

SCREENING AND INTAKE FORMS

For

Non-Emergency Domestic Violence Programs

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WASHINGTON STATE COALITION

WSCADV

AGAINST DOMESTIC VIOLENCE

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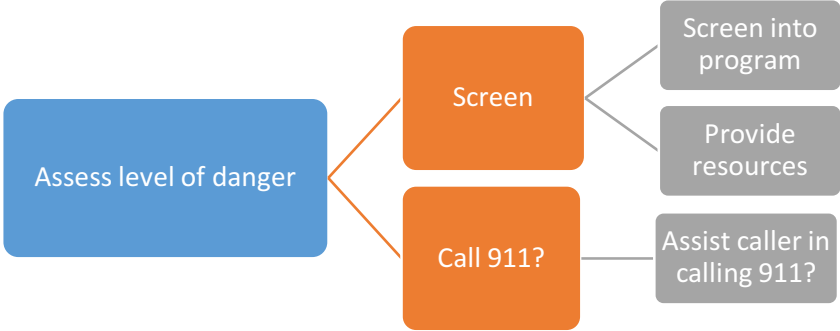
Introduction

One of the values of our advocacy work is to continually examine and reevaluate our practices and explore ways to improve our services on behalf of survivors. Even though our advocacy programs offer a rich array of services for survivors beyond emergency shelter, for many people, “seeking shelter” is still a highly visible and commonly recognized option for help. We know that shelter is not enough. We know that survivor’s needs are complex and that we often don’t have the community resources that we want. And yet, survivors tell us that getting through our doors can be a confusing and overwhelming experience. Survivor-centered advocacy practice pushes us to question how we are screening people who are seeking help from our programs and asks us to think about the ways we inadvertently create barriers to our services. This report describes our findings and recommendations following an assessment of the screening and intake processes of 13 domestic violence shelters and 2 community-based domestic violence programs.

Things to keep in mind

- Screening forms should be brief, include staff instructions and prompts, or framing introductory or explanatory sentences that help the caller understand the process. Additionally, screening questions should be limited and focused on: the survivor’s priorities; understanding what the survivor identifies as risks to themselves or their children; and the threats posed by the abuser that impact safety for the caller or their children.
- Shelter Screenings should lead with the intention to provide safety and advocacy services for individuals experiencing a range of abusive tactics from their partner.
- Shelter screenings should determine eligibility based on the survivor’s perception and understanding of the risks they are facing from their abuser. Determination of shelter eligibility should go beyond the limited legal definitions of domestic violence found in statute.
- Both shelter screenings and intake forms should include explanatory instructions and guidelines with prompts that guide the advocate and participant through the process and explain the purpose of the questions.
- Both shelter screenings and intake forms should include staff prompts that remind advocates to: explain the purpose of the questions; describe their advocacy services; provide information about accommodations; offer timely needed services, offer breaks during the process and check for understanding with the participant.
- Programs provide ongoing training for staff, volunteers and relief workers about the shelter screening and intake to build consistency and a shared understanding about the purpose of these processes.

Non-Emergency DV Program Screening



Date ____ / ____ / ____

Advocate: _____

Assess level of danger

Thank you for calling our program. How can we assist you today? Please describe your situation and what prompted you to call our program.

Screen participant into your program

Tip: Please familiarize yourself with the questions ahead of time. This is a tool to assist you in understanding the needs of the participant so that you are equipped to provide the appropriate support

Thank you for sharing your story with me. I'm sorry you are experiencing this challenge in your life. I would like to ask you a few questions, so that I can provide the most appropriate services to you.

Participant First & Last Name _____

Are you interested in coming in today or would you like for us to set up an appointment with an advocate?

We want to keep your connection with us as confidential as possible so I would like to go over the best ways to connect with you by phone.

Safe Phone Number with Area Code (_____) _____

Is it okay to leave messages? Yes No

If yes, what specifically should the message say? _____

Who else might answer your phone? _____

Is the abusive partner living in the home? Yes No

What is your relationship with the person who is hurting you? _____

Is it still okay to call the safe number provided? Yes No

Our program provides many different services. Can you share with me what services you might be interested in? (This is also a great time to share more information about your program)

- | | | |
|--|--|--|
| <input type="checkbox"/> Support groups | <input type="checkbox"/> Legal Advocacy | <input type="checkbox"/> Mental Health support |
| <input type="checkbox"/> Children's Services | <input type="checkbox"/> Chemical Dependency support | <input type="checkbox"/> Housing Advocacy |
| <input type="checkbox"/> One on One advocacy and Support | | <input type="checkbox"/> other |

We have children's services. Will you be bringing any children with you? _____

what are your childrens ages? _____

If yes, how many? _____

What type of services do you think might be supportive to your kids at this time? _____

Provide Resources

Emergency & Basic Needs Resources:

- Food bank
- Rental assistance programs
- Other shelters/Day programs
- Sexual Assault services
- Legal assistance
- Financial resources
- Health clinics
- Local community centers
- Libraries
- Other resources

Safety Planning

Please safety plan before disconnecting with the caller. Often folks who contact our non-emergency programs are still connected to their abuser. They might be trying to decide on life options and need to reach out to see what services will support their decisions. They may not have any interest in ending the relationship. That's ok! We can still help them plan to stay as safe as possible.

Caller's Safety Plan:

Safety planning is an ongoing conversation with a survivor and may or may not be a formal or written plan. Safety planning strategies should be relevant to the survivors' priorities, decisions and risks. The planning process should be dynamic and flexible to meet the survivors' changing circumstances.

Davies, J. Domestic Violence Advocacy: Complex Lives/Difficult Choices, 2, second edition, 2014

A safety plan is tailored to each individual and may need to adjust as their situation changes.

Calling 911: On the rare occasion that you assisted the caller in contacting 911 document that here.

Thanks for your patience with all these questions. Now it is your turn, do you have any questions for me?

Non-Emergency DV Program Screening Guidelines

Asses level of danger	Date, Advocate's name	This is important information for noting when someone first contacted your program.
	<i>"Thank you for calling our program. How can we assist you today? Please describe your situation and what prompted you to call our program."</i>	Thank the caller for reaching out to your program. This shows you are available and ready to support.
	Asses level of danger	While listening to the caller you should be able to assess the level of danger. For example; <ul style="list-style-type: none"> • Abuser in the back ground yelling • Caller is whispering or is afraid to talk • Caller is afraid to stay any longer in the residence and is packed and ready to go.

Calling 911	Caller sounds like they are in immediate danger	You can ask if the caller would like for you to assist them in calling 911. This would require you to obtain their location and other information.
	This is not an option for everyone	Please be prepared to discuss the some of the consequences that could result in calling 911. <ul style="list-style-type: none"> • An arrest could happen and it could be you, your partner, or both • Concerns about deportation • What will happen to the children? •

Screen participant into your program

<p><i>“Thank you for sharing your story with me. I’m sorry you are experiencing this challenge in your life. I would like to ask you a few questions, so I can provide you with the most appropriate services.”</i></p>	<p>Again, thank them for sharing their story with you. Folks are vulnerable during this time and they are taking a risk by sharing personal information before they even know if you will be able to help.</p>
<p>Participant First & Last Name</p>	<p>You might not think having the last name of the participant is important but most non-emergency programs can serve many people at once. It’s likely that many people will have the same first name.</p>
<p><i>“Are you interested in coming in today or would you like for us to set up an appointment with an advocate?”</i></p>	<p>Not everyone is in an emergency situation and might want to make an appointment. This also allows you the opportunity to:</p> <ul style="list-style-type: none"> • safety plan • discuss resources in the community • give an idea of what to expect at an appointment • get documents ready if needed • plan for a ride or bus directions • get childcare if needed • work around their work schedule
<p><i>“We want to keep your connection with us as confidential as possible so I would like to go over the best ways to connect with you by phone. “</i></p>	<p>If the caller says it’s ok for you to call them it’s important to discuss safety planning while using the phone. It’s also important to know if the abuser is still in the home and may answer the phone.</p>
<p>Safe Phone Number with Area Code <i>“Is it okay to leave messages?”</i></p>	<p>Make the distinction of calling vs. leaving a message. It might be ok to call the phone but not leave a message. Area codes are important with cell phones. Not everyone is local and you will need the area code to call them back.</p>

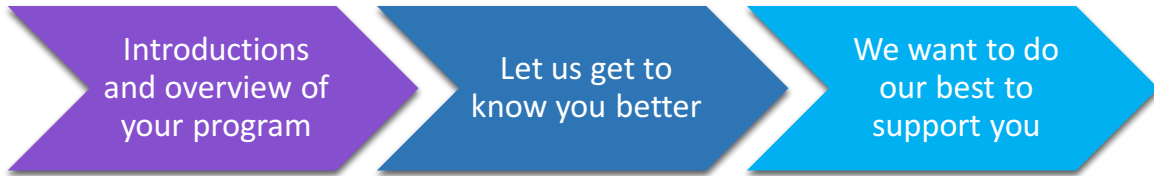
Screen participant into your program

<p><i>“If yes, what specifically should the message say?”</i></p>	<p>The caller might want you to have a secret phrase planned. For example: “Hi this is Sandy from Avon; the knitting group on Pike; or the local yoga class. I will call back tomorrow.”</p>
<p><i>“Who else might answer your phone?”</i></p>	<p>The caller might not think that someone else will answer their phone so it’s always good to get clarification and plan for all possibilities.</p>
<p><i>“Is the abusive partner living in the home?”</i></p>	<p>This question will help you understand why the caller might be speaking quietly and/or not engaging with you at the time of your call.</p>
<p><i>“What is your relationship with the abuser?”</i></p>	<p>It’s helpful to know what role the abusive person plays in the life of the caller. The abuser could control when the caller leaves the house and/or how they get to their appointments. You should be prepared to provide some helpful tips and safety planning on how to get to your office.</p>
<p><i>“Is it still okay to call the safe number provided?”</i></p>	<p>Why ask this again? After the previous questions the caller may have decided that it’s not a good idea for you to call back. Now is the time to talk about a safe way to communicate.</p>
<p><i>“Our program provides many different services. Can you share with me what services you might be interested in?”</i></p>	<p>After sharing what services you provide it’s a good idea to uncover what the caller might be interested in. They might be able to connect to other resources before coming to the appointment.</p>
<p><i>“We have children’s services, will you be bringing any children with you?”</i></p>	<p>Sharing that you have services for kids says you are open to not just serving the caller but the children as well.</p>
<p><i>“What type of services do you think might be supportive to your kids at this time?”</i></p>	<p>By asking this question you get a small window into what the children might need and what you might need to provide resources for.</p>

Provide Resources

<p>Provide the caller with resources in the area.</p>	<ul style="list-style-type: none"> • Food bank • Rental assistance programs • Other shelters/Day programs • Sexual Assault services • Legal assistance
<p>Safety plan before you disconnect with the caller.</p>	<p>Often folks who contact our non-emergency programs are still connected to their abuser. They might be trying to decide on life options and need to reach out to see what services will support their decisions. They may not have any interest in ending the relationship. That's ok! We can still help them plan to stay as safe as possible.</p> <p>Safety planning is an ongoing conversation with a survivor and may or may not be a formal or written plan. Safety planning strategies should be relevant to the survivors' priorities, decisions and risks. The planning process should be dynamic and flexible to meet the survivors' changing circumstances.</p> <p><i>Davies, J. Domestic Violence Advocacy: Complex Lives/Difficult Choices, 2, second edition, 2014</i></p>
<p>Calling 911: On the rare occasion that you assisted the caller in contacting 911 document that here.</p>	<p>This does not happen often, however if you assisted the caller in calling 911, document the information in case the police department calls you back or follows up for more information.</p>
<p>Questions NOT on this form: Too many questions can be overwhelming. If you do not see questions on this form that you normally ask, please consider putting these questions on an optional form for them to fill out and give back to you later.</p>	<p>Consider alternatives to asking a lot of questions on your forms. Additional questions, like the ones below, can be on a handout that participants fill out on their own time and return to you.</p> <ul style="list-style-type: none"> • Court order, police involvement • Veteran or military status • Additional demographics or needs of children (can this be collected with the children's advocate?)

Non-Emergency DV Program Intake



Name _____ Date _____ Interpreter _____
Cell Number _____ Last Address _____
City _____ State _____ Zip Code: _____
ID # _____ Date of Birth _____

Introductions and overview of your program

Tip: Please familiarize yourself with the Intake questions ahead of time. This is a tool to assist you in understanding the needs of the participant so that you are equipped to provide the appropriate support

Welcoming statement: “I hope we will be able to provide you with the resources you need and if not, guide you in the right direction. Our program welcomes everyone – and we open our doors to individuals who reach out to us from different cultures, race and ethnicities, from a variety of religious backgrounds, folks with diverse gender identities and sexual orientations, folks with hidden or visible disabilities, folks who have substance use challenges, folks with money or no money – just like the world around us.”

Tip: *Whenever possible, before you begin the paperwork, take the participants (including children) on a tour of your program. Provide them with an opportunity to get acquainted with an unfamiliar place. Share the highlights of your program before you get to the personal questions on your form. This allows folk time to get comfortable and appreciate the goal of your program.*

Accessibility within our Facilities

Did you notice anything on our tour that might prevent you from getting around? Do you have any concerns or hesitations about using our program?

Do you have any access needs that we should know about?

No Yes Please describe: _____

Let us get to know you better

Tip: Shifting the conversation – sharing the story

“The next question is focused on sharing what brought you to our program. Please take your time and feel free to stop if you need to take a break. Please share whatever you feel comfortable with, all your answers are voluntary. We keep this information confidential and we don’t share it with anyone without your permission. Except, if you tell us that you want to hurt yourself or someone else, or you tell us that your child has directly experienced abuse.”

I know this is a difficult time for you, and when you feel comfortable, I am ready to hear about the events that led you to call our program.

We want to do our best to support you

Tip: Once trust has been established, and because we want to provide the best advocacy services, it may be helpful to know how a person identifies their gender. Remind participants to share whatever they feel comfortable with, all their answers are voluntary.

Make a welcoming space for people of all genders and open the door for advocacy after intake.

What is your gender identity? _____

Female Male Transgender Gender non-conforming

Something else you would like to share _____

Can you share what your relationship is with the person who is harming you?

Spouse Boyfriend/Girlfriend Ex-Boyfriend/Ex-Girlfriend Partner Other relationship _____

Tip: Time to check-in and let the participant know that you be asking them to describe their experience of living with abuse. Let the participant know that you are happy to take a break and return to this conversation.

Can you describe your experience of abuse?

Emotional Abuse: _____

Physical Abuse: _____

Sexual Abuse: _____

Other tactics: _____

We would like to get to know your children. Can you share their names and any particular needs that we can support you with?

Name	Gender	Date of Birth	Age

Has your partner ever harmed your children?

No Yes, *Please describe:* _____

Can you share how your children were harmed?

No Yes, *Please describe:* _____

What is your biggest concern for your children right now?

No Yes, *Please describe:* _____

Experiencing abuse can be extremely difficult to live with and sometimes it can lead to people harming themselves to ease the pain.

Have you ever thought about harming yourself?

No Yes

Please describe: _____

Have you ever done anything to hurt yourself?

No Yes

Please describe: _____

While you are with us, if you are feeling like you might want to harm yourself would be willing to talk to staff and share how we can support you? _____

Many people experiencing abuse use alcohol or other drugs to help them cope. We are here to support you and can connect you to resources that match your needs.

Is this something that you would like help with?

No Yes, How can we support you? _____

This may not be a concern for you now, however we let everyone know that we can talk with you about a range of birth control options including emergency contraception. Would you like more information about this?

No Yes Please describe: _____

Tip: Let the participant know that the next set of questions focus on what they may need to be comfortable in this space and includes some demographic questions. Remind participants that the answers are voluntary and you can return to them at a later time.

Many people have been prescribed medication to take daily. If you need help with refilling a prescription, we can assist you with that.

Do you or your children have any concerns about health or medical related issues that you would like to address? No Yes Please describe: _____

Do you have any cultural or religious needs? No Yes

Please describe: _____

Can you share what specific cultural, ethnic groups or communities you identify with?

Race:

- African American Asian Native American Alaska Native
 Pacific Islander White Multiracial Other _____

Ethnicity:

- Non-Hispanic/Non-Latino Hispanic/Latino Other _____

Can you share what is your main source of income?

- TANF _____ If not on TANF, eligible? _____ SSI _____
 Worker's Compensation _____ None Unknown Employment _____
 Veteran's Disability _____ GA _____ Unable to Work _____
 Other: _____

Has participant ever received information on applying for TANF? _____ * If NOT on TANF and possibly eligible, give information NOW on how to apply.

Our program works within our community to connect you to services to support you and your family. Let's discuss some of these programs and see if you might be interested in their services.

- Community Advocacy
- Drug/Alcohol Counseling
- Court Advocacy
- Interpreter Services
- Shelter
- Housing
- Financial Assistance
- Transportation
- DV Education
- Employment/Vocational Counseling or Training
- Legal Advocacy
- Childcare/Respite Care
- Education
- ESL
- Address Confidentiality Program
- Healthcare/Medication
- Parent-Skill Counseling
- Mental Health Counseling
- Food/Clothing
- Group Support
- Culturally Appropriate Services
- Other
- No Participant Services Needed
- Unknown

Emergency Contact Information _____
(In case of an emergency is there anyone you would like for us to contact?)

Safety Planning

Safety planning is an ongoing conversation with a survivor and may or may not be a formal or written plan. Safety planning strategies should be relevant to the survivors' priorities, decisions and risks. The planning process should be dynamic and flexible to meet the survivors' changing circumstances.

Davies, J. Domestic Violence Advocacy: Complex Lives/Difficult Choices, 2, second edition, 2014

Thanks for your patience with all these questions. Now it is your turn, do you have any questions for me?

Non-Emergency DV Program Intake Guidelines

Introductions and overview of your program	Participant First & Last Name, Program ID#, Date of Birth.	You might not think having the last name of the participant is important but most non-emergency programs can serve many people at once. It's likely that many people will have the same first name.
	Tip: Please familiarize yourself with the intake questions ahead of time. This is a tool to assist you in understanding the needs of the participant so that you are equipped to provide the appropriate support.	
	Welcoming statement: Create a statement that works for your program	<i>"I hope we will be able to provide you with the resources you need and if not, guide you in the right direction. Our program welcomes everyone – and we open our doors to individuals who reach out to us from different cultures, race and ethnicities, from a variety of religious backgrounds, folks with diverse gender identities and sexual orientations, folks with hidden or visible disabilities, folks who have substance use challenges, folks with money or no money – just like the world around us."</i>
	Tip: Whenever possible, before you begin the paperwork, take the participants (including children) on a tour of your program. Provide them with an opportunity to get acquainted with an unfamiliar place. Share the highlights of your program before you get to the personal questions on your form. This allows folk time to get comfortable and appreciate the goal of your program. Explain the goal of your program and how you plan to support the participant (caution: too much organizational detail may be unnecessary at this time). Share if you provide 24-hour advocacy coverage, legal advocacy services, and/or housing specialists. Do you allow smoking around the facility? Can family members visit? Think about the most important things someone needs to know up front. Advocate can gain a lot by just listening to someone sharing their story.	
Accessibility	Think how people use the space – what do people need to function successfully in your facility. Providing a tour of the program gives you the opportunity to engage with the participant while walking around. Make sure to inquire about the children and their ability to get around or any other access need.	

Tip: Shifting the conversation – sharing the story

“The next question is focused on sharing what brought you to our program. Please take your time and feel free to stop if you need to take a break. Please share whatever you feel comfortable with, all your answers are voluntary. We keep this information confidential and we don’t share it with anyone without your permission. Except, if you tell us that you want to hurt yourself or someone else, or you tell us that your child has directly experienced abuse.”

By using this language, you are sharing:

1. The transition to a new set of questions.
2. Acknowledgment that it is okay for participants to take care of themselves, and
3. The participant is guiding the conversation.

“I know this is a difficult time for you, and when you feel comfortable, I am ready to hear about the events that led you to call our program

The way you ask this question is important to building a connection and trust with the participant. Inviting the participant “to share” rather than making them feel like they have no choice.

Use phrases like: “can you share” or “when you feel comfortable, let’s begin.” Avoiding phrases like “tell me what happened when you were abused” or “tell me the details about the recent incident.”

We want to do our best to support you

<p>Tip: Once trust has been established, and because we want to provide the best advocacy services, it may be helpful to know how a person identifies their gender. Remind participants to share whatever they feel comfortable with, all their answers are voluntary.</p>	
<p>Gender – What is your gender identity?</p> <ul style="list-style-type: none"> • Female • Male • Transgender • Gender non-conforming • Something else you would like to share? 	<p>Don't assume you know the gender of the program participant. Or if they identify with a gender that is the one you think.</p>
<p>Can you share what your relationship is with the person harming you?</p> <ul style="list-style-type: none"> • Spouse • Girlfriend or (Ex) • Boyfriend or (Ex) • Partner • Other relationship? 	<p>Notice how the participant describes their relationship, use the same language. Refrain from calling their partner <i>"your abuser, your batterer or the perpetrator."</i></p>
<p>Tip: Time to check-in and let the participant know that you be asking them to describe their experience of living with abuse. Let the participant know that you are happy to take a break and return to this conversation.</p>	
<p>Can you describe your experience of abuse?</p> <ul style="list-style-type: none"> • Emotional abuse • Physical abuse • Sexual Abuse • Other tactics 	<p>Most people living with abuse have experienced different types of behaviors like: threats, put downs physical or sexual abuse, restricting access to money, using a disability against you, using the children against you, interfering with birth control and decisions around family planning</p>
<p>We would like to get to know your children. Can you share their names and any particular needs that we can support you with?</p> <ul style="list-style-type: none"> • Has your partner ever harmed your children? • Can you share how your children were harmed? • What is your biggest concern for the children right now? 	<p>The intent of these questions are to lay the foundation for working with the participant on how to best support the child(ren). We know that removing a child(ren) from a familiar space to an unfamiliar place and changing routines is often confusing and upsetting.</p>

We want to do our best to support you

<p>Experiencing domestic violence can be extremely difficult to live with and sometimes it can lead to people harming themselves to ease the pain.</p> <ul style="list-style-type: none"> • Have you ever thought about harming yourself? • Have you ever done anything to hurt yourself? • “While you are with us, if you are feeling like you might want to harm yourself would be willing to talk to staff? Could you find a staff person and share how we can support you?” 	<p><i>“Experiencing domestic violence can be extremely difficult to live with and sometimes it can lead to people harming themselves to ease the pain.”</i></p> <p><i>“While you are with us, if you are feeling like you might want to harm yourself would be willing to talk to staff?”</i></p> <p>For information check out this webinar on the WSCADV website -- <i>Suicide Assessment and Intervention Webinar</i> by Sue Eastgard. https://wscadv.org/resources/suicide-assessment-and-intervention-webinar/</p>
<p>Many people experiencing domestic violence use alcohol or other drugs to help them cope. We are here to support you and can connect you to resources that match your needs. Is something that you would like help with?</p>	<p>The intent here is to offer support if needed, not to punish people or make them feel bad about using. Using substances should not be a reason to ask someone to leave your program.</p>
<p>This may not be a concern for you now, however we let everyone know that we can talk with you about a range of birth control options including emergency contraception. Would you like more information about this?</p>	<p>There are options for folks who think they might be pregnant and are trying to decide about this life changing decision. Emergency Contraception works best within three days of intercourse and can prevent pregnancy. (Some folks have this on site if not, Plan B is available on store shelves or the internet at Afterpill.com).</p> <p>We know that many survivors talk about the ways their partner interfered with their birth control or didn’t respect their decisions around family planning. The WSCADV website’s Reproductive Justice page has information about basic forms of birth control that are less likely to be felt by a partner. Information about teen rights around access to birth control and parental notification in WA. Information about how emergency contraception works and where you can get it (if your program does not have it as a resource).</p>

We want to do our best to support you

<p>Tip: Let the participant know that the next set of questions focus on what they may need to be comfortable in this space and includes some demographic questions. Remind participants that the answers are voluntary and you can return to them at a later time.</p>	
<p>Many people have been prescribed medication to take daily. If you need help with refilling a prescription, we can assist you with that.</p> <p>Do you or your children have any concerns about health or medical related issues that you would like to address?</p> <ul style="list-style-type: none"> • Are you or your children on any medication that staff should be aware of? 	<p>Asking about general health concerns helps you identify the support that a participant or their child(ren) might need.</p> <p>Asking about prescriptions is not an opportunity for you to determine what medication they are taking; but rather, if they have enough to last for several days. Does your program provide a personal lock box for them to use while in the program? Can you refill meds quickly if needed?</p>
<p>Do you have any cultural or religious needs?</p> <p>Can you share what specific cultural, ethnic groups or communities you identify with?</p>	<p>Participants appreciate your efforts to identify their cultural or religious needs which will help them have a positive experience in your program.</p> <p>Supporting a participant’s cultural and religious needs sends a message that your program is welcoming to all. If possible, knowing this information ahead of time can help you prepare for their arrival and increase a participant’s comfort.</p>
<p><i>“Financial stability is an important part of survival. Our program can refer you to financial resources in the area if needed. Can you share what is the main source of your income? “</i></p>	<p>We know that having a source of income is critical. We ask this question so that if you need assistance we can provide you with information.</p>
<p><i>Our program works within our community to connect you to services to support you and your family. Let’s discuss some of these programs and see if you might be interested in their services.</i></p>	<p>This is a great way to uncover the services the participant may have already tapped into and provide efficient coordination and collaborate with existing supports. And, the participant may want additional information or clarification about how to access other resources.</p>

We want to do our best to support you

<p>Emergency Contact Information</p>	<p>This information should only be used in extreme emergencies and with the participant’s permission. The participant gets to decide what constitutes an emergency. This information is not to be used to try to locate someone if they do not return to your program after a few days. We are not detectives and participation in our program is voluntary!</p>
<p>Safety Planning</p>	<p>Safety planning is an ongoing conversation with a survivor and may or may not be a formal or written plan. Safety planning strategies should be relevant to the survivors’ priorities, decisions and risks. The planning process should be dynamic and flexible to meet the survivors’ changing circumstances.</p> <p><i>Davies, J. Domestic Violence Advocacy: Complex Lives/Difficult Choices, 2, second edition, 2014.</i></p>
<p><i>Thanks for your patience with all these questions. Now it is your turn, do you have any questions for me?</i></p>	<p>This is a time to listen closely to the participant’s needs and questions. Listen for <i>why</i> the needs, questions and requests are important to the participant.</p>
<p>Questions NOT on this form: Too many questions can be overwhelming. If you do not see a number of questions on this form that you normally ask please consider putting these questions on an optional form for the participant to fill out and return to you. Or, consider not asking the questions and ask yourself – is this really necessary – or are you asking the question because you have always asked this question and no one remembers why, or tells you “we have always done it this way.”</p>	<p>Consider alternatives to asking many questions on your forms. Additional questions can be on a handout that could be fill out on their own and returned to you.</p> <ul style="list-style-type: none"> • Court order • Were the Police involved • Veteran or military status • Other additional demographics • Additional needs of children (can this be collected with the children’s advocate?) • Are you duplicating your questions between different advocate positions? • Could there be better coordination between forms and reduce the duplicative data collection? <p>Bottom line: Participants should not have to answer the same question over and over again.</p>