MICHIGAN
DOMESTIC VIOLENCE
PREVENTION &
TREATMENT BOARD

MICHIGAN DOMESTIC VIOLENCE PREVENTION & TREATMENT BOARD

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Quality Assurance Standards

Pre-Review Packet

Revised November 2005

Website: http://www.michigan.gov/domestic violence

State of Michigan – Family Independence Agency

STANDARDS DEVELOPMENT FRAMEWORK

Act 389, Public Acts of the State of Michigan, 1978, which specifies the Michigan Domestic Violence Prevention and Treatment Board's powers and duties established the legal framework for adoption of standards. Specifically, Section 4, (b) requires the board to:

> "Develop standards for the implementation and administration of services and procedures to prevent domestic violence and to provide services and programs for victims of domestic violence."

The philosophical base for standards development is the Michigan Domestic Violence Prevention and Treatment Board's statement of philosophy:

> Domestic violence is rooted in a sexist social structure that produces profound inequities in roles, relationships, and resources and power distribution between women, children, and men in families. Domestic violence is damaging to those individuals directly involved and to society as a whole. It is criminal conduct, which cannot be tolerated. Prevention through education, advocacy and appropriate intervention is the ultimate goal. All victims should be provided safety and must be treated with dignity and respect.
>
> Interventions that blame the victim and do not hold the abuser accountable for the violence are ineffective and inappropriate. The Michigan Domestic Violence Prevention and Treatment Board shall encourage and advance the empowerment of victims and seek social change, which addresses the existing imbalance of power within violent relationships.
>
> The Board believes that to make informed choices for themselves and their children, victims should have access to safety, information about domestic violence, available options, and community resources. To carry out their decisions, victims of domestic violence may require support and advocacy that respects their right to self-determination.

Instructions Guide

1. Contact community and system leaders to arrange for their availability during the times specified on the enclosed schedule. The Peer Review Team's goal is to talk with 10-15 individuals. It is important to schedule interviews with 1-3 Board members, preferably the President/Chair and Treasurer; 1-2 volunteers; and STOP partners. It is not necessary to contact former service participants. Other examples of who to include are noted on the *Community/System Leader Interview List*, item #9 below. Two times are set aside for **community interviews**:
   - **Phone interviews can be scheduled at specific times between 9:30 AM and Noon or between 1:30 PM and 4:00 PM on Day, Date;** and
   - **In-person interviews can be scheduled to begin at 8:30 AM, 9:00 AM or 9:30 AM on Day, Date**.

   Please arrange for **8-10 phone interviews**. Phone interviews will last 20-30 minutes and a peer team member will contact the individual. **2-4 in-person interviews** can be scheduled. These interviews can be set up at the administrative office/shelter, or at the community member's office, whichever the community member prefers. In-person interviews will last 30-45 minutes.

2. Complete and submit the staff chart. It is helpful if you include funding source for each position if possible. The MDVPTB Team Leader will work with you to schedule **staff interviews** between **1:30 PM and 5:00 PM on Day, Date**.

3. Complete Part's A-C. Copy the items listed on the enclosed checklist that are identified as Parts D, E, and F. These include program policies, procedures, personnel policies, proofs, and additional documents necessary for the peer team's background information prior to the visit. **Return six copies** of Parts A-F to the MDVPTB office **by Day, Date**.

4. Plan for the on-site visit using the sample questions that are included in this packet after the checklist.

5. The review team will **pick up materials from the administrative office/shelter on Day, Date at Time**. The team will **meet with the Program at Time on Day, Date**. Please make arrangements for a tour of the shelter to take place after that meeting at approximately **Time**.

6. The review team will conduct an **exit interview with the Executive Director/CEO at Time on Day, Date**.

7. Please arrange for the **Board of Directors** to meet with the MDVPTB Peer Review Team **at Time on Day, Date**.

8. Please contact **Karen Porter**, Quality Assurance Director, at **(517) 241-5221** if you have any questions.

Part A: Agency Profile

AGENCY NAME_____

The following information is requested to acquaint the quality assurance standards review team to your agency prior to the peer review.

1. Agency History – Provide a brief history/timeline of your agency. When were you founded? How many executive directors has your agency had? Highlight the most important milestones. (Please limit to one 8 ½" x 11" page).

2. Mission Statement and Philosophy – If possible, please include last revision or date of review.

3. List of Facilities – Please list the name of each facility, address and services provided at that location.

4. List of Board Members – Provide a list of all board members, the date they joined the board, board offices that they have held, or currently hold (President, Vice-President, etc), and affiliations (place of employment, expertise, etc).

5. Organizational Chart – Please include the information noted in #5 below and the funding source for each position on the organizational chart, if possible.

6. Staffing Chart – Attach a staff chart that includes the following if not included on the organizational chart.

Staff Name	Position Title	Years at Organization	Years in Current Position	Degree(s)/Special Training	Funding Source for Position

7. Overview of Programs – Complete the chart below listing approximate program/project funding amounts for the current fiscal year.

Program/Project	Total Program/Project Funding	Amount Funded By MI-FIA ~ MDVPTB/RPS	Amount Funded By Other Sources
Domestic Violence	$	$	$
Sexual Assault	$	$	$
STOP Violence Against Women	$	$	$
Transitional Supportive Housing	$	$	$
All Other Agency Programs	$	$	$
Total Agency	$	$	$

8. Units of Service – Provide client service numbers in the following format for the last three fiscal years. **NUMBER OF SHELTER BEDS**

	_____ County (In Service Area)			_____ County (In Service Area)			_____ County (In Service Area)		
Domestic Violence Services	**2002/2003**	**2003/2004**	**2004/2005**	**2002/2003**	**2003/2004**	**2004/2005**	**2002/2003**	**2003/2004**	**2004/2005**
Crisis calls									
Unduplicated non-resident adults served									
Unduplicated non-resident children served									
Unduplicated adults sheltered									
Unduplicated children sheltered									
Adult nights of shelter provided									
Child nights of shelter provided									
Shelter denials									
Sexual Assault Services	**2002/2003**	**2003/2004**	**2004/2005**	**2002/2003**	**2003/2004**	**2004/2005**	**2002/2003**	**2003/2004**	**2004/2005**
Crisis calls									
Unduplicated adults served									
Unduplicated children served									
# of Emergency responses									
Prevention activities – schools/others									

	_____ County (In Service Area)			_____ County (In Service Area)			Others (Not in Service County)		
Domestic Violence Services	**2002/2003**	**2003/2004**	**2004/2005**	**2002/2003**	**2003/2004**	**2004/2005**	**2002/2003**	**2003/2004**	**2004/2005**
Crisis calls									
Unduplicated non-resident adults served									
Unduplicated non-resident children served									
Unduplicated adults sheltered									
Unduplicated children sheltered									
Adult nights of shelter provided									
Child nights of shelter provided									
Shelter denials									
Sexual Assault Services	**2002/2003**	**2003/2004**	**2004/2005**	**2002/2003**	**2003/2004**	**2004/2005**	**2002/2003**	**2003/2004**	**2004/2005**
Crisis calls									
Unduplicated adults served									
Unduplicated children served									
# of emergency responses (Include SANE)									
Prevention activities – schools/others									

9. Community/System Leader Interview List – Please contact community and system leaders to arrange for their availability during the times specified below. The Peer Review Team's goal is to talk with 10-15 individuals that are able to describe your leadership in the community. It is important to schedule interviews with 1-3 Board members, preferably the President (Chair) and Treasurer; 1-2 volunteers; and STOP partners which may include chiefs of police, county sheriffs, court administrators, judges, law enforcement officers, probation staff, and/or prosecutors. It is not necessary to contact former service participants. Other examples of who might to include are:

- Batterer intervention services staff
- Directors from FIA, CMH, CAP or other human service agencies
- Minority community leaders
- Directors of United Way or other private funders

Two times are set aside for **community interviews**:

- **Phone interviews can be scheduled at specific times between 9:30 AM and Noon or between 1:30 PM and 4:00 PM on Day, Date;** and
- **In-person interviews can be scheduled to begin at 8:30 AM, 9:00 AM or 9:30 AM on Day, Date**.

Please arrange for **8-10 phone interviews**. Phone interviews will last 20-30 minutes and a peer team member will contact the individual. **2-4 in-person interviews** can be scheduled. These interviews can be set up at the administrative office/shelter, or at the community member's office, whichever the community member prefers. In-person interviews will last 30-45 minutes.

REMINDER! When setting appointments, please clarify whether the contact will be in-person or by phone during the times noted above. In the comments section please note which of your programs the individual is familiar with.

Name	Title	Phone	Day/Date Time of Interview	In-Person/Phone Comments

Part B – Fiscal Administration

1. Fiscal Checklist – See below

Fiscal Checklist for _____

Fiscal Period _____ **To** _____

NOTE: This section is to be completed by the Treasurer or Finance Committee Chair

Does this agency meet the following GAAP requirements?

1. Accrual Basis Yes____ No____

2. Functional Allocation of Indirect Costs Yes____ No____

3. Fund Raising Costs Identified (Gross) Yes____ No____

4. Management & General Costs Identified Yes____ No____

5. Segregation of Net Assets as Unrestricted, Temporarily Restricted, Permanently Restricted. Yes____ No____

6. Changes in each class of net assets disclosed on statement of activities Yes____ No____

7. Policy disclosure regarding treatment of contribution for which restrictions are met in the same period. Yes____ No____

8. Unconditional promises to give measured at fair value. If long-term, promise to give discounted to present value with appropriate footnote disclosures. Yes____ No____

9. Footnote disclosure of conditional promises to give. Yes____ No____

Other Comments

1. Statements are Comparative (2 years). Yes____ No____

2. Administrative and Fund Raising Costs are less than 30%. If higher, please explain. Yes____ No____

3. Is there an excess of revenues and support over expenditures resulting from unrestricted activities over the last 2 years? If so, how much. Yes____ No____

4. Does your audit contain the following components:

   a. Balance Sheet/Statement of Financial Position Yes____ No____

   b. Statement of Activities Yes____ No____

c. Statement of Changes in Net Assets (Optional) Yes____ No____

d. Statement of Cash Flows Yes____ No____

e. Notes to Financial Statements Yes____ No____

f. Statement of Functional Expenses (Optional) Yes____ No____

g. Management Letter Yes____ No____

h. Agency Response to Management Letter Yes____ No____

i. Opinion unqualified Yes____ No____

5. Additional Comments

COMPLETED BY: _____

TITLE: _____

DATE: _____

In addition, please submit your organization's:

2. Audit – Most recent fiscal period audit

3. Management Letter and Response – Letter to the Board of Directors from most recent audit and written response from the organization

4. Form 990 – Submit most recent 990 including extension requests, if applicable

5. Budget – Operating budget for current fiscal year

6. Financial Reports – Please include information that is shared with the Board of Directors for the past three reporting periods, e.g. monthly, quarterly

Part C – Quality Assurance Standards Self Evaluation

1. **For each of the 88 mandatory quality assurance standards and 54 best practice standards noted in Sections A-H (or 98 mandatory and 56 best practice standards noted in Sections A-I if your organization receives MDVPTB/TSH funds), please answer the following questions:**

   a. What improvements have occurred in the past year?
   b. Are there improvements or changes presently underway?
   c. What improvements or changes does your agency have planned?
   d. What additional improvements do you think need to be made?

2. Using the **Rating Scales for Mandatory Standards and Best Practices** below, evaluate your agency in accordance with the MDVPTB Quality Assurance Standards on pages 10-29. Each standard in the "Mandatory Standards" section will be rated not in compliance, partially in compliance, in compliance, or exceeds compliance. **Please note that comments are required for any standard rated not in compliance, partially in compliance, or exceeds compliance.** In the "Best Practices" section, it is only necessary to place a check mark next to those best practices you meet.

RATING SCALE FOR MANDATORY STANDARDS

(E) - Exceeds Standard	The standard is surpassed in an excellent manner. **Comment(s) required.**
(M) - Meets Standard	The program is in compliance with the standard. **No comment(s) necessary.**
(P) - Partially Meets Standard	The standard is not met, but there is an acceptable written plan to do so. **Comment(s) and a written action/corrective plan from the agency required.**
(D) - Does Not Meet Standard	The standard is not met and there are no acceptable plans to do so. **Comment(s) and a written action/corrective plan from the agency required.**
(NA)	The standard does not apply.

RATING SCALE FOR BEST PRACTICES

(M) - Meets Best Practice	The best practice is met in an exceptional manner and exceeds what is generally expected. It is likely that the practice is replicable and serves as a model for others. **Comment(s) necessary.**
(D) - Does Not Meet Best Practice	The program does not meet the best practice. **No comment(s) necessary.**

SECTION A. THE STANDARDS – POLICY AND GOVERNANCE

Improvement Questions

1. What improvements have occurred in the past year?
2. Are there improvements or changes presently underway?
3. What improvements or changes does your agency have planned?
4. What additional improvements do you think need to be made?

SECTION A. THE STANDARDS – POLICY AND GOVERNANCE

Mandatory Standards

_____1. The purpose of the organization is clearly stated and compatible with the philosophy of the Michigan Domestic Violence Prevention and Treatment Board.

_____2. The organization functions in accordance with its stated purpose.

_____3. The organization has a designated governing authority.

_____4. The governing authority is accountable for the organization.

_____5. The governing authority and any advisory body operates in accordance with acceptable practice.

_____6. The governing authority establishes policies for the efficient and effective operation of the program.

_____7. The organization sets goals and objectives for its management; operation; service delivery; and systems change efforts.

_____8. The organization develops plans to achieve stated goals and objectives for its management; operation; service delivery; and systems change efforts.

Best Practices

_____10. Members of the governing authority and any advisory body to the governing authority are chosen in a manner that assures a broad base of knowledge and participation in the governance of the organization.

_____11. There is a rotation mechanism to ensure a balance of new members.

_____12. The composition of the Board reflects the racial and cultural diversity of the community.

_____13. The organization takes a leadership role in identifying and addressing needs of survivors of domestic violence and/or sexual assault including significant others and children.

_____14. The organization evaluates the effectiveness and efficiency of its management, service delivery and systems change functions.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

Improvement Questions

1. What improvements have occurred in the past year?
2. Are there improvements or changes presently underway?
3. What improvements or changes does your agency have planned?
4. What additional improvements do you think need to be made?

SECTION B. THE STANDARDS – COMMUNITY RELATIONS AND FUND DEVELOPMENT

Mandatory Standards

_____1. Relevant goals, objectives and plans are established for community relations and fund development.

_____2. Community relations and fund development are conducted in accordance with applicable professional, ethical and legal principles.

_____3. The organization follows acceptable practices for public disclosure.

_____4. The organization conducts a public education program that raises the community's awareness of the causes, implications and the appropriate community response to domestic and/or sexual violence.

_____5. The organization's public education and public relations programs reflect the organization's philosophy and that philosophy is consistent with that of the Michigan Domestic Violence Prevention and Treatment Board.

_____6. The organization conducts a fund development program that secures sufficient funds to cover its operating and capital needs.

_____7. The governing body initiates and actively supports fund development efforts.

_____8. The organization is readily identifiable and visible among its consumers, peer organizations and appropriate community systems.

_____9. Public relations and public education materials are available in other languages for any ethnic group with a presence in the community and the geographic area served.

Best Practices

_____10. Materials and equipment are available to reduce barriers and assist individuals with special needs such as TTY/TTD for persons who are deaf or hard of hearing and Braille or large print for partially sighted or blind persons.

_____11. Policies for community relations and fund development are comprehensive and practical.

_____12. The organization uses designated personnel to implement its policies and procedures for community relations and fund development.

_____13. The organization conducts a public relations program that projects an accurate positive image throughout its service area and raises the community's understanding of and support for its services.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

_____14. The organization builds and maintains adequate financial reserves.

_____15. Each member of the governing body contributes financially to the organization.

_____16. The organization comprehensively evaluates community relations and fund development programs to measure efficiency and effectiveness.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

Improvement Questions:

1. What improvements have occurred in the past year?
2. Are there improvements or changes presently underway?
3. What improvements or changes does your agency have planned?
4. What additional improvements do you think need to be made?

SECTION C. THE STANDARDS – PROGRAM ADMINISTRATION AND SERVICE DELIVERY

Mandatory Standards

_____1. The organization maintains comprehensive individual client service records/case files in accordance with acceptable practices.

_____2. Confidentiality of program participants is protected.

_____3. All client service records are kept confidential and case closure is conducted in accordance with acceptable practices.

_____4. The organization works collaboratively with other domestic violence and/or sexual assault programs throughout the State and in other States as appropriate to meet the safety and advocacy needs of survivors.

_____5. Programs are conducted in accordance with applicable professional, ethical and legal principles.

_____6. Relevant goals, objectives and plans are established for service delivery management.

_____7. Services are client centered, non-judgmental, culturally sensitive and strive to empower the persons served.

_____8. Staff is responsible for implementing policies.

_____9. The chief executive officer (CEO) exercises full responsibility for the day-to-day management of the organization.

_____10. The organization conducts intake services in accordance with acceptable practices.

_____11. The organization has a system for case management and regularly plans with and monitors the progress of those who receive in person services.

_____12. The organization orients adults and children receiving assistance to the organization and its services.

_____13. The organization provides access to crisis information and shelter 24-hours each day.

_____14. The organization provides all services required in the contract.

_____15. The organization recognizes and respects the autonomy, dignity and rights of consumers.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

_____16. The organization seeks to serve persons who need its services and works to eliminate barriers to the provision of quality service to all who seek service.

_____ 17. The organization provides in person legal and medical advocacy services as well as 24 hour meeting at hospitals, police stations and other safe locations for those clients who request such service.

Best Practices

_____18. The organization designs communal living policies that stress non-violence, are fair and client centered. Clients are involved in the formulation and review of policies. Policy enforcement balances the rights of all clients with the need to ensure safety for all clients including those who choose not to follow policy.

_____19. The organization has a service delivery plan which fulfills the organization's mission.

_____20. The organization identifies the area and population it serves in all its brochures and reports.

_____21. The organization maintains an internal structure for efficient and effective administration.

_____22. The organization maintains and uses meaningful service statistics in accordance with acceptable practices.

_____23. The organization measures the efficiency and effectiveness of its management function.

_____24. The organization uses designated personnel to manage service delivery programs.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

Improvement Questions

1. What improvements have occurred in the past year?
2. Are there improvements or changes presently underway?
3. What improvements or changes does your agency have planned?
4. What additional improvements do you think need to be made?

SECTION D. THE STANDARDS – STAFF AND VOLUNTEER MANAGEMENT

Mandatory Standards

_____1. A comprehensive manual containing all personnel policies is maintained, kept current, and made available to all staff.

_____2. Acceptable practices are followed for recruiting, hiring and assigning staff.

_____3. Responsibility for hiring/firing is clearly defined.

_____4. The efficiency and effectiveness of the staff and volunteer program administration is evaluated.

_____5. The administration of staff and volunteers is in accordance with applicable professional, ethical and legal principles.

_____6. The organization establishes written qualifications for all positions and employs persons who meet or exceed those qualifications.

_____7. The organization's personnel policies attract and retain qualified personnel.

_____8. Acceptable screening practices of new staff members, which serve to protect the agency and its clients, are clearly defined and followed.

_____9. The organization recruits a diverse staff that is reflective of the community and geographic area in which the organization is located.

_____10. Acceptable practices are followed for the orientation, development and basic introductory training of staff and volunteers. Training content is compatible with the Michigan Domestic Violence Prevention and Treatment Board's statement of philosophy. Specialized training on both domestic and sexual violence exists for those individuals answering the 24-hour line and/or working in-person with residential or non-residential clients. Individuals attend the MCADSV New Service Providers Training or the content of the organization's training program includes:

- Child sexual abuse
- Crisis and trauma intervention principles and techniques
- Domestic violence and children
- Dynamics of domestic violence
- Empowerment philosophy specific to domestic and sexual assault
- Historical, psychological, and societal-cultural aspects of domestic and sexual violence
- Introduction to court systems especially as applicable to domestic and/or sexual assault survivors
- Introduction to key laws related to domestic and sexual violence including confidentiality
- Introduction to law enforcement procedures applicable to survivors of domestic and/or sexual assault

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

- Medical procedures applicable to sexual and domestic assault survivors including evidence collection procedures

- Provision of services toward groups that are unreached and/or "traditionally underrepresented" in local communities
- Resource identification, access, and advocacy
- Sexual assault in the context of domestic violence relationships

_____11. A comprehensive, confidential personnel record is maintained for each paid/volunteer staff member.

_____12. Acceptable practices are followed in terminating employment of staff.

_____13. Comprehensive job descriptions are available for all paid/volunteer positions.

Best Practices

_____14. Policies for the management of staff and volunteers are comprehensive and practical.

_____15. Relevant goals, objectives and plans are established for staff and volunteer administration.

_____16. The organization uses designated personnel to implement its policies and procedures regarding staff and volunteers.

_____17. The personnel policies include work hours, leave and benefits designed to attract and retain qualified staff.

_____18. Acceptable practices are followed in supervising and evaluating paid/volunteer staff.

_____19. A job classification system and salary ranges are maintained to attract and retain qualified personnel.

_____20. A comprehensive volunteer manual containing all volunteer policies and practices is maintained, kept current and made available to all volunteers.

_____21. Acceptable practices are followed in recruiting and assigning volunteers.

_____22. Screening practices for volunteers serve to protect the agency and its clients.

_____23. Acceptable practices are followed in the supervision, evaluation and termination of the participation of volunteers.

_____24. The organization determines the need for volunteer services and utilizes the services of volunteers as appropriate.

_____25. The organization adopts policies that attract and retain qualified volunteers.

_____26. The volunteer policies provide for hours, benefits and recognition that are designed to attract and retain qualified volunteers.

_____27. Volunteers are qualified for their responsibilities.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

SECTION E. THE STANDARDS – SYSTEMS CHANGE

Improvement Questions

1. What improvements have occurred in the past year?
2. Are there improvements or changes presently underway?
3. What improvements or changes does your agency have planned?
4. What additional improvements do you think need to be made?

SECTION E. THE STANDARDS – SYSTEMS CHANGE

Mandatory Standards

_____1. The organization advocates with community systems personnel on behalf of individual survivors, their significant others including children, and on behalf of all survivors of domestic violence and/or sexual assault as well as those at risk for domestic violence and/or sexual assault.

_____2. The organization prioritizes the community systems and organizations which need to be impacted first and develops a plan which defines strategies to work with each community system to change harmful practices and to re-enforce helpful practices. The plan is adopted by the board.

_____3. The organization works collaboratively with those community systems used by domestic violence and/or sexual assault survivors during crisis and in their effort to end violence in their lives. The goal is to change institutional practices that support domestic and/or sexual violence.

Best Practices

_____4. The organization conducts public education sessions targeted to personnel employed by community systems organizations.

_____5. The organization identifies those systems and organizations throughout its service area which affect the prevention and treatment of domestic and/or sexual violence.

_____6. The organization evaluates the practices of those systems and organizations throughout its service area which affect the prevention and treatment of domestic and/or sexual violence to determine which cause harm and which are helpful.

_____7. The organization uses designated personnel to implement its plan.

_____8. When possible, members of the organization formally participate in policy-making and evaluation of domestic violence and/or sexual assault policies in local community systems through task forces, advisory boards, etc.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

Improvement Questions

1. What improvements have occurred in the past year?
2. Are there improvements or changes presently underway?
3. What improvements or changes does your agency have planned?
4. What additional improvements do you think need to be made?

SECTION F. THE STANDARDS – FINANCIAL MANAGEMENT

Mandatory Standards

_____1. Financial management is conducted in accordance with applicable professional, ethical and legal principles.

_____2. The organization provides and maintains adequate insurance coverage and bonding of staff responsible for financial resources.

_____3. The organization provides and maintains officers and director's liability insurance.

_____4. The organization provides and maintains professional liability insurance.

_____5. The organization prepares financial statements that clearly and fairly present the organization's financial position.

_____6. The governing body adopts and the chief executive officer implements comprehensive budgets in accordance with acceptable practices.

_____7. The organization prudently manages its operating, endowment and capital funds.

_____8. The organization has sufficient cash flow to meet its operating needs.

_____9. The organization maintains an adequate system of internal controls including effective and efficient systems to account for all financial transactions to safeguard assets and to prevent or detect fraud.

_____10. The organization provides for an annual audit by independent accountants.

_____11. The organization provides for annual public disclosure of its financial position.

_____12. The organization annually meets Form 990 filing requirements.

Best Practices

_____13. Policies for financial management are comprehensive and practical.

_____14. Relevant goals, objectives and plans are established for financial management and long term financial stability.

_____15. The organization uses designated and appropriately qualified personnel to implement its policies and procedures for financial management.

_____16. The governing body continuously reviews and analyzes its financial position.

_____17. The governing body adopts and regularly reviews salary range and fringe benefit schedules.

_____18. The organization maintains adequate cash reserves.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

Improvement Questions

1. What improvements have occurred in the past year?
2. Are there improvements or changes presently underway?
3. What improvements or changes does your agency have planned?
4. What additional improvements do you think need to be made?

SECTION G. THE STANDARDS – FACILITY, SAFETY, SECURITY AND HEALTH

Mandatory Standards

_____1. The organization adheres to all applicable zoning, building, fire, health and safety codes of the community in which the organization is located.

_____2. The organization adheres to all applicable laws related to safety in the transport of children and adults.

_____3. Building and grounds are accessible and/or alternative arrangements are in place to accommodate clients with special needs.

_____4. Building and grounds are safe.

_____5. Cleaning supplies and other toxic household materials are safely stored.

_____6. Programs and equipment are accessible.

_____7. The buildings are smoke-free.

_____8. Food preparation, storage and service areas meet local health department standards.

_____9. The organization provides protection from fire and there is a system for early warning of fire.

_____10. In the event of fire or other emergencies, the organization provides for the protection and safe evacuation of persons from its buildings and grounds.

_____11. The organization provides personal care supplies to clients and their children residing in shelter.

_____12. The organization institutes practices and procedures which, insofar as possible, protect survivors and significant others including children from attack by assailants or perpetrators.

_____13. The organization has provisions for first aid and emergency medical care for its clients, staff, and volunteers and visitors.

Best Practices

_____14. Policies for the management of facilities are comprehensive and practical.

_____15. Relevant goals, objectives and plans are established for building and grounds, safety and health.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

_____16. The organization uses designated personnel to implement its policies and procedures relative to the facility, security and health.

_____17. Comprehensive evaluations are conducted to measure the efficiency and effectiveness of the operations and maintenance of buildings and grounds, safety and health.

_____18. Buildings and grounds are functional.

_____19. The buildings and grounds are attractive and clean.

_____20. The organization provides private counseling space, private sleeping and bathroom space and space for private reflection and telephone use, if practical.

_____21. The organization houses only the number of people in the shelter that can adequately be served.

_____22. The organization provides play areas inside and out for children residing in the shelter.

_____23. The organization takes measures to protect the property of consumers, staff, volunteers and the organization itself from theft.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

Improvement Questions

1. What improvements have occurred in the past year?
2. Are there improvements or changes presently underway?
3. What improvements or changes does your agency have planned?
4. What additional improvements do you think need to be made?

SECTION H. THE STANDARDS – CONTRACT REQUIREMENTS

Mandatory Standards

_____1. The organization is legally authorized to contract.

_____2. The organization does not accept reimbursement from clients unless their grant specifically authorizes them to do so.

_____3. The organization submits accurate reports in the manner and at the time they are due.

_____4. The organization retains all books, records or other documents relevant to their contract for six years after final payment.

_____5. The organization provides and maintains public liability insurance in such amounts as necessary to cover all claims which may arise.

_____6. The organization provides unemployment compensation coverage and worker's compensation insurance in accordance with applicable federal and state laws.

_____7. The organization complies with civil rights laws including Public Act 452 of 1976, Section 209, Public Act 220 of 1976, Section 504 of the Federal Rehabilitation Act of 1973, P.L. 93-112, 87 Stat. 194, Americans with Disabilities Act of 1990 (ADA), P.L. 101-3367, 104 Stat 328.

_____8. The organization seeks approval prior to publication or distribution of written and visual materials or other work products developed in connection with, or utilizing staff supported with, each contract.

_____9. The organization informs all applicants or recipients of service of their right to a fair hearing in the event of denial, reduction, or termination of a service or the organization's failure to act upon a request for service within a reasonable period of time.

_____10. The organization restricts the use or disclosure of information concerning services, applicants or recipients obtained in connection with the performance of the contracts for purposes which provide benefits to clients. The client is informed of any request for information and signs a consent before the information is made available.

_____11. The organization provides all of the services required in the contract. These services include but are not limited to, emergency shelter; 24 hour sexual assault and/or domestic violence hotline; crisis, support and group counseling; advocacy; and other support services.

_____12. The organization's services comply with the Michigan Domestic Violence Prevention and Treatment Board's program philosophy.

_____13. The organization serves the entire geographic service area stipulated in their contract.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

Improvement Questions

1. What improvements have occurred in the past year?
2. Are there improvements or changes presently underway?
3. What improvements or changes does your agency have planned?
4. What additional improvements do you think need to be made?

SECTION I. THE STANDARDS – TRANSITIONAL SUPPORTIVE HOUSING

Mandatory Standards

_____1. The TSH program provides safe, single family occupancy units, coupled with supportive services, which are available to domestic violence survivors and their children for not less than 24 months.

_____2. Appropriate supportive services are available but not mandatory for TSH service participants and their children.

_____3. The TSH program goals, objectives, and plans i.e. strategies to achieve its goals and objectives, are consistent with the organization's mission.

_____4. TSH services are culturally appropriate.

_____5. TSH program policies stress non-violence, are service participant centered, and fair, i.e. just, reasonable, unbiased, and balanced.

_____6. TSH services and policy implementation respect the autonomy and rights of service participants.

_____7. The TSH program has written policies that address the following:
- Confidentiality
- Eligibility requirements
  - Survivors of domestic violence
  - TANF income
  - Dependent children
- Domestic violence vs. non-domestic violence service participants, if applicable
- MDVPTB funded vs. non-MDVPTB funded TSH program expectations, if applicable
- Application process
- Program admittance
- Lease agreements
- Rent requirements
- Program terms and conditions
- Health, safety, and security inspections
- Escrow accounts, if applicable
- Service termination
- Access to supportive services once service participants are no longer in the TSH program

_____8. The organization uses designated personnel to implement policies and procedures for the TSH program.

_____9. There is regular evaluation of the services and administration of the TSH program.

_____10. Evaluation of TSH program services includes service participants' feedback and assesses which services to offer.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

Best Practices

_____11. The organization maintains an advisory group that meets on a regular basis to assist the program. This group includes former and/or current service participants that represent a broad base of knowledge and experience.

_____12. The organization takes a leadership role in the local community to identify and address long-term housing needs of survivors of domestic violence, including children.

~ All "Exceeds Standard", "Partially Meets Standard", and "Does Not Meet Standard" ratings require comments. ~

Quality Assurance Standards Pre-Site Visit Checklist

The following is a checklist of items to be included in the packet of information that is sent to the MDVPTB prior to the on-site visit. Please review the checklist to ensure that all required documents are included and will be submitted **by the requested date listed in the cover letter**. Please note that Sections D, E, and F ask for copies of general policies, procedures, personnel policies, proofs, and additional documents.

When submitting documents, please place in sequential order and label as specified below. Six copies of each item are required. Some of the materials listed may not be available or applicable to your agency. Please indicate if this is so.

Part A – Agency Profile

___ A1 Agency History
___ A2 Mission Statement and Philosophy
___ A3 List of Facilities
___ A4 List of Board Members
___ A5 Organizational Chart
___ A6 Staffing Chart
___ A7 Overview of Programs – Chart
___ A8 Units of Service – Chart
___ A9 Community/System Leader Interview List

Part B – Fiscal Administration

___ B1 Attach entire Fiscal Checklist
___ B2 Audit
___ B3 Management Letter
___ B4 Form 990
___ B5 Budget
___ B6 Financial Reports

Part C – Improvement Questions and Quality Assurance Standards Self Evaluation

Attach self-evaluation and improvement questions for each section:

___ C1 Section A Policy and Governance ~ Improvement Questions
___ C2 Section A Policy and Governance ~ Self-Evaluation
___ C3 Section B Community Relations and Fund Development ~ Improvement Questions
___ C4 Section B Community Relations and Fund Development ~ Self-Evaluation
___ C5 Section C Program Administration and Service Delivery ~ Improvement Questions
___ C6 Section C Program Administration and Service Delivery ~ Self-Evaluation
___ C7 Section D Staff and Volunteer Management ~ Improvement Questions
___ C8 Section D Staff and Volunteer Management ~ Self-Evaluation
___ C9 Section E Systems Change ~ Improvement Questions
___ C10 Section E Systems Change ~ Self-Evaluation
___ C11 Section F Financial Management ~ Improvement Questions
___ C12 Section F Financial Management ~ Self-Evaluation
___ C13 Section G Facility, Safety, Security and Health ~ Improvement Questions

___ C14 Section G Facility, Safety, Security and Health ~ Self-Evaluation
___ C15 Section H Contract Requirements ~ Improvement Questions
___ C16 Section H Contract Requirements ~ Self-Evaluation

Part D – Policies and Procedures

NOTE: If there is a welcome packet or standard folder of information that is given to program participants upon intake, please include in this section. Similarly, if there is a manual or standard operating procedures that contains these policies and procedures and it is easier for you to send a complete copy of the manual, it is acceptable to do so. If that is the case, please identify on the checklist where the policy/practice is located e.g. Page 10, 1st paragraph or Policy 20, #3. Lastly, if there is a blank client file that includes forms typically found in a client record, it will be helpful to include that as well.

___ D1 Acceptance of Legal Documents e.g. Warrants/Subpoenas
___ D2 Building Evacuation
___ D3 Care of Children
___ D4 Case Notes/Case Management
___ D5 Child Exclusion from Services
___ D6 Childcare Ratios (within state guidelines)
___ D7 Client Denial
___ D8 Client Grievance
___ D9 Client Transportation
___ D10 Closing of Shelter
___ D11 Communal Living Rules (house rules)
___ D12 Confidentiality
___ D13 Ethical Behavior for Staff
___ D14 Financial Development Plan
___ D15 Health Assessment
___ D16 HIV/AIDS
___ D17 Legal Assessment
___ D18 Non-Discrimination
___ D19 Non-Violence Discipline (corporal punishment)
___ D20 Notification/Mandated reporting to CPS
___ D21 Overflow Plan/Procedures
___ D22 Policies Regarding Service to Clients Who Are: **Mentally Ill**
___ D23 Policies Regarding Service to Clients Who Are: **Addicted to Alcohol and/or Illegal Drugs**
___ D24 Policies Regarding Service to Clients Who Are: **Youth/Runaway**
___ D25 Records Retention
___ D26 Release of Information
___ D27 Removal From Shelter
___ D28 School Attendance
___ D29 Seatbelt/Car Seat Use
___ D30 Security and Safety
___ D31 Service Eligibility
___ D32 Services Designed and Respectful of Religious and Cultural Backgrounds
___ D33 Sexual Harassment
___ D34 Smoking Policies/Procedures
___ D35 Time Guidelines for Initial Client Screening
___ D36 Travel Reimbursement
___ D37 Use of Phone/Equipment/Internet

Part E – Personnel Policies

NOTE: Please attach the organization's Personnel Policies and/or Employee Handbook, identifying on the checklist where the policy/practice is located e.g. Page 10, 1st paragraph or Policy 20, #3. If a policy does not exist, please indicate.

___ E1 At-Will Employer
___ E2 Criminal Background Checks
___ E3 Domestic Violence
___ E4 Employee Development/Training Requirements
___ E5 Fringe Benefit Package
___ E6 Benefits (health, dental, optical, retirement)
___ E7 Education Assistance
___ E8 Family Leave Act
___ E9 Holidays
___ E10 Maternity Leave
___ E11 Personal/Emergency Leave
___ E12 Salary Progression
___ E13 Salary Ranges
___ E14 Sick Leave Accruals/Use
___ E15 Identification of Hiring/Firing Authority
___ E16 Nepotism
___ E17 Performance Appraisals
___ E18 Termination Procedures
___ E19 Workplace Violence

Part F -- Proofs/Documents

___ F1 Articles of Incorporation
___ F2 By-Laws
___ F3 Proof of Non-Profit Status
___ F4 Annual Report
___ F5 Brochures, Flyers, etc.
___ F6 Long Range Plan
___ F7 Board Minutes (last three meetings)
___ F8 Committee Meeting Minutes (all committee meetings for the past three months)
___ F9 Proof of Liability Insurance (general, professional, director and officer)
___ F10 Proof of Unemployment Insurance
___ F11 Proof of Worker's Compensation
___ F12 Staff/Volunteer Job Descriptions (1 for each position or job type)
___ F13 Training Outline and/or Table of Contents from Training Curriculum (full curriculum, handouts, and related materials will be reviewed on site)

The following team member worksheets are included as a guide to the kinds of questions team members might be asking about each of the sections of the Quality Assurance Standards when they are on-site. It is not inclusive but offered to help you and your staff as you prepare for the site visit.

TEAM MEMBER WORKSHEET

SECTION A. SUPPORTING DOCUMENTATION – POLICY AND GOVERNANCE

1. Organizational by-laws.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

2. Written statement of mission and/or purpose.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

3. Written statement of values and/or philosophy.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

4. List of board members that indicates the expertise and knowledge base they bring to the organization.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

5. List of advisory board members, if any, that indicates the expertise and knowledge base they bring to the organization.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

6. Board minutes establishing advisory board, if any, defining its responsibilities, and establishing mechanisms for reporting to the governing body.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

7. Organizational structure chart.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

8. Board member and/or advisory board member job description.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

9. Recent minutes or reports of the governing body or advisory board.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

10. Recent minutes or reports of committee meetings.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

11. Board orientation manual.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

12. Specialized training exists for Board members, the content of which includes Board member responsibilities; the organization's mission, philosophy, and function; general knowledge of domestic and/or sexual violence and empowerment philosophy; an orientation to funding sources, budgets and financial statements including audits; and the MDVPTB philosophy.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

13. Long range, strategic and/or annual plans.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

14. Written performance evaluation of the chief executive officer.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

15. Written policies adopted by the governing body.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

16. Evidence that the governing body evaluates service delivery functions.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

17. Brochures distributed by organization.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

SECTION A. DESCRIPTIVE NARRATIVE RESPONSE – POLICY AND GOVERNANCE

1. How does the composition of the governing body and advisory board, if any, reflect the community and geographical area it represents?

2. What process does the governing body and advisory board, if any, use to recruit new members?

3. Are domestic violence and/or sexual assault service participants represented on the board or advisory board?

4. How many board meetings were held during the last year?

5. How many board members does the organization have and what was the percentage of attendance at each board meeting in the last year?

6. How are new board members oriented?

7. What are the provisions for on-going training for board members? Is board training mandatory?

8. Does every board member serve on a committee?

9. How does the governing body and advisory board, if any, evaluate its own performance?

   - How have they provided stability and/or leadership during the past year for the:

     ➔ Domestic violence program?

     ➔ Sexual assault program?

- How do they assure differentiated roles between the board and executive director or director of the:

  - ➔ Domestic violence program?

  - ➔ Sexual assault program?

10. What is the policy for removing board members who are not actively participating?

11. What are the term limits for board membership and do they ensure a balance of new members and seasoned members?

12. How and how often is a performance evaluation completed for the organization's chief executive officer and the domestic violence and/or sexual assault program's chief executive officer, when the domestic violence and/or sexual assault program is part of an umbrella organization?

13. Does the board involve itself in any employee disputes? If so, at what point does it do so?

14. What kind of reports do the governance board and the advisory board, if any, receive and generate so that it may adequately perform its planning and evaluation functions?

15. Is the domestic and/or sexual assault violence program a unit within a larger organization?

- If so, identify the title of the immediate higher position to which the director of the domestic and/or sexual violence program reports.

- Does the larger organization use a part of the revenues designated for domestic and/or sexual violence services for administration of the larger organization?

- What percentage of the larger organization's revenues/resources are designated for domestic and/or sexual violence services?

16. Identify those policies which the governing board or advisory body, if any, have adopted or revised over the last year.

17. What is the process the board uses for development of its long-range, strategic or annual plan?

    - Describe provisions for consumer participation in organizational planning and evaluation.

    - How does staff participate in the planning and evaluation process?

    - Who are the other key stakeholders included in the organizational planning and evaluation process?

18. Have there been any problems involving conflicts of interest or nepotism involving any governing body members over the past year? If so, please explain.

SECTION B. SUPPORTING DOCUMENTATION – COMMUNITY RELATIONS AND FUND DEVELOPMENT

1. Brochures, newsletters, other printed materials published by the organization.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

2. Press releases from the organization and local news articles relative to domestic and/or sexual violence that mention the organization.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

3. Annual report.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

4. Client service data and records and reports used to compile data.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

5. Training program or curriculum for public education programs.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

6. Evidence of training of personnel who answer the phone and greet visitors.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

7. Records or logs of public education activities and evaluations of programs by the audiences to whom presentations were made.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

8. Marketing plan.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

9. Fund development plan.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

10. Media response plan.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

11. Minutes of organizational body or committee meetings over the last year which document involvement in community relations and fund development activities.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

12. Evidence of interaction with community agencies that also interact with domestic violence and/or sexual assault survivors.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

13. Job descriptions of all staff members involved in community relations and fund development activities.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

14. Examples of recent direct mail appeals, grant applications and other written requests for funding.
? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

15. Charitable license to solicit.
? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

16. Records of special events.
? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

17. Records of contributions, revenue sources and amounts.
? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

18. Records of responses to inquires for information.
? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

19. Progress reports to funding sources.
? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

20. Written evaluations of community relations or fund development programs and records and reports used to prepare evaluations. Evidence of shared responsibility by management and the governing body for community relations and fund development.
? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

SECTION B. DESCRIPTIVE NARRATIVE RESPONSE – COMMUNITY RELATIONS AND FUND DEVELOPMENT

1. Describe the nature and scope of the organization's public disclosure practices. How does the organization distribute its annual report?

2. Identify the individual and staff position with primary responsibility for public disclosure, other staff positions with significant responsibility and the reporting relationship between staff.

3. What is the role of the governing body relative to public disclosure and public education?

4. How does the agency observe the tenets of client confidentiality in telling survivor stories or in the use of survivors as presenters in public education programs?

5. Describe the organization's public education program including how educators are trained.

6. Have any surveys or assessments been conducted to determine the level of recognition, respect and support for the organization?

7. Is the organization experiencing any problems with being viewed as the primary advocate in the community for domestic violence and/or sexual assault survivors? If so, what are the problems?

8. Does the organization comply with State and Federal laws related to lobbying and political activity?

9. How has the organization informed the community concerning any legislative or local government issue dealing with the rights of survivors of domestic and/or sexual violence? Describe activities.

10. How does the organization work toward inter-agency cooperation? With what community groups does the organization interact?

11. How does the organization conduct community relations activities in outlying communities?

12. How does the organization evaluate the success of its public education programs?

13. How does the organization accommodate non-English speaking communities and people who are hard of hearing, deaf, partially sighted, blind, or individuals with other special needs in your public relations and public education materials?

14. Describe the governing body's involvement in fund development.

    - What percentage of board members contribute financially to the organization?

15. How does the organization balance fund development to meet the current needs of the organization with the need to accumulate sufficient cash reserves?

16. How does the organization evaluate the success of its fund development activities?

SECTION C. SUPPORTING DOCUMENTATION – PROGRAM ADMINISTRATION AND SERVICE DELIVERY

1. Chief executive officer job description.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

2. Organizational chart.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

3. Agency mission and service delivery philosophy.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

4. Service delivery plan that describes how the agency serves survivors from their designated service area and how they serve those referred from other areas.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

5. Applicable program evaluations.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

6. Written reports to the governing body include documentation of advocacy, in person accompaniment, shelter nights, counseling hours and other services.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

7. Program administration and service delivery policies include the following:

   - ❑ access to, storage and disposal of client files
   - ❑ alcohol and other illegal drugs
   - ❑ care of children
   - ❑ case management
   - ❑ changes to rules in past year
   - ❑ client rights and client grievance
   - ❑ closing of shelter, temporarily or permanently
   - ❑ communal living/house rules
   - ❑ confidentiality
   - ❑ conflict resolution
   - ❑ counseling
   - ❑ denial of service
   - ❑ ethical guidelines for staff behavior
   - ❑ equal access to services, exclusions from access
   - ❑ HIV/AIDS
   - ❑ information and referral
   - ❑ intake
   - ❑ loan of money
   - ❑ medical issues, first aid and emergency response
   - ❑ non-violence
   - ❑ orientation of residents/children to shelter
   - ❑ protection orders
   - ❑ provision of crisis intervention services including counseling to minors that addresses at a minimum, parental permission and number of sessions allowed by the Mental Health Code for licensed professional staff
   - ❑ referral to outside counseling services

- ❑ release of information
- ❑ release of liability
- ❑ responding to child abuse and neglect
- ❑ responding to rape and sexual assault of minors
- ❑ safe home policies, if applicable
- ❑ school attendance
- ❑ security and safety procedures
- ❑ service eligibility/admission
- ❑ service to children
- ❑ service to clients referred from other geographic areas
- ❑ sexual harassment and exploitation
- ❑ shelter of children factoring in issues related to custody and parenting time orders
- ❑ staff assignment when related to a client
- ❑ statistical documentation and reporting
- ❑ transfer of clients to another shelter
- ❑ transporting service recipients
- ❑ writing case notes and case note review

8. Written procedures for implementation of policies.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

9. Statistical reports identifying numbers served and level of service provided.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

10. Brochures and outreach materials which identify the geographical area served.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

11. Crisis call activity log indicating time of call, person taking the call and disposition of the call.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

12. Samples of individualized service plans and case notes.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

13. Resource and referral manual.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

SECTION C. DESCRIPTIVE NARRATIVE RESPONSE – PROGRAM ADMINISTRATION AND SERVICE DELIVERY

1. Describe the process for distribution of information relative to program administration and policy to service delivery staff.

2. Describe the process for staff sharing of case management information.

3. Describe how the client's service plan is developed.

4. How do your services reflect your mission and the Michigan Domestic Violence Prevention and Treatment Board's philosophy?

   - How often do you review the mission and philosophy?

5. How do you provide outreach to isolated geographical areas in your service area?

6. Why might a person seeking service be denied?

   - What arrangements are made to ensure their safety if they are not provided service?
   - Do you maintain a list of persons not eligible for service?
   - If so, how often is that list reviewed?

7. How do you ensure that immigrant survivors are not excluded from service as part of the admission procedure?

8. What services are provided to adults?

   - Who provides them?
   - How often are they provided ?
   - What is the anticipated outcome?

9. What services are provided to children?

   - Who provides them ?
   - How often are they provided ?

▪ What is the anticipated outcome?

10. What is the organization's philosophy relative to advocacy on behalf of individual clients?

11. Describe how your organization instructs survivors in the dynamics of:

    - Domestic violence? – How do you measure their knowledge?
    - Sexual assault? – How do you measure their knowledge?

12. Describe how your organization instructs survivors about available resources and ways to access services when threatened with violence or when violence has occurred:

    - Domestic violence survivors? – How do you measure their knowledge?
    - Sexual assault survivors? – How do you measure their knowledge?

13. Describe how your organization helps survivors understand the ways in which they are isolated, the importance of establishing support systems and how to establish support systems for:

    - Domestic violence survivors? – How do you measure their understanding?
    - Sexual assault survivors? – How do you measure their understanding?

14. Describe how your organization helps survivors understand the importance of self-sufficiency and setting goals to achieve it:

    - Domestic violence survivors? – How do you measure their understanding?
    - Sexual assault survivors? – How do you measure their understanding?

15. How do you work with survivors of domestic and/or sexual violence and their children on safety plans?

16. Describe how communal living policies are formulated, reviewed and enforced.

    - How is conflict resolved?

17. How are violent encounters in the shelter addressed?

18. How does your organization provide examples of non-violent methods of discipline for shelter residents with children?

    - How are non-violent practices and principles between adults modeled?

19. What are the circumstances under which a survivor and/or her children may be asked to leave the shelter?

20. What arrangements are made for their safety?

21. How does your organization provide legal information and advocacy for survivors of domestic and/or sexual violence?

22. How does your organization provide medical information and advocacy for survivors of domestic and/or sexual violence?

23. Describe what your organization does to ensure cultural sensitivity.

24. How are case records managed?

    - Who has oversight?
    - How does the person who has oversight respond when judgmental comments are noted in client files?
    - How do you ensure no harm for clients based on what you keep in case files?

25. How do you protect individual case files from persons in the organization or others who are not working directly with the client?

26. Are case files conveniently located for those who do work directly with clients?

27. How do you protect confidentiality when destroying case records after the maximum required storage time has ended?

28. Do case records include:
    - ❑ a complete client information form
    - ❑ an assessment of services needed
    - ❑ an accounting of services provided
    - ❑ efforts to facilitate and coordinate services with other community agencies
    - ❑ release of liability signed by the client
    - ❑ release of information forms signed by the client
    - ❑ proof of client notification of the organization's grievance policy
    - ❑ other documentation measuring service delivery outcomes?

29. How are subpoenas handled?

30. How are child protective service issues handled?

31. How would your organization characterize the goals of its counseling programs?

32. Is clinical supervision available to counseling staff when appropriate?

- How is it accessed?
- Who decides when it is needed?

33. Do you allow tape or video recording of counseling sessions with adults or children?

34. Describe the ways in which your organization makes it possible for clients to access:

- Transportation?
- Child care?
- Health services?
- Financial services?
- Legal services?

35. Is direct financial service provided to clients?

- Who has access to the funds?
- How are funds accounted for?

36. Have you referred or transported survivors to other domestic violence and/or sexual assault service providers in the last year?

- Have other programs referred or transported survivors to your program?
- Were there any problems in that process?

SECTION D. SUPPORTING DOCUMENTATION – STAFF AND VOLUNTEER MANAGEMENT

1. Applicable long-range, strategic and/or annual plans which address human resource issues.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

2. Organizational chart.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

3. Job descriptions for paid staff and volunteers.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

4. Training manuals for paid staff and volunteers and current agendas of training sessions.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

5. Evidence of reporting and payment of employment taxes.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

6. Employer identification number.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

7. Paid staff and volunteer evaluation forms.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

8. Individual paid staff and volunteer personnel files.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

9. Non-discrimination and affirmative action policies.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

10. Paid staff and volunteer development plans.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

11. Appeal procedures for paid staff and volunteers.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

12. Personnel policies including:
    - ❑ Access for persons with special needs including those who use wheelchairs, are partially sighted, blind, hard of hearing, or deaf
    - ❑ Access to personnel files
    - ❑ At will employment
    - ❑ Benefits
    - ❑ Criminal checks
    - ❑ Domestic violence and/or sexual assault
    - ❑ Educational assistance and conference attendance
    - ❑ Employee development
    - ❑ Employee status, exempt/non-exempt, full-time/part-time, and benefit eligibility

- ❑ Ethical behavior
- ❑ Family Leave Act, if applicable
- ❑ Holidays
- ❑ Identification of hiring authority
- ❑ Method of salary progression
- ❑ Nepotism/conflict of interest
- ❑ Performance appraisals
- ❑ Personal, emergency, disability, maternity, jury, military leave
- ❑ Personnel files maintenance
- ❑ Progressive discipline
- ❑ Salary ranges
- ❑ Sexual harassment
- ❑ Sick leave accrual and use
- ❑ Substance abuse including testing
- ❑ Termination procedures
- ❑ Training requirements
- ❑ Working hours, overtime and paydays, documentation
- ❑ Workplace violence

SECTION D. DESCRIPTIVE NARRATIVE RESPONSE – STAFF AND VOLUNTEER MANAGEMENT

1. Describe the methods used to ensure the hiring of a diverse workforce reflective of the community and geographic area in which the organization is located.

2. Describe your pre-hiring screening process for paid staff and volunteers.

   - Are any special steps taken in screening volunteers and paid staff who have access to children?
   - What are those steps?

3. Describe the orientation and training process for paid staff and volunteers. Include a description of your training outline and materials containing:

   - training goals and objectives
   - hours of training
   - content including community resources
   - domestic violence and/or sexual assault response
   - specialized emergency information
   - how the organization evaluates knowledge gained from training
   - describe how the Michigan Domestic Violence Prevention and Treatment Board's philosophy statement is integrated into the organization's training programs

4. How does your organization manage continued development of paid staff and volunteers to ensure they are current with developments in the prevention and treatment of domestic and/or sexual violence?

5. How does your organization ensure that it is in compliance with federal and state employment laws?

6. Does your organization have a policy related to hiring relatives or friends?

    - Does the policy assure that those individuals will not be hired or supervised by the person who is related?

    - What measures does the organization take to avoid the appearance of conflict of interest?

7. How many volunteers are currently active?

    - What methods are used to keep volunteers motivated?

    - How are volunteers supervised and how does the program keep in touch with the actions and effectiveness of the volunteers?

    - Do volunteers have access to an employee at all times?

8. Describe your performance evaluation process for paid staff and volunteers.

    - How often is evaluation performed?

    - What is its relationship to job descriptions and to goals mutually set by the supervisor and paid staff or volunteer?

9. Describe the organization's expected ethical behavior for its paid staff and volunteers. Include:

    - treatment of clients

    - relationships with clients

    - confidentiality

    - substance abuse

    - use of materials and equipment which belong to the agency

    - outside work including domestic violence and/or sexual assault consulting work for which they might be paid by someone other than the organization

    - expectations of involvement when attending employer-paid conferences

    - any other ethical issue of importance to the organization

10. How does the organization administer its salary and benefits program to ensure that it is equitable and competitive?

11. How does the organization disseminate information to the paid staff and volunteers?

12. How does the organization maintain paid and volunteer staff personnel records including access, confidentiality, retention and storage?

13. Describe your organization's process for addressing inadequate performance by paid and volunteer staff.

- Progressive discipline issues, if applicable, through procedures for termination.
- Have there been any grievances filed in the past year?
- How were they resolved?
- Does your organization provide references for employees seeking employment after termination?

14. How does the organization resolve conflicts between staff, paid or volunteer?

15. How does your organization handle issues related to an employee living in a violent relationship?

16. Does your organization review proof of insurance and valid drivers licenses for all paid staff and volunteers who drive for the organization or transport clients as a part of their work responsibilities?

SECTION E. SUPPORTING DOCUMENTATION – SYSTEMS CHANGE

1. Board adopted systems change plan.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

2. Organizational chart/job description of designated systems change personnel.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

3. Educational curriculum/materials specifically designed for systems change education.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

4. Evaluations of educational presentations to systems personnel or community groups that determine whether there is an understanding of the issues listed as outcomes.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

5. Law enforcement response policies.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

6. Assessment of how community systems/organizations are responding to the issues of domestic violence and sexual assault, to survivors and significant others including children.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

7. Records indicating involvement with collaborative bodies working on systems change.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

8. Media articles that address advocacy and systems change work conducted by the organization.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

9. Case files that indicate individual advocacy efforts on behalf of clients.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

SECTION E. DESCRIPTIVE NARRATIVE RESPONSE – SYSTEMS CHANGE

1. Describe relationships, collaborations and partnerships with key figures in community systems.

2. Describe any training the organization's staff has received in the last year relative to providing effective advocacy for survivors of domestic and/or sexual violence and their significant others including children.

3. Describe the ways in which you advocate on behalf of individual domestic and/or sexual assault survivors. How do you encourage survivors to advocate on their own behalf?

4. Do you actively seek evaluative information from systems which affect the prevention and treatment of domestic violence and/or sexual assault about the ways in which you can work better together?

   - Do you seek ideas from other systems to improve the prevention and treatment of domestic violence and/or sexual assault in your community?

5. Describe how you handle inappropriate practices carried out by the systems that affect the prevention and treatment of domestic violence and/or sexual assault.

6. Does your community have a collaborative body that meets regularly to address issues of domestic violence and/or sexual assault?

   - Who is involved?

   - What are the group's activities?

   - What has changed as a result?

7. Describe how you address systems change issues in outlying communities or counties.

8. Have there been any cases within the last year in your community in which a systems change organization responded inappropriately to your agency, a domestic violence and/or sexual assault survivor or their significant others including children? Did you respond and, if so, describe what you did.

9. Describe any positive changes that you believe have occurred in the way another organization responds to domestic violence and/or sexual assault survivors because of your organization's involvement.

10. Describe what you would do in your community if you had more resources.

SECTION F. SUPPORTING DOCUMENTATION – FINANCIAL MANAGEMENT

1. Written accounting and financial management policies have been adopted by the governing body.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

2. Written purchasing and inventory control policies are in place.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

3. Written policies exist to control the investment of unexpended fund balances and to obtain a maximum return on investments.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

4. The organization has a written plan for financial management and long term financial stability.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

5. Job description and resume of person(s) responsible for implementation of accounting policies and procedures for financial management are in place.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

6. Organization provided:
   - Proof of bonding insurance
     ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present
   - Proof of officer's and director's liability insurance
     ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present
   - Proof of professional liability insurance
     ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present
   - Monthly financial statement for the last year
     ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present
   - Chart of accounts
     ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present
   - The current approved operating budget
     ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present
   - Minutes of governmental body meetings which indicate board adoption of the budget
     ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present
   - Salary range schedule
     ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present
   - Minutes of meeting in which salary schedule was adopted
     ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

- Minutes of finance committee meetings

? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

- Most recent audit conducted by independent accountant

? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

- Annual report which publicly discloses financial position

? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

- Form 990 for most recently completed fiscal year

? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

SECTION F. DESCRIPTIVE NARRATIVE RESPONSE – FINANCIAL MANAGEMENT

1. Is accounting done on an accrual basis?

2. Is there functional allocation of indirect costs?

3. Are fundraising costs identified?

4. Are management and general costs identified?

5. Are net assets segregated as unrestricted, temporarily restricted and/or permanently restricted?

6. Are changes in each class of net assets disclosed on statement of activities?

7. Is the policy regarding treatment of contribution for which restrictions are met in the same period disclosed?

8. Are unconditional promises to give measured at fair value? If long-term, are promises to give discounted to present value with appropriate footnote disclosures?

   - Is there footnote disclosure of conditional promised to give?

9. Describe the organization's internal control procedures.

   - What are the lines of authority and reporting for employees involved in accounting activities?
   - Are all transactions authorized by an appropriate responsible individual?
   - What are the limits of authorization?
   - Is mail opened by someone other than the bookkeeper?
   - Does someone list all receipts both cash and checks, showing from whom it was received and the amount?
   - Are pre-numbered receipts issued immediately for all cash received?
   - How frequently are deposits made?
   - Are all checks immediately endorsed "For Deposit Only"?

- Are bank statements reconciled by someone other than the person authorized to deposit or withdraw money?
    - ➔ Are pre-numbered checks used?
    - ➔ Are two signatures requires?
    - ➔ Are checks ever pre-signed or is a signature stamp used?

10. Have all payments for the following been made and made in a timely fashion in the last year?
    - Payroll taxes
    - Worker's compensation insurance
    - Unemployment insurance
11. How are employee hours of work tracked?
12. How do you determine which employees are exempt or non-exempt for overtime provisions of the Fair Labor Standards act?
13. How are employee benefits tracked?
14. How is the budget developed and approved?
15. How does the chief executive officer monitor the financial situation/status of the organization?
16. How does the governing board monitor the financial situation/status of the organization?
17. What process does the governing board use to assure that salaries are locally competitive?
18. Does the board have a policy on accumulation of reserves? How many days of expenses could be covered by the amount of reserve on hand?
19. How is travel reimbursement handled?
    - Is there a travel and reimbursement policy?
    - How does the governing board determine reimbursement rates?
    - Are receipts required for expenses paid out-of-pocket by the employee?
    - Do travel policies define what is considered a workday for non-exempt employees attending a conference?

- Are employees required to complete a mileage reimbursement form that indicates where they have traveled to, how many miles they've gone, reimbursement rate per mile and total cost?

- Is a prior approval required for reimbursement for purchases?

20. Are there policies on personal use of agency telephones and office equipment by staff members? What are they?

21. Is there a policy relative to use of personal credit cards to pay reimbursable expense?

22. What is the policy relative to employees and volunteers using their own auto on organization business?

23. Has it been necessary for the organization to borrow to meet expenses in the last year?

24. What percentage of the budget is allocated for management and general costs?

25. What percentage of the budget is allocated for fund development costs?

26. What are the organization's requirements for competitive bidding for purchases?

27. How does the agency control the investment of unexpended fund balances? Are there procedures to obtain a maximum return on investments?

28. Do audit components include a balance sheet/statement of financial position, statement of activities, statement of cash flows and notes to financial statements?

29. Did the auditor prepare a management letter? Did the agency provide a written response?

30. Does the independent author meet with the governing body or its designated committee at least annually to discuss the audit report and together matters of concern?

31. What are the limits of your various liability insurance's? What do they cover?

32. Is an inventory of equipment and furnishing conducted periodically?

SECTION G. SUPPORTING DOCUMENTATION – FACILITY, SAFETY, SECURITY AND HEALTH

1. Written facility management policies.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

2. Evidence of adherence to codes, occupancy certificates, health department certificates, etc.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

3. Written plan that addresses facility, health and safety issues.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

4. Organizational chart/job description of personnel responsible for building maintenance and health and safety issues.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

5. Evaluations of facility, health and safety issues.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

6. Contracts related to building maintenance.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

7. Building evacuation policy and procedures.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

8. Occupancy records which indicate the number of people housed daily over the last year.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

9. Security policies for protection of clients, staff, and volunteers.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

10. Liability and fire insurance coverage.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

11. First aid and medical emergency policies.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

12. Policy on cardiopulmonary resuscitation, universal precautions and communicable diseases training for staff.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

13. Policy regarding seat belts in all vehicles used for agency business.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

14. Approved car seats available, properly installed and used for transporting all children as required by law.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

SECTION G. DESCRIPTIVE NARRATIVE RESPONSE – FACILITY, SAFETY, SECURITY AND HEALTH

1. Who is responsible for facility, health and safety policy and implementation?

   - How is oversight accomplished?

   - Describe security, safety and health training for staff.

   - Is the organization adequately insured?

2. Are there local health and fire codes you are expected to meet?

   - Are you inspected regularly by these departments and what is the outcome of those inspections?

   - Have you been cited for non-compliance with any of these requirements in the last year?

   - If so, how was it resolved?

3. The peer review team will tour your facility and grounds during the visit. They will look at issues related to access, the sufficiency of bed space, opportunities for privacy, smoke detectors and fire extinguishers to ensure that they are operable and/or inspected, the sufficiency of common area space, play areas for children, opportunities for ventilation, safety related to screens, storage of toxic materials, and availability of first aid supplies. They will observe the level of cleanliness and whether the facility is comfortable and inviting and the office is organized and business-like. They will look at the adequacy of trash disposal and storage of food. They will talk with you about how you accommodate dietary requirements and your attention to cultural preferences related to food and how you provide for adequate nutrition needs.

4. Does your organization regularly employ a commercial pest control company?

   - If not, how do you control for extermination of pests?

   - How do you deal with donated goods that may present a health problem?

5. How do you provide for safety related to the facility and grounds?

6. How do you plan for security including protection from assailants, perpetrators and from other shelter residents? Consider the:
   - shelter
   - telephones
   - grounds
   - offices
   - security of clients and their children when they leave the grounds while a resident

   - Do you have a policy relative to assailants/perpetrators on the premises?

   - What policies have you instituted to protect children while in shelter?

   - Is your shelter location a secret and what is the rationale?

   - If so, how is that received in the community?

7. What arrangements are made for clients who smoke?

   - Is there adequate protection for non-smokers?

   - Do you provide for storage of matches and lighters out of the reach of children?

8. What are your evacuation procedures in case of fire or natural disasters?

   - Do you practice with staff and clients?

   - Are bedroom windows marked to alert firefighters during a fire?

9. What are your policies and procedures for routine cleaning throughout the facility and in the food preparation and service areas?

10. Is your facility in compliance with regulations related to lead, radon, asbestos and carbon monoxide?

11. What are your procedures for medical emergencies?

12. What are your procedures for required workers compensation reporting?

13. What measures do you take if a person in shelter has an infectious disease?

14. Are employees provided:

- CPR training?
- Education on communicable diseases?
- Universal precautions training?
- Testing for tuberculosis and hepatitis?

15. How do you deal with other resident health care issues such as allergies or chronic health care issues?

16. Is all of your major equipment functional including the furnace, stove, refrigerator?

17. Is the crisis line always accessible? Will a caller ever experience a busy signal?

18. Are clients and their children encouraged to develop a safety plan should violence re-occur?

19. Do all vehicles used to transport clients and their children have operable seat belts?

- Do you have approved safety seats available for children?
- Are children under twelve encouraged to sit in the back seat?
- How do you communicate laws regarding child safety during transport to staff and volunteers?

The peer review team will tour your facility and grounds during the visit and complete the following checklist:

Shelter Visit Checklist: Y = Yes N= No UTD= Unable to Determine

___ Y ___ N ___ UTD No alcohol, illegal drugs or weapons are allowed on the premises
___ Y ___ N ___ UTD Services for those dependent on alcohol or illegal drugs are available either directly or through referral

The shelter has written policies and procedures that:

___ Y ___ N ___ UTD Regulate access to the facility
___ Y ___ N ___ UTD Document the coming and going of clients
___ Y ___ N ___ UTD Require school aged children to attend school or the provider has school provided on site
___ Y ___ N ___ UTD Regarding child care provision
___ Y ___ N ___ UTD Require volunteers/staff transporting clients in personal vehicles to have a valid driver's license on file

___ Y ___ N ___ UTD Require children under 12 to sit in the back seat in vehicles with front air bags and for making sure child safety seats are properly installed and used for children under 40 lbs
___ Y ___ N ___ UTD Require all passengers/drivers to wear seat belts
___ Y ___ N ___ UTD Prohibit smoking in vehicles if clients/children are being transported
___ Y ___ N ___ UTD Require that all vehicles used to transport clients/children be insured for liability and physical damage

Shelter Facility:

___ Y ___ N ___ UTD Is handicap accessible or has policies and procedures in place to secure alternative shelter for disabled clients
___ Y ___ N ___ UTD Prohibits cooking, space heating or smoking in sleeping rooms
___ Y ___ N ___ UTD Is clean
___ Y ___ N ___ UTD Is in good repair
___ Y ___ N ___ UTD Has adequate personal supplies available to clients and their children
___ Y ___ N ___ UTD Has policies and procedures in place for assuring safety in food preparation, storage and disposal
___ Y ___ N ___ UTD House rules clearly identify client participation in shelter upkeep and client participation is not excessive
___ Y ___ N ___ UTD Allows sufficient client access to food/drinks
___ Y ___ N ___ UTD Prohibits smoking inside the facility
___ Y ___ N ___ UTD Has adequate bed/crib space available for each client
___ Y ___ N ___ UTD Has adequate operable restrooms and bathing facilities available for clients and their children
___ Y ___ N ___ UTD Entrances, exits, steps, walkways, etc. are clear
___ Y ___ N ___ UTD Has adequate illuminated and operable fixtures and outlets in place
___ Y ___ N ___ UTD Has adequate pest control and garbage removal
___ Y ___ N ___ UTD Has proof of passing an annual furnace inspection on file that includes a carbon monoxide test
___ Y ___ N ___ UTD Has adequate 24 hour heat, electricity and water service available
___ Y ___ N ___ UTD Kitchens or food service areas are free of grease build up or ventilation equipment, rodents, rodent droppings and insects
___ Y ___ N ___ UTD Is equipped with an operable fire detection system
___ Y ___ N ___ UTD Has policies/procedures in place for providing and documenting quarterly fire detection system tests
___ Y ___ N ___ UTD Documents that the fire detection system has been regularly tested
___ Y ___ N ___ UTD Conducts quarterly fire drills
___ Y ___ N ___ UTD Documents quarterly fire drills
___ Y ___ N ___ UTD Has policies and procedures in place for reviewing emergency evacuation procedures with all residential clients and staff
___ Y ___ N ___ UTD Has adequate number of fire exits
___ Y ___ N ___ UTD Has emergency evacuation diagrams posted in the hallways and in sleeping rooms
___ Y ___ N ___ UTD Has shelter windows free from outside release bars and debris
___ Y ___ N ___ UTD Is free from combustible materials including basements, attached buildings and attics
___ Y ___ N ___ UTD Has an annual fire safety inspection on file
___ Y ___ N ___ UTD Has adequate first aid supplies available and accessible
___ Y ___ N ___ UTD Staff receive first aid training with annual course updates
___ Y ___ N ___ UTD Has policies and procedures in place for administering prescription and over-the-counter medication

___ Y ___ N ___ UTD	Has access to phone and emergency numbers at all times free of charge
___ Y ___ N ___ UTD	Maintains a daily log which includes the name, age, sex and client number for all shelter residents
___ Y ___ N ___ UTD	Has written procedures in place for staff which outline expectations for their interaction with clients including client empowerment theory, development of safety planning, housing location plan, review of the availability of FIA support, etc.

SECTION H. SUPPORTING DOCUMENTS – CONTRACT REQUIREMENTS

1. Evidence of non-profit status.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

2. Articles of Incorporation.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

3. Minutes or by-laws which indicate who is authorized to sign contracts.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

4. Financial and client information reports submitted to the FIA in the last year.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

5. Records retention policy.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

6. Proof of liability insurance which includes the amount of coverage.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

7. Proof of workers compensation and unemployment insurance coverage.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

8. Written non-discrimination and affirmative action policies.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

9. Written client rights policy and client grievance procedures.
   ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

10. Written complaints from applicants or recipients of service and any written responses.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

11. Written confidentiality policy and release of information forms.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

12. Written policy regarding referral to outside counseling service when necessary or requested.
    ? Present/Outstanding ? Present/Adequate ? Present/Not Adequate ? Not Present

SECTION H. DESCRIPTIVE NARRATIVE RESPONSE – CONTRACT REQUIREMENTS

1. Does the organization charge fees for service?

2. Are the organization's contract required reports accurate and submitted on time?

3. How many years' books and records has the organization retained and where are they stored?

4. Has the organization received any complaints of discrimination from anyone in a protected class under the laws of the United States or the State of Michigan?

   - How did the agency handle the complaint?

5. How does the composition of the staff reflect the ethnic makeup of the community?

6. Has the organization published or distributed any written/visual material or other work product developed in connection with the contract?

   - If yes, was prior approval sought?

7. What is the process for informing applicants or recipients of service of their right to a fair hearing if they are denied service or if service is reduced or terminated, or if the organization failed to act upon a request for service within a reasonable period of time?

8. What is the organization's procedure for the release of client information?

   - Does the organization require the client sign a release before information is released?

   - How do you communicate to your staff that discussion with unauthorized persons, either during or after working hours, information about individual clients learned through their employment, is a breach of confidentiality?

9. Are you contracted to provide services in more than one county?

   - Describe how you provide services in those counties outside the county in which your primary office and/or shelter is located.

10. Describe how the 24hour hotline works.

    - Is access always immediately available to those who call?

    - Is there ever a circumstance where the caller might have to make more than one attempt to get through?

11. Is emergency shelter staffed and accessible 24 hours a day, 365 days a year?

- Have you closed your shelter for any reason over the past year?
- If so, why?

12. What is the anticipated outcome for clients who are provided crisis, support and/or group counseling?

- How often do you offer group counseling?
- What counseling opportunities are available for non-residents?
- Where are counseling appointments located?

13. Describe how you meet contract requirements for provision of support services--health care, legal assistance, housing assistance, financial assistance, transportation assistance, child care/children's services and systems change in *each* county in your agency's geographic service area.

Program – City
ON-SITE REVIEW SCHEDULE

	Day One	Day Two	Day Three	Day Four
8:30 AM		Pick documents up from site		Community partner interviews On site
9:00 AM		Review documents Phone/in-person interviews with community partners Off site	Interview Executive Director/CEO Tour facility Review case records and personnel files On site	
9:30 AM				Follow-up questions and/or file review On site
10:00 AM				
10:30 AM				Team meeting Off site
11:00 AM				
11:30 AM				
12:00 Noon			Lunch	
12:30 PM				
1:00 PM			Interview Staff On site	
1:30 PM				
2:00 PM				
2:30 PM				
3:00 PM		Break		
3:30 PM		Team meeting Off site		
4:00 PM				Meet with Executive Director/CEO On site
4:30 PM				
5:00 PM			Break – TA Time	Meet with Board of Directors On site
5:30 PM		Dinner	Dinner	
6:00 PM				
6:30 PM				
7:00 PM		Team meeting Off site	Team meeting Off site	
7:30 PM	Team meeting Off site			
8:00 PM				
8:30 PM				

Michigan Domestic Violence Prevention and Treatment Board
Quality Assurance Program
On-Site Documents Checklist

In order for the Peer Review Team to determine compliance with the Michigan Domestic Violence Prevention and Treatment Board's Quality Assurance Standards, several additional documents must be examined at the time of the review. To prepare for the team's visit, please have the following items labeled and available on site by the time the team arrives. Please indicate if an item is unavailable.

Section A. Policy and Governance

- ❑ Board minutes - Last 12 months
- ❑ Board member job description
- ❑ Committee meeting minutes - Last 12 months
- ❑ Board orientation manual
- ❑ Executive director performance evaluation

Section B. Community Relations and Fund Development

- ❑ Press releases
- ❑ Client service data and records, reports used to compile data
- ❑ Training curricula for public education
- ❑ Records or logs of public education activities
- ❑ Evaluations of public education activities
- ❑ Most recent direct mail appeal
- ❑ Examples of recent grant applications and funding requests
- ❑ Special events records
- ❑ Records of contributions and revenue sources and amounts
- ❑ Records of responses to inquiries for information
- ❑ Progress reports to funding sources
- ❑ Evaluations of community relations or fund development programs and records and reports used to prepare evaluations

Section C. Program Administration and Service Delivery

- ❑ Program evaluations
- ❑ Service delivery reports
- ❑ Changes to rules in the past year
- ❑ Policies related to:
    - Conflict resolution
    - Counseling
    - Information and referral
    - Loan of money
    - Orientation of residents/children to shelter
    - Protection orders
    - Service to clients referred from other geographic areas
    - Shelter of children when adult resident does not have legal custody

- Statistical documentation and reporting
- Transfer of clients to another shelter
- Writing case notes and case note review

❑ Crisis call activity log indicating time of call, person taking call, call disposition
❑ Case files - Current and closed, resident and non-resident
❑ Resource and referral manual

Section D. Staff and Volunteer Management

❑ Volunteer job descriptions
❑ Paid staff evaluation forms
❑ Volunteer staff evaluation forms
❑ Training curriculum and/or handouts

Section E. Systems Change

❑ Education curriculum/materials designed for systems change personnel
❑ Evaluations of educational presentations to systems change personnel
❑ Law enforcement response policies
❑ Records indicating involvement with collaborative community bodies
❑ Media articles

Section F. Financial Management

❑ Policies related to:
- Accounting and financial management
- Purchasing and inventory control
- Investment of unexpended fund balance Investment of unexpended fund balance

❑ Proof of bonding insurance
❑ Monthly financial statements - Last 12 months
❑ Chart of accounts
❑ Salary range schedule and meeting minutes in which salary schedule was adopted
❑ Finance committee minutes - Last 12 months

Section G. Facility, Safety, Security and Health

❑ Facility management policies
❑ Certificates
- Occupancy
- Health department
- Fire codes

❑ Evaluation of facility, health, and safety issues
❑ Building maintenance contracts
❑ Occupancy records - Last 12 months
❑ Policy on CPR and AIDS/HIV universal precautions training for staff

Section H. Contract Requirements

❑ By-laws or minutes indicating who is authorized to sign contracts
❑ Written complaints from applicants or recipients of service and written responses