

**Appendix E**  
**SWOT Analysis**

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Results of Worksheet 11: Perceptions of SWOT

Themes	Strengths (Internal Forces)	Themes	Opportunities (External Forces)
<i>State and Hospital Policies on IPV</i>	<ul style="list-style-type: none"> <li>- Mandatory reporting policy and procedures (3)</li> <li>- Awareness of mandatory reporting (1)</li> <li>- Written hospital IPV policies (2)</li> </ul>	<i>Standardized IPV policy and procedure</i>	<ul style="list-style-type: none"> <li>- Create a DHS policy and procedure on IPV (4)</li> <li>- Develop countywide standardized screening, documentation and reporting forms (6)</li> </ul>
<i>Hospital Infrastructure</i>	<ul style="list-style-type: none"> <li>- Staff and administrators are used to following policies and procedures (4)</li> <li>- Infrastructure in place to implement a program (1)</li> </ul>	<i>User-friendly policies and procedures</i>	<ul style="list-style-type: none"> <li>- Cross referencing and/or consolidating multiple policies and procedures to make all policies and procedures user friendly (3)</li> <li>- Make standardized IPV policies and forms available on MyPHD, have search capacity on MyPHD (4)</li> </ul>
<i>DHS Infrastructure</i>	<ul style="list-style-type: none"> <li>- DHS provides a large amount of diverse services to the public (2)</li> <li>- DHS has infrastructure in place (1)</li> </ul>	<i>Training</i>	<ul style="list-style-type: none"> <li>- Electronic standardized screening form for all patients aged 13 and up, could increase reporting because of confidentiality (2)</li> </ul>
<i>Standardized Form</i>	<ul style="list-style-type: none"> <li>- Most agencies have a standardized form to record info on IPV (4)</li> </ul>	<i>Partnerships</i>	<ul style="list-style-type: none"> <li>- Use outside experts to train employees (3)</li> <li>- Annual training for staff (2)</li> <li>- Practical training on reporting and documenting (1)</li> <li>- Standardized training for county (1)</li> </ul>
<i>Committed Staff</i>	<ul style="list-style-type: none"> <li>- Staff and admin want to be seen as helpful to patients affected by IPV (3)</li> <li>- Caring, knowledgeable, committed employees (1)</li> <li>- Willingness to address the issue (1)</li> </ul>	<i>IPV Team</i>	<ul style="list-style-type: none"> <li>- Build internal partnerships (e.g. among county entities, such as law enforcement, the district attorney's office, shelter agencies, mental health, health care agencies) (5)</li> <li>- Build external partnerships (e.g. among non-county entities, such as church groups, non-profits, IPV agencies, human rights campaigns, unions) (6)</li> <li>- Partner with private sector groups in the areas of data collection, training, etc. (1)</li> </ul>
<i>Referral Procedures</i>	<ul style="list-style-type: none"> <li>- PHNs have referral procedures (1)</li> <li>- Staff willingness to refer to other agencies (3)</li> </ul>		
<i>Trained Staff</i>	<ul style="list-style-type: none"> <li>- Large number of employees trained and knowledgeable (3)</li> </ul>		

Themes	Weaknesses (Internal Forces)	Themes	Threats (External Forces)
<b>Staff awareness, preparedness to screen, report and refer</b>	<ul style="list-style-type: none"> <li>- Most employees are not aware of standardized forms (3)</li> <li>- Staff uncomfortable asking IPV screening questions (1)</li> <li>- Training on IPV is not up-to-date, comprehensive, or consistent, and only reaches a limited number of employees (6)</li> <li>- Lack of good research regarding what does and does not work, with respect to training (3)</li> <li>- Staff are overloaded with many policies, procedures and manuals (3)</li> <li>- Staff are overloaded, short of time for screening, interventions, and training (2)</li> <li>- Need clarification of resources (1)</li> <li>- Some staff are incompetent, new (3)</li> </ul>	<b>Shortage of personal and county resources</b>	<ul style="list-style-type: none"> <li>- Shortage of resources (personal and monetary resources) (1)</li> <li>- Budget cuts (7)</li> <li>- Program cuts (1)</li> <li>- Staff cuts (1)</li> <li>- Overworked staff, overloaded (1)</li> </ul>
<b>Lack of infrastructure to respond to IPV</b>	<ul style="list-style-type: none"> <li>- Currently no DHS IPV policy (3)</li> <li>- No clear definition of IPV (vs. DV, child/elder abuse) (3)</li> <li>- No entity to specifically address IPV, need a department such as DCFS (2)</li> <li>- Size of DHS (1)</li> <li>- Geographical location, buildings distributed all over the place (1)</li> </ul>	<b>Systematic threats</b>	<ul style="list-style-type: none"> <li>- County bureaucracy (3)</li> <li>- Consolidation of department and services</li> </ul>
<b>Administrative Accountability</b>	<ul style="list-style-type: none"> <li>- Lack of internal policy review (4)</li> <li>- Lack of administrative accountability (1)</li> </ul>	<b>Privacy</b>	<ul style="list-style-type: none"> <li>- Privacy issues (2)</li> </ul>
<b>Collaboration/Communication</b>	<ul style="list-style-type: none"> <li>- Lack of internal collaboration (1)</li> <li>- Lack of external collaboration and communication between related agencies (law enforcement, shelters, legal, etc) (5)</li> </ul>	<b>Sociological Threats</b>	<ul style="list-style-type: none"> <li>- Cultural issues (3)</li> <li>- Religious barriers (2)</li> <li>- Gender issues (Women still invisible, women's issues unrecognized) (1)</li> </ul>
<b>Bureaucracy, slow processes</b>	<ul style="list-style-type: none"> <li>- Planning process to develop IPV policy is too slow (2)</li> <li>- Political changes impede the process (1)</li> </ul>	<b>Coordination</b>	<ul style="list-style-type: none"> <li>- Lack of communication and coordination between IPV-related agencies (i.e. law enforcement, shelters, legal, etc). (4)</li> </ul>
<b>Prevention</b>	<ul style="list-style-type: none"> <li>- Lack of prevention programs, lack of prevention money</li> </ul>	<b>Prevention</b>	<ul style="list-style-type: none"> <li>- Lack of prevention programs to address the needs of perpetrators (i.e. treatment for batterers) (2)</li> </ul>
		<b>Political agendas</b>	<ul style="list-style-type: none"> <li>- Politicians reluctant to address issues of IPV, for fear of affecting election outcomes (3)</li> <li>- Changes in political environment, which alter goals and slow processes (2)</li> </ul>