3Arizona Developmental Disabilities Planning Council Grant: Sexual Violence Against Individuals with Intellectual and Developmental Disabilities

Sexual violence is a pervasive public health issue that disproportionately affects women, racial and ethnic minorities, and individuals with intellectual disabilities (Barger, Wacker, Macy, & Parish, 2009; Black et al., 2011). Current data by the Center for Disease Control (CDC) indicate that about one out of three women experience some form of sexual violence during their lifetime—about twice the rate of men (Smith et al., 2017). Individuals with intellectual and developmental disabilities (I/DD) are at an even greater risk to become victims of sexual violence than individuals without disabilities. Bureau of Justice dataⁱ indicate that the rate of rape and sexual assault against individuals with intellectual disabilities is more than seven times the rate of individuals without disabilities. Among women with intellectual disabilities the rate increases to about 12 times the rate of women without intellectual disabilities. Behind these numbers are children and adults who, as subsequent survivors of sexual violence, experience a wide range of long-term physiological and/or psychological health problems including symptoms of depression, anxiety, social isolation, and suicidal ideation (Murphy et al., 2007; Sequeirea et al., 2003). The financial consequences of sexual violence further affect the public health system more than any other crime resulting in an estimated population economic burden of nearly \$3.1 trillion for rape alone (Peterson, DeGue, Florence, & Lokey, 2017).

The severity, pervasiveness, and lasting consequences of sexual violence among individuals with I/DD raise several questions about the current state of the nearly 110,000 individuals with I/DD estimated to live in the state of Arizona (Braddock, Hemp, Tanis, Wu, & Haffer, 2017). As such, a comprehensive current state analysis is needed that determines the extent to which the state of Arizona (a) detects; (b) reports; (c) tracks data; (d) monitors; (e) trains; and (f) prevents sexual violence/abuse among individuals with I/DD. Such an analysis must include a process map that delineates how individuals with I/DD are tracked through public agencies such as the Department of Economic Security (DES), its Division of Developmental Disabilities (DDD), the Department of Child Safety (DCS), the Arizona Department of Education (ADE), as well as a records review that examines their respective proactive and reactive policies and procedures related to prevention and reporting sexual violence/abuse. Given that two common living arrangements of individuals with I/DD in Arizona are family caregivers and supervised residential settings (Braddock et al., 2017), a comprehensive current state analysis must also include both types of providers and the lived experience of individuals within these settings. The process map for the current state must be subjected to a failure mode analysis that highlights where gaps or breakdowns in detection, reporting, tracking, monitoring, training, and prevention occur. Finally, the current state should be juxtaposed with a **future state** based on best practices present in other state systems such as Pennsylvania, Massachusetts, and New Jersey. The current and future state comparison must yield specific, actionable recommendations that can inform regulatory and legislative changes. The data underlying this report must be both qualitative and quantitative in nature and based on extant as well as original data. As such, a mixed methods research design is recommended, as it includes the collection and analysis of qualitative and quantitative data via literature and records reviews, surveys, focus groups, and one-on-one interviews.

To this end, we have formed a **researcher-practitioner partnership** between two community organizations with established community ties in the areas of sexual violence/abuse

prevention and support for survivors of sexual violence/abuse (Jessica Nicely from Winged Hope Family Advocacy Foundation and Jenny Mullins from Advocacy31Nine), a nationally recognized disability researcher (Dr. Alexander Kurz from Arizona State University), and an expert in results-based facilitation, process improvement, impact analysis, and programmatic redesign (Dr. Meghan Velasquez). Collectively, the team has the technical expertise and deep community relationships to successfully complete a literature review of best practices in state systems, review records of existing legislation, policies, procedures, and agency data, as well as conduct surveys, interviews, and focus groups.

1. Describe the proposed research design, including methodology, proposed research questions the project seeks to answer, and describe the sample population.

For purposes of this grant, we will use a **concurrent triangulation design**, which represents a mixed methods research design that collects both quantitative and qualitative data concurrently and then compares the two databases to determine convergence, differences, or some combination thereof (see Figure 1).

QUAN

QUAL

QUAL

QUAL

Data Collection

QUAN

Data Results Compared

QUAL

Data Analysis

Data Analysis

Figure 1. Concurrent triangulation design (Creswell, 2009).

The design uses separate quantitative and qualitative methods as a means to offset the weakness inherent within one method with the strengths of the other. To accomplish the aforementioned tasks (i.e., current state, process map, future state, failure mode analysis) and related outcome products (i.e., literature review, records review, final report), several data collection methods are employed for both tracks. The qualitative track is designed to establish the first-hand, personal experiences, knowledge, and perspectives of individuals with I/DD and their families, as well as DDD-funded or Regional Behavioral Health Authority (RHBA)-funded group home providers through focus groups and one-one-interviews related to sexual violence/abuse identification, reporting, training, and prevention. The qualitative track further includes focus groups and oneone-interviews with agency representatives (i.e., DES, DDD, DCS, ADE) including other DDD stakeholders (e.g., Arc of Arizona, Guthrie), law enforcement (e.g., City of Maricopa Police Department), and health care providers (e.g., Phoenix Children's Hospital, Penal County Medical Forensic Services). Please find Letters of Support from select representatives and providers in Appendix A. The quantitative track is designed to gather representative, empirical data through a psychometrically reliable survey from all DDD- and RHBA-funded group home providers in the state of Arizona. To this end, an electronic survey will be developed and emailed to all DDDand RHBA-funded providers in the state of Arizona. All participants of the qualitative track will also receive an opportunity to participate in the survey. Dr. Kurz has conducted numerous focus groups and cognitive labs with students with disabilities in several federally funded research

grants and published their results in peer-reviewed journals and book chapters. He further has extensive experience developing survey instruments and will apply his expertise to develop survey constructs and determine the survey's reliability. The ADDPC will retain its intellectual property and will be free to re-administer the survey for longitudinal data collection. Both tracks are informed by the information gathered through the literature and records review. Dr. Kurz frequently conducts literature reviews and is well versed in coding schemes, meta-analytic strategies, and overall access to relevant literature bases. Appendix A details support from key agencies, which will provide policies and procedures related to (a) detection; (b) reporting; (c) tracking; (d) monitoring; (e) training; and (f) prevention of sexual violence/abuse among children and adults with I/DD.

For purposes of the final report, quantitative data and are examined in light of the rich, qualitative descriptions to highlight convergence, discrepancies, and additional issues missed by the survey constructs. As such, a comprehensive picture is iteratively assembled that (a) highlights **gaps in the current system** of detection, reporting, data tracking, monitoring, training, and prevention efforts; and (b) offers **recommendations for improvement** based on best practices. The table below highlights the methods used by subgroup. Please note additional support by key stakeholders to support our efforts to recruit convenience samples of n = 10 or higher (see Appendix A).

Table 1. Methods by sample population subgroup.

| | Focus Group | 1:1 Interview | Survey | Records Review |
|--|----------------|------------------|--------|-------------------|
| DES | X | | | X |
| DDD | X | X | | X |
| DCS | X | X | | X |
| ADE | X | X | | X |
| Families of Individuals with I/DD | X | Sample* | X | |
| Individuals with I/DD | X | X | X | |
| DDD/RHBA-funded providers | X | X | X | Sample* |
| Law enforcement | X | Sample* | X | |
| Health care providers | X | Sample* | X | |
| Other key stakeholders (e.g., Arc of Arizona, Guthrie) | X | Sample* | | |

^{*}Represents a convenience sample.

The Gantt chart listed under #4 details all key activities by duration and sequence. As such, we will be able to address all research questions recommended by the ADDPC. The research questions are listed below. In addition, we reserve the right to add up to 6 additional research questions informed by the best practice literature review. As such, we anticipate a final set of 15 research questions to be reviewed and approved by the ADDPC.

- 1. What is the process for a person with I/DD to report sexual violence/abuse in a
 - a. DDD-funded or RHBA-funded group home;
 - b. Family home;
 - c. Adult developmental home;
 - d. At school;

- e. Day treatment program for adults (DTA)?
- 2. How is the person and family made aware of this process?
- 3. What actions are taken if the perpetrator is the guardian or it's another resident with I/DD?
- 4. When are cases substantiated, and how?
- 5. What are the outcomes of these reports to the people and organization (if applicable) involved?
- 6. What are current staffing, regulatory, or legislative requirements, barriers, and successes to detection, reporting, tracking and monitoring, and prevention efforts among state agencies and organizations regarding the I/DD population?
- 7. How are organizations and state agencies currently working together to address sexual violence/abuse detection, reporting, tracking, monitoring, and prevention among the population with I/DD? What's working in these relationships, and what are the gaps?
- 8. What are individuals' with I/DD, families', providers', and DDD support coordinator's experiences, knowledge, and perspectives on sexual violence/abuse identification, reporting, training, and prevention?
- 9. What are overall recommendations to ensure that Arizona works towards elimination of sexual violence/abuse of people with I/DD? Share best practices.
- 2. Briefly describe the capacity for the Applicant to successfully complete the methodology of this project. Provide any previous experience with the activities requested in this scope of work, and a web link to the final product(s), if available.

Impact Analytica is a division of Improvement Assurance Group, an Arizona-registered Limited Liability Company. Impact Analytica specializes in continuous improvement consulting for non-profit, government and educational agencies, program evaluation, and research. Our senior lead consultants, Dr. Meghan Velasquez and Dr. Alexander Kurz, have worked successfully with a diverse set of clients including Valley of the Sun United Way, Vello, Emergenetics International, Pearson, StriveTogether, Smarter Balanced Assessment Consortium, Tonto Creek Camp, Digital Promise, Maricopa County Community Colleges District, Thriving Together, and the Office of Catholic Schools in the Archdiocese of Denver and Detroit. Drs. Kurz and Velasquez will co-lead the research team working on this project. Dr. Kurz brings an extensive depth of experience as a disability researcher with specialized expertise in special education, research methods, data analytics, statistics, and data visualization. He has successfully managed large-scale, multi-year grant efforts for the U.S. Department of Education (DOE) and led several researcher-practitioner partnerships including for the Institute for Educational Sciences (IES). Dr. Velasquez is a skilled a mixed methods researcher and quality improvement consultant who specializes in results-based facilitation, process improvement, and programmatic redesign. She has further completed several process improvement projects that have included process mapping and failure mode analysis for a large, community college client.

Winged Hope Family Advocacy Center and Advocacy 31nine are joining Impact Analytica in this work. Ms. Jessica Nicely of Winged Hope Family Advocacy Center and Ms. Jenny Mullins of Advocacy 31nine will join the research team as content experts. Both Ms. Nicely and Ms. Mullins bring years of experience as victim advocates with specialized training in supporting individuals with I/DD and victims of sexual violence.

Formed specifically to address this scope of work, the researcher-practitioner partnership between Impact Analytica, Winged Hope and Advocacy31nine brings together complementary knowledge, skills, and relationships required to fully address the objectives detailed in this grant. The aforementioned individuals (now described as the research team) hold specialized training in mixed methods research, special education, project management, continuous improvement, and victim support. All of these skills will be critical to appropriately generate original data by conducting focus groups and interviews with individuals with I/DD and their families, residential care providers, and state agencies. In addition, the research team brings a long history of community relationships and credibility that will support them in engaging a broad range of individuals who may otherwise be difficult to reach. A selection of work examples is described below. Please refer to the Appendices for the actual documents.

Vello Impact Report: http://www.vello.org/

Appendix B presents the full Impact Report for Vello, a virtual tutoring program. The example is included because it demonstrates our ability to develop professional, production-level reports with infographics. This capability will be critical for developing the final and condensed report, due to their high visibility. As such, the ADDPC needs to ensure that the reports can be published and distributed with credibility and confidence. Dr. Kurz is further a renowned expert on accessibility. He has led workshops on making content and assessments accessible for students with disabilities. His qualifications will ensure that the report will be readable and accessible to individuals with disabilities.

Peer-reviewed Article: https://journals.sagepub.com/doi/10.1177/001440291007700103

This article published in the top special education journal—*Exceptional Children*—is featured because Dr. Kurz and his colleagues used cognitive labs and focus groups to analyze student perceptions of item modifications and their effects on accessibility. The expertise to conduct focus groups, especially with individuals with disabilities, is critical to executing several key tasks for this grant.

Dr. Kurz has published over 40 peer-reviewed journal articles and book chapters in some of the top special education and assessment journals. He has further won over \$45,000,000 in external awards including the DOE and IES. Please refer to his CV for additional details. His total academic record underscores his ability to deliver the key products for purposes of this grant.

3. Briefly provide an overview of the name(s) of the key staff who would be assigned to this project, their educational background, length of time with organization, current job title, and previous experience with this type of research. Attach current resumes or CVs of each team member involved. Resumes/CVs are excluded from the 20-page maximum.

The research team consists of four key individuals, representing three unique agencies in our partnership. Drs. Alexander Kurz and Meghan Velasquez of Impact Analytica will serve as the project leads for this work and will serve on the research team with Jessica Nicely of Winged Hope Family Advocacy Foundation and Jenny Mullins of Advocacy31nine. Together, the team will address all grant objectives and produce the deliverables described under #4.

Alexander Kurz, PhD, BCBA-D, Senior Lead Consultant, earned his doctorate in Special Education from Vanderbilt University and currently works in the School for Social and Family Dynamics at Arizona State University (https://isearch.asu.edu/profile/1789188). He has spent over two decades serving students with disabilities including as a special education teacher, behavior analyst, and researcher. Dr. Kurz has led federal research grants on students with disabilities for the DOE including IES and the Office of Special Education Programs (OSEP). He has published over 40 peer-reviewed journal articles and book chapters on students with disabilities including two edited volumes on accessibility and over 20 national and international conference presentations including for the American Educational Research Association (AERA) and the National Council on Measurement in Education (NCME). At Vanderbilt, Dr. Kurz served as the Dunn Family Scholar in Educational and Psychological Assessment. Currently, he serves as Director of the Arizona Practitioner-Researcher Educational Partnership (AzPREP) Office. He has participated in over 10 externally funded research projects over the last 8 years, serving in a variety of roles including co-principal investigator, principal investigator, and project director. To date, the total amount of external funds awarded exceeds 45 million dollars. He has acquired substantial research and grant management expertise with a specific focus on research partnerships. As principal investigator and project director, he successfully managed a cross-institutional partnership between the Arizona Department of Education and ASU via an IES-funded Researcher-Practitioner Partnerships in Education Research grant. In his role as Director for Data and Research for Valley of the Sun United Way's collective impact initiative (Thriving Together), he has further conducted numerous improvement science projects in local districts and schools. Dr. Kurz has the technical and psychometric expertise and content **knowledge** to conduct rigorous literature and record reviews and develop accessible research report. See CV for more details. Length at organization: 2 years

Meghan Kenney Velasquez, EdD, Senior Consultant, earned her doctorate in Educational Leadership and Supervision from Arizona State University. She is an expert group facilitator with extensive training in results-based leadership (RBL) and results-based facilitation (RBF). Dr. Velasquez has received a Lean Six Sigma Green Belt certification and completed **Design Thinking** training. Using these skills, Dr. Velasquez has led several continuous improvement projects that leveraged facilitated data experiences to help groups make meaning of complex data sets and develop organizational solutions that increase accessibility and transparency, as well as center end user satisfaction in institutional decisionmaking. Her expertise will be needed to facilitate a user-centered design process and productive meetings between ADDPC staff and project consultants. This facilitation will ensure that the project maintains appropriate schedule and compliance. Dr. Velasquez has further managed several large-scale, multi-year projects including a major school reform project for which she was named Administrator of the Year. In that work, Dr. Velasquez was responsible for the supervision and improvement of school-based programs for children and teens with autism, generalized learning disabilities, cognitive and physical impairments. She is well versed in Arizona accessibility standards and has over ten years of experience supporting children and families with varied abilities in better understanding their rights and accessing services. See CV for more details. Length at organization: 4 years

Jessica Nicely, Senior Consultant, has been a passionate advocate for child abuse prevention, awareness and treatment for the past 23 years. A survivor of child abuse, Jessica founded her own 501c3, Winged Hope Family Advocacy Foundation in 2013. Since then, Winged Hope has directly served or trained over 47,000 people around the state of Arizona. Winged Hope was the Recipient of the Arizona Attorney General's 2018 Arizona Crime Victims' Rights Week Award for Service Coordination. Jessica has also been a spokesperson for Prevent Child Abuse America's Arizona Chapter and is currently a speaker for the Arizona ACE (Adverse Childhood Experiences) Consortium. For eight years, Jessica volunteered on an Arizona Foster Care Review Board and she is a graduate of the FBI Citizen's Academy. Jessica regularly serves as an expert on Child Abuse, Sexual Assault, Domestic Violence, and Suicide at panel discussions and trainings throughout the state of Arizona. A graduate of Arizona State University, Jessica is also a published author and her memoir All My Friends Are Zeros: My Secret to Overcoming Adverse Childhood Experiences is available at all online booksellers. A former Miss Arizona USA, Jessica had the privilege of representing the state of Arizona at the Miss USA Pageant. Jessica is a current candidate to receive the Beth McDonald Woman of the Year Award for 2019. See CV for more details. Length at organization: 6 years

Jenny Mullins, Senior Consultant, earned her Bachelor of Science in Elementary Education from Grand Canyon University. She spent the first 10 years of her career as a classroom teacher. She has also worked with individuals with Intellectual or Developmental Disabilities on and off for 15 years and has a daughter who is on the autism spectrum. Since 2016, she has been working as a victim advocate with Winged Hope Family Advocacy Center. She specializes in providing support for individuals with developmental disabilities who have been the victim of sexual violence. She is the co-founder and executive director of Advocacy31nine, an organization that provides services and educational support for individuals in foster care who have developmental disabilities. Many of these individuals have also experienced sexual violence. Jenny uses her background as an educator and her experience as a victim advocate to help these students find the support and healing they need. She is trusted by many organizations that serve individuals with intellectual and developmental disabilities such as the Autism Society of Arizona, Arizona Autism United, The Arc of Tempe, AZ Assist, the Division of Developmental Disabilities, the Center for Disability Law, and the Arizona Department of Education. See CV for more details. Length at organization: 2 years

As a division of Improvement Assurance Group and a close collaborator with Arizona State University, Impact Analytica has access to a broad range of talent in mixed methods research, statistical analysis, facilitation, and continuous improvement. For this project, we have identified four key project roles:

- <u>Senior Lead Researcher:</u> This role will be filled by Dr. Kurz whose expertise in research methods, accessibility, and focus groups will led on the development of sampling methods and quantitative data collection. He will also supervise all focus groups.
- <u>Senior Researcher:</u> This role will be filled by Dr. Velasquez whose expertise in mixed qualitative research and continuous improvement will focus on research design implementation, qualitative data collection, process improvement deliverables, and project management.
- <u>Senior Consultant:</u> This role will be filled by Ms. Jessica Nicely and Ms. Jenny Mullins. Ms. Nicely and Ms. Mullins will leverage their community relationships to ensure access

- to key stakeholders for data collection and their expertise in supporting victims of sexual abuse to refine data collection methods and ensure focus group and interview experiences are safe and productive for victims, individuals with I/DD and their families and providers.
- <u>Supervising Therapist:</u> This role will be filled by Ms. Angela Douglas, a licensed clinical social worker with over 15 years of experience. In this role, Ms. Douglas will provide therapeutic support to focus groups participants on an as needed basis. Recognizing the volume of work associated with this scope, it is possible that Ms. Douglas may not be available for all of the focus groups and 1:1 interviews. In these cases, Ms. Douglas will work to identify an appropriately trained and certified therapist to provide on call services in her absence.

For each of these roles, Impact Analytica has identified a 'backup' member of our broader team who has the requisite knowledge, skills and expertise to successfully execute the key responsibilities of the role. Further references or information on these team members is available upon request.

4. Provide a timeline with key tasks.

The following scope of work (SOW) is designed to (a) determine how the state of Arizona detects, reports, tracks data, monitors, trains and prevents sexual violence/abuse among children and adults with I/DD, (b) determine what types of targeted training are needed and for which audiences to prevent, recognize and report sexual violence/abuse; (c) raise awareness of this issue among local, state and national audiences, and (d) motivate regulatory and legislative changes. To do this, the research team will:

- Conduct a **comprehensive current state analysis** of existing policies and practices related to detecting, reporting, monitoring, training and preventing sexual abuse of individuals with I/DD;
- Conduct a **literature and best practice review** to determine how Arizona compares to other states:
- Generate a **final report**, including an executive summary, that highlights gaps in the current system of detection, reporting, data tracking, monitoring, training, and prevention efforts:
- Include in the final report areas of relative strength in current practices and **recommendations for improvement** based on best practices;
- Produce a **condensed report in plain language with visual graphics** that makes findings and recommendations comprehensible to a diverse audience.

The work will be organized into three phases, each with unique deliverables, key tasks and timelines. Each phase is explained in greater detail below and the specific activities are visualized in the Gantt chart on page 11-12.

Phase 1– Level Setting

Phase 1 serves to establish a strong foundation for the work and to build a connection between the research team and the ADDPC. In this session we will:

- Conduct a **facilitated session** that builds connections between the team and ADDPC staff; reviews information necessary to finalize data collection schedule and sample, and confirms/revises the established timeline laid out in the Gantt chart.
- Review **key contacts and communication channels** between the research team and ADDPC. Establish a series of **monthly check-in meetings** to ensure effective, ongoing communication between the research team and ADDPC. Check-in meetings will occur once per month via video conference and are expected to take between 30 and 60 minutes per session.

Phase 2 – Data Collection

Phase 2 focuses on collecting original data and conducting review of existing literature and extant data. This work will be conducted via two, concurrent tracks, with a third track situated in advance of the concurrent tracks. These tracks are quantitative and qualitative data collection (occurring concurrently) and literature and best practice review.

- Phase 2A Literature and Best Practice Review: The research team will conduct a comprehensive literature and best practice review to discern best practices associated with (a) detecting; (b) reporting; (c) tracking data; (d) monitoring; (e) training; and (f) preventing sexual violence/abuse among individuals with I/DD. This review will include a thorough examination of empirical and peer-reviewed literature related to sexual abuse against individuals with I/DD as well as a review of policies and procedures in states known to be leading the way (e.g. Massachusetts) in best practices for prevention, reporting, tracking and training related to sexual abuse against individuals with I/DD. Findings from this phase of work will directly inform the recommendations posed in the final report.
- Phase 2B Quantitative Track: The quantitative data collection track will occur concurrently to the qualitative data collection track. This track will yield original data and a survey instrument that ADDPC can use to pursue ongoing monitoring following the completion of this project. As the primary data collection mechanism for this track, a survey will be developed to measure all aspects of the grant objectives.
- Phase 2B Qualitative Track: The qualitative data collection track aims to collect both original data through interviews and focus groups as well as extant data in the form of policy and procedure review. This data collection track seeks to achieve two specific aims:
 - 1. Create a detailed process map that documents the intended current state and failure modes associated with grant objectives. This will be accomplished through a policy/procedure and records review in which the research team will review documented policies and records of reported abuse to discern what is meant to occur and what has actually occurred related to detecting, reporting, tracking and monitoring sexual abuse against individuals with I/DD. The process map of the intended current state of these practices will then be used in focus groups to determine the failure modes of the existing process. Agencies to be included in the policy/procedure review include DES, DDD, DCS and ADE.
 - **2. Discern the actual current state** for key stakeholders by understanding their lived experience. Focus groups and individual interviews will be conducted with each of the four major state agencies (DCS, DES, DDD, ADE) as well as with a broad cross-section of individuals with I/DD and their families, residential

providers and other key stakeholders (e.g.: educators, law enforcement officers, etc.). Focus groups will center on gaining a deep and nuanced understanding of the lived experience of individuals with I/DD, their families, residential providers and state agency representatives.

Phase 3 – Analysis & Reporting

The analysis and reporting phase brings all the work together to detail research findings and make recommendations for improvement. This phase of work will yield three deliverables:

- Raw data files containing all survey data.
- Full report with executive summary.
- Condensed report with visuals. The condensed report will be created using a multistep process that includes engaging an expert reviewer to support adaptation of the report to make it accessible to audience with diverse abilities. The expert reviewer will be provided with a first draft of the condensed report that he/she will review and provide feedback on. This feedback will inform revisions to the document that make it more accessible and comprehensible. The expert reviewer will be selected by the research team and approved by ADDPC.

The full SOW will span a total of 12 months. A detailed breakdown of the activities and their respective timelines is included in the Gantt chart.

The research team is committed to ensuring client satisfaction and on-time completion of project deliverables. As stewards of client resources, we believe that proactive work is essential to effectively managing projects and safeguarding time to produce all deliverables. The team will conduct weekly meetings that are geared toward this style of proactive management. These meetings will ensure that:

- All project staff have current, cross functional information;
- All stakeholder engagements are scheduled in advance and well organized;
- Documentation of project progress is well maintained and up to date;
- ADDPC is keep abreast of project developments and progress.

| Gantt chart | July Aug Sept Oct Nov Dec Jan Feb Mar Apr May June '19 '19 '19 '19 '19 '20 '20 '20 '20 '20 | July ,20 |
|---|---|-------------|
| Internal research and design meetings (bi-weekly) | X X X X X X X X X X | × |
| Monthly check in with ADDPC | X X | × |
| Literature and Best Practice Review | | |
| Records Review | | |
| Initial meeting with ADDPC to level set expectations | | |
| Review of extent data provided by ADDPC | | |
| Finalize and obtain ADDPC approval of | | |
| data collection schedule and key informants for 1-1 interviews | | |
| Schedule focus groups and individual | | |
| interviews | | |
| Quantitative Data Collection: Survey | | |
| Development | | |
| Quantitative Data Collection: Survey | | |
| distribution Survey window onen for narticinant | | |
| completion | | |
| Quantitative Data Collection: Close | | |
| survey window | | |
| Qualitative Data Collection: Focus | | |
| Groups | | |
| Qualitative Data Collection: Individual Interviews with Individuals with I/DD and | p ₁ | |
| their Families | | - |
| | | |

* Focus Groups shall include but not be limited to state agencies (DDD, DCS, ADE, DES), individuals with I/DD and their families, & residential care providers.

| Interviews with State Agency Representatives | |
|--|--|
| Analysis and Report Development | |
| Presentation of initial reports and research-based best practices to ADDPC | |
| Expert review of condensed report to ensure accessibility | |
| Final report revisions | |
| Final presentation meeting with ADDPC | |