**Memorandum of Agreement**

The [Domestic Violence Program][[1]](#endnote-1) and the [Family Planning Program]

This agreement is by and between [domestic violence program]and [family planning program]to enhance the response to individuals and families experiencing intimate partner violence in the [locality/region] area.

The parties listed above and whose designated agents have signed this document agree that:

1. The [domestic violence program] and [the family planning program] agree to work collaboratively on the Project Connect pilot program activities to enhance our response to those experiencing intimate partner violence.
2. The [domestic violence program] will provide training and ongoing technical assistance on identifying and responding to intimate partner violence for all staff of [the family planning program].
3. The [family planning program] agrees to use the model intervention identified by Project Connect for screening for intimate partner violence and participate in evaluation activities, including pre/post survey for training participants, provider behavior survey, and client outcome survey.
4. When intimate partner violence is identified by [the family planning program], staff will review advocacy services available in the community and provide referral to the [domestic violence program] or other appropriate domestic violence services.
5. The [domestic violence program] agrees to provide each individual seeking services as a result of a referral from the [family planning program] with appropriate safety planning and support services to address intimate partner violence.
6. The [domestic violence program] agrees to provide materials to the [family planning program] in support of ongoing training and consultation efforts, as well as awareness materials to distribute to the [family planning program’s] clients.
7. The [domestic violence program] agrees to develop and maintain up-to-date referral and resource materials and to make those materials available to the [family planning program].
8. The [domestic violence program] and the [family planning program] will actively partner in a Health Advisory Council (resource team) created in support of services provided by Project Connect.
9. Representatives of the [domestic violence program] and the [family planning program] will meet at least once annually to ensure an understanding of the scope of services provided by their respective programs, review referral policies between agencies, and revisit the terms of this agreement.

We, the undersigned, approve and agree to the terms and conditions as outlined in the Memorandum of Understanding.

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Name Name

Executive Director Title

Domestic Violence Program Family Planning Program

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Date Date

1. Developed by the Haven Shelter & Services Inc. in Warsaw, Virginia and adapted by the Shelter for Help in Emergency in Charlottesville, Virginia. [↑](#endnote-ref-1)