivors with disabilities will be kept confidential. No specific information will be shared outside of the collaborative, unless there is a signed, time-limited release from the client, or a legal or ethical mandate, as detailed below, to do so.

## Confidentiality of Information/Disclosures about State and Local Collaborative Agencies

Collaboration members understand that any information/disclosures made by representatives about their respective agencies is being shared so to improve our systems' responses to sexual violence and/or abuse and services to survivors who have disabilities or are D/deaf. Any such information will be treated as confidential and will not be shared outside of the collaborative. For example, if information about agency policies, procedures, actions or inaction of agency staff or management, is shared, this is for the purpose of improving service delivery and accessibility; it is not meant to be used for other purposes.

Similarly, any information/disclosures made by or about local community agencies involved in the needs assessment and pilot site projects, provided that they do not require mandatory reporting or the exercise of protection and advocacy authority, as described below, will also be treated as confidential and will not be shared outside the collaborative. For example, if information about local agency policies, procedures, actions, or inaction of agency staff or management, is shared, this is for the purpose of improving service delivery and accessibility; it is not meant to be used for other purposes. It is anticipated during the needs assessment and pilot site selection phase(s) that data reported to LaFASA by the local agencies will be provided to the collaborative. This aggregate report does not include personal information regarding survivors or local staff and volunteers. The aggregate report may reveal some deficiencies, such as a lack of medical advocacy, however; LaFASA staff review this information monthly and functions as the technical assistance provider to all local SAC's. The collaborative partners will keep this information confidential and use it for the purpose of assessing need, pilot site selection and improving services for the target populations.

## Confidentiality of Personal Disclosures Made by Collaboration Members

Collaboration members also understand that any personal information or disclosures shared by individual SEAL partners will be treated as confidential and will not be shared outside of the collaborative. Information or disclosures shared about personal experiences of abuse, job related problems, or experiences with other SEAL partner agencies, be shared for the purpose of moving the collaboration towards system change, and will be received in that spirit.

### *Mandated Reporting to Adult or Elderly Protective Services*

Collaborative members acknowledge that this agreement does not negate their responsibility under Louisiana law to make a report to state authorities if they have cause to believe that an adult's physical or mental health or welfare has been or may be further adversely affected by abuse, neglect, or exploitation. La R.S. 15:1504. Louisiana law mandates reporting by any person; thus, all partners are mandatory reporters. For purposes of this law, an "adult" is defined as "any individual eighteen years of age or older, or an emancipated minor who, due to a physical, mental, or developmental disability or the infirmities of aging, is unable to manage his own resources, carry out the activities of daily living, or protect himself from abuse, neglect, or exploitation." La R.S. 15:1503(3).

Collaborative members will insure that they, and others working on this project, are aware of the mandatory reporting laws and have a common understanding of both its mandates and its limitations. Because our intention is to share only general anecdotal information rather than personally identifiable information, situations in which the laws' requirements are triggered are unlikely to occur, especially since R.S. 14:1505 states that a report should include the name and address of the person alleged to have been abused or neglected.

If any collaborative member, in the course of work on this project, obtains information that she believes requires a report to adult protective services, she will follow these guidelines for making such a report:

1. She will carefully review the facts of the situation in light of the definitions included in the statute to make sure that reporting is required.
2. If possible, she will discuss the situation with at least one other member of the collaborative to insure that there is a common understanding that the individual involved meets the definition of "adult", and that there is cause to believe that abuse, neglect, or exploitation has occurred.
3. Whenever possible, she will discuss the situation with the adult affected, and seek his/her approval before making a report.
4. If the affected adult cannot or will not give approval, she will proceed to make the report as provided by law, with notice to the affected adult if possible.
5. She will advise the full collaborative the fact that a report was made and, if requested, will share the general facts underlying the report, without violating confidentiality, as necessary to aid the partners in understanding the impact of the situation on the work of the project and use of this collaboration agreement.

#### *Mandated Reporting to Child Protective Services*

Collaborative members acknowledge that this agreement does not negate their responsibility under Louisiana law to make a report to state authorities if they are listed as mandatory reporters under La. Ch. Code § 603(15) and they have cause to believe that a child is being abused or neglected. Mental health/Social service practitioners, by the law as "any individual who provides mental health care of social service diagnosis, assessment, counseling, or treatment, including a psychiatrist, psychologist, marriage or family counselor, social worker, member of the clergy, aide, or other individual who provides counseling services to a child or his family" and Court Appointed Special Advocates are listed as mandatory reporters. LaFASA collaborative partners may fall within these definitions. Advocacy Center staff do not fall within any of the mandatory reporting categories. Even if not mandatory reporters, collaborative members may choose to make such a report if they believe it appropriate based on the facts known to them.

Collaborative members will insure that they, and others working on this project, are aware of child abuse/neglect reporting laws and have a common understanding of their mandates, definitions, and procedures. Because our intention is to share only general anecdotal information rather than personally identifiable information, situations in which mandatory child protection reporting

requirements are triggered are unlikely to arise.

If any collaborative member, in the course of work on this project, obtains information that she believes should result in a report to child protective services, she will follow these guidelines for making such a report:

1. She will carefully review the facts of the situation in light of the definitions included in the Children's Code to make sure that reporting is required, or that she believes reporting is appropriate under the circumstances.
2. If possible, she discuss the situation with at least one other member of the collaborative to insure that there is a common understanding that the facts meet the definitions of abuse or neglect and that there is cause to believe that abuse or neglect of a child has occurred.
3. If she feels a report is mandated or appropriate, she will make a report.
4. She will advise the full collaborative the fact that a report was made and, if requested, will share the general facts underlying the report as necessary to aid the partners in understanding the impact of the situation on the work of the project and use of this collaboration agreement.

#### *Protection and Advocacy Authority*

#### Federally mandated access/investigative authority

The collaborative partners are agreed that nothing in this charter is intended, or would have the effect of, restricting staff of the Advocacy Center from invoking that agency's federally mandated access authority to investigate and/or obtain records related to abuse or neglect of persons with disabilities, even if the initial knowledge of the situation arises as a result of project activities including training sessions which may be held in communities where pilot sites operate. This access authority is defined in federal law, and includes access to facilities where individuals with disabilities reside for the purpose of monitoring their well-being and advising them of their rights; access to these individuals' records (with their consent or under other select situations for those unable to provide consent); and investigating situations in which the agency has cause to believe that significant abuse or neglect may have occurred.

It is understood that in such circumstances, any investigation would be conducted by AC staff who are not connected with, or actively working on, this project, and no project funds would be used. The Advocacy Center's usual criteria and procedures for use of its access authority would be followed. In other words, the agency would neither be more likely, nor less likely, to conduct an investigation pursuant to its access authority, in situations where the initial information came through work on this project. For example, if during a pilot site training session, a member of local law enforcement mentions to the group, which includes an AC staff member working on this project, that a local nursing home resident was recently raped, that staff member may provide that information to the AC investigations unit, which may investigate as independently and fully as it would had it learned of this incident through other sources.

A situation where Advocacy Center collaborative partners determine they are mandated to make a report to Adult Protective Services would not necessarily trigger exercise of protection and access authority. This is because the Adult Protective Services, rather than the Advocacy Center, has the quasi-police power to investigate abuse or neglect **in the community**, can enter private homes to investigate, and can seek court orders to remove individuals determined to be in danger. Should Advocacy Center staff determine that such activities might be necessary, they would report the situation to APS to investigate and take appropriate action.

### Other Advocacy Center Activities

Except for the type of situations described above, the Advocacy Center commits that it will not **initiate** any legal advocacy based on information learned through this project. However, it is understood and agreed that the Advocacy Center also has a duty to provide advocacy services and/or legal representation to eligible individuals with disabilities **who request such services and whose issues fall within the agency's annually determined case selection criteria**. It is understood by all the partners that nothing in this agreement would constrain AC from handling such cases in its usual manner, and that any possible conflict of interest would be addressed by keeping such case work totally separate from the work of this project.

For example, the Advocacy Center may be asked by an individual with a physical, emotional, or behavioral disability to challenge a denial of physical and/or programmatic access to a program or service. It is conceivable, although unlikely, that a survivor of sexual assault may seek such assistance if she is unable to access sexual assault services. If such a case fits within AC's "access group" case selection criteria, AC staff within that group would provide the requested representation. It is also possible, but again, highly unlikely, that a staff member of a collaborative partner agency (state or local) with a disability might contact AC for advice or assistance in obtaining accommodations from his/her employer, or assistive technology that would enable better job performance. If such a case fits within AC's "employment/rehabilitation group" case selection criteria, AC staff within that group would provide the requested representation. In either such situation, the work on the individual case would be kept completely separate from the work of this collaborative.

AC staff are frequently appointed by the court to represent individuals with disabilities who are the subject of Adult Protective Services (APS) proceedings. It is agreed by all partners that such representation of individual clients does not in any way conflict with systemic work in collaboration with APS at the state and local level through this project.

In its individual representation activities, AC always attempts to resolve cases as the lowest possible level of intervention. Litigation is only a last resort, which is pursued only after other approaches (letters, negotiation, mediation, and/or administrative hearings) are unsuccessful.

The Advocacy Center also pursues systems change through a variety of methods, including, where appropriate, class action litigation. AC has long maintained strict rules that prohibit using the

resources of non-legal programs, such as this project, to gather facts or conduct investigations that would be used as the basis for such litigation. It is understood and agreed by all partners that the Advocacy Center will not seek or use any information obtained through this project to pursue systems litigation, nor is it planning any such litigation related to the issues and systems involved in this project. In other words, AC pledges not to develop systems litigation around the issues of inaccessible sexual assault services during the time this project is ongoing.

#### Commitment to full disclosure and communication at the local level

Since the potential for exercise of protection and advocacy authority or more general Advocacy Center activities may cause concern among local pilot site partner agencies, a detailed discussion of all potential uses, and limitations upon use of these authorities, will be held during the needs assessment stage of this project. As pilot sites are considered, such discussions will be scheduled with all local stakeholders to insure complete understanding and agreement with the confidentiality agreements of this charter, and their applicability to the local sites.

#### *Community Living Ombudsman and Long Term Care Ombudsman Authority*

The collaborative partners are agreed that nothing in this charter is intended, or would have the effect of, restricting staff of the Advocacy Center's Community Living Ombudsman (CLOP) or Long Term Care Ombudsman (LTCOP) program staff from invoking their state statutory authority to assist residents of long term care facilities or community homes and seek to resolve issues affecting them, even if the initial knowledge of the situation arises as a result of project activities.

CLOP staff work statewide with residents of group (community) homes for people with developmental disabilities. They are mandated by state statute to visit 75% of the community homes in the state each quarter. During these visits, they become acquainted with residents and assist them with any issues that arise. They also bring concerns to the attention of home administrators and, in some cases, file complaints with the state Department of Health and Hospitals seeking investigation into the possible violation of standards. LTCOP staff work only in long term care facilities such as nursing homes and assisted living facilities, and perform a similar role in them. AC administers the LTCOP program only a few regions of the state.

It is agreed that if CLOP or LTCOP staff obtain knowledge of a situation as a result of work with this collaborative, and the situation falls within their authority and is NOT directly related to this project, follow up would be conducted by CLOP or LTCOP in accordance with the CLOP and LTCOP's usual criteria and procedures for assisting residents. In other words, ombudsmen would neither be more likely, nor less likely, to assist a resident in situations where the initial information came through this project.

For example, if, while assisting with the needs assessment, an AC CLOP staff member learns that a resident recently wandered away from a local community home which she regularly visits, she would investigate and report back to the program, just as if the report came from another source.

If CLOP or LTCOP staff obtain knowledge about a situation that IS directly related to this project, it is agreed that they would refer this to their supervisors for follow up in accordance with program requirements, but the individual ombudsman who is actively working on this project would NOT be involved in the subsequent investigation, resolution, and report.

For example, if a LTC Ombudsman, while interviewing nursing home staff as part of the needs assessment for this project, learns that no records of possible resident-to-resident sexual assault are maintained, she would report this to her supervisor, who would determine whether the LTCOP needs to follow up on this fact independent of this project. If so, follow up would be pursued by other independent LTCOP staff, so that the person working on this project could continue in her role as a collaborative partner on the local level.

### *Needs Assessment Survey and Report*

In conducting its needs assessment survey, the collaborative will neither seek nor report personally identifying information regarding any people with disabilities and or/ D/deaf people, and survivors. To the extent such information is sought or collected, it will be in statistical or general anecdotal form only.

## **Section X. GLOSSARY OF KEY TERMS**

Our collaborative has identified terms which we will use commonly in our work. We recognize that this glossary is an active document and we expect that it will expand and change as our work progresses.

**Abuse** -- To intentionally cause harm or pain to someone else. This harm or pain may take different forms, including but not limited to emotional, physical, and sexual abuse.

**Accessibility** -- The degree to which programs and services have the capacity to be used by all people. The term is most often used when describing barriers to these products and services that deny full participation or use by people who have disabilities or are D/deaf. Accessibility may be categorized as physical, programmatic, or attitudinal.

**Advocate** -- An advocate (noun) is a person who speaks or writes in support or defense of a person or cause. To advocate (verb) is to speak or write in favor of, support or urge by argument, and/or to recommend publicly, a requested outcome.

**Appropriate services** -- this term encompasses a wide variety of choices that may include many types of services such as living options, transportation, and healthcare provision, provided by staff and/or volunteers who are skilled, caring, and respectful. The characteristics of a skilled staff member or volunteer is one who has the education, ongoing training, and experience to be confident and competent in the services being provided. A caring staff member or volunteer is one who treats all people with dignity.

Consensus model of decision-making – A process that fully utilizes the resources of a group. It is more difficult and time consuming to reach than a democratic vote or an autocratic decision. Most issues will involve trade-offs and the various decision alternatives will not satisfy everyone. Complete unanimity is not the goal - that is not always possible. However, it is possible for each member of the collaboration to express her opinion, be listened to, and assist in making a group decision based on its logic and feasibility considering all relevant factors. This requires the mutual trust and respect of each individual. A consensus decision represents a reasonable decision that all members of the group can accept. It is not necessarily the optimal decision for each member. When all the group members feel this way, they have reached consensus as we have defined it. This means that a single person can block consensus if he or she feels that it is necessary.

Differences of opinion are natural and respected. This model requires that the collaboration members seek them out, value them, and involve everyone in the decision-making process. Disagreements can improve the group's decision. With a wider range of information and opinions, there is a greater chance of that the group will reach a more feasible or satisfactory decision.

D/deaf -- The term deaf is a medical term that refers to an individual with a hearing disability. The term Deaf refers to people who identify and are a part of a community, language, and culture where sign language is used for communication. The capital "D" reflects the condition of deafness as a cultural norm rather than a disability.

Disability -- A physical, mental, or behavioral impairment that affects at least one major life function. Major life functions include, but are not limited to: seeing, hearing, eating, sexual activity, learning, self-care, self-direction, working, independent living, economic self-sufficiency.

Ethical communication -- A philosophy of communication that addresses the moral interactions implicit in communication. Ethical communication enhances human worth and dignity by fostering truthfulness, fairness, responsibility, personal integrity, and respect for self and others. Ethical communication requires direct, transparent communication and the avoidance of triangulation (talking to a third person about an issue with someone before discussing it directly with her.)

External communication -- The sharing of information ideas, and concepts with people and organizations that are not members of the SEAL collaborative. This type of communication may include oral, written, signed, and/or any other way in which the exchange of ideas and concepts is accepted by those who receive the information.

Internal communication -- The sharing of information, ideas, and concepts among the partners. This type of communication may be oral, written, or signed, and/or delivered in any other way in which the exchange of ideas and concepts is accepted by members of the collaborative.

Media -- Agencies of mass communication are commonly referred to as "media." These agencies include traditional forms of mass communication such as newspapers, magazines, and periodicals, as well as electronic formats such as radio, television, and Inter/Intranet.

People First Language -- The use of respectful, appropriate language when referring to a person with a disability. People First Language recognizes that a disability does not define a person, rather a disability is only one aspect of a person's entire being. The emphasis is placed on the person not his or her disability. (Example: "People with disabilities" rather than "disabled people".) Individual preferences are always respected.

Sexual assault/violence -- Unwanted or nonconsensual sexual contact by anyone. The continuum of sexual assault/violence includes inappropriate touching, sexual harassment, sexual exploitation, incest, rape, partner rape, and rape/homicide.

Survivor -- An empowering term that encompasses a person's journey after experiencing sexual violence.

Survivor Sensitive Language -- The use of respectful, appropriate language when communicating to, with, and among people who have experienced sexual violence. This includes referring to such people as "survivors" rather than "victims", unless they prefer to be identified as victims. Individual preference is always respected.

Systems change -- The modification of the policies, practices, and culture of a system in a way which results in long-lasting, fundamental changes in the way that system operates.

Transparency (Transparent Communication) -- The core requirements of transparency are to be sincere, open, authentic and honest in all communication. Transparency is a metaphorical extension of the definition of a "transparent" object is one that can be seen through. In transparent communication, there are no hidden agendas.

"Where they live" -- The type of shelter in which individuals reside (e.g., nursing home, group home, independent home or apartment, hospital) as well as the type of community (urban, rural, part of the state) in which these shelters are located.

**Sec XI. WORK PLAN**

This plan identifies the workflow of our collaborative, highlighting the deliverable products and the estimated time they will be submitted to OVW. SEAL recognizes that the time estimates may change as the project evolves; however, this project and its corresponding budget shall not extend past the contracted date of September 30, 2011.

| Product   | Expected Date of Completion  |
|---|--|
| Collaboration Charter/Submission to OVW   | Developing Collaboration Charter<br>January 2009 - July 2009<br><br>Collaboration Charter Submission to OVW - July 2009                      |
| Narrowing the Focus/Selection of Pilot Sites/Narrowing the Focus Memo Submission to OVW | Narrowing The Focus/Selection of Pilot Sites August 2009 - September 2009<br><br>Narrowing the Focus Memo Submission to OVW - September 2009 |
| Designing the Needs Assessment/Needs Assessment Plan/Tool Submission to OVW             | Designing the Needs Assessment<br>September 2009 – February 2010<br><br>Needs Assessment Plan/Tool Submission to OVW – February 2010         |
| Conducting the Needs Assessment   | February 2010 – April 2010   |
| Compiling and Reporting Needs Assessment Findings/Submission to OVW                     | Compiling Needs Assessment Findings<br>April 2010 - May 2010<br><br>Needs Assessment Report to OVW – May2010                                 |
| Strategic Planning/Development of Strategic Plan/Submission to OVW                      | Strategic Planning/Development of Strategic Plan June 2010 - August 2010<br><br>Strategic Plan Submission to OVW – August 2010               |
| Implementation of Initiatives   | Implementation September 2010 - September 30, 2011   |