Michigan Department of Health and Human Services
Division of Victim Services
Michigan Domestic and Sexual Violence Prevention and Treatment Board

Quality Assurance Standards
*Without Worksheet*s

October 2019

Michigan Department of Health and Human Services
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Michigan Domestic and Sexual Violence Prevention and Treatment Board

Quality Assurance Standards

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In 1978, Michigan was the third state in the country to pass legislation making domestic violence a crime. The legislation also established the Michigan Domestic Violence Prevention and Treatment (MDVPTB), changed in 2012 to the Michigan Domestic and Sexual Violence Prevention and Treatment Board (Board). The governor appointed Board is mandated to develop standards for the implementation and administration of services and monitor organizations receiving funding.

Early advocates rallied to make monitoring a peer process. The Board agreed and peer review using the first quality assurance standards was established. With input from individuals representing Board funded organizations' leadership and direct service workers; staff from the Michigan Coalition Against Domestic and Sexual Violence, now named the Michigan Coalition to End Domestic and Sexual Violence; Board members and staff; standards-based review site visits were first launched in the mid-1980s. With many revisions throughout the years, to this day Board quality assurance standards monitoring is a peer driven process that relies on staff currently working in or having extensive experience working in domestic and sexual violence service organizations.

This document represents the most recently revised Quality Assurance Standards (QAS). Like the documents that have come before, this too reflects input gained from organizations like yours.

The Quality Assurance Standards are a blueprint that guides you towards excellence in both services and administration. It describes what is expected and required of organizations receiving funds administered by the Board.

This document presents standards with questions, checklists, and an addendum aligned with individual standards to assist you in determining what is needed to meet each standard. In the addendum you will find links with valuable information to your organization's board/governing body, you and your staff. The route to compliance and strong programming is clearly outlined in the standards and supplemental documents. Consistent and intentional use of the standards and detailed information will put you on a path towards excellence. The journey may be challenging, but the results will be exhilarating!

STANDARDS RATING SCALE

(E)	**Exceptional** • **The standard is met in an excellent manner, i.e., a positive, creative, innovative approach that could be replicated**
(M)	**Meets** • **The organization is following the standard**
(OE)	**Opportunity for enhancement** • **The standard is minimally met** • **Efforts in this area need strengthening and further development** • **The organization is required to develop a response/plan upon receipt of the Quality Assurance Standards Review Site Visit Report**
(P)	**Plans to meet** • **The standard is not currently met but the organization has an acceptable written plan in place to attain compliance** • **The organization's action/compliance plan is attached**
(D)	**Does not meet** • **The standard is not met and there is currently not an acceptable plan to attain compliance** • **The organization is required to develop a response/plan upon receipt of the Quality Assurance Standards Review Site Visit Report**
(NA)	**Not applicable**

Narrative Response Boxes – Narrative response boxes are color coded when you hover your mouse over them. The purple shade is for the organization's response, the red shades are for peer reviewer comments.

Links – Links are located throughout the QAS document which provide explanations or examples. The links connect to the addendum located at the end of the standards. Information may be accessed by clicking on the link and in some instances by hovering over the link where a screen tip may appear.

ScreenTips – To utilize the ScreenTip feature confirm the tool is activated by following the next two steps.
- Go to the "File" tab, select "Options", on the "General" tab and then "User Interface Options" under "ScreenTip Style" make sure that "Show feature descriptions in ScreenTips" is selected.

- Then, under "Options" select "Display" and make sure that "Show document tooltips on hover" is checked.
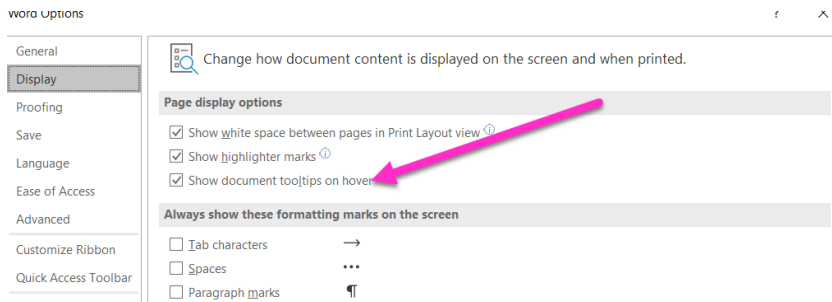
Check Boxes – There are two possible options on how to check boxes depending on the operating system being used. One is to double click on the box, and it will become checked, or double click the box to uncheck it. The other possible option is that when you click on the box, a dialogue box will pop up. You will be able to select "Check" or "Not checked".
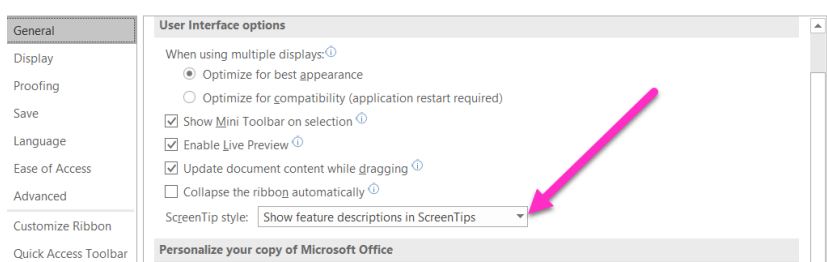
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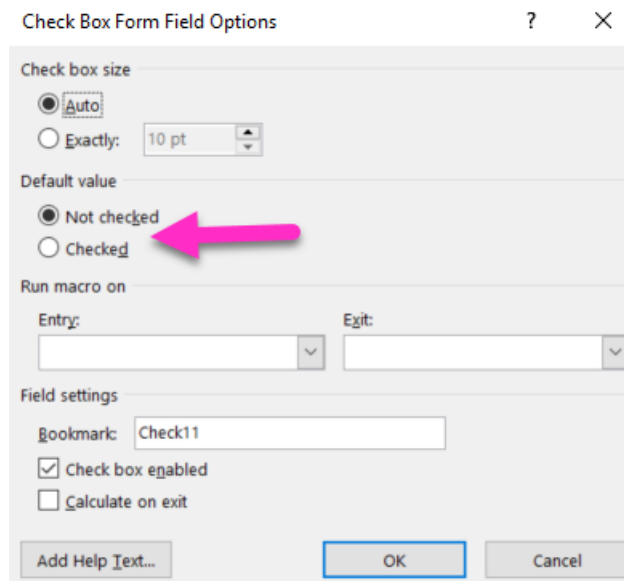
DHHS Division of Victim Services
Michigan Domestic and Sexual Violence Prevention and Treatment Board (DVS/MDSVPTB)
Quality Assurance Standards – Introduction

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 serving survivors of domestic/intimate partner violence and/or sexual assault and their family and friends will:

    - Have a clearly articulated purpose which is compatible with the DVS/MDSVPTB's philosophy
    - Function in accordance with its stated purpose
    - Meet survivor service and advocacy needs
    - Evaluate all aspects of its operations
    - Have a Board of Directors/Governing Authority (Board) that sets policy, provides oversight and is accountable for the organization

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

2. **Basic Considerations**

    These standards emphasize the role of the Board 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 and the Chief Executive Officer or Executive Director are clearly differentiated; staff does not govern, and the Board does not administer the day-to-day activities. The Board establishes policies and the staff, at the direction of the Chief Executive Officer or Executive Director, implements programs reflecting those policies. A clear governance structure is in place.

Standard A1: *Infrastructure*	The purpose of the organization is clearly stated and compatible with the philosophy of the DVS/MDSVPTB.

Standard A2: *Infrastructure*	The Board of Directors/Governing Authority sets goals and objectives for the organization and identifies plans and activities to achieve them.

Standard A3: *Infrastructure*	The organization has developed a transition plan to address leadership changes or other major transitions.

Standard A4: *Infrastructure*	The Board of Directors/Governing Authority establishes policies for the efficient and effective operation of the organization.

Standard A5: *Practice*	Members of the Board of Directors/Governing Authority are chosen in a manner that assures a broad base of knowledge and participation in the governance of the organization.

Standard A6: *Practice*	There is a rotation mechanism to ensure a balance of new Board of Directors/ Governing Authority members and ongoing members.

Standard A7: *Practice*	The composition of the Board of Directors/Governing Authority is diverse, and representative of the geographic area served.

Standard A8: *Practice*	Each member of the Board of Directors/Governing Authority contributes financially to the organization.

Standard A9: *Foundational*	The organization functions in accordance with its stated purpose.

Standard A10: *Foundational*	The Board of Directors/Governing Authority reviews and manages risks facing the organization.

Standard A11: *Foundational*	The Board of Directors/Governing Authority is accountable for the organization.

Standard A12: *Practice*	The Board of Directors/Governing Authority evaluates the organization's overall effectiveness and efficiency.

Standard A13: *Foundational*	The organization has a designated Board of Directors/Governing Authority.

Standard A14: *Foundational*	The organization complies with civil rights and other laws cited within the contract(s) 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 DVS 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.**

Standard A15: *Practice*	**The Board of Directors/Governing Authority operates in accordance with acceptable practice.**

Introduction: Section B ~ Financial Management

Introduction

1. **Summary of the Standards**

    This section presents standards that encompass the organization's management of financial resources. Sound financial management practices and continuous monitoring of the organization's financial status is essential if its effectiveness and viability are to be maintained. Compliance with these standards will help to ensure that:

    •   Financial resources are prudently used
    •   There is an accounting of how financial resources are used
    •   There is public disclosure of how financial resources are used

2. **Basic Considerations**

    These standards stress that Generally Accepted Accounting Principles (GAAP) with regular internal and external reports and audits are the foundation for prudent management of capital, endowment and operating income/expenses.

    It is the role of the governing body to ensure financial accountability and that the bulk of the organization's resources are used to meet service needs. The standards emphasize strong financial management policies and the establishment of plans for the organization's financial management and long-term financial stability.

Standard B1: Infrastructure	Goals, objectives, and plans are established for financial management and long-term financial stability.

Standard B2: Foundational	The governing body adopts, and the Chief Executive Officer or Executive Director implements comprehensive budgets in accordance with acceptable practices.

Standard B3: Practice	The organization's accounting is done on an accrual basis.

Standard B4: Practice	The organization uses functional accounting to track finances by program or service area/cost center.

Standard B5: Practice	The organization prepares financial statements that clearly and fairly present the organization's financial position.

Standard B6: Practice	The organization prudently manages its operating, endowment, and capital funds.

Standard B7: Practice	The organization has sufficient cash flow to meet its operating needs.

Standard B8: Infrastructure	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.

Standard B9: Infrastructure	The organization maintains a detailed written description of its segregation of duties related to internal controls.

Standard B10: Foundational	The organization provides for an annual audit by independent accountants.

Standard B11: Foundational	The organization annually meets Form 990 filing requirements.

Standard B12: Foundational	The organization retains all books, records, and other documents relevant to the contract(s) for a minimum of six years after final payment.

Standard B13: Infrastructure	Policies for financial management are comprehensive and practical.

Standard B14: Practice	The organization maintains adequate cash reserves.

Standard B15: Practice	The organization uses a cost analysis process as part of its ongoing planning and program development.

Standard B16: Practice	The Board of Directors/Governing Authority continuously reviews and analyzes its financial position.

Standard B17: Practice	The Board of Directors/Governing Authority adopts and regularly reviews salary range and fringe benefit schedules.

Standard B18: Practice	The organization uses designated and appropriately qualified personnel to implement its financial management policies and procedures.

Standard B19: Foundational	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, cyber insurance, and others as needed.

Standard B20: Foundational	The organization provides unemployment compensation coverage and worker's compensation insurance in accordance with applicable federal and state laws.

Standard B21: Foundational	Financial management is conducted in accordance with applicable professional, ethical, and legal principles.

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/intimate violence and/or sexual assault and their family and friends will:

- Operate efficiently and effectively
- Provide client-centered services that are culturally honoring and respectful
- Present options and information
- Stress safety for client and their children
- Provide support and advocacy that respects clients' right to self-determination

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 honoring and respectful; and protects the dignity and right to self-determination of clients. It also includes procedures for documentation of services that are provided and addresses the relationship between philosophy and practice.

Standard C1: *Foundational*	The organization's services comply with the DVS/MDSVPTB's philosophy.

Standard C2: *Foundational*	The organization's client eligibility practices are consistent with the DVS/MDSVPTB contract(s) and philosophy.

Standard C3: *Foundational*	The organization recognizes and respects the autonomy, dignity, and rights of clients.

Standard C4: *Foundational*	Services are client-centered, non-judgmental, culturally honoring, respectful, and strive to empower the persons served.

Standard C5: *Infrastructure*	Goals, objectives, and plans are established for the organization's delivery of service.

Standard C6: *Foundational*	The organization provides or arranges for all services required in the contract(s). 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.

Standard C7: *Foundational*	All DVS/MDSVPTB contract(s) required services are provided free of charge.

Standard C8: *Foundational*	Confidentiality of program participants is protected.

Standard C9: *Infrastructure*	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.

Standard C10: *Foundational*	The organization works to reduce barriers that prevent individuals from seeking and accessing services.

Standard C11: *Practice*	The organization conducts intake services in accordance with acceptable practices.

Standard C12: *Foundational*	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.

Standard C13: *Practice*	The organization orients adult and child clients to the organization and its services.

Standard C14: *Foundational*	The organization maintains confidential comprehensive individual client service records/case files in accordance with acceptable practices.

Standard C15: *Practice*	The organization has a system for regular supervisory and/or peer case review.

Standard C16: *Practice*	The organization conducts case closure in accordance with acceptable practices.

Standard C17: *Practice*	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.

Standard C18: *Practice*	The organization maintains an internal structure for efficient and effective administration of service delivery.

Standard C19: *Practice*	The organization gathers, evaluates, and uses meaningful service information in accordance with acceptable practices.

Standard C20: *Infrastructure*	The Chief Executive Officer or Executive Director exercises full responsibility for the day-to-day management of the organization.

Standard C21: *Practice*	The organization uses designated personnel to manage its delivery of service(s).

Standard C22: *Foundational*	The organization per federal and state confidentiality provisions restricts access to, use of, and/or disclosure of personally identifying client information by: • Using signed, voluntary, time-limited, written client consent forms; • Informing clients of requests for information related to their participation in services or connection with the organization; and • Informing clients that the choice to sign or not sign is not a condition of service.

Standard C23: *Foundational*	Programs are conducted in accordance with applicable professional, ethical, and legal principles.

Introduction: Section C-SANE ~ 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 programming and services. Compliance with these standards will help ensure that an organization that provides SANE services to patients/survivors of sexual assault:

    - Meet contract requirements relative to SANE service delivery
    - Operate efficiently and effectively
    - Provide patient/survivor-centered services that are <u>culturally honoring</u>, respectful and reflect the philosophy of the DVS/MDSVPTB
    - Employ trained, qualified and certified personnel who create an ethical, supportive and secure environment for sexual assault patients/survivors
    - Respond to sexual assault patients'/survivors' emotional and physical needs as well as evidentiary needs for prosecution
    - Strive to ensure that patients/survivors are not re-traumatized by the exam and assist patients/survivors in gaining control
    - 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, <u>culturally honoring</u>, 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.

Standard C-SANE1: *Infrastructure*	**SANE program goals, objectives, and plans are consistent with the organization's mission.**

Standard C-SANE2: *Infrastructure*	**The SANE program has comprehensive written policies/protocols.**

Standard C-SANE3: *Foundational*	**Forensic medical examination procedures and practices are culturally honoring and respectful.**

Standard C-SANE4: *Foundational*	**SANE services, practices, and policy implementation respect the self-determination, autonomy, and rights of sexual assault patients/survivors.**

Standard C-SANE5: *Foundational*	**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 trauma to the victim.**

Standard C-SANE6: *Foundational*	**The SANE program provides victim-centered medical and forensic evaluation for child sexual assault patients/survivors in a manner minimizes the trauma to the victim and caregivers.**

Standard C-SANE7: *Foundational*	**The SANE program protects the integrity of evidence, including the completion of the Sexual Assault Evidence Collection Kit (SAEK) as approved by the Michigan State Police.**

Standard C-SANE8: *Infrastructure*	**The organization's policies, protocols, and practices related to SAFE Response payments are consistent with Michigan law and the DVS/MDSVPTB's philosophy.**

Standard C-SANE9: *Foundational*	**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.**

Standard C-SANE10: *Foundational*	**The SANE program provides crisis intervention, support, advocacy, and specific assistance to patients/survivors of sexual assault eligible for SANE services.**

Standard C-SANE11: *Foundational*	**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.**

Standard C-SANE12: *Practice*	**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.**

Standard C-SANE13: *Practice*	**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.**

Standard C-SANE14: *Practice*	The organization conducts or provides for SANE specific training for personnel employed by community system organizations.

Standard C-SANE15: *Practice*	There is regular evaluation of the services and administration of the SANE program.

Standard C-SANE16: *Practice*	The organization uses designated personnel to implement policies and procedures for the SANE program.

Standard C-SANE17: *Foundational*	The organization uses trained, qualified and certified personnel to complete medical and forensic examinations following a sexual assault. • The minimum standard requires that a nurse/medical provider has met the educational requirements set forth by the International Association of Forensic Nurses (IAFN) for sexual assault medical/forensic exams including didactic training, skills lab/preceptorship, speculum training, be observed by a qualified medical professional; and • Ongoing clinical training and supervision are provided by medically qualified personnel.

Standard C-SANE18: *Foundational*	SANE services are conducted in accordance with applicable professional, ethical, and legal principles.

Introduction: Section C-TSH ~ 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/intimate partner violence, sexual assault, and their family and friends will:

   - Assist clients in achieving housing stability by making available flexible funding and voluntary supportive services
   - Assist clients in obtaining safe affordable housing
   - Engage landlords and community partners to create partnerships which support client housing stability
   - Stress safety for survivors and their children
   - Meet contract requirements

2. **Basic Considerations**

   These standards encompass the overall policies, practices and procedures the organization needs to ensure that persons served and prospective persons to be served in the Transitional Supportive Housing program receive services that 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 honoring, protects their dignity, and right to self-determination.

   It also includes procedures for documentation of services that are provided and addresses the relationship between philosophy and practice.

Standard C-TSH 1:	The TSH program goals, objectives, and plans are consistent with the
Infrastructure	organization's mission.

Standard C-TSH2:	The TSH program provides safe, single-family occupancy units, coupled with
Foundational	voluntary supportive services, which are available to domestic/intimate partner violence and/or sexual assault survivors and their children.

Standard C-TSH3:	Voluntary supportive services are available for TSH residents and their children.
Practice	

Standard C-TSH4:	TSH program policies stress non-violence, are client centered, and fair.
Infrastructure	

Standard C-TSH5:	The TSH program has comprehensive written policies.
Infrastructure	

Standard C-TSH6:	Acceptable practices are followed for the orientation, development, and basic introductory training of TSH staff. Training content includes:
Foundational	1. Assisting survivors to retain housing
	2. Community assessment
	3. Economic justice
	4. Flexible funding distribution/documentation
	5. Housing rights/laws
	6. Identifying survivor needs
	7. Landlord engagement
	8. Mobile advocacy
	9. Philosophy
	10. Trauma-informed/survivor-centered advocacy
	11. VAWA housing rules
	12. Voluntary services

Standard C-TSH7:	The organization actively participates in local community groups to identify and
Practice	address long-term housing needs of survivors of domestic violence and sexual assault.

Standard C-TSH8:	There is regular evaluation of the services and administration of the TSH
Practice	program.

Standard C-TSH9:	The organization uses designated personnel to implement policies and
Practice	procedures for the TSH program.

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/intimate partner violence and/or sexual assault services will:
   - Employ qualified persons who create an ethical, supportive and secure environment for survivors and their families and friends
   - Recruit and maintain a staff qualified to perform the work required with diverse characteristics that:
     - Reflect individuals seeking support and assistance
     - Represent the community and geographic area served in which the organization is located
   - Maintain a staff of persons who are sufficiently trained and highly motivated
   - 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 are the cornerstones 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.

Standard D1: *Infrastructure*	Goals, objectives, and plans are established for the administration and management of staff.

Standard D2: *Infrastructure*	Goals, objectives, and plans are established for the administration and management of volunteers.

Standard D3: *Infrastructure*	A comprehensive manual containing all personnel policies is maintained, kept current, and made available to all staff.

Standard D4: *Infrastructure*	A comprehensive volunteer manual containing all volunteer policies and practices is maintained, kept current, and made available to all volunteers.

Standard D5: *Foundational*	Acceptable practices are followed for recruiting, hiring, and assigning staff.

Standard D6: *Foundational*	Acceptable practices are followed for recruiting, selecting, and assigning volunteers.

Standard D7: *Foundational*	Acceptable screening practices of potential staff members, which serve to protect the organization and its clients, are clearly defined and followed.

Standard D8: *Foundational*	Acceptable screening practices of potential volunteers, which serve to protect the organization and its clients, are clearly defined and followed.

Standard D9: *Practice*	Acceptable practices are followed in supervising and evaluating staff.

Standard D10: *Practice*	Acceptable practices are followed in supervising and evaluating volunteers.

Standard D11: *Practice*	Acceptable practices are followed in voluntary and involuntary separation from the organization.

Standard D12: *Foundational*	The organization develops and implements culturally honoring and respectful practices among its staff.

Standard D13: *Infrastructure*	The organization has a range of policies, procedures and/or practices relating to the use of technology.

Standard D14: *Practice*	The organization establishes written qualifications for all staff positions and employs persons who meet or exceed those qualifications.

Standard D15: *Practice*	The organization establishes written qualifications for all volunteer positions and utilizes persons who meet or exceed those qualifications.

Standard D16: *Practice*	Comprehensive job descriptions are available for staff positions.

Standard D17: *Practice*	Comprehensive job descriptions are available for all volunteer positions.

Standard D18: *Practice*	A comprehensive, confidential personnel record is maintained for each staff member.

Standard D19: *Practice*	A comprehensive, confidential personnel record is maintained for each volunteer.

Standard D20: *Practice*	A benefits package and salary ranges are maintained to attract and retain qualified staff.

Standard D21: *Practice*	The organization provides written information to staff upon hiring or major transitions, detailing information about their position and welcoming them to the organization or to their new position.

Standard D22: *Practice*	The organization determines the need for volunteer services and utilizes the services of volunteers as appropriate.

Standard D23: *Practice*	The organization recruits diverse staff and volunteers reflective of the individuals served, community and geographic area.

Standard D24: *Foundational*	Acceptable practices are followed for the orientation, development, and basic introductory training of staff and volunteers. Training content is compatible with the DVS/MDSVPTB'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. New employees and volunteers providing direct service with survivors attend a New Service Provider Training (NSPT), the content of which includes: • Child sexual abuse • Crisis and trauma intervention principles and techniques • Domestic/intimate partner violence and children • Dynamics of domestic/intimate partner 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/intimate partner violence relationships

Standard D25: *Practice*	**The organization has a professional development and training plan for each staff.**

Standard D26: *Practice*	**The organization provides resources to assure that staff are sufficiently trained in technology and software used within the organization.**

Standard D27: *Practice*	**The organization addresses vicarious trauma among staff and volunteers.**

Standard D28: *Practice*	**Responsibility for hiring and firing staff is clearly defined.**

Standard D29: *Practice*	**Responsibility for engaging and dismissing volunteers is clearly defined.**

Standard D30: *Practice*	**The organization evaluates the effectiveness of its procedures and practices related to the administration of staff.**

Standard D31: *Practice*	**The organization evaluates the effectiveness of its procedures and practices related to the administration of volunteers.**

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

Standard D33: *Foundational*	**The administration of staff and volunteers is in accordance with applicable professional, ethical, and legal principles.**

Introduction: Section E ~ Community Engagement and Fund Development

Goals, objectives, and plans are established for community engagement and fund development, such as community relations, education, prevention, and public awareness.

1. **Summary of the Standards**
   This section presents standards that encompass an organization's policies, procedures, and practices relative to:
   - Communications
   - Community education
   - Community relationships
   - Fund development
   - Prevention
   - Public awareness
   - Public disclosure

   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 can provide. Compliance with these standards will help ensure that an organization will:
   - Be accountable to the community
   - Inform the community about the cause, implications, prevention, and working with survivors of domestic/intimate partner violence and/or sexual assault and their family and friends to promote healing and well being
   - Encourage cooperative relationships with individuals and community organizations in order to gain understanding and support for organizational goals, services and needs
   - Attain sufficient and diversified funding support to operate current programs and plans for meeting future needs

2. **Basic Considerations**

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

Standard E1: *Infrastructure*	The organization's philosophy related to community engagement and fund development is consistent with that of the DVS/MDSVPTB.

Standard E2: *Infrastructure*	Goals, objectives, and plans are established for community engagement.

Standard E3: *Infrastructure*	Policies related to community engagement and fund development are comprehensive and practical.

Standard E4: *Foundational*	The organization follows acceptable practices for public disclosure of program activities and financial position.

Standard E5: *Practice*	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.

Standard E6: *Practice*	The organization conducts a fund development program that secures sufficient funds to meet its current needs and future goals.

Standard E7: *Practice*	The Board of Directors/Governing Authority initiates and actively supports fund development efforts.

Standard E8: *Practice*	The organization conducts community engagement and fund development programs that project an accurate positive image throughout its geographic area served and raises the community's understanding of and support for its services.

Standard E9: *Practice*	The organization is readily identifiable and visible among its consumers, peer organizations, and appropriate community systems.

Standard E10: *Foundational*	Community engagement materials are available in other languages for any ethnic group with a presence in the community and the geographic area served.

Standard E11: *Foundational*	Community engagement materials and sensory modalities are available to accommodate individuals with diverse needs.

Standard E12: *Practice*	The organization uses designated personnel for its community engagement and fund development activities.

Standard E13: *Practice*	The organization comprehensively evaluates the success of its community engagement activities to measure efficiency and effectiveness.

Standard E14: *Practice*	The organization comprehensively evaluates the success of its fund development activities to measure efficiency and effectiveness.

Standard E15: *Foundational*	**Community engagement is conducted in accordance with applicable professional, ethical, and legal principles.**

Standard E16: *Foundational*	**Fund development is conducted in accordance with applicable professional, ethical, and legal principles.**

Introduction: Section F ~ Systems Change

1. **Summary of the Standards**

    This section presents standards that encompass an organization's advocacy efforts to ensure that community systems used by domestic/intimate partner violence and/or sexual assault survivors and their families and friends, 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:
    - Criminal justice system(s)
    - Civil justice system(s)
    - Medical and health care system(s)
    - Mental health system(s)
    - Children's services' system(s)
    - Educational system(s)
    - Culturally specific system(s)
    - Faith-based community system(s)
    - Social services system(s)

    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 support and assist survivors.

2. **Basic Considerations**

    These standards address the planning, education and advocacy efforts in which the organization engages in to ensure that domestic/intimate partner violence and/or sexual assault survivors and their families and friends, and those at risk of the same 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 that standards can only address the issues for which the organization can be accountable. Organizations cannot be held accountable for whether a system makes changes. Organizations can only be held accountable for their own efforts to educate and advocate in the hope that change will result.

Standard F1: _Infrastructure_	The organization prioritizes the community systems and organizations which need to be impacted first and develops a Board of Directors/Governing Authority adopted systems change plan which defines strategies to work with each community on behalf of survivors of domestic/intimate partner and/or sexual violence and their children.

Standard F2: _Infrastructure_	The organization works collaboratively with community systems to positively impact institutional policies, practices, and procedures that affect domestic/intimate partner and/or sexual violence survivors and their children.

Standard F3: _Practice_	The organization advocates with community systems personnel to reduce and remove common barriers impacting survivors of domestic/intimate partner violence and/or sexual assault and their families and friends as well as those at risk for domestic violence and sexual assault.

Standard F4: _Practice_	Members of the organization formally participate in the development and evaluation of domestic/intimate partner violence and/or sexual assault policies, procedures, and practices in local community systems.

Standard F5: _Practice_	The organization conducts or provides for training designed for personnel employed by community system organizations.

Standard F6: _Practice_	The organization uses designated personnel for its systems change efforts.

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:
    • Essential physical resources
    • Transportation of clients
    • Buildings, grounds and 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.

Standard G1: Infrastructure	Goals, objectives, and plans are established for building, grounds, and equipment to ensure a healthy and safe environment.

Standard G2: Infrastructure	The organization has a written emergency response plan.

Standard G3: Infrastructure	Policies for the management of facilities are comprehensive and practical.

Standard G4: Foundational	The organization institutes practices and procedures which, insofar as possible, protect survivors, children, and staff in the provision of services.

Standard G5: Foundational	Buildings, grounds, and equipment are accessible and/or alternative arrangements are in place to accommodate clients with special needs.

Standard G6: Foundational	Buildings, grounds, and equipment are safe and functional.

Standard G7: Practice	Facilities and grounds provide physical spaces that are welcoming, inclusive, and promote safety and comfort.

Standard G8: Practice	The organization has adequate space to provide private and confidential services.

Standard G9: Practice	The organization provides children's play areas inside and out at its residential facility(ies).

Standard G10: Practice	The organization provides children's play area(s) at its non-residential office(s) and/or facility(ies).

Standard G11: Foundational	Cleaning supplies and other toxic materials are safely stored.

Standard G12: Foundational	The organization maintains a smoke-free environment.

Standard G13: Foundational	The organization provides protection from fire and there is a system for early warning of fire.

Standard G14: Foundational	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.

Standard G15: *Foundational*	The organization has provisions for first aid and emergency medical care for its clients, staff, volunteers, and visitors.

Standard G16: *Practice*	The organization provides personal care supplies to clients served by advocacy/emergency response, Sexual Assault Nurse Examiner Program (SANE), Transitional Supportive Housing (TSH), and/or shelter program(s).

Standard G17: *Practice*	The organization takes measures to protect the property of clients, staff, volunteers, and the organization itself from theft.

Standard G18: *Practice*	The organization utilizes technology and information systems to enhance the delivery and administration of services.

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

Standard G20: *Foundational*	Preparing, storing, and disposing of food meets acceptable standards.

Standard G21: *Practice*	Comprehensive assessments of buildings, grounds, and equipment are conducted to measure safety and health conditions.

Standard G22: *Practice*	The organization uses designated personnel to implement its policies and procedures relative to the organization's facility(ies), security, safety, and health.

Standard G23: *Foundational*	The organization adheres to all applicable zoning, building, fire, health, and safety codes of the community in which the organization is located.

Standard G24: *Foundational*	The organization adheres to all applicable laws related to safety in the transportation of children and adults.

MDHHS Division of Victim Services
Michigan Domestic and Sexual Violence Prevention and Treatment Board (DVS/MDSVPTB)
Quality Assurance Standards ~ Scoring Explanation

There are three groups of standards. All are significant and expected to be met. Every standard contributes to an excellent organization. The following criteria has been used to place each into a specific group:

- Foundational Standards – Ethical; legal; safety; health; client rights
- Infrastructure Standards – Plans and policies; compatibility with DVS/MDSVPTB philosophy
- Practice Standards – Vital to the essential functioning of an organization; evaluation; procedures; other.

The standards are comparable to the elements it takes to create a solid building. A building is comprised of its foundation, infrastructure and design. A building's stability is impacted by each of these elements and supports the idea of weighting the standards. A foundation must be strong enough to support the infrastructure which supports the design and functionality of the building. The combination of these elements is fundamental to a strong organization.

Weighted Rating Score Scale:

	Exceptional	Meets	Opportunity	Plans to Meet	Does Not Meet	Not Applicable
Foundational Standards Rating Score	6	6	4.5	1	0	0
Infrastructure Standards Rating Score	5	5	3.75	1	0	0
Practice Standards Rating Score	4	4	3	1	0	0

Based on peer review team experiences, some standards are quantitative in nature and best rated as meets or does not meet. These do not require or fit a variable rating scale. Other standards are qualitative in nature. These are evaluated based on peer reviewers' experience and expertise; and are rated as exceptional, meets, plans to meet, or does not meet.

Exceptional ratings are awarded extra points (bonus) in final scoring after a base line is determined.

Standards Groups							
Section Letter	Section Title	Total # of Standards in Section	# of Foundational Standards	# of Infrastructure Standards	# of Practice Standards	Highest Potential Weighted Score	Weighted Score Percentage of Total
A	Policy and Governance	15	5	4	6	74	9%
B	Financial Management	21	7	4	10	102	12%
C	Program Administration and Service Delivery	23	12	3	8	119	15%
C-SANE	Sexual Assault Nurse Examiner Program	18	10	3	5	95	12%
C-TSH	Transitional Supportive Housing	9	2	3	4	43	5%
D	Staff and Volunteer Management	33	7	5	21	151	19%
E	Community Engagement and Fund Development	16	5	3	8	77	10%
F	Systems Change	6	0	2	4	26	3%
G	Facility, Safety, Security, and Health	24	12	3	9	123	15%
	Totals	**165**	**60**	**30**	**75**	**810**	**100%**

This addendum can be used as a guide to help understand and identify the important components of program development, policies, procedures, and practices that lead to excellence. It can also help clarify organizational culture, service delivery methods and operations. Examples and definitions are included as guidance and do not represent all options. They are intended to assist in informing and describing information requested in standards' narrative response questions and help identify the types of documents to attach.

1	**Acceptable Public Disclosure** *E4*	An exempt organization must make specific tax documents available for public inspection and copying. These items include: • IRS determination 501 c-3 letter • Annual return (990 or 990EZ) IRS – https://www.irs.gov/charities-non-profits/public-disclosure-and-availability-of-exempt-organizations-returns-and-applications-documents-subject-to-public-disclosure
2	**Administration and Management of Staff and Volunteers** *D1, D2*	Reporting structure, supervision structure, staff ratio, employee development, Organizational Chart, Job descriptions Records retention, personnel file documents
3	**Administrative Management Positions**	Executive Director, Bookkeeper, Finance Director, Receptionist, Grant Manager
4	**Aggregate Data** *C19, C-SANE15, C-TSH9*	Summaries of client feedback surveys and/or compiled outcome data for each program area
5	**All Programming Including Administrative**	Domestic violence/intimate partner violence, sexual assault, Transitional Supportive Housing, children's, SANE, legal, advocacy, counseling, shelter, supervised visitation, parenting time, childcare, community/prevention education, administration, fund development, and/or others as applicable
6	**Background Check Policies for Staff and Volunteers** *D7, D8*	Criminal history, state and national sex offender registries, MI Department of Health and Human Services Child Abuse Central Registry, E-Verification, driving record, fingerprint background check, Out of State Background checks for anyone who has lived or worked outside the state in last five years, and written examination suitability to work with minors, positive background check policy, frequency of background checks, who and type of background check conducted, and employee/volunteer requirement to notify agency of charges/tickets
7	**Benefit Package or Salary Range that Attracts and Maintains Qualified Staff** *B17, D20*	This is not a comprehensive list but examples of what may comprise a benefit package: • Bonuses • Cafeteria Plan • Child friendly offices • Disability insurance • Employee appreciation events/activities • Fitness access/memberships • Flex time and flexible schedules • Flexible spending accounts • Fringe benefits • Health insurance (medical, dental, vision) • Holidays • HSA • Life insurance • Onsite healthy snacks/beverages • Overtime • Paid time off • Premium/hazard pay • Relocation assistance • Remote work options • Retirement/401K contributions • Sabbatical leave • Student loan repayment

		• Training/Professional development • Travel reimbursement • Tuition reimbursement
8	**Breaches of Confidentiality** *C8*	Sharing information about clients with unauthorized persons internal and external either while engaged in or after participating in the organization's services/programs; and/or during or after working hours MIVAN Confidentiality Training National Victim Assistance Academy: Advanced Skills Institute National Victim Assistance Academy (NVAA) | How We Can Help | OVC TTAC
9	**Capital Funds** *B6*	Building, equipment, funds
10	**Client and Civil Rights American with Disability Act** *A14, C3, C-TSH4, D3, D4*	The ADA prohibits discrimination based on disability in employment, state and local government, public accommodations, commercial facilities, transportation, and telecommunications. To be protected by the ADA, one must have a disability or have a relationship or association with an individual with a disability. An individual with a disability is defined by the ADA as a person who has a physical or mental impairment that substantially limits one or more major life activity, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment. The ADA does not specifically name all impairments that are covered. A Guide to Disability Rights Law – www.ada.gov
11	**Client Engagement Methods** *C-TSH3*	Email, list serves, website, newsletter, quarterly activities, monthly delivery of household supplies/food and holiday assistance/events, video, text, and technology based communication
12	**Client Information/ Methods Made Available** *C3, C4, C13, C-SANE3, C-TSH2*	Welcome letter, introduction to program staff, participant/client rights, grievances, emergency procedures, handbook
13	**Client Programs**	Domestic violence/intimate partner violence, sexual assault, Transitional Supportive Housing, children's, SANE, advocacy, counseling, shelter, legal, and/or others as applicable
14	**Client Record (Comprehensive)** *C14*	This is not a comprehensive list but examples of what to consider including: • 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 • Client approved methods of contact, frequency, emergency response scenarios
15	**Community Education** *E2, E12*	Activities to promote learning and understanding of issues related to gender-based violence – you can see the audience.
16	**Community Engagement** *Section E*	The combined efforts in which an organization interacts with the community it serves to educate and increase the understanding about available services, the cause, implications, prevention, and working with survivors of domestic/intimate partner violence and/or sexual assault and their family and friends to promote healing and well-being. Community Engagement activities include: • Community education • Community relations • Education • Prevention • Public awareness
17	**Community Engagement Policies** *E3*	This is not a comprehensive list. Examples to consider including are: • Acceptance of donations • Communication • Media responses • Donor privacy • Events • Event evaluation process/methods • Fundraising • Gift acceptance

		• Social media • Survivor stories
18	**Community Relations** *E2, E12*	Activities to establish and maintain mutually beneficial relationships with the communities in which the organization operates. Examples include Zonta, Rotary, Chamber of Commerce, Board of Commissioners, and other community organizations (public, private or governmental). Activities include attending meetings, becoming members, involvement in committees and other community-based events.

19	**Comprehensive Job Descriptions for Staff and Volunteers**
	D16, D17
		Elements of a Comprehensive Job Description:
		• Job Title
		• Position Summary
		• Key Responsibilities
		• Skills & Qualifications
		  Education, experience, skills, certifications, years of experience
		• Supervision/Department/Supervisory Responsibilities
		• Employment Type & Benefits
		  Job classification, exempt/non-exempt, hourly/salaried, full or part time, travel requirements, benefits available, funding source

19	**Confidentiality Laws** *C8, C22, C-SANE4*	• Violence Against Women Act, 42 USC 13925(b)(2); and • Family Violence Prevention & Services Act, 42 USC 10402. • Domestic Violence/Sexual Assault Victim Counselor Privilege 2 Mich. Comp. Laws § 600.2157a(2) Resources MCEDSV - Confidentiality Policy Considerations and Recommendations: A Resource Manual for Michigan Domestic and Sexual Violence Programs - https://mcedsv.org/wp-content/uploads/2019/11/Confidentiaity-Manual-Update-2018.pdf MIVAN - https://mivan.org/ NNEDV Website – https://nnedv.org/content/confidentiality/ Technology Safety Project Confidentiality Project - https://www.techsafety.org/confidentiality
20	**Cost Analysis Samples** *B15, C18*	How the organization determines cost(s) by program or service area/cost center within an identified area, examples include: • Counseling and advocacy services within domestic violence and/or sexual assault non-residential services • Program services by category (DV, SA, SANE, TSH) • Emergency shelter • Fundraising events (time and costs vs revenue vs social capital) • Purchasing equipment/property (buying vs leasing/renting) • Staffing (volume of units of service vs staffing hours) (staff utilization of time)
21	**Crisis and Helpline Procedures** *C5, C6*	How the 24-hour crisis/hotline helpline works, where is it located, who supervises, how it is monitored, how are calls documented, differences/similarities for calls related to domestic violence/intimate partner violence and those related to sexual assault, define difference between crisis call vs a call requesting information or referral, text and chat procedures
22	**Critical Situations** *G2*	Accidents, serious illness, fire, medical emergencies, floods, natural disasters, hostage situations, bomb threats, unlawful intrusion, pandemic, physical assault, public health crisis, hazardous material, data breach, data recovery, electronic disruption
23	**Culturally Honoring** *C4, D12*	To honor one another's traditions, beliefs, values, and practices means you are aware of the differences between cultures and honor cultural intents. The organization's behaviors, attitudes and policies support and enable staff to work effectively in diverse populations and situations. An organization that demonstrates culturally honoring qualities: • Creates a welcoming environment for diverse populations • Develops institutionalized cultural knowledge • Establishes organizational commitment and capacity for cultural self-assessment • Has an organizational consciousness of inherent dynamics when cultures interact • Includes adaptive service delivery that reflects an understanding of cultural diversity • Values diversity
24	**Culturally Honoring and Respectful Sexual Assault Medical Examination Procedures/ Practices**	SANE program offers culturally honoring care kits that support emotional support response in a culturally honoring way.

	C-SANE3	Program is open and accepting of cultural practices/ceremonies in preparing examination room i.e. prayers, songs, smudging.
25	**Development of Position Activities and Qualifications** *D16, D17*	The process of gathering, examining and interpreting data about the task performed in a job, may be determined by: • Conducting time studies • Identifying skills utilized to perform tasks • Interviewing employees to understand tasks they are performing • Observing how tasks are performed • Researching other like position in similar organizations
26	**Direct Service Positions**	Advocate, Counselor, Shelter Worker
27	**Diversity** *D23, E11*	Gender, race, ethnicity, age, sexual orientation, disability, geographic, cultural, type of victimization
28	**Diverse Board** *A5, A7*	Diversity is about the different perspectives, skill sets and representation that individuals bring to the board. Board diversity includes personal experience, expertise, perspectives, and influence. Examples include different professions, life experiences, geography, age, race, gender, sexual orientation, socio-economic status, involvement with communities, interests. A diverse board: • Reflects the diversity of the community served therefore providing access to resources through connections with partners and potential donors; and • Offers diverse perspectives from individuals better qualified to identify solutions and risks when facing major decisions.
29	**Diversity – Complex Pieces** *D23*	Diversity represents the many people that make up the community, it is about giving them a seat at the table, including their voice, and being open to listening, hearing and responding to that voice. • Helping Those Who Help Others; Key Findings From a Comprehensive Needs Assessment of the Crime Victim Field, link - https://reachingvictims.org/wp-content/uploads/2020/06/ACCESS-2020_NRCRV_NEEDSREPORT_6_5_20.pdf • The National Resource Center for Reaching Victims – resources on increasing organizational capacity to serve diverse cultures and persons with disabilities – link https://reachingvictims.org/how-we-help/resources-library/
30	**Donated Gifts** *E16*	Stocks, bonds, treasury notes, property, leases, vehicles

31	**Economic Justice** *C10*	Economic justice occurs when survivors have access to resources to help survivors achieve safety and independence including reduction of barriers that often impact an individual's ability to move forward such as:
		• Accessing legal assistance to address custody, child support
		• Poor credit scores (repairing credit ratings, addressing debt, freezing credit)
		• Stable employment (job training, education, removing barriers of attendance, transportation)
		• Addressing financial abuse occurring after leaving the abuser:
		    o Debt
		    o Evictions
		    o Legal issues
		    o Mainstream benefits
		    o Ruined credit scores
		    o Sporadic employment histories
		DV and Economic Justice Archives (NNEDV)

32	**Education** *E2, E12*	Community based education about an organization's services and domestic and sexual violence, which may be general information or curriculum based instruction
33	**Electronic Communication Modalities**	Electronic posts created by the organization including versions in languages other than English; those adapted for special needs and/or materials that are developmentally and literacy appropriate; technology for deaf or hard of hearing persons; audio and large print for partially sighted or blind persons
34	**Electronic Devices** *D13*	Cell/smart phones, tablets, laptops, cameras, pagers, USB drives
35	**Electronic Financial Methods** *B8*	Bank EFT, PayPal, app pays, square readers
36	**Equipment**	Utilities, furnace, boiler, water heater, appliances, generator, technology devices, vehicles, fire suppression, communication

37	**Evaluating Data**	Look for patterns, how often assessed against past outcomes, assign responsibility Using data to inform decisions regarding program changes, adding, or discontinuing programs
38	**Evaluation** **A2, A12, C18, C19, C-SANE15, C-TSH8, D30, E13, E14, F4, G21**	Evaluation is the process of collecting information about the program in order to assess the effectiveness of service delivery, challenges and opportunities. Using evaluation information an organization can make adjustments that better meet client needs and improve program services and/or elements within the organization. Assessments/evaluations include determining what works and what does not. It can also include analyzing the impact of services, client satisfaction, supervisor to staff ratio, staff to client ratio, staff productivity, fundraising events, and cost effectiveness. Information gathered from evaluation can be utilized to propel changes to improve the quality of an organization's practices and services. Effective Management Series - National Victim Assistance Academy (NVAA) | How We Can Help | OVC TTAC
39	**Evidence of Adherence to Applicable Codes, Zoning, Building, Fire, Health and Safety Codes** *C-TSH2, G23*	Certificate of occupancy; health department evaluations; boiler, fire and/or safety inspections which may include; Housing Quality Standards (HQS), water back flow tests, sprinkler systems checks, fire drills
40	**Explaining a Process**	A description of a 'process' would include: how often does it happen (timeline), who is responsible (provides), who decides when it is needed, who provides it, how documented
41	**Fair Labor Standards Act** *D16*	Department of Labor fact sheets https://www.dol.gov/agencies/whd/fact-sheets Department of Labor exempt vs. non-exempt https://www.dol.gov/sites/dolgov/files/WHD/legacy/files/fs17a_overview.pdf Department of Labor standard salary increase effective January 1, 2020. https://www.dol.gov/agencies/whd/overtime/2019/index
42	**Financial Policies** *B3, B4, B6, B7, B8, B9, B13, B14, B21*	This is not a comprehensive list but examples of what to consider including: • Audit processes • Authorization to sign contracts, approve expenditures and sign checks • Banking procedures (including electronic) • Bidding • Budget • Compensation determination process • Conflict of interest • Cost allocation • Credit card use and acceptance • Depreciation • Document maintenance, retention and destruction • Donations • Equipment • Financial reports • Gift acceptance • Insurance • Internal controls including step by step description of how money or instruments of money is handled, the degrees of separation from opening the mail, issuing and signing checks, and going to the bank to make deposits, job titles for persons performing functions • Inventory • Investments • Line of credit including authority to engage, access and limits • Mail • Payroll • Procurement/Bids • Purchases • Required annual interest/potential conflict of interest disclosures by board of directors and key employees • Risk assessment • Travel and reimbursement

		o Rates of reimbursement o Receipts required or not o Workday definition for exempt/non-exempt employees o Documentation required for mileage reimbursement o Eligible expenses o Use of personal auto • Whistleblower policy

43	**Flexible Funding**
	C-TSH6
		Flexible funding is financial support provided to survivors to address barriers that exist between the survivor and safety while maintaining client confidentiality. Financial support can be provided in several ways depending on the survivor's needs, the parameters of the funding source and organizational policy. Generally, the issuing process has as few barriers as possible. Flexible funding can include:
		• Payments to a third party requested by the survivor
		  o Childcare provider
		  o Health care provider
		  o Landlord
		  o Others
		  o Professional services (mechanic, electrician, plumber, carpenter)
		• Agency purchasing/providing gift card for necessities or services requested by the survivor
		• Cash assistance provided directly to the survivor
		• Utilities
		• Documents (birth certificates, state IDs)
		• Education (GED, certificate courses, testing, license renewals)

44	**Fund Development** *Section E*	Activities the organization engages in to raise funds to support programs, services and facilities.
45	**Fundraising** *E16*	The process of creating and enhancing relationships with potential and existing donors to ensure current and future income with a focus on larger and consistent gifts.
46	**Fundraising and Charitable Solicitations Legal Requirements** *E15, E16*	Raffle licenses, liquor licenses, license to solicit, how donations are valued, quid pro quo contributions when a donor receives something of value in return for their contribution Michigan Charitable Solicitation Act: AG - Charitable Trust Charitable Contributions | Internal Revenue Service https://www.irs.gov/charities-non-profits/charitable-contributions
47	**Goals, Objectives, and Plans are Established for the Administration and Management of Staff** *D1, D2*	Questions to consider when setting goals, objectives and plans for the administration and management of staff include: • Are there case reviews or activities that occur regularly? • Are there frequent staff or other meetings to discuss challenges, identify resources, and seek solutions to barriers? • Do supervisors have support and knowledge to supervise and support staff? • How are supervisors supervised to ensure they are effective? • How is service documentation monitored? • How is staff supervised? • Is there a regular process for documentation of staff supervision? • What is the process for ongoing, intentional staff/supervisor interactions? • What management training does the organization provide/require for supervisors? • Qualifications and Training (new and ongoing) requirements of supervisors Leadership Institute - National Victim Assistance Academy (NVAA) | How We Can Help | OVC TTAC CSH : Training & Professional Development - CSH
48	**Governance Policies** *A4, A11, B17*	This is a document that provides parameters of how Board will operate within the organization. It outlines the processes, rules, policies on how the Board will govern itself (the tasks and things they will do) and the policies the Board will oversee, for example financial management and personnel, in conducting/monitoring/overseeing the business of the organization This is not a comprehensive list but examples of what to consider including in a board governance policy manual: • Annual oversight tasks also known as a monitoring calendar • Board code of ethics • Board governance policy

		• CEO/Executive Director Compensation determination process • Conflict of Interest • Document retention and destruction, minimally meeting contract requirements • Gift acceptance • Investment policy • Risk management • Role of the Board including: ethical, legal, financial oversight; and defined roles in evaluation, risk management, strategic direction, day to day management, operations, personnel oversight • Role of the Chief Executive Officer/Executive Director including: ethical, legal, financial oversight; and defined roles in evaluation, risk management, strategic direction, day to day management, operations, personnel oversight • Short-term and long-term planning • Virtual meetings • Voting – in person, electronic, quorum • Whistleblower
49	**Identify and Evaluate Risk** *A10*	An assessment is used to explore potential risks and vulnerabilities organizations face. It includes what will be done to protect the integrity of the organization and minimize its risks. An organization looks at potential risks to reduce the impact of or avoid: • An individual being injured (staff, volunteers, clients, donors, community members) • The likelihood of facing legal action/consequences • Loss of funding • Loss of public creditability • Potential harmful impact on: survivors, service participants, staff, Board members, volunteers, community members • Natural disaster • Technology vulnerabilities: electronic database, video conferencing, firewalls, mobile devices
50	**Infectious Diseases** *G15*	HUD Infectious Disease Toolkit https://files.hudexchange.info/resources/documents/Infectious-Disease-Toolkit-for-CoCs-Preventing-and-Managing-the-Spread-of-Infectious-Disease-within-Shelters.pdf COVID-19 Guidance for Shared or Congregate Housing	CDC - https://www.cdc.gov/coronavirus/2019-ncov/... COVID-19 and Homelessness Services Training for Homeless Shelter Workers - https://www.cdc.gov/coronavirus/2019-ncov/ National Healthcare for the Homeless Council - *https://nhchc.org*
51	**Individuals Responsible for Implementing Policies, Procedures and Practices Related to Staff and Volunteers** *D32*	List position(s) title(s) and specific staff and volunteer responsibilities. Example (can be done for any position): • Volunteer Coordinator – All volunteers except for clinical intern placements – Responsibilities include recruiting, screening, placement, support, direct supervision, orientation, evaluation, and ongoing general training • Office Manager – All staff and volunteers – Responsibilities include assignment and orientation of technology, administrative orientation, background checks
52	**Information Not Created by Organization**	Newspaper articles, copies of blogs, television interviews, on-line articles, corporate sponsor, civic group newsletters, Facebook posts
53	**Insurances** *B19, B20, D33*	It is important to check your contract for minimum requirements of the type of policy and coverage limitations required: some examples may include: • Auto • Bond • Commercial • Crime • Cyber • Directors and Officers Liability • Employment Practices • ERISA • Flood • Fraud • General Liability • Lawyer • Medical

		• Non-Owned Auto Coverage • Professional Liability • Property – Building and Equipment/Furnishings • Sexual Abuse/Molestation • Umbrella • Unemployment • Volunteer • Workers Compensation The organization's insurance carrier can provide an ACORD form that summarizes specific coverages.
54	**Interdisciplinary Entities**	MDT, SART, DART, CAC, SA Coalitions, DV Coalitions, HSCB, Wrap around, CoC/LPB
55	**Leadership Positions**	Leadership positions within the organization whose title may include words like; director, manager, supervisor, lead, coordinator, or other words that imply management responsibilities
56	**Legal/Ethical Practices in Fund Development and Community Engagement** *E15, E16*	In fund development and community engagement; activities that are legal, ethical and best practice could include: • Accurate and honest communication • Activity alignment with organizational mission • Adherence to state fundraising laws AG - Charitable Trust (michigan.gov) • Adherence to Federal IRS fundraising laws: Charitable Contributions | Internal Revenue Service https://www.irs.gov/charities-non-profits/charitable-contributions • Donor Bill of Rights • Financial transparency – easy access to non-profit financial and Board information • Having a State of Michigan Charitable License to Solicit • Notices required with solicitations • Obtaining proper licensing for events (liquor, raffle) • Policies and practices about the use of survivor stories and as speakers • Policies related to using images of people – must have permission, and may not include personally identifying information or images of minors • Public disclosure requirements • Public donor lists in manner which the donor wants • Reports to foundations and other funding sources • Respect restrictions on donor gifts • Timely gift acknowledgements • Transparency with fundraising costs
57	**Legal Documents Policy**	Warrants, subpoenas
58	**LEP and 4-Point Analysis** *C10*	United States Executive Order 13166 addresses "Improving Access to Services for Persons with Limited English Proficiency (LEP)" The Executive Order requires that federal agencies work to ensure that recipients of federal financial assistance including nonprofit organizations receiving federal funds provide meaningful access to LEP applicants and beneficiaries. https://www.lep.gov/.
59	**Managing Potentially Dangerous Situations**	De-escalation training, protocol development, role-playing, critical incident reviews
60	**Methods to Determine Client Need**	Determining if satellite offices are in the best location and/or if the offices are staffed at times most desired and convenient for persons seeking assistance and support
61	**Methods to Reduce Access Barriers**	Transportation, alternative meeting locations, Skype, texting, mobile advocacy, culturally welcoming, other accommodations
62	**Organizational Components**	• Culture • Goals/Purpose • Division of labor • Processes • Structure/Hierarchy of authority • Evaluation • Collaboration
63	**Organizational Culture**	The underlying beliefs, assumptions, values, and ways of interacting that contribute to the unique social and psychological environment of an organization.
64	**Organizational Reports**	This is not a comprehensive list but examples of what to consider including:

	A12, A13	• Board and staff self-assessments and satisfaction
		• Community partners feedback
		• Community systems surveys of agency work
		• Cost analysis
		• Financial reports
		• Review of client feedback/satisfaction surveys
		• Service delivery reports describing:
		   o Number of individuals accessing/using services
		   o Which services accessed/used
		   o Level or amount of services accessed/used
		• Staff reports

65	**Organizational Security** **G4, G6**	Shelter facility; telephones; grounds; offices; mobile advocacy, and security of clients and their children when they leave the grounds
66	**Organizational Structure** **C18**	A system that outlines how certain activities are designed in order to achieve organizational goals. These activities are "organization components" and can include rules, roles and responsibilities. The organizational structure also determines how information flows through the organization. (For example: top down, centralized, decentralized across various levels). The organizational structure defines the hierarchy, roles, where things fit within the organization, how the organization approaches priorities, its culture, engagement, policies, and procedures.
67	**Other Local Service Providers**	Offsite groups, substance abuse organizations, homeless shelters, cross training, co-located staff, COC/LPB, HARA, coordinated entry
68	**Personnel Policies** **D3, D7, D8, D11, D33**	This is not a comprehensive list but examples of what to consider including: • Administrative leave • American with Disability Act • Attendance • Benefits • Confidentiality • Conflict of interest • Discrimination/harassment complaint process • Drug/smoke free workplace • Employee injuries • Employment • Employment status • Equal Employment Opportunity • Ethics and conduct • Grievance response • Nepotism • Performance appraisals • Personnel records • Premium/hazard pay • Safety • Sexual harassment • Social media usage • Technology • Termination • Time and pay • Travel • Universal precautions • Whistleblower • Workplace violence policy • Work from home policy
69	**Personnel Record (Comprehensive)** **D3, D5, D7, D18, D19**	This is not a comprehensive list but examples of what to consider including: *Personnel Record – Employee file* • Background check results • Disciplinary actions • Driver's licenses • Educational transcripts/verification of education

		• Employment application • Employment verification/reference checks • Goals/development plans • Job description • Offer letter signed by both parties • Orientation documents • New employee training • Ongoing training records • Performance evaluations • Receipt/acknowledgement of employee handbook • Resume • Separation documents *Personnel Records – I-9/E-verify* • E-Verification • I-9 Form *Personnel Record – Medical/Health* • Doctor notes/medical leave • Drug test results • Employee benefit forms • FMLA requests • Health insurance documents • Health related documents • Worker compensation claims *Personnel Record – Wage, Payroll and PTO* • Garnishments/litigation documents • IRS tax withholding forms • Payroll and compensation information • Timesheets
70	**Personnel Records Separately Maintained**	Personnel Records files could include payroll, immigration status (I-9/e-verify), medical/health, benefits, employee file
71	**Plan** *A2, B1, C5, C-SANE1, CTSH1, D1, E2, E6, E7, F1, G1*	A plan describes action steps to achieve goals and objectives. A plan includes timelines, who is responsible to implement action steps, and identified clear and obtainable measures. It is an evolving and changing document that is adjusted as barriers and challenges are identified and/or eliminated through regular reviews and updates. An organization can have a variety of plans which could include: • Community outreach • Evaluation • Facilities • Fund development/fundraising • Marketing • Short and long plans • Staffing • Strategic goals • System change
72	**Policies to Protect Children** *G4*	Safe facilities and equipment, child abuse and neglect, staff screening, childcare, car seats, education participation
73	**Practices Supporting Culturally Honoring and Respectful**	Training provided; practices adopted • Helping Those Who Help Others; Key Findings From a Comprehensive Needs Assessment of the Crime Victim Field, link - https://reachingvictims.org/wp-content/uploads/2020/06/ACCESS-2020_NRCRV_NEEDSREPORT_6_5_20.pdf • The National Resource Center for Reaching Victims – resources on increasing organizational capacity to serve diverse cultures and persons with disabilities – link https://reachingvictims.org/how-we-help/resources-library/
74	**Prevention** *E2, E12*	Interventions designed to ultimately stop gender-based violence.

75	**Process and Utilizing Data in Program Evaluation**	Who get reports, is data used when making staffing decisions, program decisions, goals, objectives, who is involved, what information/data is utilized, how often completed, what questions are asked in determining when to reassign, add or reduce staff
76	**Process for Developing Financial Management Goals**	Who is involved, how frequently is the process completed, how frequently are the plans reviewed, what financial information is utilized to determine the goals and objectives
77	**Process for Job Description Development** *D16*	Who is involved in development, timeline for development, frequency of review, and process for development for new positions, how are revisions adopted and implemented
78	**Process for Training Plan Development** *D25*	Who creates plan for new employees and ongoing staff development, how are training needs determined, when is it done, where is plan documented, and how is it reviewed, how often
79	**Proof of Non-Profit Status**	A letter from IRS indicating 501(c)3 status
80	**Public Awareness** *E2, E5, E12*	Activities that increase the public level of consciousness about available services and the impact of gender-based violence in the community. Examples include media interviews, social media posts, billboards, and community booths – you don't see the audience, but the information is out there for the public to see/learn.
81	**Qualification in a Job Description for Staff and Volunteers** *D14, D15*	Typical qualifications to consider which describe the position and necessary abilities to perform job responsibilities: • Attributes • Education/Knowledge • Experience/Credentials • Skills/Ability
82	**Resources – Domestic and Sexual Violence**	Battered Women's Justice Project (BWJP) Center on Victimization and Safety | Vera Institute of Justice - Persons With Disabilities HUD Exchange International Association of Forensic Nurses (IAFN) Michigan Coalition to End Domestic and Sexual Violence (MCEDSV) Michigan Victim Advocacy Network - MiVAN National Latino Network National Network to End Domestic Violence (NNEDV) National Resource Center on Domestic Violence National Sexual Violence Resource Center (NSVRC) National Victim Assistance Academy (NVAA) | How We Can Help | OVC TTAC Praxis International Rape, Abuse, & Incest National Network (RAINN) Safe Housing Partnership StrongHearts Native Helpline The TA Provider Resource Center (TA2TA) (List of OVW technical assistance providers) The National Alliance for Safe Housing (NASH) Uniting Three Fires Against Violence (UTFAV)
83	**Safeguards and Measures to Protect Electronic Data** *C8, C14*	Password protected documents, VPN, firewalls, use of mobile devices, texting with clients NNEDV Technology Resources
84	**SANE Policies/ Procedure** *C-SANE2, C-SANE8, C-SANE11*	This is not a comprehensive list but examples of what to consider including: • Acute care needs • Aftercare or follow up • Confidentiality • Contacting advocates • Court testimony • Crisis intervention (assessment, triage, safety planning, transportation) • Hospital/medical SANE exams when medically needed (for community-based programs) • Maintenance of chain of evidence for evidence kits • Medical examination and evidence collection • Medical protocol(s) • Patient/survivor autonomy • Peer review process • Photo documentation • Record sharing • Referrals and information • Responding to patients/survivors with special needs and/or disabilities

		• Response time • Rights of patients/survivors and self determination • Role of Children's Advocacy Center (CACs), if applicable • Role of criminal justice systems • Situations requiring mandatory reporting • Staff qualifications and training • Suspect examinations
85	**Separation List** *D3, D11*	This is not a comprehensive list but examples of what to consider including: • COBRA notification • Collect badge/business cards • Distribute final paychecks/pay outs • Exit interview • How communicated in organization/community/funders • Key collection • Provide forms *(Approval for reference checks, updated address form, resignation letter)* • Records requiring update and documentation • Return of equipment • Technology access termination • What staff is involved
86	**Social Media Risks** *D13*	Privacy, others posting sensitive information on personal accounts, identify theft NNEDV Internet Computer Safety
87	**Staff Analysis**	Analysis comparing the amount of paid direct service staff hours worked versus the number of direct service units provided, client wait times, number turned away/unserved
88	**Staffing Patterns**	Where staff/volunteers will work, when/what hours they will work, and which staff/volunteers will have what responsibilities
89	**Supervisory Positions**	Leadership positions within the organization whose title may include words like; director, manager, supervisor, lead, coordinator, or other words that imply management responsibilities
90	**Support Services** *C6, C-TSH2, C-TSH3*	Health care; childcare; children's services; assistance with legal, housing, financial, transportation needs

91	**Systems Change Plan Elements**
	F1
		• Needs Assessment – Survivor identified needs, data utilized, stakeholders' input, identified barriers
		• Goals – Based on needs assessment what are the desired changes
		• Actions – Develop a plan to reach the desired goals, what actions are needed, who needs to be engaged. Examples to consider including:
		   o Collaborative responses
		   o Monthly meetings
		   o MOU (development and review)
		   o Protocol development
		   o System scan
		   o Training
		• Timeline – Establish estimated completion date(s) for action steps
		• Responsible – Establish who is responsible for implementing action steps
		• Measures – Identify how progress on goals, objectives and action steps will be measured
		• Review – Establish how review will be implemented in day to day work including review by Board members, administrative staff, direct service staff, stakeholders/community partners

92	**Technology in Community Engagement**	Website, social platforms, social media, e-newsletter, e-blasts, mobile apps, blogs, vlogs NNEDV Internet Computer Safety
93	**Technology in Service Delivery/Work**	Texting, e-counseling, computerized accounting/database, tablets, cameras, electronic signatures NNEDV Internet Computer Safety
94	**Technology Policies** *A15, B12, C14, C16, D13, D26, E5, G1, G18*	Technology use in organizations is constantly evolving. New threats, risks and challenges are presented continuously with hardware and software, and requires an organization's constant monitoring. The establishment of a regular review of technology policies is necessary for the protection of an organization and its service recipients. This is not a comprehensive list but examples of what to consider including: • Authorized use and access • Back up of systems • Cell phones

		• Collection, modification, use, and disclosure procedures for personally identifiable data (client and staff) • Data breach response plan • Engaging clients through electronic systems • Firewalls/safeguards • Physical protection of servers, computers, phones, and security systems • Plan for system disruption • Policy on electronic searches of clients • Procedure for software installation and patches • Procedures for the secure disposal of computers or other electronic media that contain client identified and other personally identifying data • Processes for survivors to opt-out, inspect, withdraw, or correct their data/records • Screening, training and background check processes of individuals who have access to sensitive information • Social media usage for agency • Social media and staff safety • Content of electronic records (client, business, financial), how long it is maintained, and who may access • Use of personal electronic devices • Use of technology in accommodating individuals • Virtual meeting platform(s) • Working off site NNEDV Internet Computer Safety
95	**Technology Utilized by Board** *A15*	Electronic voting, Board member portal, emailed Board packet, virtual meeting platforms
96	**TSH Policies /Procedures** *C-TSH4, C-TSH5*	This is not a comprehensive list but examples of what to consider including: • Access to supportive services once resident is no longer in the TSH program • Application process • Confidentiality • Dependent children • DVS/MDSVPTB funded vs. Non-DVS/MDSVPTB funded TSH program expectations, if applicable • Eligibility requirement(s) • Flexible funding • Lease agreement(s) • Mobile advocacy • Program terms and conditions • Rent requirement(s) • Resident selection process • Residents who are survivors of domestic violence/sexual assault vs. those who are not, if applicable • Service termination • TANF income requirement(s)
97	**TSH Program Evaluation Stakeholders** *C-TSH8*	Residents, staff, landlords, community members and partners
98	**Volunteer Categories** *D-8*	One time only, non-direct service, and/or direct service volunteers
99	**Volunteer Manual (Comprehensive)** *D4, D8, D11, D33*	This is not a comprehensive list but examples of what to consider including: • Attendance • Background checks • Benefits • Confidentiality • Critical incidents/emergencies • Documentation • Dress code • Drug/alcohol free environment

		- Emergency procedures - Equal opportunity - Ethics/code of conduct - Evaluation - Expectations - Expense reimbursement - Grievance policy - Harassment policy - Hours of operation - Media response boundaries - Mission, philosophy, history - Non-discrimination - Parking - Positions - Programs - Resignation - Scheduling - Smoke free environment - Social media - Supervision - Termination - Transportation - Travel - Volunteer orientation - Volunteer records - Weapons
100	**Written Agreements** *C-SANE16, C-SANE17, F2, F4*	Donated space, MOUs, business partner agreements, protocols