

CHICAGO DEPARTMENT OF FAMILY AND SUPPORT SERVICES
 DIVISION ON DOMESTIC VIOLENCE
 SUPERVISED VISITATION AND SAFE EXCHANGE SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE
 2020 SCOPE OF SERVICES

SECTION ONE – GENERAL INFORMATION

DELEGATE INFORMATION	
Delegate Agency Name	
Project Name	
2020 Award Amount	
Agency Website Address	
2020 P.O. Number	
Executive Director Name	
Executive Director Address	
Executive Director Phone	
Executive Director Email	
Program Contact Name	
Program Contact Address	
Program Contact Phone	
Program Contact Email	
Fiscal Contact Name	
Fiscal Contact Phone	
Fiscal Contact Email	
Board of Directors Chairperson	
Address	
Phone	
Email	

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Hours during which domestic violence services are provided:							
Mon.		Tues.		Wed.		Thurs.	
Fri.		Sat.		Sun.			
Program Location/Site (List Site Location where services listed on the Scope of Services are performed)							
LOCATION							
Address							
Phone							
Ward where this site is located							
Community Area where this site is located							
Clients seen at this location come from the following wards:							
Clients seen at this location come from the following community areas:							
Program Service Hours:							
PO# (please indicate PO on each page)							

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Projected total number of enrolled clients in 2020 (new + carryover)	
List all languages in which domestic violence services are offered	
What specialized populations do you serve? (neighborhood, cultural group, etc.)	
PO# (please indicate PO on each page)	

SECTION TWO – DFSS PROGRAM DESCRIPTION

A. Program Goals

Supervised Visitation and Safe Exchange for Domestic Violence programs consider as their highest priority the safety of child(ren) and adult victims when providing visiting parents with opportunities to visit with child(ren) of whom they do not have custody. Supervised Visitation services protect the safety of the custodial parent and the child (ren) during a supervised visit between the visiting parent and the child (ren). Safe exchange services protect the safety of the custodial parent during the transfer of child (ren) to the visiting parent for an unsupervised visit. Safety is facilitated by structural elements of the facility such as separate parking lots, entrance and exits, and waiting rooms for custodial and visiting parents. Additionally, staggered arrival and departure times and security cameras are utilized to augment safety. Supervised Visitation and Safe Exchange services covered by this grant are court-ordered due to a history of intimate partner violence between the custodial and visiting parents.

B. Target Population

Any Chicago resident (and their children) who has been either the victim or perpetrator of intimate partner violence and has been court-ordered to utilize a supervised visitation and safe exchange program is eligible for services. At least one parent must be a resident of the City of Chicago. Delegates must be able to offer services to underserved populations including undocumented victims, those whose do not speak English, male victims, those who are disabled, and LGBTQIA victims.

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SECTION THREE – REQUIRED CORE PROGRAM ELEMENTS

Delegates must deliver, at a minimum, all of the following services:

- Respond to service requests within 48 hours
- Develop a visitation plan and facilitate court-ordered supervised visitation between visiting parent and child (ren).
- Monitor visits to assure appropriate interaction between visiting parent and child(ren)
- Facilitate safe exchanges of child (ren) from custodial parent to visiting parent, monitoring compliance with time allotted for visit, and facilitating the safe exchange of child (ren) back to custodial parent.
- Provide a secure location for a supervised visitation program and determine the ability to also conduct safe exchanges at the location
- Develop program policies and procedures for ongoing safety for the custodial parent and child(ren) from the visiting parent
- Develop security policies and protocols that meet the safety needs of the community and individuals using the facility including the use of security personnel and security devices.
- Develop criteria by which cases are rejected, suspended, or terminated if the safety needs of custodial parent, visiting parent, or child (ren) cannot be met.
- End visits, or do not allow exchanges to take place, if parents engage in behavior that compromises or endangers the emotional or physical safety of child (ren), the custodial parent, Applicant staff or other individuals. Prior to terminating a visit and if it is safe to do so, the Applicant staff can attempt to redirect or stop a parents behavior.
- In order to ensure the physical, auditory, and visual separation of custodial and visiting parents while on-site, facilities must have the following structural and safety elements in place as provided in the U.S. Department of Justice, Office on Violence Against Women “ Guiding Principles for Safe Havens: Supervised Visitation and Safe Exchange Grant Program”:
 - Use staggered arrival and departure times. DFSS recommends at least a 15 minute gap between the time visiting and custodial parents arrive as an added precaution. If the visiting parent is running late, DFSS recommends that the delegate call the custodial parent to delay their arrival time.
 - Provide separate entrance and exits for custodial and visiting parents to decrease the likelihood that parents will come into contact with one another while traveling to and from the center.
 - Allow custodial parents to wait on- or off-site, based on the safety needs, age and developmental stage of the visiting child (ren). The waiting area must be secure and not in a location accessible to the visiting parent. DFSS requires the waiting areas have doors that can be secured by the Applicant. DFSS recommends that the visiting parent should not be able to hear the custodial parent or determine where he/she is waiting in the facility as additional safety precaution.

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- Maintain security cameras. DFSS recommends that the security cameras are installed in strategic locations, including entrances for custodial and visiting parents, on elevators, stairwells and throughout the facility to ensure the safety of the child (ren), custodial parent and visiting parent.
- In circumstances where such features are not available, the Applicant must develop and implement enhanced procedures to ensure the safety of all clients, and that custodial and visiting parents do not come in contact with one another. If the Applicant plans to make facility improvements to improve the physical, auditory, and visual safety features of the facility during the contract term, that plan along with the enhanced safety plans and procedures must be submitted with the contract paperwork. DFSS may visit the proposed locations to examine the facility design to ensure the proposed facilities will decrease the opportunity for parents to come into contact with one another.
- Coordinate victim care within the agency and with other agencies to expand the range of services available to victim
- Provide referrals to survivors in need of services beyond SVSE, including, but not limited to housing, food, transportation, public benefits, job training, medical care, etc.
- Provide crisis counseling as needed.
- Provide explanation of victim rights and legal protections under the Illinois Domestic Violence Act as needed.
- Provide explanation of how to petition for an Order of Protection as needed.
- Through ongoing training, monitoring, and reporting, ensure that supervised visitation centers provide high quality enhanced SVSE services that adhere to OVW's Guiding Principles previously referenced
- Attend Local Consulting Committee meetings as and when they are scheduled
- Create a confidential process for victims to complete a DDV issued Client Outcome Survey (formerly the Evaluation of Services Survey), on paper and a minimum of 75% online. Copies of all paper surveys will be submitted to DDV.
- Provide community education workshops and/or outreach events to educate the general public and allied service providers about domestic violence and available services
- Provide referrals to the Illinois Domestic Violence Hotline
- Respond to inquiries from the Illinois Domestic Violence Hotline to update service profile
- Offer services to underserved populations including undocumented victims, those whose do not speak English, male victims, those who are disabled, and LGBTQ victims
- Maintain victim confidentiality
- Report changes in staff, staff hours, agency operating hours, agency and program location
- Ensure that all staff providing services listed in this Scope of Services have, at minimum:
 - earned a 40 Hour Domestic Violence training certificate from an accredited training provider; and
 - have experience providing Supervised Visitation and Safe Exchange services to victims, perpetrators, and children of intimate partner violence

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SECTION FOUR – PERFORMANCE MEASURES

To track progress towards achieving the stated program goals in Section Two and to assess success of the program, DFSS will monitor a set of performance indicators that may include, but are not limited to:

- Percentage of scheduled supervised visits that are attended by custodial parent, visiting parent, and child(ren)
- Percentage of scheduled safe exchanges that are attended by custodial parent, visiting parent, and child(ren)
- Percentage of adult clients who complete a Client Outcome Survey
- Percentage of children had a positive visitation experience because of the services
- Percentage of clients who feel supported by program staff in making their own decisions
- Percentage of clients who feel safe from abuse while at the center

Data Reporting

Delegate agency will be expected to collect and share data with DFSS according to the format, frequency, and submission protocol specified by DFSS. The parties recognize that reliable and relevant data is necessary to create a common understanding of performance trends, ensure compliance, evaluate program results and performance, and drive program improvements and policy decisions. As such, DFSS reserves the right to request/collect other key data and metrics from delegate agencies including client-level demographic, performance, and service data on a format specified by DFSS.

Delegate agency agrees to the following reporting requirements:

- Quarterly Reports detailing services provided. Format will be provided.
- Monthly Meetings with DFSS staff, if required.
- Narratives in the quarterly report that may highlight a particular case or services provided to victims of intimate partner violence that demonstrates value in the ongoing services or a gap in services.

Uses of Data

DFSS reserves the right to use data related to delegate agency performance, including but not limited to data submitted by the delegate agency for the following:

- a) In periodic meetings described below to review program performance and develop strategies to improve program quality throughout the term of the contract; and
- b) To guide DFSS program development, evaluate programs, inform policies, and inform contract decisions such as payment rates, contract extensions or renewals, and evaluation of

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proposals by the delegate agency in response to any future solicitations by DFSS for goods or services.

Meetings

Regular reviews of and conversations around program performances, program results and program data, particularly related to the goals outlined in this agreement, will allow DFSS and the delegate agency to employ real-time information to track performance, identify good practices, and swiftly, collaboratively, and effectively address any challenges experienced by the target population.

At such meetings, the data will be reviewed to:

- a) Monitor progress, highlight accomplishments, and identify concerns;
- b) Collaboratively design and implement operational changes to continuously improve processes and outcomes; and
- c) Develop strategies to broader system changes to improve service delivery and coordination between services.

Meetings shall include at a minimum the Deputy Commissioner for Domestic Violence, or designee, and the delegate agency's executive director, or designee. Delegate agency or DFSS may be represented by additional representatives as each party deems appropriate. DFSS may request the attendance of additional parties as it deems appropriate. Representatives from the delegate agency will attend all meetings as requested by DFSS.

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SECTION FIVE –PLANNED ACTIVITIES

Please complete the highlighted cells to indicate the program’s planned activities for the contract period.

A.	ENROLL CLIENTS via starting an intake or needs assessment form. Form must be signed and dated by client and worker to verify client enrollment.	Q1	Q2	Q3	Q4	Total
1.	Number of custodial parents carried over from Q4 2019 to Q1 2020					
2.	Number of visiting parents carried over from Q4 2019 to Q1 2020					
3.	Number of children carried over from Q4 2019 to Q1 2020					
4.	Number of newly enrolled custodial parents in 2020					
5.	Number of newly enrolled visiting parents in 2020					
6.	Number of newly enrolled children in 2020					
7.	Total number of clients served in 2020					
8.	Total number of visitation units served in 2020					
PERFORMANCE MEASURE						
Achieved total visitation units will equal at least 90% of total predicted enrollment						
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B.	PROVIDE A SAFE AND CLEAN ENVIRONMENT IN WHICH TRAINED STAFF SUPERVISE COURT ORDERED VISITS AND SAFE EXCHANGES OF CHILDREN BETWEEN CUSTODIAL AND VISITING PARENTS	Q1	Q2	Q3	Q4	Total
1.	Number of scheduled supervised visits between visiting parent and child					
2.	Number of supervised visits attended by custodial parent, visiting parent, and child(ren)					
3.	Number of scheduled safe exchanges between visiting parent and child					
4.	Number of safe exchanges attended by custodial parent, visiting parent, and child(ren)					
PERFORMANCE MEASURE						
80% of scheduled supervised visits will be attended by custodial parent, visiting parent, and child (ren)						
PERFORMANCE MEASURE						
80% of scheduled safe exchanges will be attended by custodial parent, visiting parent, and child (ren)						
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C.	CLIENT OUTCOMES OF SURVEYS (adult clients only)	Q1	Q2	Q3	Q4	Total
1.	a. Number of adult clients completing the Client paper Outcome Survey					
	b. Number of adult clients completing the Client online Survey					
2.	Number of surveys that indicate the client strongly or somewhat agreed with A.2 of the survey, indicating that her children had a positive visitation experience because of the services					
3.	Number of surveys that indicate the client strongly or somewhat agreed with B.2 of the survey, indicating that staff was supportive of her decision making					
4.	Number of surveys that indicate the client strongly or somewhat agreed with C.2 of the survey, indicating that the client felt safer from abuse while at the center.					
PERFORMANCE MEASURE 50% of clients will complete an Outcome of Services Survey. 75% of these will complete a survey online.						
PERFORMANCE MEASURE 80% of clients taking the Outcome of Services Survey will indicate that they strongly or somewhat agree with A.2 of the survey						
PERFORMANCE MEASURE 80% of clients taking the Outcome of Services Survey will indicate that they strongly or somewhat agree with B.2 of the survey						
PERFORMANCE MEASURE 80% of clients taking the Outcome of Services Survey will indicate that they strongly or somewhat agree with C.2 of the survey						
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D.	ENROL PROVIDE COMMUNITY EDUCATION / AWARENESS WORKSHOPS ON DOMESTIC VIOLENCE presented by program staff	Q1	Q2	Q3	Q4	Total
1.	Number of community education / awareness workshops on domestic violence presented by delegates					
2.	Number of total expected participants					
PO# (please indicate PO on each page)						

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Please review the **Required Core Program Elements in Section 3** and **Performance Measures in Section 4**. Please describe activities to be performed to address the needs of the target population and achieve Performance Measures, focusing on activities not captured in the listed Core Elements.

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PO# (please indicate PO on each page)	
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SECTION SIX –PROGRAM FUNDING

Please list all funding sources that comprise the other share listed in your program budget. Total of this chart should equal the other share listed in the program budget.	
\$ AMOUNT	FUNDING SOURCE
\$	TOTAL
PO# (please indicate PO on each page)	

SECTION SEVEN –REQUIRED ADDITIONAL DOCUMENTATION

The Division on Domestic Violence requires the following documentation to be submitted to meera.raja@cityofchicago.org within the first 30 days of the contract start date:

1. Current **job description** for every staff person providing services to victims of domestic violence in this program. A job description should be provided for every staff person providing services to victims of domestic violence in this program, regardless of whether this grant pays the staff’s salary. Job descriptions should follow the format of the job description posted along with other contract documents at: www.cityofchicago.org/fsscontracts
2. Current **resume** for every staff person providing services to victims of domestic violence in this program. A resumes should be provided for every staff person providing services to victims of domestic violence in this program, regardless of whether this grant pays the staff’s salary.
3. **Proof of 40 hour domestic violence training** from an accredited training provider for every staff person providing services to victims of domestic violence in this program. Proof of training should be provided for every staff person providing services to victims of domestic violence in this program, regardless of whether this grant pays the staff’s

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salary. Proof of training is required regardless of staff’s other professional training, certificates, and education.

Failure to submit these documents will result in an audit finding against the program.

SECTION EIGHT –DDV DELEGATE GUIDEBOOK

The Division on Domestic Violence has created a guidebook to provide additional instruction and information on program requirements. The 2020 guide is available at: www.cityofchicago.org/fsscontracts

Please review this guide as it is part of your contract.

SECTION NINE –SUBMITTAL AND APPROVAL

CERTIFICATIONS:

By checking this box, your agency certifies that all information provided in the Scope of Services is correct and that the agency will comply with the requirements listed in the Scope of Services.

SUBMITTAL AND APPROVAL

Applicant signature in blue:	
Name typed:	
Title:	
Date of signature:	
DDV staff signature:	
Title:	
Date approved:	
PO# (please indicate PO on each page)	