

2009

# Collaborative Service Delivery Site Business Case Discussion Paper

Creating a “One Stop” Service Delivery Site for  
Victims of Sexual Violence & Partner Abuse



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### EXECUTIVE SUMMARY

The *Business Case Discussion Paper: Creating a “One Stop” Service Delivery Site for Victims of Sexual Violence & Partner Abuse* presents a possible course of action for the creation of a collaborative service delivery site for male and female victims of sexual violence and partner abuse in Kingston, Ontario.

Best practice standards in law enforcement, anti-violence and related service sectors reflect a long-standing appreciation of the need for and benefits of collaboration among the many different service providers involved with victims and survivors of intimate violence, as evidenced by the creation of coordinating committees and the development of inter-agency protocols throughout the province. Despite our best efforts, victims of intimate violence continue to “fall through the cracks”; they experience and report frustration and disappointment when trying to identify, find and access the many different services they require at various times during disclosure, healing and recovery.

A Coalition of law enforcement, justice, child welfare, Family Court, health and mental health, anti-violence and social service sectors hope to better meet the needs of their clients by changing the way they deliver services currently available in our area; more specifically, by increasing the degree and efficacy of collaboration through co-location of crisis intervention, short and long term services at a single site. In addition to the many benefits to service users, co-location also benefits service providers, their employers and the community-at-large.

Over the past year, the Coalition has worked together with survivors of sexual violence and partner abuse to develop and confirm the a service delivery model for the collaborative site, specific programs and services to be offered, and the physical requirements for the site. Projected rental costs for the implementation of a comprehensive service delivery model and a more modest “phased-in” model in both the downtown and north end regions of Kingston highlight the primary barrier to the immediate creation of a collaborative service delivery site: access to adequate and sustainable operational funds for this innovative service.

Funding options for collaborative service delivery sites are currently limited. The original funding model for the collaborative site presumed proportional contributions to rent and other shared costs by sufficient numbers of onsite and external partner agencies, as well as a willingness and ability to restructure and/or reassign direct service personnel to work at the collaborative site. The most feasible option for establishment of a collaborative service delivery site appears to be a phased-in approach, beginning with two or more key agencies currently experiencing or projecting the need for additional physical space, and evolving to include service providers from other organizations as momentum for the initiative grows.

Introducing and incorporating new programs and services into the collaborative site on a gradual, or “phased-in”, basis would allow sufficient time for partner agencies to complete caseload reviews and analyses, explore options for restructuring and reassignment of personnel, and/or secure grant or operational funds required to contribute to the site on a trial or ongoing basis.





## SECTION 1: INTRODUCTION

### 1.1 Background

Following the establishment of the first shelters for abused women and the first crisis centres for victims of sexual violence in Ontario in the mid to late 1970s, it quickly became evident that cooperation and collaboration between and among the various sectors and service providers involved with these issues would be in the best interest of victims of intimate violence. No one agency, organization or professional group could provide the many different services and supports victims of sexual violence and partner abuse require to disclose, escape, heal and recover from the abuse and violence they've experienced; and as a result, effective intervention with individual victims often necessitated the involvement of police officers, child welfare professionals, the criminal and/or family court systems, medical professionals, social services and supports, victims' advocates and counsellors. However, differences in philosophy, mandates and approaches to the issue of gender-based violence often made it difficult for representatives from these different sectors to work together effectively.

In an effort to promote positive working relationships between individuals and agencies involved in anti-violence work, a small group of professionals and service providers established the Coordinating Committee Against Domestic Assault on Women in Kingston in 1983. Committee members worked together to share information about their respective mandates and responsibilities, and develop a cohesive network of services for victims of partner abuse and their families. Their efforts to build cooperative relationships, share information and expertise, and improve the services available to victims and their families culminated in the development and implementation of a comprehensive Partner Abuse Protocol in 2003. Eventually, the Coordinating Committee expanded to include organizations and professionals working with victims and survivors of sexual violence, the group's name was officially changed to the Kingston Frontenac Anti-Violence Coordinating Committee (KFACC), and a second Protocol outlining the shared guidelines for best practices for a collaborative response to victims of sexual assault was launched in 2008.

The Coordinating Committee currently receives a small amount of operational funding from the Ministry of Community and Social Services which allows it to hire a part time coordinator on a contract basis. Grant moneys are secured on an ongoing basis to support specific projects and activities designed to help KFACC realize its two-pronged mandate: to promote individual and community awareness of issues relating to intimate violence; and to support a coordinated community response to sexual violence and partner abuse.

In 2007-08, KFACC began to explore the need for and feasibility of establishing a **collaborative service delivery site** in Kingston for victims of partner abuse and sexual violence: a single, centrally-located site where representatives from the law enforcement, justice, child welfare, Family Court, anti-violence and social service sectors work together to help male and female victims and survivors access or learn about the critical, short and long term services they need to escape and recover from the violence they've experienced.





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A Coalition of agency representatives and service providers interested in working to establish such a site was established in May 2008. The Coalition maintains formal connections to, and regularly liaises with KFACC, but functions as an independent body. In November 2008, Kingston Frontenac Anti-Violence Coordinating Committee, applied for and secured one-time grant funding from the United Way to support the ongoing work of the Coalition and cover the costs inherent in generating this *Business Case Discussion Paper*.

The *Business Case Discussion Paper* will be used to support and promote the continuing work of the Coalition; however, given the protracted and collaborative nature of this undertaking, it is likely that the *Business Case* will need to be revisited, expanded and revised several times during the development and implementation of the initiative.

### 1.2 Rationale for Collaborative Service Delivery Site

Over the past 30 years, countless survivors, advocates, educators and other professionals have worked to end violence against women and improve services for victims of intimate violence in Canada. Despite their concerted efforts, dating violence, partner abuse, child sexual abuse and other forms of sexual violence remain serious problems in our country today.

**Violence against women in Canada costs approximately \$4.2 billion a year, including the cost of police and government service, medical care and lost productivity.**

Amnesty International

In Kingston:

- ★ The Kingston Police responds to approximately 950 “domestic calls” annually, or 2 to 3 calls per day; and at least 225 people face criminal charges relating to partner abuse each year.<sup>1</sup>
- ★ Kingston Interval House provides shelter and support to approximately 250 abused women and 70 children per year.<sup>2</sup>
- ★ Each year, over 900 abused women living in the community receive individual counselling through the Outreach Program, Kingston Interval House and the Women’s Program, Kingston Community Counselling Centre.<sup>3</sup>

<sup>1</sup>2006: 905 domestic calls; 245 people charged; 2007: 1011 domestic calls; 233 people charged; 2008: 936 domestic calls; 225 people charged. (Email correspondence: Constable L. Damczyk; 22 October 2009).

<sup>2</sup>2007-08: 305 women; 75 children; 2008-09: 193 women; 65 children. (Telephone conversation: J. Young, Executive Director, KIH; 05 November 2009).

<sup>3</sup>KIH: 2008-09: 213 women (Telephone conversation: J. Young, Executive Director, KIH; 05 November 2009). K3C: 2006-07: 418 women; 2007-08: 332 women; 2008-09: 386 women (Email correspondence: Mary Ann





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- ★ The Kingston Police investigates approximately 125 incidents of sexual assault and related offences each year; and approximately 45 people face criminal charges as a result of these investigations.<sup>4</sup>

Victims and survivors of partner abuse and sexual violence living in Kingston currently have access to a wide variety of supports and services provided by agencies and professionals committed to the delivery of a seamless network of services, as evidenced by the longevity and efficacy of our Coordinating Committee, and the intent and content of the Partner Abuse and Sexual Assault Protocols developed by KFACC and adopted by this community. However, high staff turn-over, diminishing resources and escalating service pressures experienced by the law enforcement, justice, child welfare, health and mental health, social service and anti-violence organizations in our community serve to undermine our efforts to implement the Protocols in a consistent manner, and, at times, compromise our ability to address challenges identified by service users in a timely and effective manner.

As a result, victims of partner abuse and sexual violence continue to “fall through the cracks”; victims experience and report frustration and disappointment when trying to identify, find and access the many different services they require at various times during their recovery process. The need for repeated disclosures of painful information, multiple appointments at agencies with limited hours of service, transportation costs, lack of child care, confusion arising from breakdowns in communication, difficulty understanding and navigating complex systems, and uncertainty about the criteria, expectations and paper-work requirements for some services all undermine a client’s willingness and ability to develop and follow-through with a realistic, cohesive plan of action.

Service demands throughout the law enforcement, justice, child welfare, health and mental health, and social service sectors clearly indicate the need for additional services for victims and survivors of intimate violence in Kingston. However, **we can better meet the needs of our clients by changing the way we deliver the services currently available in our area**; more specifically, by increasing the degree and efficacy of collaboration between service providers involved with victims and survivors of intimate violence.

One of the more progressive and effective collaborative approaches being introduced into the anti-violence sector in Canada and around the world today is co-location of essential crisis intervention, short and long term services in a single building ~ a “one stop” service delivery site for male and female victims and survivors of sexual and domestic violence. The proposed collaborative service delivery site for Kingston will not replace individual agencies but rather will increase the options and choices available to victims and survivors of intimate violence, with attention to the range of services needed at different stages of disclosure and recovery, preferred hours of service, practical supports needed to promote the clients’ commitment to a realistic plan of action, and duration of service.

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Beeby, Program Coordinator, K3C; 23 October 2009).

<sup>4</sup>2007: 118 investigations; 29 people charged; 2008: 131 investigations; 62 people charged (Email correspondence: Jason Kee, Kingston Police Force: 29 October 2009)





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### Anticipated Benefits of Collaborative Service Delivery Site

#### For victims and survivors:

Co-location will make it easier for individual clients to familiarize themselves with, access, and effectively use the services they need while reducing the number of times they must disclose and repeat painful information; it will also decrease transportation time and costs for clients involved with multiple agencies. The availability of crisis intervention, short and long term support and counselling services at one site will allow clients to return to a familiar location to access the many different services they may need during their disclosure, healing and recovery process ~ a process that may take several years for some survivors, particularly adult survivors of child sexual abuse and partner abuse.

Co-location of services for victims of partner abuse and sexual violence will be particularly beneficial to those individuals who have experienced both kinds of violence, either within their current relationship or at different times in their lives. The range of services available at the collaborative site and the service delivery model will facilitate a more cohesive and holistic response to these clients, and will help them identify and address any common dynamics arising from multiple victimization.

Ready access to multiple service providers from different organizations at a single location will also facilitate information sharing between agencies, service planning, scheduling and service coordination, all of which will benefit the client as well as the service providers.

It is our intention to invite employees who have a particular interest in working with victims of sexual violence and/or partner abuse to join the team at the collaborative site. Clients will benefit from the opportunity to work with professionals who have chosen this particular speciality, as opposed to working with employees who are not adequately trained and/or who are not particularly interested in helping victims and survivors deal with the many different and complex issues they face as they come to terms with the violence they have experienced.

#### For service providers:

In addition to facilitating timely communication and improving service coordination, service providers will benefit from ready access to their colleagues from other organizations in a multitude of ways; for example, co-location will increase opportunities for sharing skills and expertise, facilitate inter-agency referral processes and expedite scheduling appointments and meetings involving employees from multiple organizations. In addition, service providers with a particular interest in working with victims of violence will be able to develop significant expertise and contribute to meaningful research in this area.

#### For partner agencies:

The new collaborative service delivery site will offer on-site partner agencies an opportunity to address any current and emerging needs for additional space within their own organization in a cost effective manner. Agencies currently needing to expand or secure additional office space are well positioned to realize significant efficiencies resulting from co-location; for example, meeting rooms, group rooms and staff room could be shared among all on-site partners thereby reducing the overall cost of renting adequate space for each partner agency. These and other projected efficiencies resulting from co-location will not only benefit individual partner agencies but also represent benefit to the community-at-large as a result of more efficient use of transfer payment funds from the provincial government.





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Participation in the collaborative site will also allow partner agencies to offer employees opportunities for lateral transfers and/or opportunities to contribute to the development, implementation and evaluation of a new and unique service delivery model in the anti-violence sector.

### 1.3 Community Coalition

Coalition partner agencies, as per the Memorandum of Understanding<sup>5</sup> signed by said partners, include:

- City of Kingston, Social Services: Community & Family Services Department
- Crown Attorney's Office
- Frontenac Children's Aid Society
- Kingston Community Counselling Services
- Kingston General Hospital: Sexual Assault/Domestic Violence Program
- Kingston Interval House
- Kingston Police
- Legal Aid Ontario, Duty Council Services
- Pathways for Children & Youth
- Sexual Assault Centre Kingston
- Victim/Witness Assistance Program

Throughout 2008-09, the Coalition confirmed the Working Agreements<sup>6</sup> that guide and inform its activities, established Fund Development, Site Development, and Programs and Services Work Groups, and approved Terms of Reference<sup>7</sup> for said Work Groups.

The membership and activities of the Coalition reflect and reinforce the collaborative nature of this undertaking. While the composition of the Coalition may change during various phases of this initiative, the Coalition will remain active and involved with the collaborative service delivery site during the entire development process. Lead agencies for specific components of the initiative have been and will continue to be identified as necessary; for example, Kingston Interval House has served as the lead agency responsible for administering grant funds received to date to assist with the collaborative site project. The Coalition will work cooperatively with any such lead agencies during the development of the collaborative site.



<sup>5</sup> Copy of Memorandum of Understanding can be found in Appendix One

<sup>6</sup> Copy of Working Agreements can be found in Appendix One

<sup>7</sup> Copy of Terms of Reference for Work Groups be found in Appendix One





## 1.4 Survivors' Advisory Council

In order to ensure that the development and creation of the collaborative site is guided and informed by the lived experiences and needs of victims, a Survivors' Advisory Council was established in November 2008 to work cooperatively with the Coalition. The Council meets on a regular basis to provide input and feedback to the Coalition on a wide variety of issues, including the "look and feel" of the proposed site, safety and security issues, programs and services needed on-site, and the possible involvement of volunteers at the collaborative site.

In most instances, this input is provided in written format; however, Council members have also requested and participated in face-to-face dialogues with representatives from specific organizations, such as the Duty Council Supervisor, Family Court, in an effort to promote more effective service delivery within as well as between member agencies. The Council has also prepared and delivered several formal presentations to the Coalition, the Kingston Frontenac Anti-Violence Coordinating Committee and its member agencies.<sup>8</sup> These presentations have been well received and the Coalition and Council anticipate increasing the Council's role in promotion and marketing efforts pertaining to the collaborative site as the project develops.

Membership of the Survivors' Advisory Council may change in consideration of members' availability and interest; however, the Council will remain active and involved with the collaborative service delivery site during the entire development process.



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<sup>8</sup>Presentations made or scheduled to date: Coalition; KFACC; Domestic Violence Investigators (Kingston Police Force; Napanee Police Force); Ontario Works; Lennox & Addington Family and Children's Services.



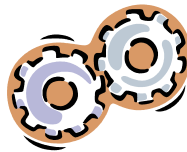


## SECTION 2: SERVICE DELIVERY MODEL

### 2.1 Overview

The Coalition, with assistance from the Program & Services Work Group and the Survivors' Advisory Council, has researched, developed and approved the basic parameters and components of the service delivery model for the collaborative site. It is understood that this model and the specific composition of partners co-located on-site will continue to evolve throughout the development and early operational phases of this initiative.

The proposed service delivery model is similar, in many ways, to “wrap-around” approaches used in mental health and children’s services sectors with added benefits resulting from the co-location of representatives from the law enforcement, justice, child welfare, Family Court, health and mental health, anti-violence and social service sectors. Partner agencies may participate in the collaborative site in a variety of ways: as internal or on-site partners; external or contributing partners; or as community partners. On-site partner agencies will relocate one or more employees to work at the collaborative site, on a full or part-time basis and in accordance with rental agreements negotiated with the lead agency/agencies; external or contributing partners will assign staff to work on-site during regularly scheduled hours, and will contribute to site costs proportionate to their use of office and programming space; and employees from community partners will attend meetings and contribute to programs as negotiated.



#### Inclusive Criteria for Service

The collaborative service delivery site will provide:

- ★ Services and supports to victims and survivors of partner abuse and sexual violence, including but not necessarily limited to:
  - male and female victims/survivors;
  - older adults and seniors who have and/or who are experiencing partner abuse or sexual violence;
  - persons with disabilities who have and/or who are experiencing partner abuse or sexual violence; - and -
  - adult survivors of child sexual abuse.
- ★ Services and supports to children and adolescents who have been exposed to or witnessed partner abuse in their home environment.
- ★ Information, resources and referrals to children and adolescents who have experienced child abuse, including child sexual abuse, and their families.<sup>9</sup>

<sup>9</sup> Direct services for children and adolescents who have experienced child abuse, including child sexual abuse, may be provided at or through the CSDS at some point in the future in accordance with resources available and the needs and preferences of clients and service providers.





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### Services Available at the Collaborative Site

The collaborative site will offer a wide range of acute/crisis intervention, short term and long term supports and services, including referral and information services, direct services, and practical supports and assistance designed to facilitate and promote access to programs and services, such as on-site child care. In addition to crisis intervention and short term services, such as law enforcement, emergency shelter, safety planning and risk assessment services, the collaborative site will also provide or help clients access a comprehensive network of practical, counselling, advocacy and support services needed to help victims heal, recover and build violence-free lives, including but not necessarily limited to housing, income-support, child welfare/Family Court supports, education/skills assessment, financial planning, job retraining and placement, and long term individual and group counselling services.

Services provided will respect and reflect the individual mandates of partner agencies; and will be developed with attention to the best practice standards in their respective sectors. However, in addition to facilitating more effective service planning and delivery involving multiple agencies, the collaborative site represents a unique opportunity to develop and provide new, cost-effective programs and services in response to emerging trends and changing client needs, such as groups for abused women with mental health issues co-facilitated by outreach staff from Kingston Interval House and Frontenac Community Mental Health Services; and educational sessions for abused women involved with both the Criminal and Family Court systems co-facilitated by a representative from the Victim/Witness Assistance Program and Duty Council, Family Court.

Specific service partners can not be confirmed until the fiscal considerations and funding requirements outlined in Section 4 have been addressed and resolved by lead and partner agencies; however, a preliminary survey of Coalition members suggests the following services could be provided at or through the collaborative site in the immediate future:

- ★ Police services: immediate relocation of or assigned hours on-site for the Domestic Violence Coordinator and Sexual Violence Coordinator in consideration of fiscal resources available; possible relocation of Bail Safety Program; officers visiting or working on-site in accordance with assigned responsibilities and case involvement.
- ★ Criminal Court: participation in scheduled meetings and appointments; discussions ongoing with Victim/Witness Assistance Program and Crown Attorney's Office to explore most effective and efficient level of involvement.
- ★ Family Court: assigned hours on-site for Duty Council.
- ★ Counselling and support services: immediate relocation of or assigned hours on-site for outreach staff from Kingston Interval House, and counselling staff from Women's Program, Kingston Community Counselling Centre; participation in scheduled meetings, appointments or groups by staff from Sexual Assault Centre Kingston.

Proposed analysis of caseload numbers at other organizations and agencies may encourage and support relocation of staff to the collaborative site, including but not necessarily limited to Ontario Works, Ontario Disability Support Program (ODSP) and Housing employees.





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### Specific Components of Service Delivery Model

The service delivery model at the collaborative site will include and reflect, but may not necessarily be limited to, the following components:

- ★ The mandates, parameters for service, confidentiality requirements and record-keeping procedures of partner agencies and organizations will be maintained, respected and reflected in the day to day operations of the collaborative site.
- ★ Existing Protocols for collaborative service delivery, including the Partner Abuse Protocol and Sexual Assault Protocol for Kingston and Frontenac, will be respected and reflected in the day to day operations of the collaborative site.
- ★ Clients will identify and select the agencies and organizations with which they wish to work with the exception of mandated and legislated agency involvement, such as Duty to Report as per the Child & Family Services Act.
- ★ Formal consent to release information procedures as developed or required by partner agencies will be used and respected to control the dissemination, sharing and use of personal information, records or files between and among partner agencies.
- ★ Clients and service providers will work together in a cooperative and collaborative manner to develop and implement individual **service delivery plans** which will reflect and address each client's unique needs, and outline a realistic plan of action for both the service users and service providers involved with said client.
- ★ Service delivery plans will be goal-oriented and need driven with no predetermined "closure date"; however, decisions about duration of service will be made with attention to agency mandate, resource availability, possible dependency issues, and maximizing use of all available and appropriate community resources.
- ★ Service providers will make every effort to generate options, maximize choice and maintain flexibility when working with clients with attention to and in compliance with any legislated and/or mandated requirements, limitations, restrictions or parameters of service for partner agencies; and in consideration of available resources.
- ★ Clients and service providers will build collaborative partnerships built on mutual respect for the experiences, knowledge and expertise each brings to the service relationship.
- ★ **Service review meetings**, held at or some time after the conclusion of a client's involvement with the collaborative site, will be used to review the services provided and evaluate the efficacy of collaboration in relation to said client. The service review process reflects the commitment to inter-agency accountability and continuous learning among partner agencies.





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A critical and essential component of the proposed service delivery model is the creation and use of **Client Advocates**.<sup>10</sup> Client Advocates will provide “hands-on” assistance and support to clients if and as necessary during their involvement with the collaborative site, facilitating the client’s access to services required and working with the client to identify and address any real or perceived barriers to service within the collaborative site or in the broader service community. Client Advocates will be assigned to specific clients at intake or at any point during their involvement with the collaborative site in accordance with clearly defined criteria; for example, if very high risk safety issues are evident; if the situation and/or service requirements are particularly complex; and/or if the client is reporting barriers to service. The number, skill sets and composition of Client Advocates will reflect the site’s commitment to provide services to both male and female victims, and to adults, youth and children; and to provide services in both English and French.

More specifically, Client Advocates will:

- serve as a consistent contact and resource for the client, regardless of services used or duration of involvement;
- facilitate and assist with the development of an effective, realistic service delivery plan, organize case conferences, and help establish priorities;
- assist with the management and resolution of any critical issues or barriers to service, serving as a mentor and role model for effective problem solving;
- provide practical supports and assistance, such as helping clients develop a list of questions to ask the Ontario Works staff member;
- coordinate safety planning efforts, including management of high risk situations;
- provide information, support and assistance required to help clients better understand, navigate and work with Family and Criminal Court systems; - and -
- schedule and facilitate service review meetings.

The proposed service delivery model assumes Client Advocates would also assist with the intake process on a rotating basis and carry a caseload of clients involved in individual, long term counselling. Client Advocates would be responsible for completing any scheduled or unscheduled intake interviews when providing intake coverage; and would become the victim’s Client Advocate immediately following intake or at any time during his/her involvement with the collaborative site in the event that assistance from a Client Advocate is needed. Client Advocates would NOT provide in-depth or long term counselling to the same clients for which they serve as advocate in order to avoid any role confusion.

This distribution of responsibilities not only makes efficient use of available fiscal and human resources, it also minimizes the number of times a client must disclose painful information about their past or current situation and recognizes and respects the powerful bond that’s often created during a client’s “first disclosure”. However, the staffing model must be flexible enough, or have sufficient redundancy, to accommodate multiple, unscheduled intakes on any given day, and respond effectively to scheduling or caseload pressures.



<sup>10</sup>Refer to page 22 of this document for more information about options to fund/create these positions.





## 2.2 Evaluation and Research

The proposed network of services and the service delivery model for the collaborative site have been developed with attention to similar sites currently in existence, including but not limited to the Family Justice Centre in San Diego, the Family Violence Project spearheaded by the Catholic Family Counselling Centre in Waterloo, Ontario, the Domestic Violence Advocacy Support Central in Western Australia, and the “One Stop Shops for Domestic Violence” in Northern Ireland. However, several components of the service delivery model for the collaborative site proposed for Kingston represent unique and innovative combinations or additions to the service delivery models currently in use at these and other similar sites. For this reason, and in consideration of the relative “newness” of this approach to service delivery in the law enforcement, justice and anti-violence service sectors, the Coalition is committed to developing and implementing a collaborative framework for continuous evaluation and critical research at the collaborative service delivery site.

As mentioned previously, service review meetings will be used to evaluate interventions with specific clients, and partner agencies will be encouraged and supported in their efforts to evaluate and improve the specific services they provide on-site on an ongoing basis.

In addition to this client-focused evaluation, the Coalition plans to establish a **Research Council** comprised of professors and researchers from a wide variety of relevant disciplines, including but not necessarily limited to community development, economics, health administration, psychology and law. An initial conference, planned for Spring 2010, will bring together selected researchers from across Canada; these individuals will work with Coalition representatives to develop a research design and appropriate research parameters for the collaborative service delivery site with attention to impact and benefits for service users, service providers and the community-at-large. At the conclusion of the conference, a limited number of researchers will be invited to serve as members of the Research Council on an ongoing basis.<sup>11</sup>

Research Council members will provide guidance and assistance with the ongoing evaluation of the service delivery model, and assist with the compilation and publication of findings.

In addition, they will be welcome to develop and implement individual research projects and/or place students on-site in consideration of the mandate, goals and objectives of the collaborative service delivery site.



<sup>11</sup>Kingston Interval House, acting as lead agency on behalf of the Coalition, applied for and received grant funding from the Law Foundation of Ontario to support the initial research conference and early operations of the Council (confirmed October 2009).





## 2.3 Options for Development and Implementation

The Coalition has explored several options for the ongoing administration of the collaborative site, including:

- the creation of a new and distinct organization responsible for establishing and managing the site;
- the use of one or more lead agencies responsible for managing and overseeing the selected site and the services available; - and -
- the continued use of a “coalition” of agencies which would share responsibility for securing and administering the collaborative site in accordance with resources available and resources allocated to the site.

The Coalition will continue to evaluate the feasibility and sustainability of these options during the development phase of this initiative; however, at this point it appears most likely **the collaborative site will be established by one or more lead agencies** that assume responsibility for securing and administering the physical location chosen for the collaborative service delivery site. This operational model presumes that sufficient numbers of partner agencies will be able and willing to contribute to the costs of maintaining and operating the collaborative site in accordance with the degree or level of their involvement in the delivery of services.

### Comprehensive Service Delivery Model

The service delivery model described thus far in this Business Case represents the most comprehensive option for the development and implementation of a collaborative service delivery site for victims of partner abuse and sexual violence; and includes or presumes:

- ✓ One or more lead agencies ready to assume responsibility for purchasing or renting space required for the collaborative site; and to negotiate and administer rental agreements with internal/on-site and external/contributing partner agencies.
- ✓ Sufficient numbers of internal/on-site partners and external/contributing partners with access to fiscal resources required to pay for staff enhancements and/or relocation of existing employees, and to contribute to rental costs prorated to space required/used.
- ✓ One or more lead agencies with access to fiscal resources required to hire and/or provide personnel required for reception, administrative, coordination and property maintenance services at the collaborative site - or - sufficient numbers of partner agencies willing and able to contribute to these costs.

The advantages of establishing a collaborative site using the comprehensive service delivery model have been referenced throughout this document: improved and enhanced services for victims and survivors; streamlined administrative and communication procedures; opportunities for continuous, focused learning for service providers interested in sharing and/or developing expertise in this area; more efficient use of existing and new resources; and an opportunity to conduct and/or contribute to research in the field. While Coalition member agencies remain committed in principle to this service delivery model, the majority remain uncertain as to how they might be able to restructure, redistribute and/or secure additional funds and resources required to cover the cost of their involvement in the collaborative site.





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Consequently, at the time this Business Case is being prepared, the Coalition is facing the challenge of finding a realistic, sustainable strategy to move the initiative forward.

### Phased-In Services

It may be more feasible to “build” the comprehensive service delivery model over time, gradually adding agency representation and on-site services to a shared site as momentum for the initiative grows and partner agencies are able to restructure, reallocate and/or secure additional funds needed to support their participation in the collaborative service delivery site. This option includes or presumes:

- ✓ A minimum of two Coalition members experiencing or projecting a need for additional office and/or programming space willing to work together to secure said space, preferably in a building with sufficient redundancy to allow for gradual expansion; and willing to relocate and co-locate specific staff members who would be involved with or responsible for programming and services compatible with the collaborative service delivery model.
- ✓ Access to funds required to secure sufficient meeting and programming space at shared site to accommodate and encourage multi-agency meetings, inter-agency service planning or safety planning discussions, and co-facilitated group sessions.
- ✓ Commitment on part of lead or co-located agencies to allocate and/or secure funds and resources required to provide minimal reception, administrative and coordination services at onset of collaborative project.
- ✓ Commitment on part of proposed on-site and contributing partner agencies to secure funds and resources required to support their participation in the collaborative site.

In some instances, an extended time frame for the gradual expansion of services at the collaborative site may prove useful to potential partner agencies who, at this time, are uncertain of the need for or efficiencies that might be realized as a result of their participation in the collaborative site. For example, caseload reviews at Ontario Works, ODSP, and Housing may confirm the need for and advantages of consolidating clients who have experienced partner abuse or sexual violence into specialized caseloads which could then be assigned to employees interested in developing the necessary skills and expertise to work effectively with this client population. Co-locating these employees with key anti-violence service providers, such as outreach workers from Kingston Interval House and counsellors from the Women’s Program at Kingston Community Counselling Centre, would go a long way to facilitating victims’ access to a seamless network of services and supports.







## SECTION 3: SITE REQUIREMENTS

### 3.1 Site Options

The collaborative service delivery site could be:

- ★ Established in a stand-alone building dedicated solely to the collaborative site; purchased or leased by one or more lead agencies responsible for negotiating independent rental agreements with on-site and contributing partner agencies.
- ★ Located in a multi-purpose structure, such as an office building or community mall; leased by one or more lead agencies responsible for negotiating independent rental agreements with on-site and contributing partner agencies.
- ★ Co-located in a building owned and administered by a community agency willing to serve as the host organization for the collaborative site; and to negotiate rental agreements with on-site and contributing agencies.<sup>12</sup>

The Coalition hopes to secure space in a building that will allow for the expansion and growth of the collaborative site, regardless of which service delivery option is initially implemented. The need for additional space to accommodate gradual growth and expansion is immediately evident in relation to the option of phased-in services. However, in the event that the collaborative site is launched using the comprehensive service delivery model, some physical redundancy in the chosen site would still be advantageous, and would allow for program expansion and ongoing development. For example, there is considerable interest in developing and implementing a comprehensive volunteer program at the collaborative site, including a resource room/library/"drop-in centre" maintained and serviced by volunteers, volunteer drivers, and volunteer movers. Not only would additional space be required for the proposed resource room, but additional office space for a volunteer coordinator would also be necessary.

To date, the Coalition has explored two specific options for co-locating the collaborative service delivery site in buildings owned and/or administered by another community agency: the Frontenac Children's Aid Society; and Kingston Community Health Centre.

In early Spring 2009, the Frontenac Children's Aid Society announced they had purchased land on Division Street, near the new Kingston Police Headquarters, and would be relocating to a newly constructed office building in Fall 2011. The Executive Director confirmed their interest and willingness to incorporate the collaborative service delivery site into this new building; however, uncertainty and concern about partner agencies' ability to secure adequate funding to support their participation in the collaborative service delivery site within the time frame identified by the CAS undermined the Coalition's support for this site option.

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<sup>12</sup>Which could be done through a lead agency or on an agency by agency basis in accordance with the preferences and requirements of the host organization.





## Collaborative Service Delivery Site Business Case Discussion Paper: 2009

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In late Spring 2009, the Kingston Community Health Centre reported that they hope to move to a new, expanded location in north Kingston in the next three to five years. They initially hoped to secure infrastructure funding through the Federal Government to support this initiative; however, they were unable to take advantage of this funding stream because of time constraints. Their need for new and additional space remains, and they have confirmed their interest and willingness to consider co-locating with the collaborative service delivery site. Some components of their original vision for the new location were not immediately compatible with the physical requirements for the collaborative site; however, the many mutual benefits that could be realized through this particular co-location suggest ongoing dialogue and discussion between the Coalition and the Kingston Community Health Centre would be worth pursuing in the months to come. The extended time frame for the Health Centre's possible relocation may provide the Coalition with the time required to secure adequate operational funds for the collaborative service delivery site.

### 3.2 Generic Site Requirements

The Coalition, with assistance from the Site Development Work Group and the Survivors' Advisory Council, has identified the following minimum physical requirements for the collaborative site, regardless of the type of building purchased or leased for this project:

- convenient location on bus route with sufficient visibility to create awareness and promote accessibility, and with adequate measures to protect confidentiality, privacy and safety of clients;
- complies with best practice standards for barrier-free design throughout;
- controlled and monitored entrance;
- secure, welcoming reception area suitable for adult and child clients, and with space to display community resources;
- private/quiet waiting area attached to or easily accessible from common waiting area for use by high risk or distraught service users;
- supervised children's play area; - and -
- in-house washroom facilities for clients and employees.

In addition to these generic requirements, office and programming space must be secured in consideration of the service delivery option to be implemented (comprehensive vs phased-in) and the number and requirements of on-site, contributing and external partners.





### 3.3 Site Requirements for Specific Development Options

Specific physical requirements for the collaborative service delivery site will be influenced, if not determined, by: the service delivery option (comprehensive vs phased-in); the number and composition of on-site, contributing and external partner agencies; and the specific programs and services to be delivered on-site. However, in an effort to identify the resources needed to move this initiative forward, the Coalition has confirmed the minimum site requirements for both the comprehensive and phased-in service delivery options; and has completed a preliminary review of rental options and costs in the Kingston area.

Information was collected from the City of Kingston, the Kingston Economic Development Corporation, private developers and land owners, and several not-for-profit organizations in order to determine average, triple net rents in both the central (downtown) and north end areas of Kingston; and to determine typically square footage requirements for reception areas, waiting areas, offices, meeting rooms, etc.

Initial explorations suggest it may be most efficient to use the services of a broker to locate suitable rental space for the collaborative site; however, this may result in additional leasing costs as landowners often try to recoup the brokers' fee through rental agreements.

The physical requirements and average rental costs for the comprehensive service delivery model and the phased-in approach for the creation of the collaborative service delivery site are summarized below in Tables 1 and 2. Space requirements and costs for phased-in service delivery model (Table 2) assume co-location of 7 to 10 full and part time employees, or 6 FTEs<sup>13</sup> from at least two key agencies providing services to victims of violence, including persons responsible for management or coordination, reception/administrative services, and direct services.



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<sup>13</sup>Full time equivalents





## Collaborative Service Delivery Site Business Case Discussion Paper: 2009

**Table 1: Site Requirements and Costs for Comprehensive Service Delivery Model**

Room/Area	#	Comments	Sq. Ft. Per Unit (approx)	Total Sq. Ft. (approx.)
Reception	1	Secure, welcoming area able to accommodate receptionist	100	100
Waiting Area	1	Suitable for approximately 7 persons with sufficient space to display community resource information	200	200
Quiet Wait Area	1	Suitable for approximately 2 persons	80	80
Admin/Management Offices	4	Individual offices for administrative, coordination and/or management personnel	100	400
Supply/storage	1	Shared or central storage	150	150
Frontline Staff Offices	8	Individual offices with sufficient space for counselling and storage	120	960
Conference room: large	1	Suitable for approximately 20 persons; with storage	700	700
Conference/interview room: small	2	Suitable for approximately 4 persons; with storage	120	240
Group room: large	1	Suitable for approximately 10 persons; with storage	400	400
Group room: small	1	Suitable for approximately 6 people; with storage	300	300
Children's area	1	Suitable for approximately 8 persons	300	300
Client washroom	2	w/c accessible	60	120
Staff washroom	2	w/c accessible	55	110
Staff room	1	With kitchenette	120	120
<b>Total sq ft required</b>		Includes 13% efficiency factor		<b>4723</b>
Approximate Triple Net Rental Costs Per Year				
Central Kingston	<b>\$127,531</b>			
North End Kingston	<b>\$103,906</b>			



## Collaborative Service Delivery Site Business Case Discussion Paper: 2009

<b>Table 2: Site Requirements and Costs for Phased-In Service Delivery Model</b>				
Room/Area	#	Comments	Sq. Ft. Per Unit (approx)	Total Sq. Ft. (approx.)
Reception	1	Secure, welcoming area able to accommodate receptionist	100	100
Waiting Area	1	Suitable for approximately 7 persons with sufficient space to display community resource information	200	200
Admin/Management Offices	3	Individual offices for administrative, coordination and/or management personnel	100	300
Supply/storage	1	Shared or central storage	150	150
Frontline Staff Offices	6	Individual offices with sufficient space for counselling and storage	120	720
Conference room: large	1	Suitable for approximately 20 persons; with storage	700	700
Group room: large	1	Suitable for approximately 10 persons; with storage	400	400
Group room: small	1	Suitable for approximately 6 people; with storage	300	300
Client washroom	2	w/c accessible	60	120
Staff washroom	2	w/c accessible	55	110
Staff room	1	With kitchenette	100	100
<b>Total sq ft required</b>		Includes 13% efficiency factor		<b>3616</b>
Approximate Triple Net Rental Costs Per Year				
Central Kingston				<b>\$97,632</b>
North End Kingston				<b>\$79,552</b>





## Collaborative Service Delivery Site Business Case Discussion Paper: 2009

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### Notes:

1. Triple net rental figures or triple net leases refer to lease agreements which include proportional contributions to taxes, insurance and property maintenance in addition to the base rental rate per square foot.
2. Rental costs included in Tables 1 and 2 are based on the following average estimated triple net rental rates:  
Central (downtown) Kingston:       \$27/square foot  
North End Kingston:                 \$22/square foot
3. Rental costs included in Tables 1 and 2 include an efficiency factor, an allowance for wall thickness, corridor areas and other features not included in useable floor space, calculated at 13% of total square footage.
4. Some renovations are typically required for rental properties. Rental costs in Tables 1 and 2 do NOT include costs resulting from leasehold improvements. There are several different options for payment of these costs including payment by tenant up front, payment by tenant amortized over course of lease, and shared payment by tenant and landowner ~ with tenant contributing their portion either at commencement or over the course of the lease.
5. Rental costs in Tables 1 and 2 do NOT include any designated parking spaces; cost for designated parking spaces may be incorporated into rental agreements at the discretion of the landowner and tenant.
6. A minimum commitment of five (5) years is a standard expectation for commercial leasing in Kingston. Shorter leases may be negotiated in some instances; however, the cost to the collaborative partners may be increased accordingly.





## SECTION 4: FINANCIAL CONSIDERATIONS AND FUNDING OPTIONS

The Coalition has compiled and reviewed background information pertaining to collaborative service delivery sites for victims of violence currently in existence, surveyed local service providers to determine the feasibility and desirability of establishing a similar collaborative site in Kingston, researched and developed a comprehensive service delivery model for the proposed site, and confirmed the physical requirements and approximate rental costs for comprehensive and phased-in service delivery models. To date, partner agencies have absorbed any costs resulting from their representation on the Coalition. Grant funds have been secured and used to cover costs arising from purchased services, such as research, facilitation and/or coordination services, and/or costs associated with specific components of this initiative, such as contributing to child care and transportation costs for members of the Survivors' Advisory Council.<sup>14</sup>

Regrettably, sustainable funding options for collaborative service delivery sites are limited at this time. The provincial government has not indicated or confirmed any intention to assume responsibility for funding these types of service delivery sites in the foreseeable future, though they continue to express support for collaborative initiatives of all kinds. While it may be possible to establish a new organization with an independent board of directors which would assume responsibility for securing the capital and operational funds required for the collaborative site, this organizational and funding option is inherently incompatible with the collaborative nature of the initiative.

Current funding levels for local agencies and organizations are insufficient to support staff enhancement and program development or expansion at this time; and options for securing additional operational funds are limited in the present economic environment. Consequently, it is unlikely the Coalition will be able to identify sufficient numbers of on-site and contributing partner agencies able to assume responsibility for the ongoing operational costs of the collaborative site through proportional contributions to site costs and shared human resources in the immediate and foreseeable future.

**Financially, the most feasible option for the establishment of a collaborative service delivery site appears to be a phased-in approach**, beginning with two or more key agencies that are currently experiencing or projecting the need for additional or new physical space. It may be possible for these organizations to approach an existing agency to serve as the host site for the collaborative initiative, assuming they have or will have the physical space required; or alternately, the agencies could work together to rent adequate space for a collaborative project in a new and neutral location, such as an office building.

This approach is most likely to succeed if one or more of these key agencies is willing to assume responsibility as the lead agency/agencies for the collaborative project. As such, they would assume responsibility for working with Coalition members to create and administer a multi-sourced operational budget for the collaborative site. Options for operational funding and/or securing critical personnel for the collaborative site include but are not necessarily limited to the following:

<sup>14</sup>Kingston Interval, acting as lead agency on behalf of the Coalition, has secured and administered one-time grant funding from the Ministry of Community & Social Services, the Ontario Women's Directorate, the United Way and the Law Foundation of Ontario.





## Collaborative Service Delivery Site Business Case Discussion Paper: 2009

- ★ Restructuring, reallocating or redistributing existing human and fiscal resources of the lead agency/agencies to facilitate relocation of frontline direct service personnel and provide the minimal administrative and coordination services initially required at the new site.
- ★ Applying for grant funding to assist with these and other costs.
- ★ Restructuring staffing resources and full time equivalents allocated to outreach, counselling and advocacy at Kingston Interval House, Kingston Community Counselling Centre and possibly the Sexual Assault Centre Kingston to create Client Advocate positions and/or free up sufficient time for two or more counsellors to implement a collaborative intake process and serve as Client Advocates, a critical and essential component of the service delivery model for the collaborative site.
- ★ Applying for and negotiating a Purchase of Service Agreement with the City of Kingston, based on the assumed and proven benefits of the collaborative site to the community-at-large (presumes sufficient numbers of service providers are or will be working together at the collaborative site to make the argument for general benefits arising from this new and innovative service).
- ★ Encouraging and supporting case load and job description analysis at other partner organizations, such as Kingston Police, ODSP, Ontario Works and Housing, with attention to possible efficiencies resulting from the creation of dedicated positions to work with victims and survivors of partner abuse and sexual violence ~ and the eventual co-location of said positions with other service providers working at the collaborative site.

This option for a phased-in approach assumes an ongoing and growing commitment on the part of sufficient numbers of on-site, contributing and external partner agencies to confirm, secure and provide the financial resources needed to maintain, sustain and grow the collaborative site. Individual strategic and/or business plans generated by partner agencies, including discussion of the rationale and parameters for their human and fiscal contributions to the collaborative site, would support the phased-in service delivery model. These individual business plans would serve as addendums to this Business Case Discussion Paper; and would provide more detailed information about specific costs and projected efficiencies for each partner agency.







## SECTION 5: CONCLUSION

A coalition of agencies and organizations has researched and confirmed the need for and value of a collaborative service delivery site for male and female victims of intimate violence in the Kingston area with attention to anticipated benefits for service users, service providers and the community-at-large. Over the past year, representatives from the law enforcement, justice, child welfare, Family Court, anti-violence and social service sectors have worked together with survivors of sexual violence and partner abuse to develop and confirm the basic parameters of the service delivery model, the specific programs and services to be offered, and the physical requirements for the collaborative site.

To date, one time grant funding from multiple sources has been secured and used to support the research, exploration and community development efforts critical to this collaborative initiative. Considerable momentum has been generated in relation to the project, up to and including discussions with possible host agencies interested in working with the Coalition to establish the collaborative service delivery site. However, sustainable funding options for collaborative sites are limited at this time; and it is unlikely that sufficient numbers of on-site, external and community partner agencies will be able to secure, generate and contribute the human and financial resources needed to establish and administer the collaborative site as originally envisioned by the Coalition.

However, a collaborative project involving two or more key service providers currently experiencing and/or projecting the need for additional office space seems realistic and achievable at this time. In addition to realizing the efficiencies resulting from co-location, these organizations would be well positioned to take advantage of the momentum generated to date regarding this innovative service option, and to work with other service providers to expand and enhance the services available at or through the collaborative location over time. Introducing and incorporating new programs and services into the collaborative site on a gradual, or “phased-in”, basis would allow sufficient time for partner agencies to complete caseload reviews and analyses, explore options for restructuring and reassignment of personnel, and/or secure grant or operational funds required to contribute to the site on a trial or ongoing basis.

As the Coalition moves forward with this initiative, it may be helpful to remember that most, if not all, of the specific supports and services currently available for victims of partner abuse and sexual violence exist as a result of the efforts and demands of victims, survivors and the people who care for and about them.

As stated so succinctly by a member of the Survivors’ Advisory Council:

**“Don’t take no for an answer. Just do it!”.**





**APPENDIX ONE: FOUNDATION DOCUMENTS FOR COMMUNITY  
COALITION**



**Collaborative Service Delivery Site, Kingston, Ontario**  
**MEMORANDUM OF UNDERSTANDING**

This letter serves to confirm that the following agencies, services and organizations are currently members of a community coalition working to establish a collaborative service delivery site (CSDS) for male and female victims of sexual violence and partner abuse in Kingston, Ontario.

The designated representatives, as per signatures below, confirm that their respective agencies, services or organizations support the development and establishment of the collaborative service delivery site in accordance with the attached Working Agreements. The members of the community coalition anticipate ongoing involvement with the CSDS once it is operational; however, the specific roles, responsibilities and contributions of the on-site and external partner agencies have not been confirmed at this time.

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Adele LaFrance, Manager,  
Community & Family Services Dept  
**City of Kingston, Social Services**

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John Skoropada, Assistant Crown Attorney  
**Crown Attorney's Office**

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Stephen Doig, Director of Services  
**Frontenac Children's Aid Society**

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Mary-Ann Beeby, Program Coordinator  
**Kingston Community Counselling Centre**

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Donna Joyce, Manager  
**Kingston General Hospital, SA/DV Program**

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Lisa Fox, Outreach Worker  
**Kingston Interval House**

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Inspector Antje McNeely, Patrol Division  
**Kingston Police Services**

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Leanne Wight, Supervisor, Duty Counsel (Family)  
**Legal Aid Ontario: Duty Counsel Services**

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Jim Hill, Clinical Director  
**Pathways for Children & Youth**

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Kim Allen, Executive Director  
**Sexual Assault Centre, Kingston**

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Janet Lee, Manager  
**Victim Witness Assistance Program**

**Collaborative Service Delivery Site  
WORKING AGREEMENTS OF COMMUNITY COALITION**

The following is a summary of the working agreements generated and approved by members of the community coalition involved in the development of a collaborative service delivery site for victims of partner abuse and sexual violence.<sup>15</sup>

These agreements will:

- ✓ guide and inform the work of the coalition and of the Site Development, Fund Development and Program & Services Work Groups;
- ✓ be shared and used as a framework for discussion with the Survivors' Advisory Council;
- ✓ be reviewed, modified and revised by the Programs & Services Work Group, as directed by the community coalition, throughout the development process.

These agreements have been approved by:

**City of Kingston, Social Services  
Crown Attorney's Office  
Frontenac Children's Aid Society  
Kingston Community Counselling Centre (K3C)  
Kingston General Hospital, SA/DV Program  
Kingston Interval House  
Kingston Police Services  
Legal Aid Ontario: Duty Counsel Services  
Pathways for Children & Youth  
Sexual Assault Centre, Kingston  
Victim Witness Assistance Program**

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<sup>15</sup>Initial ideas for Working Agreements generated by community coalition at meeting held 30 September 2008; draft Working Agreements were reviewed and revised by the Program & Services Work Group at meeting held 28 October 2008; revised Working Agreements were reviewed and revised by the community coalition on 03 December 2008; final version of the Working Agreements was approved by the coalition on 12 December 2008.

### General Parameters

It is understood and accepted by all community partners and stakeholders that the collaborative service delivery site will serve as an additional direct service option and/or location for coordination of services for victims and survivors of partner abuse and sexual violence. It will not be designed or serve as a replacement to the existing services throughout Kingston and Frontenac County.

### Service Delivery

The Collaborative Service Delivery Site will be designed to reflect and reinforce a positive, affirming attitude towards victims and survivors, one which recognizes and honours their courage, facilitates their efforts to build and maintain violence-free lives for themselves and their families, and supports their journeys toward healing and recovery.

More specifically, the CSDS will:

- Provide services and supports to victims and survivors of partner abuse and sexual violence, including but not necessarily limited to:
  - male and female victims/survivors;
  - older adults and seniors who have and/or who are experiencing partner abuse or sexual violence;
  - persons with disabilities who have and/or who are experiencing partner abuse or sexual violence; - and -
  - adult survivors of child sexual abuse.
- Provide services and supports to children and adolescents who have been exposed to or witnessed partner abuse in their home environment.
- Provide information, resources and referrals to children and adolescents who have experienced child abuse, including child sexual abuse, and their families; and will work cooperatively and collaboratively with agencies, organizations and professionals in the child welfare, medical and mental health, legal and child advocacy sectors to ensure children and adolescents who have experienced child abuse receive the support and services they require.<sup>16</sup>
- Develop and implement a client-driven model of service delivery which reflects best practices while remaining open to change based on evolving and emerging client needs and relevant research findings.

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<sup>16</sup>Direct services for children and adolescents who have experienced child abuse, including child sexual abuse, may be provided at or through the CSDS at some point in the future in accordance with resources available and the needs and preferences of clients and service providers.

For the purpose of these Working Agreements and in relation to the CSDS, “client-driven model” includes:

- collaborative partnerships between clients and service providers built on mutual respect for the experiences, knowledge and expertise each brings to the service relationship
  - a commitment to allow individual clients to identify and select the agencies and organizations with which they wish to work with the exception of mandated and legislated requirements, such as Duty to Report as per the Child & Family Services Act or compliance law enforcement/justice activities; - and -
  - the use of informed consent processes which will allow individual clients to control dissemination, sharing and use of any personal information, records or files between and among internal/on-site and external partners (with exception of mandated and legislated requirements as noted above).
- Provide a wide range of acute/crisis intervention, short term and long term supports and services to identified clients, including referral and information services, direct services, and practical supports and assistance designed to facilitate and promote access to services, including but not necessarily limited to on-site child care.

### **Relations Between Community Partners and Stakeholders**

Representatives and employees of internal, or on-site, partner organizations and external partner organizations will:

- Respect and comply with:
- the mandates and parameters for service of internal/on-site and external partners;
  - existing protocols for collaborative service delivery, including the Partner Abuse Protocol and Sexual Assault Protocol for Kingston and Frontenac County;
  - expectations, roles and responsibilities for internal/on-site and external partners; - and -
  - any memoranda or agreements for service delivery developed specifically for the CSDS.
- Work together in a cooperative and collaborative manner to develop and implement individual service delivery plans guided and informed by:
- each client’s unique needs;
  - the mandates of internal/on-site and external partner agencies; - and -
  - the current and evolving understanding of long term needs of individuals committed to establishing and maintaining healthy, violence-free lives for themselves and their children.
- Make every effort to generate options, maximize choice and maintain flexibility when working with clients, with attention to and in compliance with any legislated and/or mandated requirements, limitations, restrictions or parameters for service for internal/on-site or external partners; and in consideration of available resources.
- Explore the feasibility, benefits and challenges of incorporating the use of case managers into the service delivery model. More specifically, being able to offer clients the option to work with a consistent case manager who will:

- help clients identify and articulate their service needs;
  - help clients identify and choose the agencies with which they need and wish to work;
  - work with clients to develop a realistic service delivery plan;
  - help clients “navigate” the services available at the CSDS and in the community;  
- and -
  - facilitate introductions and referrals as necessary.
- Explore the feasibility, benefits and challenges of providing some services and supports using volunteers and/or peer service delivery models.
- Comply with existing and pending requirements for bilingual service delivery in Kingston; and provide service in both official languages.<sup>17</sup>
- Ensure that the CSDS complies with best practice standards for accessible, barrier-free design.
- Provide service in a manner which reflects best practice standards with respect to cultural competency.
- Identify, address and resolve issues between and among themselves in a direct and forthright manner, including but not necessarily limited to differences of opinion, perceived conflicts of interest, and challenges inherent in providing consistent service in accordance with and while respecting multiple organizational mandates.

Date Approved: 12 December 2008

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<sup>17</sup>In consideration of resources available to on-site and external partner agencies at any given time; and in accordance with specific requirements identified by the respective funding Ministries for partner agencies.

**KFACC: Collaborative Service Delivery Site Initiative  
FUND DEVELOPMENT WORK GROUP**

**Terms of Reference**

The Fund Development Work Group is mandated, on behalf of the community coalition working to establish a collaborative service delivery site for victims of partner abuse and sexual violence, with the following responsibilities and tasks:

- To research funding options and complete and submit funding proposals, or facilitate the completion and submission of proposals in cooperation with one or more lead agencies, to secure funds required to support this initiative throughout the development process including but not necessarily limited to funds required to purchase consultation and coordination services for the community coalition and funds required to support the establishment and operations of the Survivors' Advisory Council.
- To liaise and work cooperatively with KFACC and one or more lead agencies re: funds received and expenditures made in relation to this initiative,; and to monitor, compile and present information pertaining said funding to the community coalition, possible funding bodies/sources, supporters and stakeholders.
- To support, facilitate and/or assist with the completion and submission of interim and final reports to the community coalition and to funding bodies/sources re: project or grant funding received in relation to this initiative, as requested by and in collaboration with the lead agency/agencies.
- To research funding requirements, options and possible funding models for capital, start up and operational dollars for the collaborative service delivery site, and to serve as a resource to the community coalition and lead agency/agencies in relation to the same.
- To research and collect data and information required for the preparation of a Business Plan for the development, start up and operations of the collaborative service delivery site, including but not necessarily limited to information from external sources and members of the community coalition.
- To liaise and work cooperatively with the Site Development Work Group to complete a cost analysis and develop a written Business Plan which speaks to the funding requirements, and proposed timelines for the development, start up and operations of the collaborative service delivery site. (It is understood the Business Plan for the CSDS will need to be revised and updated on a regular and ongoing basis as this initiative unfolds.)
- Liaise with the community coalition and other Work Groups as necessary.

Date Developed: October 2008  
Date Approved: 03 December 2008



## **KFACC: Collaborative Service Delivery Site Initiative PROGRAM & SERVICES WORK GROUP**

### **Terms of Reference**

The Programs & Services Work Group is mandated, on behalf of the community coalition working to establish a collaborative service delivery site (CSDS) for victims of partner abuse and sexual violence, with the following responsibilities and tasks:

### **Foundation Documents and Commitments**

- To develop and confirm the foundation documents that will be used to guide and inform the development and work of the collaborative service delivery site, including but not necessarily limited to: Working Agreements Between Community Coalition Partners; Vision Statement; Mission Statement/Mandate; and Value Statements, such as Beliefs, Aims and Guiding Principles of Service Delivery.<sup>18</sup>
- To develop and confirm any formal Memoranda of Agreement between and among on-site partners, external partners and lead agency/agencies.
- To develop and oversee processes designed to monitor implementation and compliance with commitments articulated in any foundation documents and Memoranda of Agreement as approved by and in accordance with direction from the community coalition.<sup>19</sup>

### **Programs & Services**

- To research, develop and confirm the service delivery model for the CSDS.
- To confirm the specific services, programs and practical supports that will be available through and/or provided on-site at the CSDS.
- To identify and approach community partners and stakeholders as necessary and as approved by the community coalition to:
  - assist with and/or contribute to the planning and development phases for the CSDS
  - participate as internal or external partners at the CSDS.
- To confirm internal and external partner organizations and stakeholders that will provide services, programs and supports on-site at the CSDS.

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<sup>18</sup>Foundation documents will include commitment and/or reference to cultural competence and an anti-racism/anti-oppression philosophy and approach when and where appropriate as determined by the community coalition.

<sup>19</sup>Including but not necessarily limited to conflict management and issue resolution processes.

- To liaise with the Site Development Work Group to ensure that the design of the CSDS is compatible with the service delivery model and provides adequate and appropriate space for the services and programs provided on-site.
- To prepare, coordinate and/or deliver presentations to partner agencies about the service delivery model, programs and services available, and/or their role within said model.

### **Research Partners & Initiatives**

- To identify, confirm and liaise with research partners as directed by the community coalition.
- To liaise with the Fund Development Work Group to identify, apply for and secure funding to support specific research initiatives, evaluation projects and related undertakings.
- To monitor the implementation of the service delivery model and to evaluate its efficacy with attention to community benefits, relationships between partners/stakeholders, and service delivery outcomes.

### **Survivors' Advisory Council**

- To liaise and serve as formal link between Survivors' Advisory Council (SAC) and the community coalition.
- To meet and/or work with the SAC as and when necessary to facilitate program development, implementation and evaluation.

### **Planning & Development**

- To develop, coordinate and oversee long term and strategic planning for the CSDS.

Date Developed: November 2008  
Date Approved: 03 December 2008

**KFACC: Collaborative Service Delivery Site Initiative  
SITE DEVELOPMENT WORK GROUP**

**Terms of Reference**

The Site Development Work Group is mandated, on behalf of the community coalition working to establish a collaborative service delivery site for victims of partner abuse and sexual violence, with the following responsibilities and tasks:

- Research and confirm site requirements for CSDS as identified by internal/on-site and external partner, as per building codes and other relevant legislation, and with attention to programs, services, supports and personnel on-site.
- Gather information about site requirements, use of space, and other relevant matters from collaborative sites currently in operation.
- Research, investigate and evaluate possible site options as directed by the community coalition, in cooperation with lead agency/agencies, and with attention to:
  - advantages and disadvantages of co-location with another organization vs an independent site;
  - advantages and disadvantages of using temporary, smaller location prior to moving to larger, more permanent location;
  - requirements and expectations for use of site/space, including implications for site partner if CSDS “outgrows” site;
  - code and accessibility requirements;
  - liability issues and insurance requirements; - and -
  - fit with stated purpose and mandate of CSDS.
- Compile and present information pertaining to site requirements and site options to the community coalition, lead agency/agencies, and funding sources as necessary throughout development process.
- Identify and respond to any deadlines or timeline pressures pertaining to site selection and applications for space as directed by the community coalition and/or in collaboration with the lead agency/agencies.
- Liaise and work cooperatively with the Fund Development Work Group to complete a cost analysis and develop a written Business Plan for the CSDS with attention to site requirements, site options, start up and operating costs, and funding options/models.
- Identify, liaise with, and make presentations to possible public and private “site partners” as directed by the community coalition and/or in cooperation with the lead agency/agencies.
- Prepare written reports about site requirements, site options, costs and other relevant information for submission to possible site partners, funding sources, community coalition and/or lead agency/agencies.

- Assist, facilitate and/or support contact with and negotiations between the community coalition, lead agency/agencies, site partner, and contractors, architects and other relevant professionals during site development as requested by lead agency/agencies.
- Recruit additional work group members as and if necessary.

Date Developed: October 2008  
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