



MICHIGAN DOMESTIC AND SEXUAL VIOLENCE PREVENTION AND TREATMENT BOARD

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Quality Assurance Standards

**Including Worksheets
Revised August 2013**

Website: <http://www.michigan.gov/domesticviolence>
State of Michigan – Department of Human Services

Michigan Domestic and Sexual Violence Prevention and Treatment Board
Quality Assurance Standards
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**Michigan Domestic and Sexual Violence Prevention and Treatment Board
Quality Assurance Standards ~ Instructions for Self-Evaluation**

For each section:

1. Review the **Introduction, Summary of Standards, and Basic Considerations**.
2. Complete the **Introductory Questions**.
3. Using the *Rating Scale for Core and Advanced Standards*, **evaluate your agency's level of compliance** for each of the Michigan Domestic and Sexual Violence Prevention and Treatment Board Quality Assurance Core and Advanced Standards.
4. Note the rating of 'Exceeds', 'Meets', 'Needs Strengthening', 'Plan to Meet', 'Does Not Meet', or 'NA' on the self-rating line directly below each Core or Advanced Standard.
5. Although comments are not required, you are encouraged to include comments to further describe 'Exceeds', 'Needs Strengthening', 'Plan to Meet', 'Does Not Meet', or 'NA' self-ratings.

RATING SCALE FOR BOTH CORE AND ADVANCED STANDARDS

(E)	Exceeds standard. <ul style="list-style-type: none"> • The standard is surpassed in an excellent manner. • The organization is encouraged to include comments in its self-rating.
(M)	Meets standard. <ul style="list-style-type: none"> • The organization is in compliance with the standard. • No comments necessary.
(NS)	Needs strengthening. <ul style="list-style-type: none"> • The organization minimally meets the standard however efforts are needed to enhance its work in this area. • An action/corrective plan will be required from the organization as part of its response to the Quality Assurance Standards Review Site Visit Report. • The organization is encouraged to include comments in its self-rating.
(P)	Plan to meet standard. <ul style="list-style-type: none"> • The standard is not currently met but the organization has an acceptable written plan in place to attain compliance. • The organization's action/corrective plan is attached. • The organization is encouraged to include comments in its self-rating.
(D)	Does not meet standard. <ul style="list-style-type: none"> • The standard is not met and there is currently not an acceptable plan to attain compliance. • An action/corrective plan will be required from the organization as part of its response to the Quality Assurance Standards Review Site Visit Report. • The organization is encouraged to include comments in its self-rating.
(NA)	The standard does not apply. <ul style="list-style-type: none"> • The organization is encouraged to include comments in its self-rating.

6. Answer all of the questions under the **Narrative Response** section for each of the section's core quality assurance and advanced standards. Please type your responses directly into the document.
7. Review the consolidated list of **Items to be Submitted Prior to On-Site Visit** located towards the end of this document. Included are program policies, procedures, reports, forms, brochures, handouts, examples, and other items that provide background information, verification, and context for the peer review team prior to the visit. Leave 1st column blank if item is attached. Type NA in 1st column if item is not available. If item is included in another attached item such as the Board Manual, Standard Operating Procedure, or Personnel Policies, indicate the page # in the 2nd column and which document in the 3rd column. Please note: Although only listed once, attached items are likely to be applicable to more than one standard and all items will be considered by the peer review team in their entirety when the team reaches a consensus rating for each standard. For each requested item there will be a corresponding standard section(s) and number(s) indicating the primary time(s) when the item will be considered. For example: Organization's bylaws *A1, A3, A4, A9, A10, H1*.
8. Prior to the peer review team's arrival, gather remaining **Items to be Available for Review On-Site** listed at the end of this document. The peer review team will examine these items while at your organization.

Quality Assurance Standards Self-Evaluation
Introduction: Section A ~ Policy and Governance

1. Summary of the Standards

This section presents standards that encompass an organization's policies and governance – the foundation of organizational self-definition and self-regulation. Compliance with these standards will help ensure that an organization that serves survivors of domestic violence and/or sexual assault and their children will:

- A. Have a clearly articulated purpose which is compatible with the Michigan Domestic and Sexual Violence Prevention and Treatment Board's statement of philosophy;
- B. Function in accordance with its stated purpose;
- C. Plan to meet the service and advocacy needs of domestic violence and/or sexual assault survivors and their children; and
- D. Evaluate the outcomes of service delivery and systems advocacy.
- E. Have a Board of Directors that sets policy, provides oversight, and is accountable for the organization.

The role of the Board of Directors is to give direction to the organization. The Board of Directors may appoint an advisory body and delegate some of the functions addressed in the standards; however, the Board of Directors is the signatory to the contract and cannot delegate its responsibilities for compliance to the standards.

2. Basic Considerations

These standards emphasize the role of the Board of Directors in setting policy, identifying needs, developing a strategy to address needs, evaluating the effectiveness and efficiency of the organization, and providing oversight. The role of the Board of Directors and the chief executive officer are clearly differentiated; staff does not govern and the Board of Directors does not administer the day-to-day activities. The Board of Directors establishes policies and the staff, at the direction of the chief executive officer, implements programs reflecting those policies. A clear governance structure is in place.

Quality Assurance Standards Self-Evaluation
Introductory Questions: Section A ~ Policy and Governance

- 1. What changes have occurred in the past year or are presently underway?

- 2. What other changes do you think would be helpful?

Core Standard A1: The purpose of the organization is clearly stated and compatible with the philosophy of the Michigan Domestic and Sexual Violence Prevention and Treatment Board.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Organization/Team Comments:

Narrative Response:
None

Core Standard A2: The organization functions in accordance with its stated purpose.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard A3: The organization has a designated Board of Directors.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard A4: The Board of Directors is accountable for the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. If the domestic and/or sexual assault violence program is a unit of a larger organization:
 - a. Identify the title of the immediate higher position to which the director of the domestic and/or sexual violence program reports.
 - b. What percentage of the larger organization's revenues/resources is designated for domestic violence and/or sexual violence services?

c. Does the larger organization use a part of the revenues designated for domestic and/or sexual violence services for the administration of the larger agency? If so, describe.
2. How many board meetings were held during the last year?
3. How many board members does the organization have and what was the percentage of attendance at each board meeting in the last year?
4. How does the Board of Directors ensure that the organization has filed all documents required to be filed with the state, local, and federal government?
5. How does the Board of Directors ensure adequate resources, protect assets, and financial oversight?
6. How and how often is a performance evaluation completed for the organization's chief executive officer/executive director? If the organization is part of an umbrella organization, how and how often is a performance evaluation completed for the organization's domestic violence and/or sexual assault program director?
7. How does the Board of Directors evaluate its own performance?
8. How has the Board of Directors provided stability and/or leadership during the past year for the: <ul style="list-style-type: none"> a. Domestic violence program, if applicable? b. Sexual assault program, if applicable? c. Transitional housing program, if applicable?
9. What kind of reports do the Board of Directors and/or advisory board receive and generate?

Core Standard A5: The Board of Directors operates in accordance with acceptable practice.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How are new board members oriented?
2. What are the provisions for on-going training for board members? Is board training mandatory?
3. Does every board member serve on a committee?
4. How does the Board of Directors assure different roles between the board and executive director of the: <ul style="list-style-type: none"> a) Domestic violence program, if applicable? b) Sexual assault program, if applicable? c) Transitional housing program, if applicable?
5. What is the policy for removing board members who are not actively participating?
6. Have there been any problems involving conflicts of interest or nepotism with any board member over the past year? If yes, please explain.
7. Does the board involve itself in any employee disputes? If so, at what point does it do so?

Core Standard A6: The Board of Directors establishes policies for the efficient and effective operation of the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
 1. Identify those policies which the Board of Directors have developed, reviewed, revised and/or adopted over the last year.

Core Standard A7: The Board of Directors sets relevant goals and objectives for the organization-

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
 None

Core Standard A8: The Board of Directors develops plans and activities to achieve identified relevant goals and objectives for the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What is the process the board uses for development of its long-range, strategic or annual plan?
2. Describe provisions for service participant involvement in the organization's planning and evaluation.
3. How does staff participate in the planning and evaluation process?
4. How do volunteers participate in the planning and evaluation process?
5. Who are the other key stakeholders included in the organization planning and evaluation process?

Core Standard A9: Members of the Board of Directors are chosen in a manner that assures a broad base of knowledge and participation in the governance of the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How are members selected for the Board of Directors to assure a broad base of knowledge and experience?
2. What process does the Board of Directors use to recruit new members?
3. How does the composition of the Board of Directors reflect the community and geographical area it represents?
4. Are domestic violence and/or sexual assault service participants represented on the Board of Directors?

Core Standard A10: There is a rotation mechanism to ensure a balance of new Board members and ongoing members.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What are the term limits for Board of Directors membership and do they ensure a balance of new and ongoing members?

Advanced Standard A11: The composition of the Board of Directors is diverse and representative of the geographical area it represents.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Advanced Standard A12: The Board of Directors evaluates the effectiveness and efficiency of the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What kind of reports do the governance board and/or the advisory board, receive and generate so that it may adequately perform its planning and evaluation functions? *(Submitted with A5)*
Financial Reports, Staff Reports, service delivery reports (# of clients during the FY), services used by clientele, shelter residents, etc.

Advanced Standard A13: The organization has developed a transition plan to address leadership changes or other major transitions.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What plans has the board developed for the possible transition of the executive director?
2. Are transition plans developed regarding the loss of other key staff persons, e.g., program manager, fiscal manager?
3. Does the board have a plan developed for the significant loss or addition of programming?

Advanced Standard A14: The board appropriately reviews and manages risks facing the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the Board of Directors become aware of potential risks facing the organization?
2. What process does the organization utilize to evaluate and monitor identified risks?

Quality Assurance Standards Self-Evaluation

Introduction: Section B ~ Community Relations and Fund Development

Relevant goals, objectives and plans are established for community relations, education/prevention, community education, public awareness, and fund development.

1. Summary of the Standards

This section presents standards that encompass an organization's policies, procedures, and practices relative to communications, public disclosure, community relationships, education/prevention, community education, public awareness, and fund development. These areas are closely related and thus, evaluated together. The way in which an organization functions in these areas directly affects the quality of service the organization is able to provide. Compliance with these standards will help ensure that an organization will:

- A. Be accountable to the community;
- B. Inform the community about the cause, implications, prevention of domestic violence and/or sexual assault, and the treatment of domestic violence and/or sexual assault survivors and their children;
- C. Encourage cooperative relationships with individuals and community organizations in order to gain understanding and support for organizational goals, services, and needs; and
- D. Attain sufficient and diversified funding support to operate current programs and plan to meet future needs.

2. Basic Considerations

These standards emphasize the importance of establishment of written plans, policies and adherence to professional guidelines as an appropriate foundation for community relations, education/prevention, community education, public awareness, and fund development. They encompass evaluation and strong professional values.

Quality Assurance Standards Self-Evaluation

Introductory Questions: Section B ~ Community Relations, Public Awareness, Community Education, Prevention, and Fund Development

1. What changes have occurred in the past year or are presently underway?

2. What other changes do you think would be helpful?

Core Standard B1: Relevant goals, objectives and plans are established for community relations, education/prevention, community education, public awareness, and fund development.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization develop relevant goals, objectives and plans for its community relations, education/prevention, community education, public awareness, and fund development?

Core Standard B2: Community relations, education/prevention, community education, public awareness, and fund development are conducted in accordance with applicable professional, ethical, and legal principles.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Does the organization comply with state and federal laws related to lobbying and political activity?
2. Does the organization allow staff to volunteer for fundraising activities? If so please describe.
3. Does the organization comply with regulations related to federal funding sources?

Core Standard B3: The organization follows acceptable practices for public disclosure including program activities and financial position.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

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

Core Standard B4: The organization conducts a public awareness program that raises the community's awareness of the causes, implications, and appropriate community response to domestic and/or sexual violence.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization observe the tenets of client confidentiality in telling survivor stories or in the use of survivors as presenters in public awareness and community education programs?
2. Describe the organization's public awareness and community education programs including how presenters are trained.
3. How does the organization use technology and the internet to communicate with the public, e.g. website, social media, e-newsletter, e-blasts, and blogs?

Core Standard B5: The organization's philosophy related to community relations, education/prevention, community education, public awareness, and fund development is consistent with that of the Michigan Domestic and Sexual Violence Prevention and Treatment Board.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard B6: The organization conducts a fund development program that secures sufficient funds to meet its current needs and future goals.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the fund development program consider future goals as it works to meet current needs? What changes may occur in the future including budget restraints, increasing volume of clientele, etc.

Core Standard B7: The Board of Directors initiates and actively supports fund development efforts.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
1. Describe the Board of Director's involvement in fund development.

Core Standard B8: The organization is readily identifiable and visible among its consumers, peer organizations, and appropriate community systems.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
1. Have any surveys or assessments been conducted to determine the level of recognition, respect and support for the organization?
2. Is the organization viewed as the lead agency in the community for domestic violence and/or sexual assault survivors? If not please describe.
3. 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.
4. How does the organization conduct community relations activities in outlying communities?

Core Standard B9: Education/prevention, community education, and public awareness materials are available in other languages for any ethnic group with a presence in the community and the geographic area served.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
1. How does the organization accommodate non-English speaking communities?
2. What materials are available, and in what languages, other than English?

Core Standard B10: The organization uses designated personnel for its community relations, education/prevention, community education, public awareness, and fund development activities.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. List position title(s) designated for the organization's community relations, education/prevention, community education, public awareness, and fund development efforts.

Core Standard B11: Policies related to community relations, education/prevention, community education, public awareness, and fund development are comprehensive and practical.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard B12: The organization conducts community relations, education/prevention, community education, public awareness, and fund development programs that project an accurate positive image throughout its service area and raises the community's understanding of and support for its services.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What does the organization do to project a positive image within the community?
2. Is there anywhere in the service area where the organization's image is not positive? If so, describe including the organization's response.

Advanced Standard B13: Education/prevention, community education, and public awareness materials are available to accommodate individual needs e.g. technology for persons who are deaf or hard of hearing, Braille or large print for partially sighted or blind persons.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization accommodate people who are hard of hearing, deaf, partially sighted, blind, or have other individual needs in the organization's education/prevention, community education, and public awareness materials?

Advanced Standard B14: Each member of the Board of Directors contributes financially to the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What percentage of board members contribute financially to the organization?

Advanced Standard B15: The organization comprehensively evaluates the success of its community relations, education/prevention, community education, public awareness, and fund development activities to measure efficiency and effectiveness.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization evaluate the success of its community relations, public awareness, community education, prevention, and fund development activities?

2. How does the organization use evaluation in developing, reviewing and/or revising these programs?

Quality Assurance Standards Self-Evaluation

Introduction: Section C ~ Program Administration and Service Delivery

1. Summary of the Standards

This section presents standards that encompass an organization's program administration, practices, and methods of service delivery. Compliance with these standards will help ensure that an organization that provides services to survivors of domestic violence and/or sexual assault and their children will:

- A. Meet contract requirements relative to service delivery;
- B. Operate efficiently and effectively;
- C. Provide client-centered services that are culturally sensitive and reflect the philosophy of the Michigan Domestic and Sexual Violence Prevention and Treatment Board;
- D. Present options and information relative to community resources to those seeking assistance;
- E. Stress safety for survivors and their children; and
- F. Provide support and advocacy that respects survivors' right to self-determination.
- G. Respond immediately to individuals in crisis 24 hours a day by providing access to trained personnel through a crisis/hotline.

2. Basic Considerations

These standards encompass the overall practices, procedures, and plans that the organization needs to ensure that persons served and prospective persons to be served receive the services they are eligible for, interested in, and in need of; and that those services are delivered in a manner that is client-centered, non-judgmental, culturally sensitive, and protects the dignity and right to self determination of the persons served. It also includes procedures for documentation of services that are provided and addresses the relationship between philosophy and practice.

Quality Assurance Standards Self-Evaluation

Introductory Questions: Section C ~ Program Administration & Service Delivery

1. What changes have occurred in the past year or are presently underway?

2. What other changes do you think would be helpful?

Core Standard C1: Programs are conducted in accordance with applicable professional, ethical, and legal principles.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard C2: Confidentiality of program participants is protected.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how clients are informed of the organization’s confidentiality policy.
2. How does the organization communicate to staff and volunteers what breaches of confidentiality are, e.g., discussing information about clients with unauthorized persons, either during or after working hours?
3. Under what circumstances, if any, is client information released without client consent?
4. How are subpoenas handled?
5. How are warrants handled?
6. What is the process for reporting suspected child abuse and/or neglect to Children’s Protective Services?
7. Does the organization allow photographing, audio recording, or videotaping of clients? If yes, describe the circumstances and procedures followed.

Core Standard C3: The organization restricts access to, use of, and/or disclosure of client information by:

- Using signed, voluntary, time-limited, written client consent forms; and
- Informing clients of requests for information related to their participation in services or connection with the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe the organization’s procedures and/or practices related to client releases of information.

2. How does the organization ensure that there is informed consent and that clients know what pieces of information are being released to whom?
3. What is the organization's procedure for informing clients of requests for information related to their participation in services or connection with the organization?

Core Standard C4: The organization recognizes and respects the autonomy, dignity, and rights of clients.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How do services reflect the organization's mission and the Michigan Domestic and Sexual Violence Prevention and Treatment Board's philosophy?

Core Standard C5: Services are client centered, non-judgmental, culturally relevant, and strive to empower the persons served.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization ensure that services are client centered?
2. How does the organization ensure that services are non-judgmental?
3. How does the organization ensure that services are culturally relevant?
4. How does the organization ensure that services strive to empower the persons served?
5. What are the circumstances under which a client may be asked to no longer participate in services?

Core Standard C6: The organization seeks to serve all persons requesting assistance and its efforts include elimination of barriers to the provision of quality service.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization accommodate non-English speaking communities?

2. What other steps does the organization take to reduce barriers for, i.e., accommodate, persons accessing services?
3. Why might a person be denied service? What arrangements are made to ensure an individual and their family's safety if they are not provided service?
4. Does the organization maintain a list of persons not eligible for service? If yes, describe.

Core Standard C7: Relevant goals, objectives and plans are established for the organization's delivery of service.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

- Narrative Response:**
1. Describe the organization's process for developing relevant service delivery goals, objectives, and plans related to its **domestic violence** programming.
 2. Describe the organization's process for developing relevant service delivery goals, objectives, and plans related to its **sexual assault** programming.
 3. Describe the organization's process for developing relevant service delivery goals, objectives, and plans related to its **transitional supportive housing** programming.

Core Standard C8: The organization responds immediately to individuals in crisis 24 hours a day by providing access to trained personnel through a crisis/hotline.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

- Narrative Response:**
1. Describe procedures and practices related to the 24 hour crisis/hotline, e.g., how the 24 hour crisis/hotline works, where it is located, who supervises, how it is monitored, how calls are documented, differences/similarities for calls related to domestic violence and those related to sexual assault.
 2. Describe how the 24 hour crisis/hotline is staffed.
 3. Describe training provided to individuals responding to crisis situations via the 24 hour crisis/hotline.
 4. Is there ever a time when the 24 hour crisis/hotline is not answered immediately? If yes, please describe the circumstances under which this occurs.

Core Standard C9: The organization orients adult and child service participants to the organization and its services.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard C10: The organization conducts intake services in accordance with acceptable practices.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
1. Describe the organization's intake process.

Core Standard C11: The organization conducts case closure in accordance with acceptable practices.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
1. Describe the organization's process for case closure.

Core Standard C12: The organization maintains confidential comprehensive individual client service records/case files in accordance with acceptable practices.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- How are case records kept, i.e., electronically or paper?
- Describe the organization's system for keeping case records including: who has access, storage location, method of tracking, related security measures, and procedures for destroying.
- Who from outside the organization has access to case records?

4. Do case records include:
- Documentation that client eligibility was determined based on declaration of circumstances
 - Date(s) of contact with client
 - Description of type(s) of assistance requested by client and assistance provided
 - Method(s) of service delivery
 - Significant contact(s) with client and significant event(s)
 - Release of information form(s) signed by the client, as needed
 - Documentation that client was notified of the organization's client rights and grievance policy

Core Standard C13: The organization has a system for regular supervisory and/or peer case review.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- Describe the process for case review.
- Is clinical supervision available to counseling/advocacy staff when appropriate? If yes, describe, e.g., how is it accessed, who decides when it is needed, who provides it?

Core Standard C14: The executive director (ED) or chief executive officer (CEO) exercises full responsibility for the day-to-day management of the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard C15: The organization uses designated personnel to manage its delivery of service(s).

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- List the position title(s) of the designated personnel used to manage its delivery of service(s).

Core Standard C16: The organization works collaboratively with other domestic violence and/or sexual assault organizations throughout the state and in other states as appropriate to meet the safety and advocacy needs of survivors.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What is the organization's procedure for referring survivors to other domestic violence and/or sexual assault service providers?
2. What is the organization's procedure for transporting survivors to other domestic violence and/or sexual assault service providers?
3. Have any problems been encountered when working with other domestic violence and/or sexual assault organizations? If yes, describe.

Core Standard C17: The organization designs and implements client related policies that stress non-violence, are fair, client centered, and consider safety for all including those who choose not to follow policy.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe the process for developing client related policies.
2. What procedures do you take when clients do not follow policy?

Core Standard C18: The organization gathers, evaluates, and uses meaningful service information in accordance with acceptable practices.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how the organization gathers, evaluates, and uses meaningful statistics for each of its program areas, e.g., domestic violence, sexual assault, transitional supportive housing, children's, legal, and/or others as applicable.

Advanced Standard C19: The organization maintains an internal structure for efficient and effective administration of service delivery.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization determine if the services that are being offered are relevant and meaningful to clients?
2. How does the organization determine if it might be helpful to offer different services than those that are currently offered to clients?
3. What method(s) do you use to determine if the organization is meeting clients' needs, e.g., determining if outreach offices are in the best location and/or if the offices are staffed at times most desired and convenient for clients?

Quality Assurance Standards Self-Evaluation
Introduction: Section D ~ Staff and Volunteer Management

1. Summary of the Standards

This section presents standards that address an organization's policies and practices regarding staff and volunteers. Compliance with these standards will help ensure that an organization that provides domestic violence and/or sexual assault services will:

- A. Employ qualified persons who will create an ethical, supportive, and secure environment for survivors and their children;
- B. Recruit and maintain a staff with diverse characteristics qualified to perform the work required that reflects the community served and geographic area in which the organization is located;
- C. Maintain a staff of persons who are sufficiently trained and highly motivated; and
- D. Establish policies that clearly define roles, are equitable, and meet legal requirements related to personnel management.

2. Basic Considerations

These standards encourage strong professional values. They assume that written policies and consistent practice is the cornerstone of a quality human resource system. They include planning and evaluation of procedures and practices related to the organization's administration of staff and volunteers.

Quality Assurance Standards Self-Evaluation
Introductory Questions: Section D ~ Staff and Volunteer Management

- 1. What changes have occurred in the past year or are presently underway?

- 2. What other changes do you think would be helpful?

**PLEASE ANSWER THE FOLLOWING QUESTIONS FOR PAID STAFF ONLY
STANDARDS D1 – D16**

Core Standard D1: A comprehensive manual containing all personnel policies is maintained, kept current, and made available to all staff.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What is the process for making changes to the personnel policies?
2. How are staff informed/trained when there are changes made to the personnel policies?
3. How often are the personnel policies reviewed by the board of directors?
4. Have there been any changes in the past year?

Core Standard D2: Acceptable practices are followed for recruiting, hiring, and assigning staff.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization recruit and assign employees to fill available positions?
2. If the organization does not have a policy relating to hiring relatives or friends, what is your practice?
3. What measures does the organization take to avoid the appearance of conflict of interest with staff?
4. What has been the organization's most recent conflict of interest with staff? How was it addressed?

Core Standard D3: Responsibility for hiring and firing staff is clearly defined.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. List position title(s) designated for hiring/firing employees.

Core Standard D4: Acceptable screening practices of potential staff members, which serve to protect the organization and its clients, are clearly defined and followed.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- Describe the pre-hiring screening process for staff, including reference checks.
- How does the organization verify applicant employment history, education, certification and/or licensure, criminal history, history of substantiated child abuse and/or sexual abuse offense?
- Does the organization review proof of insurance and valid driver's licenses for all staff that drive for the organization or transport clients as a part of their work responsibilities?

Core Standard D5: The organization establishes written qualifications for all staff positions and employs persons who meet or exceed those qualifications.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- How are job descriptions developed?
- How does the organization determine qualifications for positions?

Core Standard D6: Comprehensive job descriptions are available for staff positions.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard D7: A comprehensive, confidential personnel record is maintained for each staff member.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

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

Core Standard D8: Acceptable practices are followed in supervising and evaluating staff.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe the performance evaluation process for staff.
a. How often does performance evaluation occur?
b. What is its relationship to job descriptions and to goals mutually set by the supervisor and staff?

2. Describe the organization's process for addressing inadequate performance by staff.

Core Standard D9: Relevant goals, objectives, and plans are established for the administration and management of staff.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe the process used to determine relevant goals, objectives and plans developed for the management and administration of staff.

Advanced Standard D10: The organization evaluates the effectiveness of its procedures and practices related to the administration of staff.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How many individuals does the organization currently employ full-time? Part-time?

2. How many full-time equivalents (FTEs) are there?

3. How many administrative/management staff positions does the organization have, e.g., Executive Director, Bookkeeper, Finance Director, Receptionist? List position titles.
4. How many supervisory staff positions does the organization have, e.g., Program Manager, Advocacy Coordinator, Shelter Supervisor? List position titles.
5. How many direct service positions does the organization have, e.g., Advocate, Counselor? List position titles.
6. What questions do you ask and/or what data do you use to determine the number of positions that are needed in each of the above categories?
7. What questions do you ask to determine staffing patterns, e.g., where staff will work, when/what hours they will work, and which staff will have what responsibilities?
8. How often do you review your organizational chart?
9. How do you know if procedures and practices related to the management and administration of staff are working to meet client needs and organizational commitments?

Advanced Standard D11: A benefits package and salary ranges are maintained to attract and retain qualified staff.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What process does the Board of Directors use to assure that salaries and benefits are competitive?
2. How does the organization administer its salary and benefits program to ensure that it is equitable?

Advanced Standard D12: The organization provides written information to staff upon hiring or major transitions, detailing information about their position and welcoming them to the agency or to their new position.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What written information is provided to an employee upon hiring or major transition?
2. How does the organization record and track changes to the employee's employment status?

Advanced Standard D13: The organization has a professional development and training plan for each staff.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization establish development and training plans for each staff?

Advanced Standard D14: The organization has a plan to develop cultural competency among its staff.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how the organization develops cultural competency among staff.

Advanced Standard D15: The organization has a range of policies, procedures and/or practices relating to the use of technology.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Advanced Standard D16: The organization provides resources to assure that staff are sufficiently trained in technology and software used within the organization.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how the organization assures that staff are sufficiently trained in the use of technology and software.

**PLEASE ANSWER THE FOLLOWING QUESTIONS FOR VOLUNTEER STAFF ONLY
STANDARDS D17 – D27**

Core Standard D17: A comprehensive volunteer manual containing all volunteer policies and practices is maintained, kept current and made available to all volunteers.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.
None

Core Standard D18: Acceptable practices are followed for recruiting, hiring, and assigning volunteers.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

- How does the organization recruit and assign volunteers to fill available positions?
- What measures does the organization take to avoid the appearance of conflict of interest in volunteers?
- What has been the organization's most recent conflict of interest with volunteers? How was it addressed?

Core Standard D19: Responsibility for engaging and dismissing volunteers is clearly defined.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

- List position titles designated for engaging and dismissing of volunteers.

Core Standard D20: Acceptable screening practices of potential volunteers, which serve to protect the organization and its clients, are clearly defined and followed.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

1. Describe the pre-volunteering screening process for each category of volunteer, e.g., one time only, non-direct service, and/or direct service volunteers.
2. How does the organization verify volunteer applicant's employment history, education, certification and/or licensure, criminal history, history of substantiated child abuse and/or sexual abuse offense?
3. Does the organization review proof of insurance and valid driver's licenses for all volunteers who drive for the organization or transport clients as a part of their work responsibilities?

Core Standard D21: The organization establishes written qualifications for all volunteer positions and utilizes persons who meet or exceed those qualifications.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

1. How are volunteer job descriptions developed?
2. How does the organization determine qualifications for volunteer positions?

Core Standard D22: Comprehensive job descriptions are available for all volunteer positions.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

None

Core Standard D23: A comprehensive, confidential personnel record is maintained for each volunteer.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

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

Core Standard D24: Acceptable practices are followed in supervising and evaluating volunteers.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

1. Describe the performance evaluation process for volunteers.
a. How often does performance evaluation occur?

b. What is its relationship to job descriptions and to goals mutually set by the supervisor and volunteer staff?

2. Describe the organization's process for addressing inadequate performance by volunteer staff.

Core Standard D25: The organization determines the need for volunteer services and utilizes the services of volunteers as appropriate.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

1. How does the organization determine the need for volunteer services?

Core Standard D26: Goals, objectives, and plans are established for the administration and management of volunteers.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

1. Describe the process used to determine goals, objectives and plans for the management and administration of volunteers.

Advanced Standard D27: The organization evaluates the effectiveness of its procedures and practices related to the administration of volunteers.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response: If the narrative response to a question is the same as the response in the staff section you may simply reference the staff response.

1. How many individuals currently volunteer at your organization?
2. How many volunteer staff positions are there? List position titles.
3. How many supervisory/administrative positions work with volunteers? List position titles and the number of volunteers they work with and/or oversee.
4. What questions do you ask and/or what data do you use to determine if volunteer positions are needed?
5. What questions do you ask to determine volunteer staffing patterns e.g., where volunteers will work, when/what hours they will work, and which volunteers will have what responsibilities?
6. How do you know if your procedures and practices related to the management and administration of volunteers are working to meet client needs and organizational commitments?

PLEASE ANSWER THE FOLLOWING QUESTIONS FOR BOTH PAID AND VOLUNTEER STAFF STANDARDS D28 – D33

Core Standard D28: The administration of staff and volunteers is in accordance with applicable professional, ethical, and legal principles.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

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

Core Standard D29: The organization recruits diverse staff and volunteers, e.g., gender, race, ethnicity, age, and disability that are reflective of the community and geographic area in which the organization is located.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

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 and the population served.

Core Standard D30:

Acceptable practices are followed for the orientation, development, and basic introductory training of staff and volunteers. Training content is compatible with the Michigan Domestic and Sexual Violence Prevention and Treatment Board's 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
- Dynamics of sexual assault
- 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
- Medical procedures applicable to sexual and domestic assault survivors including evidence collection procedures
- Provision of services toward groups that are traditionally unreached and/or underserved in local communities
- Resource identification, access, and advocacy
- Sexual assault in the context of domestic violence relationships

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe the orientation and training process for staff and volunteers. Include the following if not described in the organization's training outline and/or materials.

- a. Training goals and objectives
- b. Hours of training
- c. Content including community resources
- d. Response to individual's disclosure of domestic violence and/or sexual assault incident
- e. Specialized emergency information
- f. How the organization evaluates knowledge gained from training
- g. How the Michigan Domestic and Sexual Violence Prevention and Treatment Board's philosophy statement is integrated into the organization's training programs

2. How does the organization manage continued development of staff and volunteers to ensure they are current with developments in the fields of domestic and/or sexual violence?

Core Standard D31: Acceptable practices are followed in voluntary and involuntary separation from the agency.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe the organization's practices related to terminating employment of staff and dismissing volunteers.
2. What procedures are followed when an employee or volunteer leaves the agency, e.g. COBRA notification, key collection, exit interview, technology access termination.

Core Standard D32: The organization uses designated personnel to implement its policies, procedures and practices regarding staff and volunteers.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. List position titles designated to implement policies, procedures and practices regarding staff and volunteers.

Advanced Standard D33: The organization addresses vicarious trauma among staff and volunteers.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What steps has the organization taken to lessen vicarious trauma among staff and volunteers?

Quality Assurance Standards Self-Evaluation

Introduction: Section E ~ Systems Change

1. Summary of the Standards

This section presents standards that encompass an organization's advocacy efforts to ensure that those community systems used by domestic violence and/or sexual assault survivors and their children, during crisis and in their effort to end violence in their lives, effectively and sensitively respond to their needs. These systems include, but are not limited to, the criminal and civil justice systems, the medical health and mental health systems, children's services' systems, the educational system, the faith based community, the social services system, and the legal system. Compliance with these standards will help ensure that the organization will work collaboratively with people in systems to change practices that are not helpful and positively reinforce practices that are.

2. Basic Considerations

These standards address the planning, education, and advocacy efforts in which the organization needs to engage to ensure that domestic violence and/or sexual assault survivors and their children, and those at risk of domestic violence and/or sexual assault, are protected and treated compassionately by those who are asked for or can offer help. The overall goal is to create an effective response system in the community and to change cultural attitudes and institutional practices that support violence. It is important to remember, however, that standards can only address the issues for which the organization can be accountable. They cannot be held accountable for whether a system changes. Organizations can be held accountable for their efforts to educate and advocate in the hope that change will result.

Quality Assurance Standards Self –Evaluation

Introductory Questions: Section E ~ Systems Change

1. What changes have occurred in the past year or are presently underway?

2. What other changes do you think would be helpful?

Core Standard E1: The organization prioritizes the community systems and organizations which need to be impacted first and develops a systems change plan which defines strategies to work with each community on behalf of survivors of domestic and/or sexual violence and their children.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
1. Describe the process the organization used to develop its systems change plan.

Core Standard E2: The organization's Board of Directors adopts a plan to address systems change.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
1. When did the board adopt a plan to address systems change?

Core Standard E3: The organization works collaboratively with community systems to positively impact institutional policies, practices, and procedures that affect domestic and/or sexual violence survivors and their children.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- Describe relationships, collaborations and partnerships with key figures in community systems.
- Describe the organization's participation in community task forces, work groups, and/or advisory boards which focuses on issues that are not specific to, but improve, the lives of survivors of domestic violence or sexual assault.
- Does the 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?
- How does the organization seek ideas from other systems to improve the systems' response to domestic violence and/or sexual assault survivors in the community?

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

6. Describe how the organization addresses systems change issues in outlying communities or counties.

Core Standard E4: The organization advocates with community systems personnel on behalf of all survivors of domestic violence and/or sexual assault and their children as well as those at risk for domestic violence and sexual assault.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how the organization handles inappropriate policies, procedures and practices carried out by the systems that affect the prevention and treatment of domestic violence and/or sexual assault survivors.

Core Standard E5: The organization uses designated personnel for its systems change efforts.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. List position title(s) designated for systems change efforts.

Advanced Standard E6: The organization conducts training designed for personnel employed by community system organizations.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe any training the organization's staff has provided in the last year to personnel employed by community systems relative to providing effective support for survivors of domestic and/or sexual violence.

Advanced Standard E7: Members of the organization formally participate in the development and evaluation of domestic violence and/or sexual assault policies, procedures and practices in local community systems.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe the process the organization uses to develop and/or evaluate policies, procedures and/or practices within local community systems that affect domestic violence and sexual assault survivors.



Core Standard F1: Financial management is conducted in accordance with applicable professional, ethical, and legal principles.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how indirect costs are allocated.
2. How are costs related to fund development determined?
3. How are management and general costs determined?
4. Are net assets segregated as unrestricted, temporarily restricted and/or permanently restricted?
5. Are changes in each class of net assets disclosed on statement of activities?
6. Is there a policy available to donors that describes how contributions for which restrictions are met in the same period addressed?
7. 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?
8. Have all payments for the following been made and made in a timely fashion during the past year, i.e., payroll taxes; worker's compensation insurance; unemployment insurance?
9. How are employee hours of work tracked?
10. How are employee work activities tracked?
11. How does the organization determine which employees are exempt or non-exempt for overtime provisions of the Fair Labor Standards Act?
12. How are employee benefits tracked?
13. Is there a travel and reimbursement policy? If not, how is travel reimbursement handled?
14. How does the governing authority determine reimbursement rates?
15. Are receipts required for expenses paid out-of-pocket by the employee?
16. Do travel policies define what is considered a workday for non-exempt employees attending conferences?
17. 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?
18. Is prior approval required for reimbursement of purchases for the organization?
19. Are staff required to pay for personal use of telephones, copier, fax and other agency equipment? If yes, describe.

20. Is there a policy relative to the use of personal credit cards to pay reimbursable expenses?
21. What is the policy relative to employees and volunteers using their own automobile on organization business?
22. What percentage of the budget is allocated for management and general costs?
23. What percentage of the budget is allocated for fund development costs?
24. What are the organization's requirements for competitive bidding for purchases?
25. How often is an inventory of equipment and furnishings conducted?
26. Are billings made to the Michigan Domestic and Sexual Violence Prevention and Treatment Board done on an actual cost reimbursement method?

Core Standard F2: The organization's accounting is done on an accrual basis.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Is accounting done on an accrual basis?
2. Describe your organizations process for establishing accrual? Are expenses, including payroll accrued on a monthly basis?

Core Standard F3: The organization uses functional accounting to track finances by program or service area/cost center.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Is there functional allocation of finances by program?

Core Standard F4: The organization provides and maintains adequate insurance coverage including general liability, professional liability, directors and officer's liability, fraud/employee theft coverage, non-owned auto insurance, and others as needed.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What are the limits of the organization's general or umbrella liability insurance? What does it cover?
1. What are the limits of the organization's professional liability insurance? What does it cover?
2. What are the limits of the organization's directors and officers' liability insurance? What does it cover
3. What is the organization's coverage related to fraud/employee theft?
4. What is the organization's coverage related to non-owned auto insurance?
5. Are there other insurances needed for specific program areas, e.g., SANE, legal assistance? If so please describe.

Core Standard F5: The organization provides unemployment compensation coverage and worker's compensation insurance in accordance with applicable federal and state laws.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Are you a self-reimbursing agency for workers compensation? If so describe.

Core Standard F6: The governing body adopts and the chief executive officer implements comprehensive budgets in accordance with acceptable practices.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How is the budget developed and approved?
2. How are specific income and expenditures determined by program in the budgeting process?
3. How are management in general and fund development costs determined in the budgeting process?

Core Standard F7: The organization prepares financial statements that clearly and fairly present the organization's financial position.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the chief executive officer monitor the financial situation/status of programs and the organization?

2. How does the governing authority monitor the financial situation/status of programs and the organization?

3. What reports does the governing authority receive and generate so that it may adequately perform its fiscal oversight function? How often do they receive these reports?

Core Standard F8: The organization prudently manages its operating, endowment and capital funds.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:**Narrative Response:**

1. What process does the organization use to minimize financial risks of investments?

2. Describe procedures used to obtain a maximum return on investments.

Core Standard F9: The organization has sufficient cash flow to meet its operating needs.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:**Narrative Response:**

1. Does the organization have a line of credit? If yes, what are its limits and criteria for use?

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

3. What if any, steps have been taken to manage cash flow in the last year?

Core Standard F10: 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.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:**Narrative Response:**

1. Describe the organization's internal control procedures.

2. What are the lines of authority and reporting for employees involved in accounting activities?
3. Are all transactions authorized by an appropriate individual?
4. What are the limits of authorization?
5. Does someone list all receipts, both cash and checks, showing from whom it was received and the amount?
6. Are pre-numbered receipts issued immediately for all cash received?
7. How frequently are deposits made?
8. Are all checks immediately endorsed "For Deposit Only"?
9. Are bank statements reconciled by someone other than the person authorized to deposit or withdraw the money?
10. Are pre-numbered checks used?
11. Are two signatures required?
12. Are checks ever pre-signed or is a signature stamp used?
13. If the organization used electronic payments what are the approval and review processes?
14. Has an independent accountant identified separation of duties as a concern in the annual audit? If so, describe what action the organization has taken.

Core Standard F11: The organization maintains a detailed written description of its segregation of duties related to internal controls.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard F12: The organization provides for an annual audit by independent accountants.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- Do audit components include a balance sheet/statement of financial position, statement of activities, statement of cash flows, and notes to financial statements?
- Did the auditor prepare a letter summarizing findings and recommendations to the board of directors separate from the standard management letter? Did the organization provide a written response?

3. Does the independent auditor meet with the Board of Directors at least annually to discuss the audit report and any matters of concern?

Core Standard F13: The organization annually meets Form 990 filing requirements.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard F14: Policies for financial management are comprehensive and practical.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What is the organization's process for the development of its financial management policies?

2. What is the organization's process for regular review of its financial management policies?

Core Standard F15: The organization uses designated and appropriately qualified personnel to implement its financial management policies and procedures.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Which staff, by position title(s), are responsible for implementation of accounting policies and procedures for the organization's financial management?

Core Standard F16: Relevant goals, objectives and plans are established for financial management and long term financial stability.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization develop relevant goals, objectives and plans for financial management and long term financial stability?

Core Standard F17: The Board of Directors continuously reviews and analyzes its financial position.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:**Narrative Response:**

1. How does the governing board monitor the financial situation/status of the organization? *(Submitted for F5)*

Core Standard F18: The Board of Directors adopts and regularly reviews salary range and fringe benefit schedules.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:**Narrative Response:**

None

Advanced Standard F19: The organization maintains adequate cash reserves.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:**Narrative Response:**

- Does the board have a cash reserves policy that defines accessibility/liquidity parameters, and the amount of reserves to be accumulated/maintained?
- With the current reserves how many days of expenses could be covered?
- How does the organization identify reserves within the financial statements?
- How does the organization balance current financial needs of the organization with the need to accumulate sufficient cash reserves?

Advanced Standard F20: The organization uses a cost analysis process as part of its ongoing planning and program development.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe the organization's cost analysis process(es).
2. If applicable and different than above, describe how the organization determines cost(s) by program or service area/cost center within an identified area, e.g., sexual assault services in total, SANE exams within sexual assault services; domestic violence non-residential services in total, counseling and advocacy services within domestic violence non-residential services; domestic violence residential services in total, emergency shelter and transitional supportive housing within domestic violence residential services.

Quality Assurance Standards Self-Evaluation

Introduction: Section G ~ Facility, Safety, Security, and Health

1. Summary of the Standards

This section presents standards that address the organization's policies and practices regarding its essential physical resources; the transport of clients; and activities conducted in its buildings, on its grounds, and with its equipment. Compliance with these standards will help to ensure a setting that is accessible, functional, attractive, and safe for clients, visitors, staff, and volunteers.

2. Basic Considerations

These standards encompass the overall practices and procedures that the organization employs to ensure that the buildings, grounds and equipment that the organization rents or owns are appropriately accessible, functional, attractive, safe, and secure for clients, visitors, staff, and volunteers. They ensure that the organization meets legal requirements regarding access, safety, and health as well as acceptable standards of cleanliness and functionality. These standards encourage the establishment of plans and evaluation related to safety, health, buildings, grounds, and equipment.

Quality Assurance Standards Self-Evaluation

Introductory Questions: Section G ~ Facility, Safety, Security, and Health

1. What changes have occurred in the past year or are presently underway?
2. What other changes do you think would be helpful?

Core Standard G1: The organization adheres to all applicable zoning, building, fire, health, and safety codes of the community in which the organization is located.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Are there local health and fire codes the organization is expected to meet?
2. Is the organization inspected regularly by these departments and what is the outcome of those inspections?
3. Has the organization been cited for non-compliance with any of these requirements in the last year? If so, how was it resolved?
4. Is the facility in compliance with regulations and/or acceptable practices related to lead, radon, asbestos and carbon monoxide?

Core Standard G2: The organization adheres to all applicable laws related to safety in the transport of children and adults.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Are car seats available for transporting children as required by law?

Core Standard G3: Buildings, grounds, and equipment are accessible and/or alternative arrangements are in place to accommodate clients with special needs.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does your organization accommodate or arrange for individuals with special needs?

Core Standard G4: Buildings, grounds, and equipment are safe and functional.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization provide for safety related to the facility, grounds and equipment?
2. What are the organization's procedures related to the malfunction of equipment e.g. utilities, furnace, boiler, water heater?
3. Does the organization regularly employ a commercial pest control company? If not, how are pests exterminated?
4. How does the organization deal with donated goods that may present a health problem?
5. Describe security, safety and health training for staff.

Core Standard G5: Cleaning supplies and other toxic materials are safely stored.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard G6: The organization maintains a smoke-free environment.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard G7: Preparing, storing and disposing of food meets acceptable standards.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard G8: The organization provides protection from fire and there is a system for early warning of fire.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe fire warning system

Core Standard G9: In the event of fire, natural disaster, or other emergencies the organization provides for the protection and safe evacuation of persons from its buildings and grounds.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how staff and clients are notified of evacuation procedures.

2. What are the organization's evacuation procedures in case of fire, natural disaster or other emergencies?

3. When and how do the staff and clients practice evacuation?

Core Standard G10: The organization provides personal care supplies to clients served by advocacy/emergency response, sexual assault nurse examiner (SANE), transitional supportive housing (TSH), and/or shelter program(s).

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How are personal care supplies distributed to clients served by SANE, shelter and/or TSH program(s)?

2. What provisions are made for providing personal care supplies to clients with differing needs, e.g., cultural/ethnic/male, sexual assault survivors?

Core Standard G11: The organization institutes practices and procedures which, insofar as possible, protect survivors and significant others including children from attack by assailants or perpetrators.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization plan for security including protection from assailants, perpetrators, and other shelter residents? Consider the: shelter facility; telephones; grounds; offices; and security of clients and their children when they leave the grounds while a resident.
2. Does the organization have a policy relative to assailants/perpetrators on the premises?
3. What policies has the organization instituted to protect children while in the shelter?
4. Is the shelter location a secret? If yes, what is the rationale and how is that received in the community?
5. Are clients and their children encouraged to develop a safety plan should violence re-occur?
6. Do clients have access to phone and emergency numbers at all times free of charge?

Core Standard G12: The organization takes measures to protect the property of clients, staff, volunteers, and the organization itself from theft.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What measure does the organization take to protect the property of clients, staff, volunteers and the organization from theft?

Core Standard G13: The organization has provisions for first aid and emergency medical care for its clients, staff, volunteers, and visitors.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What are the organization's procedures for medical emergencies?
2. Are employees provided: CPR training; education on communicable diseases; universal precautions training; and testing for tuberculosis and hepatitis?

Core Standard G14: Policies for the management of facilities are comprehensive and practical.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard G15: Relevant goals, objectives and plans are established for building, grounds and equipment safety and health.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard G16: The buildings and grounds are attractive and clean.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard G17: The organization has adequate space to provide private and confidential services.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard G18: The organization provides children's play areas inside and out at its residential facility(ies).

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard G19: The organization has procedures to house only the number of people in its residential facility(ies) that can adequately be served.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
 1. Describe the agency’s policy, procedure and practice for determining the maximum number of people who can be housed in the shelter.

Core Standard G20: The organization uses designated personnel to implement its policies and procedures relative to the organization’s facility(ies), security, safety, and health.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
 1. List position titles designated for building maintenance, health and safety issues
 2. Who is responsible for facility, health and safety policy and implementation? How is oversight accomplished?

Advanced Standard G21: Comprehensive evaluations of buildings, grounds, and equipment are conducted to measure safety and health conditions.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
 1. How does the organization measure the efficiency and effectiveness of the operations and maintenance of buildings, and grounds safety and health?

Advanced Standard G22: The organization provides children’s play area(s) at its non-residential office(s) and/or facility(ies).

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Advanced Standard G23: The organization has a written emergency response plan.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
None

Core Standard H1: The organization is legally authorized to contract.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard H2: The organization does not accept reimbursement from clients unless their grant specifically authorizes them to do so.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Does the organization charge fees for service? If yes, please explain.

Core Standard H3: The organization submits accurate reports in the manner and at the time they are due.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Are the organization's contract required reports accurate and submitted on time? If not, please explain.

Core Standard H4: The organization retains all books, records, and other documents relevant to the contract for a minimum of six years after final payment.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How many years has the organization retained books and records relevant to the Michigan Domestic and Sexual Violence Prevention and Treatment Board contract?

2. How and where are they stored?

Core Standard H5:

The organization complies with civil rights and other laws cited within the contract including:

- Public Act 220 of 1976, as amended, MCL 37.1101, Persons with Disabilities Civil Rights Act;
- Public Act 442 of 1976, as amended, MCL 15.231 et seq, the Freedom of Information Act (FOIA);
- Public Act 453 of 1976, Section 209, MCL 37.2209 within the Elliott Larsen Civil Rights Act;
- Section 504 of the Federal Rehabilitation Act of 1973, P.L. 93-112, 87 Stat. 194, 29 USC 794; and
- Americans with Disabilities Act of 1990 (ADA), P.L. 101-3367, 104 Stat 328, 42 USC 12101 et seq.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. 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? If yes, how did the organization handle the complaint?
2. Does the composition of the staff reflect the demographics of the community? If no, please explain.

Core Standard H6:

The organization complies with federal confidentiality provisions restricting disclosure of personally identifying information within the:

- Violence Against Women Act, 42 USC 13925(b)(2); and
- Family Violence Prevention & Services Act, 42 USC 10402.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard H7:

The organization informs service participants of their rights including access to a grievance process that addresses, at a minimum:

- Denial, reduction, or termination of service; and
- The organization failing to act upon a request for service within a reasonable period of time.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What is the process for informing clients of their rights including a grievance process?

Core Standard H8: The organization provides or arranges for all of the services required in the contract. These services include but are not limited to: a 24 hour crisis hotline; face to face emergency response; individual and group supportive counseling; advocacy; support services; and emergency shelter.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how the organization provides emergency response services.
2. Describe how counseling services are accessed.
3. Describe how advocacy services are accessed.
4. Describe how the organization provides support services, e.g., health care; legal, housing, financial, transportation assistance; child care; and children's services in *each* county in the organizations geographic service area.
5. Has the shelter, if applicable, been closed for any reason over the past year? If so, describe the circumstances.
6. Which service(s) is (are) accessible 24 hours a day, 365 days per year?

Core Standard H9: The organization's services comply with the Michigan Domestic and Sexual Violence Prevention and Treatment Board's philosophy.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard H10: The organization serves the entire geographic service area stipulated in its contract.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization provide outreach to isolated areas in its geographic service area?

Core Standard H11: The organization identifies the area and population it serves in all its brochures and reports.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard H12: The organization's client eligibility policy and/or criteria is consistent with the Michigan Domestic and Sexual Violence Prevention and Treatment Board contract definition of client eligibility.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How does the organization document client eligibility?

Quality Assurance Standards Self-Evaluation

Introduction: Section I ~ Transitional Supportive Housing (TSH)

1. Summary of the Standards

This section presents standards that encompass an organization's program administration practices and service delivery methods specifically related to transitional supportive housing. Compliance with these standards will help ensure that an organization that provides transitional supportive housing services to survivors of domestic violence and their children will:

- A. Meet contract requirements relative to transitional supportive housing service delivery;
- B. Operate efficiently and effectively;
- C. Provide client-centered services that are culturally sensitive and reflect the philosophy of the Michigan Domestic and Sexual Violence Prevention and Treatment Board.
- D. Present options and information relative to community resources to those seeking assistance;
- E. Stress safety for survivors and their children; and
- F. Provide support and advocacy that respects survivors' right to self-determination.

2. Basic Considerations

These standards encompass the overall policies, practices, and procedures that the organization needs to ensure that persons served and prospective persons to be served in the transitional supportive housing program receive the services they are eligible for, interested in, and in need of; and that those services are delivered in a manner that is client-centered, non-judgmental, culturally sensitive, and protects the dignity and right to self-determination of the persons served. It also includes procedures for documentation of services that are provided and addresses the relationship between philosophy and practice.

Quality Assurance Standards Self-Evaluation

Introductory Questions: Section I ~ Transitional Supportive Housing

1. What changes have occurred in the past year or are presently underway?

2. What other changes do you think would be helpful?

Core Standard I1: 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.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What is the organization’s total number of TSH units?

2. List the communities where TSH unites are available within your geographic service are:

3. How many of these TSH units are funded by the MI Domestic & Sexual Violence Board?

PLEASE ANSWER THE FOLLOWING QUESTIONS FOR MI DOMESTIC & SEXUAL VIOLENCE BOARD FUNDED UNITS ONLY QUESTIONS 4 – 9

4. Describe the types of TSH units that are available.

5. Are the units rented, leased, or owned by the organization?

6. How are potential TSH units identified?

7. What arrangements/agreements are made with landlords?

8. What is the process for negotiating these arrangements?

9. How are the agreements documented?

PLEASE ANSWER THE FOLLOWING QUESTIONS FOR ALL TSH UNITS QUESTIONS 10 – 15

10. How are survivors made aware of the TSH program?

11. What is the application process?

12. Are potential participants given written TSH eligibility guidelines?

13. Are potential participants given written TSH program expectations related to rental arrangements, upkeep of the property, any prohibited activities, and/or grounds for termination?

14. What is the process for identifying which potential participants are selected to move into TSH units?

15. Who makes those decisions?

Core Standard I2: Supportive services are available but not mandatory or required for TSH residents and their children.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What supportive services are offered to TSH participants?
2. Are services non-mandatory?
3. Do TSH staff stay in contact with TSH participants when they are not using any supportive services? If yes, how?
4. Is the offering of supportive services and their use or non-use documented? If yes, how?

Core Standard I3: The TSH program goals, objectives, and plans, i.e., strategies to achieve relevant goals and objectives, are consistent with the organization's mission.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What is the process the organization used for the development of relevant TSH program's goals, objectives, and plans?
2. Describe provisions for survivor involvement in the development of relevant TSH program's goals, objectives and plans.

Core Standard I4: TSH program services are culturally relevant.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how the TSH program services are culturally relevant?

Core Standard I5: TSH program policies stress non-violence, are client centered, and fair, i.e. just, reasonable, unbiased, and balanced.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How are TSH program policies developed?
2. How is survivor input included when TSH program policies are developed?
3. How are applicable policies made available to participants?
4. What is the process for reviewing policies on a regular basis and for revisions, if needed? How is this documented?

Core Standard I6: TSH services, practices, and policy implementation respects the self-determination, autonomy, and rights of residents.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard I7: The TSH program has written policies that address the following:

- Confidentiality
- Eligibility requirements
 - Survivors of domestic violence
 - TANF income
 - Dependent children
- Residents who are survivors of domestic violence vs. those who are not, if applicable
- Michigan Domestic and Sexual Violence Prevention and Treatment Board funded vs. non-Michigan Domestic and Sexual Violence Prevention and Treatment Board funded TSH program expectations, if applicable
- Application process
- Resident selection process
- Lease agreements
- Rent requirements
- Program terms and conditions
- Resident accounts (e.g. escrow, IDA, savings), if applicable
- Service termination
- Access to supportive services once residents are no longer in the TSH program

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard I8: The organization uses designated personnel to implement policies and procedures for the TSH program.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- List position titles designated for TSH services.
- Do any Michigan Domestic and Sexual Violence Prevention and Treatment Board TSH funded staff provide services to non-Michigan Domestic and Sexual Violence Prevention and Treatment Board TSH participants? If so, please describe.

Core Standard I9: The organization actively participates in local community groups to identify and address long-term housing needs of survivors of domestic violence.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- Describe how the organization participates in community groups to identify and address long-term housing needs of survivors of domestic violence.
- What projects or products have resulted from the activities of these groups?

Advanced Standard I10: There is regular evaluation of the services and administration of the TSH program.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

- How is the administration and service delivery of the TSH program evaluated?
- Who is responsible for the evaluation?
- How is the evaluation documented?
- How is information from the evaluations used, e.g., client feedback forms and other evaluations; are there changes in services offered as a result; changes in how services are implemented; changes in staff activities?

Quality Assurance Standards Self-Evaluation

Introduction: Section J ~ Sexual Assault Nurse Examiner Program (SANE)

1. Summary of the Standards

This section presents standards that encompass an organization's program administration practices and service delivery methods specifically related to SANE programing and services. Compliance with these standards will help ensure that an organization that provides SANE services to patients/survivors of sexual assault:

- A. Meet contract requirements relative to SANE service delivery;
- B. Operate efficiently and effectively;
- C. Provide patient/survivor centered services that are culturally sensitive and reflect the philosophy of the Michigan Domestic and Sexual Violence Board.
- D. Employ trained, qualified and certified personnel who will create an ethical, supportive and secure environment for sexual assault patients/survivors;
- E. Respond to sexual assault patients'/survivors' emotional and physical needs as well as evidentiary needs for prosecution;
- F. Strive to ensure that patients/survivors are not re-traumatized by the exam and assist patients/survivors in gaining control; and
- G. Provide support and advocacy that respects patients'/survivors' right to self-determination.

2. Basic Considerations

These standards encompass the overall policies, practices, and procedures that the organization needs to ensure that persons served and prospective persons to be served in the SANE program receive the services they are eligible for, interested in, and in need of; and that those services are delivered in a manner that is patient/survivor centered, non-judgmental, culturally sensitive, and protects the dignity and right to self-determination of the persons served. It also includes procedures for documentation of services that are provided and addresses the relationship between philosophy and practice.

Quality Assurance Standards Self-Evaluation

Introductory Questions: Section J ~ SANE

1. What changes have occurred in the past year or are presently underway?

2. What other changes do you think would be helpful?

Core Standard J1:	SANE program goals, objectives, and plans, i.e., strategies to achieve relevant goals and objectives, are consistent with the organization's mission.
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Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. What is the process the organization used for the development of relevant SANE program's goals, objectives, and plans?

2. Describe provisions for patient/survivor involvement in the development of relevant SANE program's goals, objectives and plans.

Core Standard J2:	<p>The SANE program has written policies/protocols that address the following:</p> <ul style="list-style-type: none"> • Acute care needs • Aftercare or follow up • Collaboration with Children's Advocacy Center (CAC), if applicable • Confidentiality • Contacting advocates • Court testimony • Crisis intervention, e.g., assessment, triage, safety planning, transportation • Hospital/medical SANE exams when medically needed • Maintenance of the chain of evidence and evidence kits • Medical examination & evidence collection • Medical protocol(s) • Referrals and information • Responding to patients/survivors with special needs and/or disabilities • Response time • Role of law enforcement • Staff qualifications & training
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Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

None

Core Standard J3:	SANE program policies are non-judgmental and patient/survivor centered.
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Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How are SANE program policies developed?
2. How is patient/survivor input included when SANE program policies are developed?
3. How are applicable policies made available to participants?
4. What is the process for reviewing policies on a regular basis and for revisions, if needed? How is this documented?

Core Standard J4: SANE program services are culturally relevant.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how the SANE program services are culturally relevant.

Core Standard J5: SANE services are conducted in accordance with applicable professional, ethical and legal principles.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how the organization's SANE services are conducted in accordance with ethical principles.

Core Standard J6: SANE services, practices, and policy implementation respects the self-determination, autonomy, and rights of sexual assault patients/survivors.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe the SANE process including advocacy for responding to sexual assault patients/survivors.

2. How does the SANE program obtain appropriate informed consent from a sexual assault patient/survivor for a SANE exam?
3. How does the SANE program obtain appropriate informed consent for a SANE exam from a sexual assault patient/survivor with special needs?
4. How are patient(s)/survivor(s) informed of their right to withdraw consent for any portion of the exam and the right to terminate the exam at any point? Describe the process used should a sexual assault patient/survivor wish to withdraw consent or terminate the examination.
5. How does the organization discuss the options around release of evidence/kit to law enforcement?
6. When evidence/kit/information is released to law enforcement how does the organization ensure that it is compliant with VAWA standards of informed release, i.e., patient's/survivor's informed, written, specific, reasonably time-limited consent?
7. In the last year how many patient(s)/survivor(s) decided not to release their kit to law enforcement?
8. What are your procedures for reporting sexual assaults to law enforcement? If addressed within your protocol please indicate. If not, please respond.
9. What is told to patients/survivors about reporting? If addressed within your protocol please indicate. If not, please respond.
10. How is a patient/survivor informed that she/he is not required to participate with law enforcement as a condition of receiving the exam?
11. How is respect for the sexual assault patient(s)/survivor(s) maintained in interdisciplinary communication?

Core Standard J7: The SANE program provides victim-centered medical and forensic evaluation for post-pubescent adolescent and adult sexual assault patients/survivors in a manner that minimizes the trauma of the victim and caregivers, and protects the integrity of evidence, including the completion of the Sexual Assault Medical Forensic Evidence Collection Kit as approved by the Michigan State Police.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How many SANE exams did the organization provide for post-pubescent adolescent and adult sexual assault patients/survivors in the last year?
2. Are individuals charged for SANE services by the agency, the hospital or another organization?

Core Standard J8: The SANE program provides victim-centered medical and forensic evaluation for child sexual assault patients/survivors in a manner that minimizes the trauma of the victim and caregivers, and protects the integrity of evidence, including the completion of the Sexual Assault Medical Forensic Evidence Collection Kit as approved by the Michigan of State Police.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
 1. How many SANE exams did the organization provide for child patients/survivors of sexual assault in the last year?

Core Standard J9: The organization’s policies, protocols and practices related to SAFE Response payments are consistent with Michigan law and the Board’s philosophy.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
 1. If exams are paid for through SAFE Response, how does the organization ensure that patient(s)/survivor(s) understand that if she has substantial safety or privacy concerns related to insurance billing the insurance company cannot be billed?
 2. If exams are paid for through SAFE Response, how does the organization ensure that patient(s)/survivor(s) understand that payment for the exam does not depend on their participation with law enforcement?
 3. If the exams are paid for through SAFE Response, how does the organization ensure that costs eligible for reimbursement through SAFE Response are not also charged to another funding source?

Core Standard J10: The organization responds in a timely manner to patients/survivors of sexual assault at a designated SANE site 24 hours a day/7 days per week.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:
 1. What is your policy on response time to the SANE site?
 2. Describe your organizations’ process for responding to SANE exams 24 hours per day/7 days per week.
 3. How many nursing and advocate staff are on call at any given time to respond for SANE exams? Does this number provide sufficient coverage?

4. How do you ensure that no one SANE or advocate is overburdened?

Core Standard J11: The SANE program provides crisis intervention, support, advocacy, and specific assistance to patients/survivors of sexual assault eligible for SANE services.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe how the SANE program provides crisis intervention to sexual assault patients/survivors.
2. Describe how the SANE program provides emotional support to sexual assault patients/survivors.
3. Describe how the SANE program provides advocacy to sexual assault patients/survivors.
4. Describe how the SANE program provides specific assistance to sexual assault patients/survivors.
5. How are the organization's ongoing services offered to patients/survivors of sexual assault eligible for SANE services?

Core Standard J12: The organization uses designated personnel to implement policies and procedures for the SANE program.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. List position title(s) involved in SANE programing including agency staff and/or hospital staff, if applicable.
2. Describe the duties and qualifications of the SANE program Medical Director.
3. Describe staff roles for SANE programing including, if applicable, forensic nurse examiner, advocates and volunteers in responding to patients/survivors of sexual assault. If addressed within your protocol please indicate. If not, please respond.
4. Describe how the organization provides court testimony. If addressed within your protocol please indicate. If not, please respond.
5. Do all SANEs provide court testimony? If not, how is it determined who provides court testimony?

Core Standard J13: The organization uses trained, qualified and certified personnel to complete medical and forensic examinations following a sexual assault.

- The minimum standard requires that a health care provider have met minimal standards of didactic training as set forth by the International Association of Forensic Nurses (IAFN) for sexual assault medical and forensic exams and be involved in clinical training and supervision by a qualified preceptor, and
- The health care provider is certified by the IAFN as a Sexual Assault Nurse Examiner-Adult/Adolescent (SANE-A) and/or Sexual Assault Nurse Examiner-Pediatric (SANE-P).

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. List names and certifications of staff providing SANE medical and forensic exams.
2. Are staff credentialed to provide SANE exams at the hospital?

Core Standard J14: The organization provides and maintains specialized equipment for forensic evidence documentation purposes, locked space for charts/other evidence and equipment for adequate disposal of medical waste.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. Describe any specialized equipment used by the SANE program.
2. For SAFE kits that the patient/survivor has agreed to release to law enforcement, describe how the chain of evidence is maintained.
3. Describe what happens to SAFE kits that have been released to law enforcement, but are never retrieved by law enforcement. If addressed within your protocol please indicate. If not, please respond.
4. For SAFE kits that have not been released to law enforcement, describe how the chain of evidence is maintained. If addressed within your protocol please indicate. If not, please respond.
5. For SAFE kits that have not been released to law enforcement, describe the organizations retention policy and how victims are informed of that policy. If addressed within your protocol please indicate. If not, please respond.

Core Standard J15: The organization actively participates in local community group(s) and/or interdisciplinary team(s) to identify and address the long-term needs of sexual assault patients/survivors related to SANE services.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

- Narrative Response:**
1. What groups and/or interdisciplinary teams does the organization participate in to ensure that the long-term needs of sexual assault patients/survivors related to SANE services are addressed?
 2. What projects, products or changes have resulted from the activities of these groups?

Core Standard J16: The organization works collaboratively with community systems to positively impact institutional policies, practices and procedures that affect sexual violence patients/survivors related to SANE services.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

- Narrative Response:**
1. Describe relationships, collaborations and partnerships with key figures in community systems.
 2. Describe the organization's participation in community task forces, work groups, and/or advisory boards which focuses on issues that are not specific to, but improve, the lives of patients/survivors of sexual assault.
 3. Does the community have a collaborative body that meets regularly to address sexual assault issues? Who is involved?
 4. What are the group's activities?
 5. What has changed as a result?
 6. What support does the organization provide to medical facilities without SANE protocols or SANEs available to respond to patients/survivors of sexual assault?
 7. How does the organization seek ideas from other systems to improve the systems' response to sexual assault patients/survivors in the community?

Advanced Standard J17: The organization conducts SANE specific training for personnel employed by community system organizations, e.g., law enforcement, prosecuting attorneys, court staff, health care, faith based, educators.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

- Narrative Response:**
1. Describe any training the organization's staff has provided in the last year to personnel employed by community systems relative to providing effective SANE services and support for patients/survivors of sexual violence.

Advanced Standard J18: There is regular evaluation of the services and administration of the SANE program.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How is the administration and service delivery of the SANE program evaluated?
2. Who is responsible for the evaluation?
3. How is the evaluation documented?



Advanced Standard J19: There are policies and procedures in place to provide suspect examinations.

Self Rating:	<input type="checkbox"/>					
	Exceeds	Meets	Needs Strengthening	Plan To Meet	Does Not Meet	Not Applicable
Team Rating:	<input type="checkbox"/>					

Organization/Team Comments:

Narrative Response:

1. How many examinations were completed for suspects of sexual assault within the last year?



ITEMS TO BE SUBMITTED PRIOR TO ON-SITE VISIT

Instructions: Leave 1st column blank if item is attached. Type NA in 1st column if item is not available. If item is included in another attached item such as the Board Manual, Standard Operating Procedure, or Personnel Policies, indicate the page # in the 2nd column and which document in the 3rd column.

Blank or NA	Page #	Document	Item
			Organization's mission and/or purpose statement A1, A2, C4, I3
			Organization's values and/or philosophy statement A1, A2, C4, I3
			Organization's articles of incorporation A1, A2, A3, H1
			Organization's bylaws A1, A3, A4, A9, A10, D3, H1
			Organization's history A1
			Organization's brochures A1
			Most recent annual report A1, B3, B6, H11
			Board of Directors and committee minutes for the last twelve months A2, A4, A7, B2, B7, F6, F17, F18
			List of members of the Board of Directors indicating the expertise and knowledge base they bring to the organization A3, A5, A9
			Proof of non-profit status, e.g., letter from IRS indicating 501(c)3 status A3
			Organizational chart A3, B10, C14, C15, D5, D32, E5, F15, G20, I8, J12, J13
			Board of Directors manual A4
			Board of Directors job descriptions A4
			Board of Directors monitoring calendar or similar tool A4
			Code of ethics A4
			Conflict of interest policy A4
			Most recent Board of Directors self-evaluation A4
			Evidence that specialized training exists for board members, the content of which includes board members 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 Michigan Domestic and Sexual Violence Prevention and Treatment Board philosophy A5
			Policies developed, reviewed, revised and/or adopted by the Board of Directors over the last year A6
			Long-range, strategic, and/or annual plans A7, A8, A12, B1, B7, C6, C7, C8, D9, D10, D25, D26, D27, E1, F8, F16, G15
			Chart identifying characteristics of the Board of Directors A11
			Evidence that the governing body evaluates the organization A12
			The Board of Directors' plans addressing leadership changes or other major transitions A13
			The organizations risk evaluation and management plan A14
			Marketing plan B1
			Fund development plan B1, B6, B7, F16
			Media response plan B1
			Community relations plan B1
			Community awareness and education plan B1
			Prevention plan B1
			Staff and volunteer job descriptions (One for each staff and/or volunteer job position) B2, B10, C15, D5, D6, D20, D22, D32, E5, F15, G20, I8, J12, J13
			Examples of recent direct mail appeals B2
			Records of special events B2
			Charitable license to solicit B2
			Procedures for donation receipt and acknowledgement B2
			Brochures, fliers, newsletters, press releases, posters, printed materials, and/or links to agency website, social media, and other electronic communication modalities, e.g., examples of electronic posts, that were created by the organization including versions in languages other than English and those adapted for special needs B4, B5, B8, B9, B12, B13
			Training program(s) and/or outline(s) for education/prevention, community education, and public awareness activities including versions in languages other than English B4, B5, B9, B12
			Records or logs of public awareness, community education, and prevention programs B4, B12
			Community interviews B4, B5, B8, B12

		Monthly financial statements for last 12 months B6
		Community relations policy B11
		Education/prevention policy B11
		Community education policy B11
		Public awareness policy B11
		Fund development policy B11
		Records and reports related to evaluation of community relations B15
		Records and reports related to evaluation of education/prevention activities B15
		Records and reports related to evaluation of community education B15
		Records and reports related to evaluation of public awareness activities B15
		Records and reports related to evaluation of fund development activities B15
		Service delivery philosophy C1, H9
		Communicable diseases and/or HIV/AIDS policy C1, H9
		Conflict resolution policy C1, H9
		Ethical guidelines for staff and volunteers C1, H9
		Loan of money policy C1, H9
		Policy regarding provision of services to minors C1, H9
		Policy related to reporting suspected child abuse and/or neglect to Children's Protective Services C1, H9
		Service to clients who are addicted to alcohol and/or illegal drugs policy C1, H9
		Service to clients who are mentally ill policy C1, H9
		Sexual harassment and exploitation policy C1, H9
		School attendance policy C1, H9
		Shelter of children when adult resident does not have legal custody policy C1, H9
		Confidentiality policy C2, C3, H6
		Acceptance of legal documents policy, e.g., warrants/subpoenas C2, H6
		Release of information policy, written procedure, and/or practice C3, H6
		Blank release of information forms C3, H6
		Welcome/orientation packet(s) given to clients for each program, e.g., domestic violence, sexual assault, transitional supportive housing, children's, legal, and/or others as applicable C4, C5, C9
		Policies, procedures, and practices related to accommodating individuals seeking assistance C6
		Brochures and outreach materials which identify services provided and/or available accommodation(s) C6
		Plans for service delivery if separate from above C7
		Written relevant goals, objectives, and/or plans for the 24 hour crisis/hotline if not included in above C8
		Policy on orientation of service participants to the organization and available services C9
		Intake policy C10
		Copy(ies) of blank intake forms for each program, e.g., domestic violence, sexual assault, transitional supportive housing, children's, legal, and/or others as applicable C10
		Case closure policy C11
		Records management policy C11, C12, H4
		Copies of blank forms used in residential and non-residential client files C12
		Written policy on writing case notes and case note review C12
		Case review policy C13
		Chief executive officer/executive director job description C14
		Units of service chart (<i>Part of pre-review packet – Please remember to note clients not in service area in the "other" column</i>) C16, C18
		Service delivery plan that describes how the organization serves survivors from their designated geographic service area and how they serve those referred from other areas C16
		Policy regarding service to clients referred from other geographic areas C16
		Policy regarding transfer of clients to another domestic violence and/or sexual assault service provider C16
		Changes to client related policies in the past year C17
		Policy on statistical documentation and reporting C18
		Copies of blank client feedback/program evaluation forms and analysis information including aggregate data, e.g., summaries of client satisfaction surveys and/or compiled outcome data for each program area, e.g., domestic violence, sexual assault, transitional supportive housing, children's, legal, and/or others as applicable C18

			Program evaluation and analysis information including aggregate data, e.g., summaries of client satisfaction surveys and/or compiled outcome data for each program area, e.g., domestic violence, sexual assault, transitional supportive housing, children's, legal, and/or others as applicable C18
			Statistical report(s) indicating numbers served and level of service provided for each program area, e.g., domestic violence, sexual assault, transitional supportive housing, children's, legal, and/or others as applicable C18
			Documentation related to analysis of service delivery C19
			Aggregate client feedback information for each program area, e.g., domestic violence, sexual assault, transitional supportive housing, children's, legal, and/or others as applicable C19
			Community survey results C19
			Access for persons with special needs including those who use wheelchairs, are partially sighted, blind, hard of hearing , or deaf policy D1, D17
			Access to personnel files policy D1
			At will employment policy D1
			Background check(s) policy, e.g., criminal history, sex offender registry, Department of Human Services Child Abuse Central Registry, driving record D1, D2, D4, D17, D18, D20
			Benefits policy D1
			Conflict of interest policy D1, D2, D17, D18
			Domestic violence and/or sexual assault policy D1, D4, D17, D20
			Educational assistance and conference attendance policy D1, D17
			Employee status, exempt/non-exempt, full-time/part-time, and benefit eligibility policy D1
			Employee orientation/development/training requirement policy D1, D8, D13, D30
			Ethical behavior policy including: D1, D17, D28 <ul style="list-style-type: none"> • Treatment of clients • Relationships with clients • Confidentiality • Substance abuse • Use of materials and equipment which belong to the organization • Outside work including domestic violence and/or sexual assault consulting work for which an employee might be paid by someone other than the organization • Expectations of involvement when attending conferences/training paid for by the organization • Any other ethical issue of importance to the organization
			Equipment, internet, phone use policy D1, D17
			Family Leave Act policy, if applicable D1
			Grievance and appeal procedures D1, D17
			Holidays policy D1
			Nepotism policy, i.e., individuals will not be hired or supervised by person who is related D1, D2, D17, D18
			Non-discrimination and/or affirmative action policy D1, D17, H5
			Performance appraisals policy for staff D1, D8, D24, D31
			Personal, emergency, disability, sick, family (medical), jury, military leave and/or paid time off policy D1
			Personnel files maintenance policy for employees D1
			Personnel Policies D1, D4, D20, D28, D31
			Policy describing method of salary progression D1
			Policy identifying who has hiring & firing authority of staff D1, D3
			Salary range policy D1
			Sexual harassment policy D1, D17
			Sick leave accrual and use policy D1
			Substance abuse including testing policy D1, D17
			Termination procedures policy D1, D31
			Travel reimbursement policy D1, D17
			Working hours, overtime and paydays, documentation policy D1
			Workplace violence policy D1, D17
			Executive director position description D3
			Training records for staff <i>(If available electronically)</i> D8, D13, D16

		Goals, objectives, and plans specific to the administration and management of staff, (if not included above) D9
		Summary or analysis of staff satisfaction surveys, if available D10
		Salary range schedule D11, F18
		Policies, procedures and/or practices relating to the use of technology D15
		Staff training plan related to technology and software. D16
		Curriculum or outline of in-house training related to technology and software D16
		Access to volunteer files policy D17
		Performance appraisals policy for volunteers D17
		Personnel files maintenance policy for volunteer files D17
		Personnel Policies if applicable to volunteers D17
		Policy identifying who has authority to engage/dismiss volunteers D17
		Procedures related to dismissing volunteers D17
		Volunteer orientation/development/training policy(ies) D17, D24, D30
		Volunteer manual and/or policy(ies) D17, D20, D28, D31
		Documentation identifying who has authority to engage or dismiss volunteers D19
		Training records for volunteers <i>(If available electronically)</i> D24
		Goals and objectives and plans specific to the administration and management of volunteers, if not included in above. D26
		Summary or analysis of volunteer satisfaction surveys, if available D27
		Documentation of insurances including: D28 <ul style="list-style-type: none"> • Unemployment • Worker's compensation • Directors and officers
		Evidence of reporting and payment of employment taxes D28
		Summary of staff and volunteer demographic information, if available D29
		Training curriculum/manual for staff and volunteers <i>(If available electronically, otherwise on site)</i> D30
		Handouts from training sessions <i>(If separate from curriculum/manual)</i> D30
		Current agendas of training sessions D30
		Staff and volunteer performance evaluation forms D30
		Progressive discipline, if applicable D31
		Documentation that the organization's Board of Directors adopted a plan to address systems change. E2
		Meeting minutes and/or records of community collaborative groups, task forces and/or advisory boards working on systems change. E3, E4
		Policies, procedures, and/or protocols developed in collaboration with systems within the community. E3
		Press releases from the organization E3
		Agendas, training outlines, handouts and/or curriculum for community systems. E6
		Policies, procedures, and/or practices that have been developed and/or evaluated. E7
		Board adopted accounting, financial management and/or related policies F1, F2, F3, F8, F9, F10, F14, F19
		Monthly financial statements for the last 12 months F3, F7, F9 F19
		Documentation of liability insurance F4
		Documentation of professional liability insurance F4
		Documentation of director and officer liability insurance F4
		Documentation of fraud/employee theft insurance F4
		Documentation of non-owned auto insurance F4
		Documentation of other insurances, if applicable F4
		Documentation of worker's compensation coverage F5
		Documentation of unemployment insurance coverage F5
		Current approved operating budget including program budgets F6
		Chart of accounts F8
		Minutes of committee meetings related to financial oversight F8, F17
		Written description of the organizations segregation of duties related to internal controls. F11
		Most recent audit conducted by independent accountant F12, F19
		Auditor's letter summarizing findings and recommendations to the board of directors F12
		Form 990 and any extensions filed for most recently completed fiscal year F13

			Fringe benefit package F18
			Documentation indicating cost(s) by program or service area/cost center within an identified area F20
			Evidence of adherence to applicable codes, zoning, building, fire, health and safety codes e.g., certificate of occupancy, health department and/or safety inspections (<i>Within the last 12 months</i>) G1
			Policy requiring 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. G2
			Policy requiring all passengers/drivers to wear seat belts G2
			Policy requiring that all vehicles used to transport clients/children be insured for liability and physical damage, and a copy of such insurance is to be on file. G2
			Policy requiring volunteers/staff transporting clients in personal vehicles to have a valid driver's license on file. G2
			Policies related to client with disabilities G3
			Policy requiring no alcohol, illegal drugs or weapons on the premises G4
			Most recent furnace inspection including a carbon monoxide test, if applicable (<i>Within last 12 months</i>) G4
			Most recent boiler inspection, if applicable (<i>Within last 36 months if antique steam, all others within last 12 months</i>) G4
			Cleaning supply and other toxic materials storage policy G5
			Policy related to maintaining a smoke-free environment G6
			Food preparation, serving, storage and disposal policy G7
			Most recent fire detection system test results (<i>Within last 12 months</i>) G8
			Emergency evacuation diagram G9
			Fire detection system test policy/procedure G9
			Most recent fire detection system test results (<i>Within last 12 months</i>) G9
			Quarterly fire drill policy/procedure G9
			Documentation related to the last four fire drills G9
			Building evacuation policy and procedures G9
			Security policies for protection of clients, staff and volunteers G11
			First aid and medical emergency policies G13
			Policy on cardiopulmonary resuscitation, universal precautions and communicable diseases training for staff G13
			Staff first aid training records G13
			Prescription and over-the-counter medication policy and procedure G13
			Facility management policy G14
			Policies, procedures and rules identifying client participation in shelter upkeep, if applicable G16
			Evaluation of facility, health and safety issues G21
			Emergency response plan that addresses critical situations, e.g., accidents, serious illness, fire, medical emergencies, floods, natural disasters, hostage situations, bomb threats, unlawful intrusion, physical assault G23
			Evidence of non-profit status, i.e., letter from the Internal Revenue Service (IRS) indicating nonprofit status H1
			None. Aggregate information required for determination of rating for this standard provided by the MI Domestic & Sexual Violence Board. H3
			Written complaints from applicants for employment or service participants including the organization's written response. H5
			Client rights policy H7
			Client grievance procedure H7
			Brochures and outreach materials that identify the geographical area served H11
			Client eligibility policy and/or criteria H12
			Forms used to document client eligibility H12
			TSH brochures, flyers, etc. I1, I4
			Statistical report(s) identifying numbers served and level of service provided I1, I10
			TSH application packet I1
			TSH welcome packet I1
			Health, safety, and/or fire inspection(s) of TSH units I1
			Goals, objectives and plans specific to TSH program I3
			Changes to rules, guidelines, and/or expectations for the TSH program in the past year I5

			TSH program policies <i>I5, I7</i>
			TSH Standard Operating Procedures/Manual, if applicable <i>I6</i>
			Evaluation of TSH program administration and service delivery <i>I10</i>
			Blank TSH client feedback forms <i>I10</i>
			Aggregate summary of TSH client feedback forms and other evaluations <i>I10</i>
			Goals, objectives and plans related to SANE program. <i>J1</i>
			SANE brochures, flyers, etc. <i>J7, J8, J11</i>
			Statistical report(s) identifying numbers served and level of service provided <i>J7, J8</i>
			SANE patient/survivor packet <i>J3, J4</i>
			SANE program policies <i>J2, J3, J9, J19</i>
			SANE Standard Operating Procedures/Manual, if applicable <i>J4, J5, J6, J7, J8, J9, J10, J11, J19</i>
			Evaluation of SANE program administration and service delivery <i>J18</i>
			Blank SANE patient/survivor feedback forms <i>J18</i>
			Aggregate summary of SANE patient/survivor feedback forms and other evaluations <i>J18</i>

ITEMS TO BE AVAILABLE FOR REVIEW DURING ON-SITE VISIT

Instructions: Prior to the peer review team’s arrival, gather items noted below for review while on-site. Leave 1 st column blank if item is available. Type NA in 1 st column if item is not available.	
Blank or NA	Item
	Board member interviews F17
	Community member interviews B2, B4, B5, B8, B12, E3, E4, E6, E7
	Staff interviews B10, B12, C4, C5, C16, C19, E5, F17, I6
	Performance evaluation of the chief executive officer/executive director A4
	Brochures, fliers, newsletters, press articles, posters, printed materials, and/or similar items that include information about the organization which may or may not have been created by the organization, e.g., newspaper articles, copies of blogs (<i>If not available electronically</i>) B4, B12
	Local news articles relative to domestic and/or sexual violence (<i>If not available electronically</i>) B8, E3
	Braille materials B13
	Technology used for accommodations B13
	Other accommodating items B13
	Current and closed client files, e.g., domestic violence, sexual assault, SANE, transitional supportive housing, children’s, legal, and/or others as applicable C2, C3, C6, C10, C11, C12, C13, H6, H12, I1, I2, I6, J4, J5, J6, J7, J8, J11
	Client feedback/satisfaction forms and other evaluations if not summarized, if applicable C4, C5, C6, C18, I10
	Crisis call activity log and/or records indicating time of call, person taking the call, and disposition of the call, i.e.:
	C8
	a. Evaluation and/or assessment of each caller’s situation
	b. Intervention and/or assistance provided
	c. Action and/or safety plan(s) developed, as needed
	d. Referrals/resources provided as needed
	e. Follow up scheduled and/or provided when appropriate
	Resource and referral manual (<i>If not available electronically</i>) C8
	Notes and/or records of supervisory and/or peer case review, if applicable C13
	Employee personnel files D2, D4, D5, D7, D8, D12, D13, D28, D31, J12, J13
	Volunteer personnel files D18, D20, D21, D23, D24, D28, D31, J12, J13
	Former staff and volunteers personnel files D31
	Training curriculum/manual for staff and volunteers (<i>If not available electronically</i>) D30
	Handouts from training sessions (if separate from curriculum/manual) (<i>If not available electronically</i>) D17
	Training records for staff (<i>If not available electronically</i>) D8, D13, D16, J12, J13
	Current agendas of training sessions (<i>If not available electronically</i>) D17
	Training records for volunteers (<i>If available electronically</i>) D24, J12, J13
	Staff satisfaction surveys if not summarized, if applicable D10
	Inventory of equipment and furnishings (<i>If available electronically</i>) F1
	Financial accounting records (<i>If available electronically</i>) F2, F3
	Evidence of available approved car seats, properly installed and used for transporting all children as required by law G2
	Vehicles used to transport clients and their children with operable seat belts, if applicable G2
	Employee/volunteer automobile insurance documentation G2
	Employee/volunteer driver’s licenses documentation G2
	Entrances, exits, steps, walkways, etc. are clear G4
	Windows are free from outside release bars and debris G4
	No combustible materials in building, basements, attics or attached buildings G4
	Equipment is functioning G4
	Observe facility’s general condition and functionality G4
	Confirm that adequate 24 hour heat, electricity and water service are available G4
	Facilities are free of pests G4
	Garbage is appropriately maintained and controlled G4
	Evidence that cleaning supplies and other toxic materials are safely stored G5
	Observe food preparation, serving, storage and disposal G7
	Observe operable fire detection system G8
	Observe placement of emergency evacuation diagrams G9
	Review adequacy of personal supplies available to clients G10

	Observe storage and other measures for securing personal belongings of clients, staff and volunteers and items belonging to the organization G12
	Review adequacy and accessibility of first aid supplies G13
	Review facility cleanliness G16
	Observe confidential client counseling and advocacy space G17
	Observe privacy of client bathroom and sleeping areas, if applicable G17
	Observe children's play areas inside and outside of shelter G18, G22
	Occupancy records indicating the number of people housed daily over the last year. If confidential identifying information is included in these records, please redact or have available examples of how occupancy records are maintained (<i>If not available electronically</i>) G19
	Contract with Medical Director J5
	Documentation of Chart Reviews J5
	Minutes from Coordinated Community Response (CCR) to Sexual Assault, Sexual Assault Task Force and/or Sexual Assault Response Team (SART) J15, J16
	Protocols and/or Memorandums of Understanding (MOUs) with law enforcement, hospital, Children's Advocacy Center (CAC), and/or other pertinent groups J15, J16, J17
	Agendas, training outlines, handouts and/or curriculums for SANE specific training for community systems J17