Virginia Sexual and Domestic Violence Program Professional Standards Committee

DRAFT Meeting Minutes

February 14, 2024, 10:00 a.m. –1:40 p.m. Tuckahoe – Henrico County Public Library 1901 Starling Drive Henrico, Virginia 23229

Members Present:

Judy Casteele, Executive Director, Project Horizon
Cori Davis, Program Director, Bedford Domestic Violence Services
Shel Douglas, Director, Fauquier County Social Services
Nancy Fowler, Program Manager, Office of Family Violence, DSS²
Leonard Hall, Jr, Director, Millstone International Logistics
Tamy Mann, Director, Giles County Victim/Witness Assistance Program
Teresa McKensie, Assistant Director, Radford/Floyd Victim/Witness Assistance Program
Shelley Strain, Executive Director, Eastern Shore Coalition Against Domestic Violence
Kristina Vadas, Manager of Victims Services, DCJS³

Members Absent:

Angela Blount, Associate Director, Virginia Sexual and Domestic Violence Action Alliance Elvira De la Cruz, Chief Executive Officer, Latinos in Virginia Empowerment Center Heather Sellers, Director, Bedford County Victim/Witness Assistance Program Ellen Wheeler, Assistant Director, Project Horizon

Professional Standards Team Members Present:

Amber Stanwix, Professional Standards Operations Coordinator, DCJS Andrea Sutton, Professional Standards Compliance Coordinator, DCJS

Welcome & Remarks

The meeting was called to order at 10:00 a.m. A quorum was present.

¹ Shel Douglas arrived at the meeting at 10:10 a.m.

² Nancy Fowler arrived at the meeting at 11:08 a.m.

³ Kristina Vadas stepped out of the meeting at 10:55 a.m. and returned at 11:45 a.m.

Approval of Meeting Minutes

The minutes from the December 14th Committee meeting were reviewed by the members. A motion to approve the minutes was made by Tamy Mann, and Shelley Strain seconded the motion. After a vote, the minutes were unanimously approved.

Updates from the Professional Standards Team

Andrea Sutton provided a brief update to the Committee. First, she informed the Committee that Jennifer Quitiquit has resigned her position as a member due to leaving the Chesterfield Victim/Witness Program and taking a position with DCJS. A Committee member also informed the group that Ellen Wheeler has left her position with Project Horizon. Under the terms of *Va. Code* § 9.1-116.3, she may no longer serve on the Committee because she no longer "holds the office or employment by reason of which [s]he was initially eligible for appointment." However, she has not yet officially resigned.

Ms. Sutton continued her update and informed the Committee that seven agencies are currently participating in the accreditation process. Five applications have already been reviewed and those agencies have been contacted. In addition, one site visit has been scheduled for March 7th.

The Professional Standards Team is tracking legislation that may require minor changes to the Policy on Participation of Professional Standards Committee Members in Meetings by Electronic Means. If this legislation is enacted, the Team expects to revise the Policy and present it to the group for approval at the next meeting.

Finally, Ms. Sutton informed the Committee that she and Amber Stanwix have been given new titles. Ms. Sutton will now be the Compliance Coordinator, while Ms. Stanwix will be the Operations Coordinator.

Updates from Conversations with Other States

Amber Stanwix provided an update to the Committee regarding several meetings that the Professional Standards Team had with representatives from other states. She informed the group that the Team was able to meet with staff members from Idaho, Iowa, Michigan, Missouri, New York, and Oklahoma to discuss their versions of Professional Standards and the processes that they use to administer such standards. Ms. Stanwix reported that all six states tie their standards to funding. In addition, five have standards that are similar in structure to Virginia's standards, three provide training to assist agencies in meeting requirements through state coalitions, and only two states have requirements to update their standards on a regular schedule.

Professional Standards Manual Revision Discussion

The Committee next began a discussion of the revision of the Professional Standards Manual.⁴ The group agreed to vote on the manual in sections but discuss each Standard individually. The

⁴ A copy of the revised Professional Standards Manual is attached to these minutes.

Standards referenced during the meeting refer to the renumbered Standards as included in the revised Professional Standards Manual.

Introductory Sections

The group began with a review of the Authors, Acknowledgement, Introduction, Professional Standards Committee History, Value Statement, Accreditation Statuses, Revocation of Accreditation Status, and Resources sections. The Professional Standards Team asked the Committee who should be included in the Acknowledgements section. The group agreed to strike this section but asked the Professional Standards Team to explore creating a page on the Professional Standards website to list all current and former members of the Committee as a way of acknowledging their contributions.

The Professional Standards Team also asked the Committee if the members found the language on revocation to be acceptable. The group agreed that they would like to see more robust language in this section, particularly concerning what happens after revocation. The Professional Standards Team agreed to revise this section and present it to the Committee at the next meeting.

Shelley Strain then moved to adopt the language of the introductory sections with the exception of the Revocation of Accreditation Status section. Shel Douglas seconded the motion. The motion passed unanimously.

Administration Section

For Standard #1, a Committee member inquired why the word "community" was removed in the second bullet point. The Professional Standards Team responded that, because the final section now specifically refers to community engagement and systemic engagement, the title of the section has been changed from "Community Engagement" to "Engagement". Therefore, the Team removed the word "community" from the second bullet point of Standard #1 to be consistent. The Committee member then raised concerns that readers may be confused by this change. After some discussion, the group decided to leave the change as it is.

Another member raised a concern about the requirement in the second bullet point that no fees be charged for crisis intervention, advocacy, and engagement services. She referred to agencies that may have transitional housing and charge a nominal fee for such services. The Team responded that the requirement for no fees is only applicable to the named services. Therefore, if agencies were to charge a fee for other types of services, such a fee would not violate this provision of Standard #1.

There were no comments or questions for Standard #2.

For Standard #3, a Committee member inquired as to the meaning of the word "regularly" in the first bullet point. The Professional Standards Team responded that there is no specific number of times supervisors must meet with staff. Rather, the Team seeks to verify that meetings are occurring. The Committee accepted this and did not request that any changes be made.

When reviewing Standard #4, the Professional Standards Team asked the Committee whether the new language of the Standard was acceptable. Several members of the Committee expressed concerns regarding the language stating that a board of directors should "oversee the agency's activities." They explained that the board has a more general oversight responsibility, while it the responsibility of the Executive Director of the agency to provide direct oversight. After some discussion, the Committee agreed to change the Standard so that it will now read, "Private Nonprofit Sexual and Domestic Violence Agencies must have a board of directors to develop policies and procedures for the operation of the organization, to monitor finances of the organization, to provide overall direction to the organization and its program, and to monitor the quality and effectiveness of programs."

There were no questions or concerns for Standards #5-#9.

Leonard Hall, Jr. moved to adopt the Standards in the Administration section with the revised language to Standard #4. Cori Davis seconded the motion. The motion was unanimously approved.

Crisis Intervention Section

There were no questions or concerns for Standard #10.

For Standard #11, several Committee members raised concerns that the language for the first bullet point may not be sufficiently clear. In particular, they wanted to ensure that the measure clearly requires policies and procedures concerning accompaniment. After some discussion, the measure was revised to read, "Agency must establish and maintain policies and procedures for medical and criminal/civil justice system accompaniment response."

For Standard #12, a Committee member inquired whether agencies should be required to have Narcan in their first aid supply kits. This sparked a lengthy discussion regarding liability and training issues. In addition, there were concerns about identifying specific brands of medication that must be included in the kits. The Committee concluded that no changes would be made to this section.

Teresa McKensie then moved to adopt the Standards in the Crisis Intervention section with the revised language to Standard #11. Tamy Mann seconded the motion. The motion was then unanimously approved.

Advocacy Section

There were no comments or questions regarding any of the Standards in this section. Tamy Mann moved to adopt the Standards in the Advocacy section, and Leonard Hall, Jr. seconded the motion. The motion was unanimously approved.

Engagement Section

There were no comments or concerns for Standard #16.

The Professional Standards Team requested feedback on Standard #17. They wanted to know if agencies are only required to have a prevention plan or if they must have made some progress on such plan. These questions triggered a lengthy discussion regarding the inclusion of prevention work in the Professional Standards. Several members commented that, while it would be preferable that all agencies perform prevention work, the funding is simply not available for many agencies. Members pointed to the time-consuming nature of the work, which is problematic if funding is not available.

The group then discussed how outreach and prevention activities overlap in many ways. Several members of the Committee inquired about adding requirements regarding outreach and eliminating the prevention language. Others pointed out how crucial collaborative relationships are in this area and suggested that language regarding collaboration should be included.

At this point, the Committee members agreed that they would like to see language regarding outreach included in Standard #16 and then Standard #17 could be deleted. To keep the meeting moving forward, the group agreed that the Professional Standards Team should draft language during the lunch break and the Committee would then review it.

There were no questions or concerns for Standard #18. Considering the desire to see the revised language for Standard #16, no motions regarding the Engagement section were made.

Training Matrix

There were no questions or concerns regarding the Level I requirements in the Training Matrix.

For the Level II section, a Committee member inquired as to how compliance is monitored. The Professional Standards Team explained the different methods of monitoring, and the Team also reminded the Committee that a written training plan meeting the requirements of the Training Matrix will now be required.

There were no questions or concerns regarding the Board of Directors Training section.

Shelley Strain moved to adopt the Training Matrix, and Tamy Mann seconded the motion. The group unanimously approved the motion.

Glossary

For this section, the group decided to go through the new definitions individually.

There were no questions or concerns regarding the definitions of "case management" or "client record/file".

For the definition of "core services", a Committee member expressed concerns that it does not specifically include children. In response, other members expressed that, by including "all victims", the definition would include children. The first Committee member pointed out that,

because children are often not primary victims, they may not be included. In response, other members stated that the Standards themselves are chiefly concerned with primary victims. In addition, while the group recognized that it is important that children receive services, there are funding concerns around requiring agencies to provide services to secondary victims. Finally, other members pointed out that agencies are free to define "all victims" however they choose. Because there was no consensus that a change was necessary, the group agreed to move to the next definition.

For the definition of "general counseling", Committee members expressed that the use of the word "general" did not seem to adequately capture what the group was trying to include. After an extensive discussion regarding what the group wanted this definition to encompass, the group agreed to change the definition to "supportive counseling". As a result, changes were made to Standard #13 and the Level II section of the Training Matrix to reflect the new definition.

The members of the Committee agreed that the definition of "Language Access Plan" was too limited, and that more information needed to be included. In addition, there were concerns regarding whether it adequately provided for the needs of the Deaf. A Committee member agreed to research language during the lunch break, which the Committee could then review.

There were no questions or concerns regarding the definitions of "persons with limited English proficiency", "plan", "policy", or "procedure".

For the definition of "secondary trauma", a Committee member suggested the addition of "or witnesses" after "hears about". The group agreed to this change.

Lunch

The Committee broke for lunch at 11:52 a.m. The meeting resumed at 1:11 p.m.

Professional Standards Manual Revision Discussion, Continued

Glossary, Continued

After the lunch break, the group returned to the definition of "Language Access Plan". A Committee member presented some more expansive language to the group. With this language, the definition would be changed to read, "Language Access Plan: An approved organizational policy that sets out, in detail, how the organization provides communication assistance services to individuals who are non-English speaking, have limited English proficiency (LEP), have a hearing or visual issue that impacts their communication, or otherwise would benefit from additional resources to help them communicate effectively. Language assistance services include both oral and written services. These services are designed to facilitate effective communication with staff and to provide LEP individuals with meaningful access to and an equal opportunity to participate fully in the services, activities, or other programs administered by the organization." The group agreed to this change.

The Committee next turned to the definition of "sexual and domestic violence agency". The Professional Standards Team began by emphasizing that this definition is only for the purposes of the Professional Standards. Some Committee members did express concerns that some qualified agencies may be omitted. The group then discussed agencies which have multiple services including programs to serve survivors of sexual or domestic violence. The group concluded that such agencies would be included under this definition and that the Professional Standards Team would accredit the specific program rather than the entire agency in that case. To provide some clarity, the group did agree to change "agency or program mission" to "organizational or program mission". In addition, they agreed to add, "For the purposes of accreditation" to the beginning of the last sentence.

Next the group reviewed the definition of "supervisor". A Committee member expressed concerns that it was not clear that supervisors should have seniority over a group of people whom they are supervising. As a result, the group agreed to add "or supervisory" after "imply management".

There were no questions or concerns regarding the definition of "vicarious trauma".

After this review, Shelley Strain moved to adopt the Glossary with the approved changes that were made. Tamy Mann seconded this motion, which was then unanimously approved by the group.

Engagement Section, Continued

The group then returned to the Engagement section to discuss the changes made to Standard #16 and the elimination of Standard #17. During the lunch break, the Professional Standards Team edited the second bullet point of Standard #16 to include "and support the development of healthy relationships and healthy sexuality" and then added a new bullet point stating, "Agency must collaboratively engage with others doing similar work in the community."

While several Committee members expressed that these changes accomplished what the Committee had been aiming to do, another felt that the elimination of specific prevention language was a significant diminishment of the Professional Standards. Other members then emphasized the issue of the lack of funding and pointed out that it can be problematic to require action without providing the funding to do so.

A Committee member then inquired whether we could alleviate these concerns by adding language around outreach activities. Several members expressed that many of the outreach activities conducted by agencies are prevention activities, even if they are not specifically identified as such.

The group then agreed to add "and outreach" after "community engagement" in the third bullet point of Standard #16. In addition, after further discussion, the group added "prevention activities/initiatives" to the list of examples in the first bullet point. In this way, the members believed that agencies would be encouraged to continue on a path towards providing prevention education and services.

After this discussion, Leonard Hall, Jr. made a motion to approve the Engagement section as amended. Cori Davis seconded the motion. The group then unanimously approved it.

Discussion Regarding How to Proceed/Meeting Dates

The Committee then discussed the date of the next meeting. The Professional Standards Team informed the group that they would like to revise the Revocation of Accreditation Status section prior to the next meeting, as well as present a policies and procedures document for discussion. They suggested a meeting in May, which would also allow them time to prepare accreditation presentations for some agencies. The Committee members selected May 8th as the date of the next meeting. This meeting will be held at the Tuckahoe branch of the Henrico County Public Library.

Public Comment

There were no members of the public at this meeting.

Closing Remarks

The meeting adjourned at 1:40 p.m.

Future Meeting

• May 8, 2024, 10:00a.m. to 3:00p.m., Tuckahoe – Henrico County Public Library

Professional Standards Manual for Virginia Sexual and Domestic Violence Programs

XXXXX 2024



Authors

Virginia Sexual and Domestic Violence Program Professional Standards Committee

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Angela Blount, Associate Director, Virginia Sexual and Domestic Violence Action Alliance

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OVERVIEW

Introduction

Welcome to the Professional Standards for Virginia's sexual and domestic violence agencies. This publication provides standards to help agencies improve the quality and consistency of their response to survivors of sexual and domestic violence.

In addition to the minimum requirements outlined in this Manual, agencies must comply with any other state and federal regulations applying to their programs and services. Furthermore, the Professional Standards accreditation process is not equivalent to, nor in place of, the grant monitoring process.

This Manual includes the Professional Standards and multiple resources. You are encouraged to access these resources as you develop, deliver, and evolve best practices and trauma-informed care for the survivors and the communities you serve. The Manual also includes a Glossary. Please note that there is an asterisk beside words included in the Glossary when such words are first used in the Professional Standards. Finally, please be aware that the definitions in the Glossary are only for the purposes of the Professional Standards.

Professional Standards Committee History

In 2015, legislation was enacted creating the Virginia Sexual and Domestic Violence Program Professional Standards Committee (the "Committee"). The purpose of the Committee is to establish voluntary accreditation standards and measures by which local sexual and domestic violence programs can be systematically evaluated with a peer-reviewed process. In addition, the Committee is responsible for reviewing and voting on accreditation status recommendations for applicant programs, establishing a subcommittee as needed to address appeals from applicant programs, and periodically evaluating and revising the accreditation standards and measures.

Under *Code of Virginia* § 9.1-116.3, the Committee is required to consist of:

- One nonvoting member from the Virginia Department of Criminal Justice Services ("DCJS")
- One nonvoting member from of the Virginia Department of Social Services
- One nonvoting member from the Virginia Sexual and Domestic Violence Action Alliance
- Twelve non-legislative citizen members appointed by the Governor, who must be leadership staff of local sexual and domestic violence programs

The appointment of members must also take into consideration racial and ethnic diversity and must be representative of regional and geographic locations of the Commonwealth.

The Committee receives assistance from the DCJS Professional Standards Team (the "Team"), which is made up of the Professional Standards Operations Coordinator (the "Operations Coordinator") and the Professional Standards Compliance Coordinator (the "Compliance

Coordinator"). Under *Code of Virginia* § 9.1-116.3, the Team is responsible for establishing accreditation procedures by which local sexual and domestic violence programs can be systematically evaluated with a peer-reviewed process, assisting local programs in obtaining or retaining accreditation, reviewing and evaluating applications for accreditation, and determining accreditation status recommendations for applicant programs and presenting such recommendations to the Committee.

The Team has the authority to determine the eligibility of agencies applying for accreditation and to interpret the Professional Standards.

Value Statement

The Virginia Sexual and Domestic Violence Program Professional Standards Committee commits to a respectful, thoughtful, and transparent process to establish best practice standards for sexual and domestic violence programs. The Committee is mindful that these standards are survivorcentered, inclusive, and empowering for both agencies and those impacted by sexual and domestic violence.

Accreditation Statuses

There are three possible status determinations for Professional Standards accreditation applicants:

Fully Accredited

The Committee will determine a status of Fully Accredited for an agency having demonstrated through the review process that the agency meets 100% of the Professional Standards.

Provisionally Accredited

Agencies that do not meet 100% of the Professional Standards may be Provisionally Accredited. To be considered provisionally accredited, applicant agencies must, at a minimum, demonstrate that they provide 24-hour crisis intervention services to all victims of sexual and/or domestic violence in their communities, and that these services are confidential and free of charge. These services must include a hotline, provisions for emergency housing, and emergency accompaniment for victims of sexual and/or domestic violence.

Provisionally accredited agencies will have up to 30 days to submit a Plan of Action and then up to 90 days to document that the Plan of Action has been followed and that the Professional Standards are being met. The Committee may then decide to grant full accreditation status or will deny the application.

Denied

The Committee will deny accreditation status to any agency that does not, at a minimum, demonstrate that it provides 24-hour crisis intervention services to all victims of sexual and/or domestic violence in their communities, and that these services are confidential and free of charge. Crisis intervention services must include a hotline, provisions for emergency housing, and emergency accompaniment for victims of sexual and/or domestic violence.

Additionally, the Committee will deny accreditation to any provisionally accredited agency that does not submit a Plan of Action within 30 days of receiving the provisional accreditation status or does not meet the requirements of the Professional Standards within 90 days from the submission of the Plan of Action.

Revocation of Accreditation Status

The Committee shall have the authority to revoke an agency's accreditation for disregarding applicable standards or committing serious violations of rules and regulations. This action will only be taken in extreme cases and as a last resort. For further information on the revocation process, please see the Virginia Sexual and Domestic Violence Program Professional Standards Processes and Procedures Guidelines.

Resources

Resources to assist your agency in meeting the Professional Standards are located on the <u>Professional Standards webpage</u>. The <u>Resources</u> tab has a wealth of information categorized by:

- Agency & Advocate Wellness
- Boards
- Community Engagement
- Direct Services
- Evaluation
- Financial Information
- Human Resources
- Policies and Procedures
- Prevention Education
- Training for Board, Staff, and/or Volunteers
- <u>Underserved Populations</u>

PROFESSIONAL STANDARDS

ADMINISTRATION

The following section relates to the administration or management of a sexual* and domestic violence* agency*. The role of the governing body, fiscal and data management, personnel management, and training are addressed. These standards provide for general administration practices that establish a common framework for service delivery.

STANDARD #1: Sexual and Domestic Violence Agencies will ensure that crisis intervention*, advocacy*, and engagement services are available and accessible to all people within the agency service area regardless of race, ethnicity, national origin, age, disability, religion, limited English proficiency, immigration status, sexual orientation, or gender identity or expression.

- Non-discrimination policy* for staff and client services includes race, ethnicity, national origin, age, disability, religion, limited English proficiency, immigration status, sexual orientation, or gender identity or expression.
- Regardless of income, no fees are charged for crisis intervention, advocacy, and engagement services as outlined in these standards.
- Agency has inclusions noticeable throughout the facility (e.g., diverse and inclusive signage, pictures, materials, social media, and marketing) and inclusive client paperwork. The facility includes staff offices, meeting rooms, and the shelter, if applicable.
- Agency has a website that clearly describes the services provided, is accessible, is inclusive, and provides relevant, up to date, and accurate information.
- Agency ensures staff receives training on civil rights, diversity* issues, and multicultural competency. Topics for training could include implicit bias, microaggressions, reducing disparities in services, and building a culture of inclusion. In addition, the agency could invite culturally specific agencies to provide cross-training or facilitate a training on a topic related to cultural humility*.
- Agency has a written policy, which affirms that staff, board of directors (or similar advisory group), and volunteers should reflect the diversity of the community served. This written policy must include action steps, be reviewed at least annually, and be updated every three years.
- If the agency defines its service population within a specific client group, there must be a clear written rationale for selectivity.

STANDARD #2: Sexual and Domestic Violence Agencies will have trained staff and/or volunteers to provide Crisis Intervention, Advocacy, and Engagement Services.

- Agency must have a written training plan* that meets the requirements of the Training Matrix.
- Staff members, volunteers, or interns must complete training within three months of joining the agency as outlined in the Training Matrix.
 - o Training modalities can include in-person instruction at the agency, shadowing a trained advocate (up to eight hours), self-directed training programs (e.g., online courses and webinars), local or county trainings, Virginia Sexual and Domestic Violence Action Alliance trainings, and/or state agency trainings.

- No more than half of the onboarding training can be completed through selfdirected training programs.
- Full-time Level II staff will receive at least 20 hours of continuing education each year, while Part-time Level II staff will receive at least 10 hours. Level II volunteers will receive at least 10 hours of training annually.
 - Training modalities for completing the continuing education include in-person instruction at the agency, shadowing a trained advocate (up to four hours), self-directed training programs, local or county trainings, state and national conferences, Virginia Sexual and Domestic Violence Action Alliance trainings, and/or state agency trainings.
 - No more than half of the continuing education can be completed through selfdirected training programs.
 - o Training must include a review of the confidentiality*, cultural humility, and vicarious trauma* topics.
- Supervisors* must receive ongoing training to support their management, supervision, and trauma stewardship responsibilities.
 - o Anyone in a supervisory position must also, at a minimum, meet the training requirements of Level II staff.
- Agencies are allowed discretion in determining training content requirements for new staff and/or volunteers who possess content expertise via prior education, training, or experience. However, all new staff and volunteers must complete the required agency and confidentiality training content.
 - o Rationale for all exceptions to training requirements must be fully documented.

STANDARD #3: Sexual and Domestic Violence Agencies will adhere to sound management practices that demonstrate operational stability, including organizational principles and practices that reflect accountability and transparency.

- Supervisors must meet regularly with staff, either individually or as a group.
- Agency shall demonstrate fiscal responsibility (auditing, internal controls, and procurement services).
- Agency shall maintain a plan that protects against the physical and financial interruption of core services*.
- Agency shall maintain a sustainability plan with projected revenues and expenditures for the 36 months of operation following the submission of an application for accreditation.
- Agency shall maintain a written succession plan for the Executive Director (or other agency leadership) position.
- Agency must have written personnel policies.
- Agency must have written job descriptions for all staff, intern, and volunteer positions.
- Agency shall maintain a written staff grievance policy that includes:
 - o matters for which grievances can be filed
 - o the levels in the agency to which the grievance may be filed and/or appealed
 - o the type of information to be submitted when filing a grievance
 - o the procedural steps and time limitations for each level in responding to grievances and appeals
 - o any criteria for staff representation

- o the staff member responsible for coordinating grievance procedures*
- o the process for how grievances are handled, analyzed, and affirmed or denied
- Staff must be provided with contact information for the Chairperson of the board of directors, if applicable, and be given the option to grieve to the board should they not be satisfied with the response from agency leadership.
- Agency shall have written procedures for staff that include instructions for responding to potential emergencies including a medical emergency, a mental health emergency, and an emergency that threatens the safety of staff and/or the individuals being served by the staff. The emergency procedures must include:
 - o assignments of tasks and responsibilities
 - Instructions for the use of alarm systems, emergency equipment and notification of authorities
 - o specification of escape routes in case of fire or natural disaster
 - o coordination with law enforcement agencies for emergency plans regarding intruders and with fire departments for emergency plans for fire or natural disasters
- Fire, tornado, bomb threat and intruder drills shall be conducted annually. The date, time, and type of the drill shall be documented.

STANDARD #4: Private Nonprofit Sexual and Domestic Violence Agencies must have a board of directors to establish policies, make significant and strategic decisions, and oversee the agency's activities.

- Agency must have written job descriptions for board members.
- Agency must have written by-laws, which provide the governance structure for the organization and its elected board. The by-laws must include:
 - o the mission and purpose of the organization
 - o the number of times per year that the board is required to meet
 - o what constitutes a quorum
 - o the length of terms
 - o the limits for consecutive terms
 - o attendance requirements
 - o the number of members required to approve amendments of the by-laws
 - how to address holding meetings or votes that are not conducted in person, such as by conference call or electronic methods
 - o a conflict-of-interest policy that clearly explains what a conflict of interest is, reporting procedures, and how to address such conflicts should they occur
- Agency must have a written process for the selection of board members, including those who reflect the diversity of the communities served.
- Board members must complete a board orientation and training which includes information about sexual and domestic violence, the agency's mission, and board members' roles and responsibilities.
- A minimum of one training session for the board of directors' ongoing development must be offered each year.
- Agency must have a written plan for board training.

• All agency policies must be reviewed by the board of directors every three years. The document should then be signed by the Chairperson of the board of directors and dated with the date of review.

STANDARD #5: Sexual and Domestic Violence Agencies will adhere to policies and practices that ensure a high standard of professional conduct.

- Agency must ensure compliance with employer/employee state and federal regulations and contracts.
- Agency must maintain a written policy/plan of a criminal background check for all staff, interns, and volunteers and a Virginia Child Abuse and Neglect Central Registry check for all staff, interns, Level 2 volunteers, and those Level 1 volunteers who may engage with children.
- Agency must maintain a written policy/plan of a driving record from the Virginia Department of Motor Vehicles for those staff, volunteers, or interns who will be transporting clients.
- Background and driving record checks must be updated every five years.
- Agency must have a written ethical behavior policy.

STANDARD #6: Sexual and Domestic Violence Agencies will document Crisis Intervention, Advocacy, and Engagement services only in databases that comply with current VAWA confidentiality standards and protect personally identifying information.

- Data about services provided must be entered into the system and reviewed regularly for accuracy, trends, and program planning.
- Agency must maintain a record retention policy specifying the client records/files* that
 will be destroyed, the time frame and method of destruction, and the way personally
 identifying information is protected.

STANDARD #7: Sexual and Domestic Violence Agencies preserve privacy and confidentiality, including the identity of and information provided by the person served or acquired from other sources before, during, and after the course of the professional relationship.

- Agency has written operational procedures on client record/file security, maintenance, and access by individuals other than the client. A description of the safeguards for client records/files against unauthorized access, fire, loss, or other hazards is available.
- Agency has written policies/procedures regarding how the agency assures compliance with applicable legal requirements regarding confidentiality.
- Agency has an informed, written, and reasonably time-limited client release of information form. The release of information form must include:
 - o the name of no more than one person or organization to which the information is being released
 - o the specific information to be released
 - o the beginning and ending dates the release is effective, not to exceed the program participant's active length of services
 - o the date and the signatures of the program participant and the employee or volunteer

- o the right to revoke a release of information at any time
- Agency has a written policy to respond to subpoenas, court orders, and other legal processes which, at a minimum, addresses how the client will be notified about the request and how the request will be processed and responded to by the agency.
- Agency has a written policy addressing the security of home computers, laptops, smart phones, virtual private networks, cloud computing, hotline routing, etc. for any staff who telecommute, including how access is terminated for staff who leave the agency.

STANDARD #8: Sexual and Domestic Violence Agencies respect and protect the civil and human rights of all those impacted by sexual and domestic violence.

- Agency demonstrates cultural humility in its sexual and/or domestic violence service delivery.
- Persons with limited English proficiency* must have meaningful access to services with equivalent services to those who are native English speakers.
- Agency has a written language access plan*, which includes the provision of relay services for the Deaf or hard of hearing.

STANDARD #9: Sexual and Domestic Violence Agencies support the voluntary services model and respect survivors'* right to self-determination*.

- Agency must have written documentation that informs all clients of their rights, including the right to self-determination. Such documentation must be made available to the client by the next business day after initial contact with the agency.
- Agency must have a written client grievance policy that is available to each agency participant and should include multiple options for filing a complaint. At a minimum the policy should include:
 - the assurance of the survivor's right to continue to receive services from the agency during and after the grievance process
 - o who the survivor should contact regarding the complaint or issue
 - o how the complaint be documented, steps that will be taken to find resolution, and whether the decision is final
 - o information regarding the survivors right to file a discrimination complaint with the Office of Justice Programs Office for Civil Rights

CRISIS INTERVENTION

Crisis intervention consists of the interactions and activities conducted by qualified, trained staff members or volunteers with an individual in crisis to stabilize emotions, clarify issues, and provide support and assistance. These standards provide that sexual and domestic violence agencies must establish quality crisis intervention services including 24/7 access, emergency accompaniment*, and emergency safe shelter.

STANDARD #10: Sexual and Domestic Violence Agencies will be accessible 24/7 to the public and to first responders to provide crisis intervention services by trained advocates.

- Agency must ensure 24/7 access and response to all survivors seeking assistance from advocates providing crisis intervention services, risk assessment, safety planning, information, and referrals. Such requirement may be met through the provision of a 24/7 hotline, including the use of a statewide hotline as necessary.
- Agency maintains documentation of number of requests for crisis intervention services that the agency provided.

STANDARD #11: Sexual and Domestic Violence Agencies will ensure that survivors in their community have 24/7 access to accompaniment services when they access emergency medical or justice systems.

- Agency must establish and maintain medical and criminal/civil justice system emergency response procedures.
- Agency maintains documentation of requests for accompaniment services and accompaniment services that the agency provided.

Standard #12: Sexual and Domestic Violence Agencies will provide, or assist to secure, emergency safe shelter to survivors of sexual and domestic violence who are in imminent danger*.

- Agency must provide or coordinate emergency shelter* for survivors and their families who are in imminent danger. If the survivor is within the agency's service area, the agency must safely maintain contact with the client until safe lodging has been established. If the survivor is outside the agency's service area, the agency must ensure that the survivor is connected to the agency within the applicable service area prior to terminating contact.
- If an agency maintains an emergency shelter and such shelter does not meet the requirements of the Americans with Disabilities Act, the agency must secure accommodations appropriate to meet the needs of a client with disabilities if such client qualifies for shelter services.
- Agency must possess a first aid supply kit.
- Agency maintains documentation of requests for emergency shelter services and emergency shelter services that the agency provided.

ADVOCACY

Through advocacy services, agencies attempt to ensure that survivors, their children, and those at risk of sexual and domestic violence are protected and treated compassionately. These standards value an individual response, collaboration, thoughtful evaluation, careful stewardship, and unconditional positive regard through a victim*-centered approach.

STANDARD #13: Sexual and Domestic Violence Agencies provide a range of individualized advocacy services that foster survivor healing from the trauma of violence.

- Agency shall provide a range of individualized advocacy services that foster healing from the trauma of violence, which must, at a minimum, include justice system advocacy, case management*, general counseling*, and referral resources.
- Agency maintains documentation of requests for advocacy services and advocacy services that the agency provided.

STANDARD #14: Sexual and Domestic Violence Agencies will coordinate services within the agency and the community to promote high quality integrated services and support to survivors.

- Agency must develop and maintain signed agreements (e.g., memoranda of understanding, cooperative agreements, or partnership agreements) as needed to provide and coordinate services to survivors. Examples include cross-training and/or co-location with agencies such as:
 - Victim Witness
 - Social Services to include Adult and Child Protective Services
 - Colleges and universities
 - Mental health
 - o Law enforcement
 - Hospitals
 - o Schools
 - o Immigration services
 - o Legal aid
- Agency must maintain, or collaborate with an agency that maintains, a physical or digital resource list with financial, healthcare, mental health, culturally specific, social service, and other resources. The list should include contact information and the services provided. Such list must be updated annually.

STANDARD #15: Sexual and Domestic Violence Agencies will address the diverse needs of the community served, providing specialized advocacy programs and population-specific interventions.

 Agency will identify the diverse needs of the community through at least two methods, such as a community needs assessment, client surveys, or feedback from other community agencies.

•	Agency will demonstrate efforts to provide a range of specialized advocacy services to identified populations within the agency's service area.			

ENGAGEMENT

Through engagement services, the agency attempts to create an effective response system to sexual and domestic violence and to change cultural attitudes and institutional practices that perpetuate such violence. These standards cover community engagement, prevention* services, and systemic engagement.

STANDARD #16: Sexual and Domestic Violence Agencies will participate in community engagement efforts that promote agency services and effective community responses throughout the agency's service area.

- Agency distributes information about agency services and accessibility through multiple channels. Examples include:
 - o tabling at community events
 - o flyers/brochures
 - o speaking engagements at various events
 - o responding to requests for information
 - o social media or conventional print/radio/TV media
- Agency engages in initiatives and activities that raise awareness, advocate for survivor access to resources, and promote systemic change (e.g., National Night Out with local police, awareness month activities).
- Agency maintains documentation of number of community engagement activities that the agency provided.

Standard #17: Sexual and Domestic Violence Agencies will deliver effective primary or secondary prevention programming that supports the development of healthy relationships and healthy sexuality.

- Agency must create a prevention plan that addresses primary or secondary prevention strategies.
- Agency is collaboratively engaged with others doing similar prevention work in the community.

STANDARD #18: Sexual and Domestic Violence Agencies will participate in systemic engagement efforts to improve the experiences of survivors.

- Agency demonstrates participation in and/or leadership in sexual and/or domestic violence focused community groups (Domestic Violence Council, Sexual Assault Response Teams, Inter-Agency Councils, or others).
- Agency provides training and education to allied professionals.
- Agency maintains training materials as they apply to community outreach.

TRAINING MATRIX

In the initial three months of training, the goal is for staff, volunteers, and interns to have a basic understanding and awareness of these concepts. This Matrix is also intended to serve as a guide for ongoing training and professional development, with the expectation that over time specific roles will develop greater understanding in these areas.

Please note that, for the purposes of these training requirements, "staff, volunteers, and interns" includes all staff from the point of entry (such as a receptionist) through to the sexual and/or domestic violence program. These terms do not include staff, volunteers, and interns working in different units of an overall agency.

LEVEL I: 8 Hours of Training for All Staff & Volunteers/Interns

Who is Level I	Training Topics
Limited Client Contact Staff, Volunteers, and Interns Staff, Volunteers, or Interns who may have incidental contact with persons accessing services.	 Administration Mission, history, philosophy, and structure of the agency Agency policies and procedures Agency Code of Ethics/Rules of Conduct Confidentiality Personal safety and security of staff, volunteers/interns, clients, and visitors Crisis Intervention & Advocacy
Examples may include: Administrative support Receptionists Grant writer Thrift Store Manager Agency can determine if this includes persons providing donated services such as computer maintenance, painting, lawn care, etc.	 Definitions and dynamics of sexual violence and domestic violence Definitions and dynamics of stalking within the context of sexual and domestic violence Emergency/Crisis Response to address immediate safety needs Secondary trauma* Vicarious trauma Role of the advocate/volunteer Making appropriate community referrals, including specialized resources for underserved populations Voluntary services Engagement Cultural humility

LEVEL II: 40 Hours of Training for All Staff & Volunteers/Interns

Who is Level II	Training Topics
All Staff, Volunteers, and Interns except Level I staff.	Level II training includes all topics outlined in Level I with expansions as necessary and the following: **Administration**
Direct Service Staff, Volunteers, and Interns who are likely to have on-going contact with persons accessing services Examples may include: Hotline Volunteers Court Advocacy Child Services Shelter Support Support Group Facilitators Companion Services Community Educators or Presenters Transportation Providers Childcare Providers	 History of the sexual and domestic violence movements Record keeping and data collection (all staff and relevant volunteers) How to access/use an interpreter Crisis Intervention & Advocacy Intersection of oppressions* and the societal impact of violence Theories/Modes of Service Provision Individual and Systems Advocacy Survivor-directed services Adverse Childhood Experiences, CDC model Trauma-informed, based on SAMSHA model Crisis Intervention/Counseling Skills Trauma of Victimization – Post Traumatic Stress Boundaries Safety Planning The use/abuse of technology Public assistance benefits Immigration visas that may be available to survivors Civil and Criminal Justice systems Victims' Rights Protective Orders Sexual violence laws, as related to adults and minors Domestic violence laws Child abuse and neglect laws Incapacitated and vulnerable adult abuse laws Unauthorized practice of law Sexual Violence as it pertains to: Child sexual abuse Adult survivors of childhood sexual violence Intimate partner sexual violence Sexual harassment Alcohol and other drug-facilitated sexual violence Domestic Violence as it pertains to: Fair housing & domestic violence Lethality/danger assessment The impact of domestic violence on children

Who is Level II	Training Topics
	 Medical Considerations Physical Evidence Recovery Kit (PERK) Blind reporting Sexual Transmitted Infections (Post-exposure Prophylaxis) and pregnancy-related concerns Reproductive coercion The Role of Sexual Assault Nurse Examiner/Forensic Nurse Examiner Strangulation Suicide intervention Human trafficking Addiction & recovery
	Engagement
	 Agency expectation of engagement: outreach, prevention, and facilitation skills
	Coordinated Community Response/Sexual Assault Response Teams

Board of Directors Training

(Professional Standard/Administration Standard #4)

Training for the board of directors is content specific. The length of the training is at the discretion of the agency. Agencies will develop and implement training on the following topics for all board members in their first year of service:

Definitions and dynamics of Sexual and Domestic Violence

Intersection of oppressions

Agency mission, history, philosophy, and structure

Agency policies and procedures (to include Code of Ethics and/or Rules of Conduct)

Channeling requests for agency services

Confidentiality

General information about agency's key partners

Responsibilities of Independent Nonprofit Board of Directors:

Personnel Policy Management

Fiduciary Responsibility

Strategic Planning

Conflict of Interest

Contingency Planning

Succession Planning

Fund Development (to include fundraising)

Executive Director (or CEO) evaluation

GLOSSARY

Accompaniment: A group of services that involves providing in-person support and advocacy to victims of sexual and/or domestic violence in the aftermath of violence, most often at hospitals as medical treatment is provided or forensic exams are conducted, or within the justice system when criminal charges are being considered or protective orders are pursued.

Advocacy: Speaking and acting for change or justice on behalf of oneself, another person, or a cause. Advocacy can generally be categorized as: self-advocacy, individual advocacy, and systems advocacy. An **Advocate** is the person who takes up the cause and provides assistance in advocacy efforts.

- Individual Advocacy: Speaking or acting on behalf of an individual to achieve changes in the practice of another individual or institution, which is necessary to protect legal or social rights or affect justice on behalf of the individual seeking help in affecting change or justice. The purpose of individual advocacy is to identify what individuals perceive as necessary protective actions for their rights so they can be assisted in asserting them. The persons who experience the sexual and/or domestic violence make this determination. It is imperative that advocates safeguard these persons' rights to make these decisions. Some examples of individual advocacy are the following:
 - o Helping individuals explore options for increasing their safety
 - o Brainstorming ideas with a tenant on how to approach an unreasonable landlord
 - Listening to individuals prioritize their needs and assisting them in identifying avenues to meet those needs
 - Discussing with individuals the benefits and limitations of legal remedies, exploring whether these remedies are appropriate for them, and identifying how to access these remedies
- **Systems Advocacy:** Influencing societal and political systems to bring about change for groups of people. A coalition or less frequently, an individual, will seek alterations in laws, the establishment of new shelter locations, or arrangements for barrier removal to needed services and legal protection.
 - Systems advocacy is critical to ending sexual and domestic violence. It means changing the policies and practices of institutions and influencing beliefs of the individuals who compose those institutions. These changes can be accomplished through many different strategies. Planning and critical thinking are essential components of systems advocacy. The focus of systems advocacy is on the practices and policies of societal institutions rather than on the individual seeking assistance from the system.

Systems change is accomplished through a combination of advocacy efforts. These efforts may include suggesting policy change, training people on the dynamics and impact of violence, building coalitions, organizing communities, improving media and public awareness, and pursuing strategic education efforts. Examples of systems advocacy include:

• The changes that have been made in police response and arrest policies related to domestic violence

- o The development of sexual harassment policies in the workplace
- o The creation of legislation criminalizing stalking
- o The development of community task forces to address sexual and domestic violence

Case Management: A process whereby advocates help their clients navigate various systems, such as the social service system, the healthcare system, or the justice system. This may involve providing information and resources, connecting clients with community services, and teaching clients how to advocate for themselves. It involves the assessment of a client's needs and the linking of that client to available services and resources.

Client Record/File: Any record or file that includes confidential client information and is created, requested, or held by the agency.

Confidentiality: Protecting information that could compromise the health, safety, or self-determination of any survivor of violence being served by an organization. Agencies must at least comply with the current federal Violence Against Women Act (VAWA) requirements for confidentiality of policy and practices (safeguarding personally identifying information). In addition, agencies should make every effort to protect the privacy of survivors, ensuring that individuals who experience violence retain control of when, where, and how their story is shared with others.

Core Services: Free and confidential 24-hour crisis intervention services for all victims of sexual and/or domestic violence in the agency's community. Such services must include a 24-hour hotline (operated by your agency or through other means), provisions for emergency housing, and emergency medical and judicial accompaniment for victims of sexual and/or domestic violence.

Crisis Intervention: Providing support, information, resources, and/or advocacy in the wake of an experience of sexual and/or domestic violence or related traumatic event.

Cultural Humility: A life-long process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience, particularly the experiences of those who are marginalized or historically oppressed in society.

Diversity: The inclusion of individuals who are of different identities across all aspects of an organization. These identities include race, ethnicity, gender identity and expression, sexual orientation, socio-economic status, age, physical abilities, religious beliefs, political beliefs, or other characteristics.

Domestic Violence: A pattern of abusive behaviors used by one individual to control or exert power over another individual in an intimate relationship.

• **Pattern:** is the consistent use of a wide variety of abusive behaviors that often increase in frequency and intensity over time.

- **Abusive behaviors:** include, but are not limited to, verbal assaults and threats, emotional abuse tactics such as intimidation and isolation, physical and sexual assaults, weapon use, property destruction, and violence directed toward others significant to the victim.
- Controlling or exerting power over another: ongoing behavior of abusers in relationships designed to maintain power over the partner(s).
- **Intimate relationship:** a relationship between two individuals that currently (previously) provides (provided) emotional and/or physical intimacy.

Emergency shelter: Emergency housing (e.g., a Domestic Violence Program residential shelter, safe home, hotel, or other shelter) for sexual and/or domestic violence victims and their minor children (regardless of gender).

General Counseling: A one-to-one interaction between an advocate and an adult or child survivor for the purpose of benefiting the survivor. Examples of general counseling include emotional support, education on dynamics of domestic and/or sexual violence and power and control, problem solving and discussing options.

• General counseling differs from **therapeutic counseling**, which is a one-to-one interaction between a licensed or board-certified mental health professional and a survivor for the purpose of addressing trauma. Therapeutic counseling may also be provided by a master's level counselor under supervision pending their licensure.

Healthy Relationship: A respectful connection between people that increases well-being, is mutually enjoyable, and enhances or maintains each individual's positive self-concept.

Healthy Sexuality: The capacity to understand, enjoy, and control one's own sexual and reproductive behavior in a voluntary consensual and responsible manner that enriches individuals and their social lives.

Imminent Danger: A real physical danger that could occur within an immediate timeframe and result in death or serious bodily harm. Some considerations include:

- A recent incident including serious bodily harm, threat of severe bodily harm, or threat to life
- The imprisonment of an abuser who is due to be released
- A Protective Order has been filed and police cannot find the abuser

Intersection of Oppressions: To promote substantive social change and effective service delivery, advocates must recognize and address the intersections of other forms of oppression with sexual and domestic violence. These other forms of oppression include, but are not limited to, racism, sexism, heterosexism, classism, ableism, and ageism.

There are many ways to understand how the link between sexual and domestic violence and other oppressions operates. These perspectives are not mutually exclusive:

- Layers of oppression make some people more vulnerable to sexual and domestic violence.
- Sexual and domestic violence are sometimes used as tools of other oppressions (e.g., homophobic man raping a woman because she is lesbian).

- Some forms of oppression contribute directly to perpetuating sexual and domestic violence (e.g., lack of economic justice and a living wage keeping a woman in an abusive relationship because she cannot support her children without the abuser's income).
- Sexual and domestic violence are forms of oppression. People who have experienced sexual and domestic violence are disempowered, judged, and marginalized because of the violence they have experienced.
- People who have experienced sexual and domestic violence are also oppressed in other ways because of their race, class, sexuality, gender, etc. They may also face multiple intersecting barriers to equality and safety (e.g., if an African American woman is raped by a white man, did sexism or racism or both contribute to her experience? What additional oppression might she face as she tries to recover or seek justice?).
- All forms of oppression, including sexual and domestic violence, are perpetuated by the belief that power must be power over, not power shared.

Language Access Plan: A document that describes how to provide services to persons with limited English proficiency.

Persons with Limited English Proficiency: Individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English.

Plan: A document that includes specific objectives and the tasks necessary to accomplish those objectives, names the individuals or groups responsible for each task, provides dates by which tasks will be completed, and specifies how success will be measured or gauged, if appropriate.

Policy: A rule or guideline governing the actions in particular situations that has been officially agreed to by an agency. Policies should be approved by the board of directors (if applicable), include the date of approval on each policy, conform with all applicable laws, and contain the elements specified in the applicable Professional Standard.

Prevention: Shifting the attitudes, behaviors, and norms that support and perpetuate the root causes of sexual and/or domestic violence. Promoting healthy behaviors and communities where sexual and/or domestic violence are likely to occur through evidence-based or evidence-informed strategies.

- **Primary prevention** refers to strategies used to prevent trauma before it occurs and reduce overall likelihood that a person will be victimized.
- **Secondary prevention** involves intervening and responding to violence that has already occurred with the goal of stopping violence from occurring again.

Procedure: The operational processes required to implement a policy. Procedures are the guidelines needed to carry out an activity.

Secondary Trauma: The emotional duress that results when an individual hears about the firsthand trauma experiences of another.

Self-Determination: Those seeking services from an agency retain the right and responsibility to make decisions in their own best interests and in the best interests of any dependent family members without the interference or undue influence of advocates, except in cases where there is an immediate risk of harm to self or others.

Sexual and Domestic Violence Agency: An agency with an agency or program mission to support survivors of sexual and/or domestic violence. Such agency must have been in operation and providing services to survivors for at least three years.

Sexual Violence: Sexual violence is non-consensual sexual conduct accomplished through threat, coercion, exploitation, deceit, force, physical or mental incapacitation, and/or power of authority.

- Non-consensual: without permission, agreement, or approval
- **Threat:** a behavior, statement, or expression that communicates the intention of someone to cause physical, emotional, or psychological harm to another
- Coercion: compelling another to act through manipulation and/or taking advantage of circumstance, personality, and/or emotions (e.g., guilt, fear, pity, anger)
- Exploitation: the unjust treatment of a human being as a commodity or an object without consideration for their well-being and for another's benefit
- **Deceit:** communicating a lie, an untrue statement, or creating a false circumstance
- Force: to use one's physical strength to make another person act against their will
- **Physical or Mental Incapacitation:** when one is not able to comprehend, process, communicate, and/or act on their own behalf due to a physical disability, a mental health disability, a cognitive disability, an injury, and/or the influence of a controlled substance such as alcohol, prescription medication, or illegal drugs
- **Power of authority:** manipulating and/or taking advantage of one's perceived higher social and/or professional standing over another to influence their thought, opinion, or behavior

Survivor/Victim: A person who has experienced the trauma of sexual and/or domestic violence. Survivors of violence may also be individuals who have committed acts of harm at some point in their lives. When agencies make determinations about providing services developed specifically for survivors or perpetrators, they must consider the context of the experience that led the person to reach out for services.

Supervisor: Leadership position within the agency whose title may include words like director, manager, supervisor, lead, coordinator, or other words that imply management responsibilities.

Trauma: Trauma results from an event, a series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening. Trauma has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. In the context of this work, trauma most often is sexual and/or domestic violence or the exposure to that violence, although we recognize the intersectionality of traumatic experiences.

Trauma-Informed: An agency or advocate that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization.

Underserved Populations: A population for which there is a disparity between the presence of that population in the agency's service area and the presence of that population among the persons receiving the agency's services. Populations that may be underserved include foreign born persons; persons with limited English proficiency; persons with disabilities; persons who are gay, lesbian, bisexual, or transgender; persons of certain racial or ethnic backgrounds; older persons; men; and others.

Vicarious Trauma: A shift in world view that occurs in helping professionals when they work with individuals who have experienced trauma. Advocates may notice that their fundamental beliefs about the world are altered and possibly damaged by being repeatedly exposed to traumatic material.