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Funded by the Office on Women's Health, U.S. Department of Health & Human Services

IHS/Tribal/Urban Health Sites

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The Department of Health and Human Services
Office on Women's Health



Formerly Family Violence Prevention Fund

Project Connect 2.0:
A Coordinated Public Health Initiative
to Prevent and Respond to Violence Against Women

IHS/Tribal/Urban Health Sites' Application for Participation

Domestic and sexual violence (DSV) pose a significant health threat across Indian Country. A 2008 Centers for Disease Control and Prevention report on health and violence found that 39 percent of Native women reported that they were victims of intimate partner violence (IPV) some time in their lives-- a rate higher than any other race or ethnicity surveyed. Because many American Indian/Alaska Native individuals are seen at some point by a health care provider, the health care setting offers a critical opportunity for early identification and primary prevention of abuse. Central to this work are partnerships that each health facility establishes with Tribal and community DSV programs. Futures Without Violence will select five IHS/Tribal/Urban (I/T/U) health facilities to participate in Phase 2 of *Project Connect: A Coordinated Public Health Initiative to Prevent and Respond to Violence Against Women*, supported by the U.S. Department of Health and Human Services (HHS), Office on Women's Health (OWH).

HISTORY OF PROJECT CONNECT: In 2010, Futures Without Violence and OWH began working in partnership with eight states and two tribal sites to develop policy and public health responses to domestic and sexual violence (DSV) in health programs. Futures Without Violence has developed a comprehensive training curriculum, healthcare provider resources, and patient education materials for use in maternal and child health, home visitation, adolescent health, and family planning settings. Based on the lessons learned with previous sites, *Project Connect 2.0* is expanding to include a larger number of tribal grantees, with a focus on I/T/U health settings and will include clinic-wide training and education.

ELEMENTS OF THE INITIATIVE:

- **Educating providers and public health professionals** on the impact of DSV on health, and how to assess for and respond to DSV in I/T/U health settings. Futures Without Violence will provide a culturally specific program to be implemented at all sites, which features in-person training, online booster trainings, and written guidelines.
- **Promoting education for patients** accessing those public health services about the connection between DSV and their health. Futures Without Violence has developed American Indian/Alaska Native (AI/AN)-specific patient safety cards, posters, and other health promotion materials.
- **Institutionalizing clinic policy** to support assessment of and coordinated responses to victims of DSV. Health facilities will create or update their internal policies to address DSV, institutionalize staff training on DSV, and require routine assessment and brief interventions for DSV.
- **Engaging in partnerships with regional or tribal domestic and/or sexual violence programs**, including funding for formal collaboration with advocates, who will give feedback on DSV clinical policies, provide training to clinical staff, and offer advocacy services for patients on-site.

- **Contributing to a learning community**, through participation in regular group emails, monthly tribal TA calls, bi-monthly webinars, and bi-annual national grantee meetings.
- **Evaluating** the impact of *Project Connect 2.0* on clinical staff and patients.

ADDITIONAL INFORMATION ABOUT *PROJECT CONNECT 2.0*: We will select five I/T/U health facilities to work with us on this exciting initiative. The period of funding is for January 1, 2013 through December 31, 2015. Selected sites will receive \$50,000 per year for a total of \$150,000 for the funding period. Years One and Two are designated as planning and implementation years. Year Three is dedicated to program and policy implementation and evaluation, creating partnerships with other local I/T/Us, and dissemination of models and best practices. Each site's outcomes, experiences and lessons learned will be shared with one another and with others nationwide as part of the technical assistance and dissemination Futures Without Violence conducts through its U.S. DHHS-designated National Health Resource Center on Domestic Violence.

***Project Connect 2.0* Tribal Grantee FAQs:**

How does the work of Tribal grantees differ than State/Territory grantees? Is this a separate program? Why? *Project Connect 2.0* is a single initiative, with six (6) State/Territory and five (5) Tribal grantees. However, the work with Tribal grantees differs from the work of States/Territories in several ways:

- Tribal grantees have an individual clinic/hospital level focus, rather than a State or Territory level public health program focus.
- State/Territory grantees will be working with State level public health programs and focusing on adolescent health, family planning, or home visitation programs. Tribal grantees are looking at an clinic/hospital-wide change, rather than change in specific women or adolescent health programs.

How will Tribal grantees be part of the larger learning community with State/Territory grantees?

More than a grant program, *Project Connect 2.0* grantees collaborate to promote the initiative's goals, provide progress reports and regularly present to the other project grantees on project activities during conference calls and in-person meetings. Tribal grantees will work collaboratively with the six (6) State/Territory grantees through joint participation webinars and national grantee meetings, as well as the opportunity to meet separately with the other Tribal grantees to discuss the particular issues and challenges of working at the clinic/hospital level in Indian country. The webinars will be held bi-monthly and the national grantee meetings will be held biannually.

Who can apply for the Project Connect 2.0 Tribal Grant?

Any I/T/U health facility can apply in collaboration with a regional or tribal DSV program. Applicants should demonstrate a history of collaboration between the clinic/hospital and regional or tribal DSV programs, and have a proven track record of serving the Native community.

Are there other requirements for the Project Connect 2.0 Tribal Grant?

Successful applicants must be able to demonstrate a 25% match (\$37,500 total, \$12,500 per year; can be in-kind) in order to be selected. Additionally, we are seeking I/T/Us that can identify a lead staff person and

demonstrate capacity to participate in an evaluation of the initiative. Because the initiative includes in-person grantee meetings in Washington, DC and San Francisco, CA applicants must be able to send staff on out-of-state travel. Since the learning community relies heavily on online communication, applicants must have regular access to internet, e-mail, and computer systems with the capacity for webinars and other eLearning programs.

Futures Without Violence and the Office on Women’s Health are inviting applications to participate in an exciting multi-year, multi-site initiative to improve health and safety of women and children by improving the public health response to domestic and sexual violence.

How to Apply:

Please review the enclosed information about *Project Connect 2.0: A Coordinated Public Health Initiative to Prevent Violence Against Women* prior to completing the application. Please submit an application that addresses the questions below.

To: Virginia Duplessis, *Project Connect 2.0* Program Manager
Futures Without Violence
100 Montgomery Street, The Presidio
San Francisco, CA 94129

With: Contact information for yourself and key collaborators including:
Name, Title & Organization
Address
Phone, Fax & Email address
Memorandum of Understanding
Letters of support

By: October 29, 2012

Your application should be no more than 10 pages double spaced and single sided without the letters of support and MOUs/letters of commitment. If you have any questions, please contact Virginia Duplessis, 415-678-5610, vduplessis@futureswithoutviolence.org.

Information required in your application:

1. **COMMUNITY CHARACTERISTICS:** Briefly describe your tribal community (location, demographics, etc.) and regional or tribal domestic and/or sexual violence program (services, number of staff, and type).
2. **HEALTH CARE DELIVERY SETTING:** Describe size; type of facility; your user population (including number of Native vs. Non-Native patients); number of annual outpatient visits; what kind of medical specialty services you provide; and what kind of data reporting system is currently used (*e.g.* PCC Patient Care Component, PCC+, RPMS).

3. STATEMENT OF NEED: Briefly describe your vision, measurable goals, and objectives for your clinic/hospital for how to integrate domestic and sexual violence prevention and response into your selected public health target area.
4. SUSTAINABILITY: What is your vision for systems change? How will you change your clinic/hospital infrastructure to ensure that your program is sustainable beyond the grant period? How open is your Tribal government to change?
5. WORKPLAN: Please map out a workplan and initial timeline for activities during Year One and Year Two. Is there any anticipated policy or protocol change that may need the approval of Tribal council or government?
6. COLLABORATION/EXPERIENCE: Please describe any previous collaborative efforts between your clinic/hospital and domestic and/or sexual violence programs. What role will regional or tribal domestic and/or sexual advocacy programs have in this project?
7. COMMUNITY INPUT: Please address how you plan to identify and integrate the needs and opinions of the Tribal community members in your initiative. Please include at least one relevant example of how your organization has worked successfully with Tribal community partners.
8. LEADERSHIP TEAM: Describe the composition (expertise, organization represented, diversity, etc.) of your Leadership Team, and why they are best positioned to guide this initiative. Each Leadership Team **MUST** include health care providers and managers from the hospital/clinic (ideally a nurse, physician and administrator), staff from regional or tribal domestic and/or sexual violence programs, partners from other community-based health/social service organizations, and must represent the community they serve.
9. LEAD STAFF: Please explain who from your organization or potential leadership team will staff the initiative, their qualifications if not listed above and how much time will be allotted to the project. **We require that at least 25% of a staff person be designated to this project.** Please demonstrate your ability to begin this initiative immediately upon acceptance.
10. EVALUATION: Please describe your team's capacity to support the evaluation, including previous experience conducting process and outcomes evaluation.
11. BUDGET: Please submit a preliminary budget for years one and two. No other budget information is required at this time. If selected, we will ask you to submit a budget and Action Plan. Each clinic/hospital will receive a total of \$150,000 (\$50,000 per year) over the grant period January 2013-December 2015 for their participation in the project and must be able to demonstrate a 25% match (\$37,500 total, \$12,500 per year; can be in-kind, including meeting space, photocopies, etc.) in order to be selected. Please explain the source of the match and describe any other financial, media, printing, and staff resources or expertise currently available to assist in this project. Also include any resources that might potentially be available from your organization or the core organizations participating.

ADDITIONAL RESOURCES: Please describe any additional resources or contributions you bring to the *Project Connect 2.0* initiative, or any other information you feel might be relevant to the project. Please include any Tribal codes in place that address domestic and/or sexual violence.

Memorandum of Understanding (MOU)/Letters of Commitment:

Collaboration is the the cornerstone of *Project Connect's* work—leadership, commitment, and action from both the clinic/hospital and domestic and/or sexual violence program are keys to improving the public health response to violence against women. The application must include an MOU or Letter of Commitment between the clinic/hospital and the regional or tribal domestic and/or sexual violence program(s) addressing the following:

- Each organization's intent and ability to identify a staff person to fully participate in the Leadership team; including attending regular meetings and conference calls, attending yearly Futures Without Violence site visit/training, attending national grantee meetings, participating in monthly TA calls and bi-monthly webinars, and other project responsibilities as needed.
- Resources that the organization can bring to the initiative such as additional staff time, materials or key contacts, etc.
- The clinic/hospital's financial commitment to the regional or tribal domestic and/or sexual violence program(s) in order to support their participation. Futures Without Violence suggests a stipend of \$10,000 per year.

Applications without MOUs/Letters of Commitment will be considered incomplete.

Letters of Support

Other letters of support from potential members of your leadership team and community partners are also encouraged. Please submit letters with original content, outlining your history of collaboration and commitment to *Project Connect 2.0*, NOT a form letter. Letters of support can be sent separately from the application, if preferred. Letters can be sent to:

Virginia Duplessis, *Project Connect 2.0* Program Manager
Futures Without Violence
100 Montgomery St., The Presidio
San Francisco, CA 94129

Timeline for Selection:

Please submit applications no later than October 29, 2012. Futures Without Violence will make a preliminary selection of finalists and will conduct phone interviews with potential members of your leadership team during the month of October. Selected applicants will be contacted by phone no later than November 26, 2012. Please note that the selected sites will be asked to send three (3) representatives to a kick-off meeting tentatively scheduled for February 2013 in the Washington, DC area thus prospective leadership team members should try to keep those dates available. Travel funds to attend this and all meetings will come out of the \$150,000 awarded to selected sites.

Thank you!

Sample MOU between IHS/Tribal/Urban Health Facility and TRIBAL DOMESTIC VIOLENCE/SEXUAL VIOLENCE PROGRAM, which can be adapted for local use.

Memorandum of Agreement
IHS/Tribal/Urban (I/T/U) Health Facility
and
TRIBAL DOMESTIC VIOLENCE/SEXUAL VIOLENCE PROGRAM

This agreement is by and between IHS/Tribal/Urban (I/T/U) Health Facility and TRIBAL DOMESTIC VIOLENCE/SEXUAL VIOLENCE PROGRAM to participate in *Project Connect 2.0: A Coordinated Public Health Initiative to Prevent and Respond to Violence Against Women* to enhance the response to individuals and families experiencing intimate partner violence. The parties listed above and whose designated agents have signed this document agree to:

1. Participate in the *Project Connect 2.0* Leadership Team including ongoing email communication, regular conference calls, local in-person meetings three times a year, and two national grantee meetings each year.
2. Create and implement an action plan to define the roles of the Leadership Team, develop a method for communicating with all Leadership Team members, and determine a decision-making process.
3. Develop and implement a comprehensive action plan to create sustainable changes to its health response to domestic and sexual violence.
4. Implement strategies for educating both patients and providers about domestic and sexual violence as a major public health concern, using *Project Connect 2.0* tools.
5. Participate in a yearly technical assistance site visit from Futures Without Violence staff and faculty, including organizing a Training of Trainers for relevant providers.
6. Coordinate with Futures Without Violence to share materials or strategies developed as part of the program and provide input about additional resources that Futures Without Violence develops for the program.
7. Participate in the evaluation component, including ensuring that data is collected from *Project Connect 2.0* trained providers and the patients/clients they serve.

IHS/Tribal/Urban (I/T/U) Health Facility will provide TRIBAL DOMESTIC VIOLENCE/SEXUAL VIOLENCE PROGRAM \$10,000 per year for their participation.

We, the undersigned, approve and agree to the terms and conditions as outlined in the Memorandum of Understanding.

NAME, Director
IHS/Tribal/Urban (I/T/U) Health Facility

NAME, Director
TRIBAL DOMESTIC VIOLENCE/SEXUAL VIOLENCE PROGRAM

Date

Date