



Cure Violence Global Virtual Assessment Visit

The Cure Violence Global (CVG) Training & Technical Assistance Team conducts assessment visits with all interested communities that have demonstrated necessary buy-in from essential stakeholders and leadership. While the assessment visit is typically a 3-5 day in-person process, due to Covid 19, CVG is working to adapt the process virtually. Typically, an Assessment Visit includes a Cure Violence 101 Workshop with representation from key entities and/or government agencies and community-based organizations, data review meetings, community partner meetings, meetings with potential workers, and community engagement. This process familiarizes stakeholders and community organizations with the Cure Violence Model and focuses on determining potential target areas, partnerships, workers, and program structures for future implementation. This document provides an overview of the options available in adapting the process virtually. As with the typical in person Assessment Visit, following the virtual “visit”, CVG will provide a detailed report that includes:

- Data Analysis
 - Potential target area(s) review
 - Level of violence (rates, groups, locations, underlying factors)
- Review of Meetings/Presentations
 - Key findings that could positively or negatively impact pre-implementation/implementation
 - Recommendations re: role(s) of key stakeholders
 - Possible adaptations (school, hospital)
- Next Steps
 - Opportunities for Implementation
 - Challenges to Implementation
 - Recommendations
 - Level of intervention (target area, multiple epicenters, citywide)
 - Tentative staffing patterns
 - ❖ Recommendations for recruitment planning
 - Cost

Assessment Visit Agenda Item Descriptions

Cure Violence 101 Workshops

Description: Cure Violence 101 Workshops are designed to provide a wide range of audiences with a comprehensive introduction to why violence is a health issue and the Cure Violence Model. The presentation includes the following modules 1) violence as a health issue, 2) overview of the health approach, 3) Cure Violence methodology, 4) Cure Violence model, 5) roles and responsibilities, and 6) outcomes and results. This workshop is typically delivered multiple times throughout an Assessment Visit in order to engage all necessary audiences (community members, city agency representatives, community-based organizations, etc.) and give them the opportunity to discuss any questions or concerns with the CVG staff.

Audience: All

Format: Presentation with slides, video, and Q+A

Objectives:

- Provide background and orientation to as many individuals and institutions as possible
- Answer general questions from audience and address any concerns
- Gain buy-in from key stakeholders, residents, and organizations within communities most impacted by violence

Key considerations:

- Designed for all audiences and can be delivered multiple times, to multiple audiences (examples: CV 101 for CBOs, CV 101 for community members, CV 101 for city agencies/organizations, etc.)
- Workshops can also combine audiences, if that is deemed appropriate or it can be targeted to specific audiences (examples: CV 101 for CBOs, CV 101 for community members, CV 101 for city agencies/organizations)
- Workshops can be delivered at the offices of the Host Agency/Organization or at audience specific locations (agency/organization offices, community centers, churches, libraries, etc.)

Virtual adaptation:

- Possible delivery options:
 - Option 1
 - One (1) webinar for all interested stakeholders
 - Webinar can also be recorded and shared with partners unable to attend live session
 - Followed by individual meetings
 - 1:1 meetings between CVG and specific agencies/organizations (e.g. City officials by Agency: Health, Mayor's Office, etc.)
 - Up to three (3) virtual meetings per day over a 2-3 day period

- Meetings with Community-level stakeholders are detailed in *Community Partner Meetings* section below
 - Option 2
 - Up to three (3) webinars for grouped audiences (e.g. City officials, community-based organizations, community members, etc.)
 - Webinar can also be recorded and shared with partners unable to attend live session
 - Webinar sessions would include discussion and Q&A directly after each presentation
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Official Data Review Meetings

Description: Official data review meetings are small group convenings with representatives from offices and agencies actively collecting relevant data. This can either be a combined meeting with multiple offices/agencies or conducted individually with each entity. Meetings often include a detailed review of specific maps, charts, reports, and data sets presented by these representatives. These meetings are an opportunity to provide CVG staff with a comprehensive overview of the scope of violence city-wide, current and historic trends, drivers of violence, groups present, and hot spots.

Audience:

- Mayor's office
- Health department
- Police department/Sheriff's department
- Office(s) of (Youth) Violence Prevention (or other city/state-wide efforts)
- Level 1 trauma unit(s)
- Research institutions

Format:

- 1:1 or multiple organizations/agencies from existing collaborations (i.e., injury review boards and city/state coalitions)
- Maps (density, incidents), incident level data packets, slides, previous reports on scope of issue or specific areas

Objectives:

- Visualize Need/Determine Potential Target Area(s):
 - Scope of violence
 - Identify of chronic "hot spots" where shootings and killings have persisted for multiple years
 - Demographic information for both victims and offenders (age and gender)
 - Reasons/motives given for shootings and killings
 - Types of weapons used

- Days of the week and during which time period(s) are violent incidents most likely to occur
- Determine Target Population:
 - Determine who is most likely to be involved in a shooting or killing: age range, race, criminal history, gang affiliation, etc.
 - Who are the most violent groups in the target area?
 - Who is at highest risk to be involved in the violence?
 - What are common risk factors for the groups and individuals?
 - Of all the violent groups and individuals, who should be the focus of the program?
 - Number of target population in each proposed target area

Key considerations:

- It is important that all participants are briefed on the goals and objectives of this meeting ahead of time and are prepared to present and provide data.
- Available data, maps, and reports should be shared with CVG prior to the Assessment Visit, if possible

Virtual adaptation:

- Data provided to CVG for review prior to scheduled virtual meeting
 - Data can be Citywide incident level data if potential target areas have not yet been identified
 - Data can be incident level data for areas disproportionately affected by violence historically
 - This should include any reports completed (i.e. health department and hospitals, OJP Diagnostic Center, etc.) as well as any maps available
- Virtual meeting with relevant agencies/organizations
 - Meeting would be led by local agency/organization to provide an overview of the level of violence at the City, Community, and Block level
 - Opportunity for CVG to ask questions required to meet the stated objectives for this activity

Community Partner Meetings

Description: Meetings with community partners serve to provide representatives with more information about the Cure Violence model and accomplish the following:

1. Determine a CBO's interest/ability to be an implementing partner; AND/OR
2. Gain insight/unofficial data of the scope of violence, target area, current strategies, available resources, etc., and to identify opportunities for collaboration.

Audience:

- Community-based organizations

- Service providers
- Violence prevention initiatives
- Faith-based organizations
- School representatives/administrators

Format: 1:1 or multiple organizations, could include CVG presentation or just be a discussion

Objectives:

- Provide overview and understand of violence as a health issue, CV model
- Assess support for implementation of CV
- Assess capacity of local CBOs that could serve as potential Implementing Partners
- Identify opportunities for collaboration
- Share local perspective with CVG staff on scope of violence, current and historic trends, drivers of violence, groups present, hot spots, etc.
- Share recommendations with CVG staff for organizational involvement, potential staff and ideas relevant to possible implementation
- Identify opportunities for collaboration - service provider, support for staff and/or participants, etc.

Key considerations:

- It is ideal to have community partners attend a Cure Violence 101 Workshop prior to this meeting.
- These meetings could be break-out sessions following their participation in a Cure Violence 101 Workshop.

Virtual Adaptation

- As with the in-person *Community Partner Meetings* the preference would be that most of the individuals have attended an initial *Cure Violence 101 Workshop* prior to the meeting.
 - This ensures that these virtual meetings are an opportunity for a more in-depth discussion based on the identified objectives and not a presentation of the model
- Possible delivery options
 - 1-2 larger virtual meetings grouped by audience (e.g. organizations based within one potential target area, organizations based on programming – education, violence prevention, etc.)
 - 3-5 smaller virtual meetings with individual organizations or smaller groupings based on the coordinating group's thinking
 - Can also include sharing of information and answering questions through phone calls and email exchange

Hospital/Trauma Center Meetings

Description: Hospitals and trauma centers provide a unique perspective when it comes to violence because of their contact with violently injured individuals and their family members. Cure Violence

works closely with hospital-based violence intervention programs that work to use this unique point of intervention to prevent retaliation, re-injury, and provide individuals with necessary resources. Additionally, CVG has assisted replication sites with adapting the model to the hospital setting. These meetings can include a brief presentation on the Cure Violence Model and a review of any available hospital data.

Audience: Hospital/trauma center administrative staff, social workers, violence prevention staff, nurses, surgeons, etc.

Format: Small group

Objectives:

- Introduce hospitals/trauma centers to the health approach and the Cure Violence Model
- Review available hospital data on violent injury and recidivism
- Identify potential for collaboration

Key considerations:

- This meeting can also be an opportunity to introduce Hospital-based Violence Intervention Programs (HVIPs) and the Health Alliance for Violence Intervention (HAVI)

Virtual adaptation

- Virtual meeting with relevant coordinating group members and hospital/trauma center personnel

Potential Workers

Description: Individuals who are credible in the potential target areas and with those at highest risk for involvement in violence are key to the success of the CV model. While official hiring of workers includes vetting, comprehensive interviews and hiring panels, CV staff use the Assessment Visit to determine if connections to these individuals already exists or if additional recruitment strategies need to be considered before implementation.

Audience: Individuals with connections to potential workers (community leaders, organization representatives, faith leaders, etc.) or individuals that may possess the characteristics and skills necessary to be successful Violence Interrupters and Outreach Workers.

Format: 1:1, small group

Objectives:

- Determine if there are individuals who could serve in the role of Violence Interrupter or Outreach Worker should implementation occur; AND/OR
- Gain insight/unofficial data of the scope of violence, target area, etc.

Key considerations:

- These could be formal (gathered at or by a local agency/organization) or informal (1:1, dinner, out in the community, etc.) meetings.
- These meetings are not interviews or hiring panels. They are designed to be informal opportunities for CVG staff to determine if credible individuals, with connections to the potential target area(s), exist as well as possible recruitment strategies should implementation occur.
- If there is a connection to those at highest risk for involvement in violence, getting their input regarding potential workers is encouraged.

Virtual adaptation:

- These sessions will be more challenging to conduct virtually as they are often small group or 1:1 meetings that require rapport building and trust, which is harder to build over a virtual platform
 - Small group virtual discussions are possible, depending on if potential staff have been preidentified by the coordinating group, or community stakeholders
 - It is also possible to schedule phone calls with key individuals and CVG training and technical assistance coordinators
 - This adaptation requires additional insight and discussion with the coordinating group
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Target Area Visits

Description: Target area visits allow staff to learn more about the community, resources, residents, organizations, and environment of the areas most impacted by violence to help inform recommendations for community-specific implementation. To familiarize CVG staff with the neighborhood(s), historically visits have included a walk through the neighborhood, attendance at a community event (i.e., meeting, health fair, sporting event, vigil, etc.).

Audience: Community leaders, residents, high risk individuals, etc.

Format: 1:1 or small group

Objectives: Target area visits provide an opportunity for CVG staff to assess:

- Size (x blocks by x blocks, 1 square mi, etc.)
- Housing (single family, buildings, etc.)
- Anchor institutions (schools, hospitals, etc.)
- Businesses
- Liquor stores, clubs
- Transportation hubs
- Presence of high-risk street activity?
- Where does violence cluster?
- What resources are present?

Key considerations:

1. Historically, target area visits are most successful when CVG staff are paired with community members, faith leaders, or key individuals from the specific area.
2. Opportunities to attend events or gatherings within the potential target area(s) are best.
3. These visits are not intended to be a “drive through,” rather they should be an opportunity for CVG staff to become acquainted with the landscape of the community to guide recommendations for implementation.
4. This visit also allows CVG staff to talk with key individuals or individuals that may be considered high risk for involvement in violence.
5. To gain a full perspective of the potential target area(s) visiting both during the day and the evening is recommended.

Virtual adaptation:

- Unable to fully adapt virtually, but can include questions regarding key considerations during the *Data Review Meeting* as well as *Community Partner Meetings*
 - Based on the proximity of the city, it may be possible to schedule a socially distanced visit to the target area(s).
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Follow-up Meetings

Description: Follow-up meetings are optional based on the outcomes of previous meetings during the Assessment Visit. This time can also be used for any meetings that may have needed to be rescheduled from previous days.

Audience: All

Format: Individual, group, etc.

Objectives:

- Address any outstanding questions from previous meetings
- Provide additional time for meetings that may have been rescheduled from previous days

Key considerations:

- This can be an opportunity to meet with individuals, agencies, or organizations that were not originally included in the agenda but have been recommended during the Assessment Visit.

Virtual adaptation:

- Additional questions can be answered via calls and email
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Debrief Meeting

Description: This session provides an opportunity for CVG staff to reconvene with the host organization at the end of the Assessment Visit to discuss any follow-up from previous meetings

and address any remaining questions. This discussion includes an overview of key implementation factors, considerations, and strategies and outlines next steps.

Audience: Host organization

Format: 1:1 or small group

Objectives:

- Review assessment visit meetings and activities
- Address any remaining questions
- Provide tentative recommendations

Key considerations:

- N/A

Virtual adaptation:

- The Debrief would be split into two (2) virtual sessions:
- Session 1
 - Small virtual meeting with coordinating group to answer any remaining questions
- Session 2
 - Meeting with coordinating group scheduled post receipt of the *Assessment Visit Report* to discuss next steps

Virtual Adaptation Activities Chart

Activity	Number of Units	Supplemental Activities
Cure Violence 101 Workshops	Up to 3	Recording made available Additional information shared via email
Official Data Review Meeting	1	CVG desk review prior to meeting Additional information shared via email
Community Partner Meetings	Up to 5	Additional information shared via email Phone calls with groups unable to participate virtually
Hospital/Trauma Center Meeting	1	Additional information shared via email
Potential Worker Meetings	Up to 3	1:1 calls
Target Area Visit	TBD	Questions included in other meetings

		Potential for socially distanced visit, TBD
Follow up Meetings	0	Additional information can be shared and questions answered via calls and email
Debrief Meeting 1	1	Additional information shared via email
Virtual Assessment Visit Report	1	Provided to organizing group within 10 business days for completion of the "visit"
Debrief Meeting 2	1	Dependent upon next steps identified during <i>Debrief Meeting 2</i>