

National Victim Assistance
Standards Consortium

Standards for Victim Assistance Programs and Providers

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The Center for Child and Family Studies extends sincere thanks to National Victim Assistance Standards Consortium members for the long hours and rigorous efforts spent reading, reviewing, and revising; for the time spent in airports and on planes; for group discussions; and for drafting ideas on which so much of the final work is based. We thank members for having the energy and commitment to talk long enough and loud enough to be heard and for standing by principles while stepping forward to develop compromises that benefit all. Finally, we thank Consortium members for their good-faith endurance of “group process” during each meeting and for transforming each day’s tensions and discoveries into each evening’s levity and camaraderie.

The National Victim Assistance Standards Consortium endeavored toward a fully informed approach in standards development. The Consortium hoped to adapt the strongest aspects of existing standards, to identify common standards suitable across victim service settings, and to build on standards drawing from an emerging vision for the field. Accordingly, the Consortium devoted extended consideration to existing standards, as well as to service trends and goals articulated by victim service experts. Many of the materials in this kit rest on ideas forged at the state level, by national organizations, and by professionals in related fields, and the Center for Child and Family Studies would like to thank people who contributed to these ideas.

Special thanks to the following organizations for granting permission to adapt excerpted portions of their professional standards:

- **American Psychological Association**, with particular contributions to the Working Definition of Victim Assistance, Mission Statement for Victim Assistance, and Guiding Values for Victim Assistance.

- **Association of Social Work Boards**, with particular contributions to Ethical Standards for Victim Assistance Providers.
- **Commission on Accreditation of Law Enforcement Agencies**, with particular contributions to writing style and Victim Assistance Program Standards on personnel policies, staff conduct, rewards and discipline, and negotiation and grievances.
- **Council on Social Work Education**, with particular contributions to How To Use the Standards and Victim Assistance Program Standards on personnel policies and staff development.
- **Missouri Coalition Against Domestic Violence**, with particular contributions to Victim Assistance Program Standards on documentation and supervision.
- **National Federation of Paralegal Associations, Inc.**, with particular contributions to Ethical Standards for Victim Assistance Providers.
- **National Organization for Victim Assistance**, with particular contributions to the Mission Statement for Victim Assistance and performance parameters throughout Victim Assistance Program Standards and to Victim Assistance Program Standards on general victim services, general administration, personnel policies, staff development, and supervision.
- **Pennsylvania Coalition Against Rape**, with particular contributions to Victim Assistance Program Standards on accessibility, coordination, general victim services, confidentiality, general administration, personnel policies, and staff development and to Ethical Standards for Victim Assistance Providers.

We also extend appreciation to the reviewers who provided feedback on preliminary drafts of this document.

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Finally, we thank those who participated in the town hall meetings that informed each discussion held by Consortium members.

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The National Victim Assistance Standards Consortium was established to address standards and credentialing for victim assistance providers. The Consortium includes individuals recommended by the National Coalition Against Domestic Violence, the Victims' Assistance Legal Organization, the National Organization for Victim Assistance, the National Center for Victims of Crime, Mothers Against Drunk Driving, and other prominent victim assistance organizations. The purpose of the Consortium is to reach across geographic and philosophical divides to forge a common ground in victim assistance professional development. The project included indepth review of literature on victim services, review of existing standards, and a series of town hall meetings hosted for victim assistance providers and policymakers across the country. Consortium members held intensive meetings to integrate input from the field, discuss issues, and draft ideas for model standards. The Consortium's products were synthesized, and draft standards were sent to the field for review. Direct service providers, administrators, researchers, educators, and activists provided input. Standards were refined and consolidated in a comprehensive standards kit. This kit, *Standards for Victim Assistance Programs and Providers*, includes three sets of standards: Victim Assistance Program Standards, Competency Standards for Victim Assistance Providers, and Ethical Standards for Victim Assistance Providers. The standards are framed by a Working Definition and Mission Statement, Guiding Values for Victim Assistance, Guidelines for Implementing Standards, and Sample Assessment Tools. The kit also includes a compendium of Promising Practices in Professional Development, a Directory of Credentialing Programs, a Directory of Related Standards, and a list of Professional Development Resources including books, curricula, and software.

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About the Consortium

About the Consortium

Background of the Consortium

The National Victim Assistance Standards Consortium (NVASC) is a multidisciplinary group of victim service experts examining standards and credentialing for victim assistance providers. The Consortium was established as an ad hoc group by the Office for Victims of Crime, U.S. Department of Justice, in partnership with the University of South Carolina's Center for Child and Family Studies. NVASC includes experts recommended by diverse organizations such as the National Coalition Against Domestic Violence, the Victims' Assistance Legal Organization, the National Organization for Victim Assistance, the National Center for Victims of Crime, Mothers Against Drunk Driving, and other prominent regional and national entities.

One of the goals of the Consortium is to build collective expertise in victim service professional development. The Consortium functions as a cooperative working group, each member bringing unique interests and philosophies to the table. Members represent numerous disciplinary backgrounds, including law, psychology, social work, and education; academic settings; and victim services in law enforcement agencies, prosecution, post-adjudication services, advocacy organizations, crisis services, and shelters. They come from locales across the United States, working at local, state, and national levels in government, private, and nonprofit sectors. Consortium members identify with interests of membership organizations, paid and volunteer practitioners, administrators, policymakers, and researchers.

Many Consortium members are direct service providers, and most have substantial experience with service in the field. Each member maintains a connection to the larger service community via activities such as consultation, volunteer response teams, outreach and prevention services, sponsorship of support groups, service on community boards and task forces, and research and technical support for providers.

Expertise of Consortium members ranges from unreported crimes to crimes investigated, prosecuted, and adjudicated, as well as longer term issues of mental and emotional health for victims. Members have extensive knowledge of varied crimes, including property crimes, homicide, drunk-driving death and injury, sexual assault, domestic violence, victimization of children, and victimization by juveniles. Several members specialize in services for ethnic minorities, gays and lesbians, or people with disabilities. Members have additional expertise in areas such as education and training, professional ethics, history of services, and restorative justice.

Standards development in this project was not limited to membership of the core working group. The group's functioning was informed by interactive town hall meetings held across the Nation. These meetings provided a forum in which practitioners helped define issues for consideration, including concerns of practitioners who work every day in the field. Additional perspectives were provided by the Consortium's consultant members who lent specialized knowledge and support, as well as by reviewers who critiqued Consortium products.

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The field of victim services has come a long way over the past few decades, progressing along multiple routes toward varied goals. The Consortium is a juncture at which we identify commonalities in approach and make a unified stride toward the best possible service for victims of crime. The combined experience of Consortium participants lends diverse strengths and broad-based credibility, rendering this project a promising opportunity for tangible advances in professional understanding of victim services education, practice, and policy.

Consortium View on Standards

A major goal of the Consortium is to reach across geographic and philosophical divides to forge a common ground in victim services professional development. This work comes at a time when the field acknowledges the unique contributions of government, nonprofit, and private providers and communities to bridge service gaps and to form coordinated responses to victimization.

Tasks performed by the group included drafting a common definition and mission to span the field of victim

assistance and examining existing standards such as the competency standards drafted for certification programs and the program standards drafted by state agencies, coalitions, and organizations. The Consortium identified core individual and program standards—the common ground—suitable for use in various victim service settings. They also identified differences for which specialized standards would be more appropriate to meet unique task demands. These standards, which have not yet been developed, might be drafted by a group of people within each area of specialization and could be layered on the common core.

Throughout their work, Consortium members have held forthright discussions, shared perspectives, and, at times, developed compromises based on collective goals. Their efforts serve to discern a shared vision and to fashion a unified agenda for advancing the field.

Biographies

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Nancy Arnow, CSW. Nancy Arnow is the Vice President of Family & Clinical Services within Safe Horizon, a leading nonprofit victim assistance organization providing support, preventing violence, and promoting justice for victims of crime and abuse, their families, and communities. Ms. Arnow has worked in the field of victimology with underserved populations for the past 20 years, specializing in domestic violence and child abuse and neglect. She has extensive clinical, supervisory, and managerial experience. Ms. Arnow has presented diverse trainings and workshops and has participated in various committees focusing on quality assurance, performance-based measures, and developing effective service delivery models for families affected by violence.

Paul B. Freeman, MS, LPC. Paul Freeman is a Senior Victim Advocate for the Fulton County District Attorney's Office, where he is developing a victim service program in juvenile court. He is an Adjunct Professor, has developed curricula for victim services, and is a licensed professional counselor. As former Bureau Chief of Victim Services in the Florida Attorney General's Office, he developed a statewide victim service program and coordinated a mass trauma response team. Mr. Freeman also served as Clinical Services Director for a psychiatric hospital and crisis center, where he

founded a rape crisis program. He has provided training to law enforcement, first responders, and victim advocates at local, state, and national levels, and plays an active leadership role in professional organizations.

Denise Giles. Denise Giles is the Victim Services Coordinator for the Maine Department of Corrections. She is responsible for planning, coordinating, administering, and evaluating the department's victim services program, including notification of inmate release, restitution services, and harassment issues. She coordinated the development of standards for the certification of batterer intervention programs, developed victim impact panels and impact-of-crime classes, and developed a policy for victim/offender dialog in a correctional setting. Ms. Giles assists in the coordination of sex offender community-notification policies and participates on the Domestic Homicide Review Panel. She designed and implemented a staff training curriculum for victims' rights and services.

Janice Harris Lord, MSSW. Janice Harris Lord is a licensed social worker and professional counselor who has worked in the crime victims' movement since 1976. She served as National Director of Victim Services for Mothers Against Drunk Driving for 15 years. Currently, she is a consultant for numerous crime victim organizations and has written two books: *No Time for Goodbyes: Coping with Sorrow, Anger and Injustice After a Tragic Death* and *Beyond Sympathy: What To Say and Do for Someone Suffering an Injury, Illness or Loss*. She is a founding board member of the National Institute for Victim Studies at Sam Houston State University. Ms. Harris Lord received the U.S. Presidential Award for Excellence in Victim Services, awarded by U.S. Attorney General Janet Reno in 1994.

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Brian Ogawa, DMin. Brian Ogawa is Director of the Crime Victims' Institute, Office of the Texas Attorney General. The Institute conducts research and evaluation studies to improve the rights and services of crime victims. Dr. Ogawa was previously director of the National Academy for Victim Studies, University of North Texas. The Academy was a collaboration between the university and the National Office of Mothers Against Drunk Driving to provide academic instruction and continuing education and to conduct research on crime victim issues. Dr. Ogawa has also been a director of a prosecutor-based victim assistance division, a mental health researcher, and a counselor. He is the author of the books *Walking on Eggshells, To Tell the Truth*, and *Color of Justice*.

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Roberta Roper. Roberta Roper is Director of the Stephanie Roper Committee and Foundation, Inc. After the murder of their daughter, Stephanie, in 1982, and their experience with the criminal justice system, Roberta and Vince Roper founded the organizations. The Committee advocates for victims' rights and services. The Foundation provides information about criminal justice proceedings, assistance with victims' rights, court accompaniment, legal assistance for eligible victims, and support groups for families and friends of homicide and drunk driving victims. Ms. Roper chairs Maryland's State Board of Victim Services, is cochair of the National Victims' Constitutional Amendment Network, and is a member of the Advisory Board, National Institute of Victim Studies. She led Maryland's efforts for a constitutional amendment for victims' rights, which was passed in 1994.

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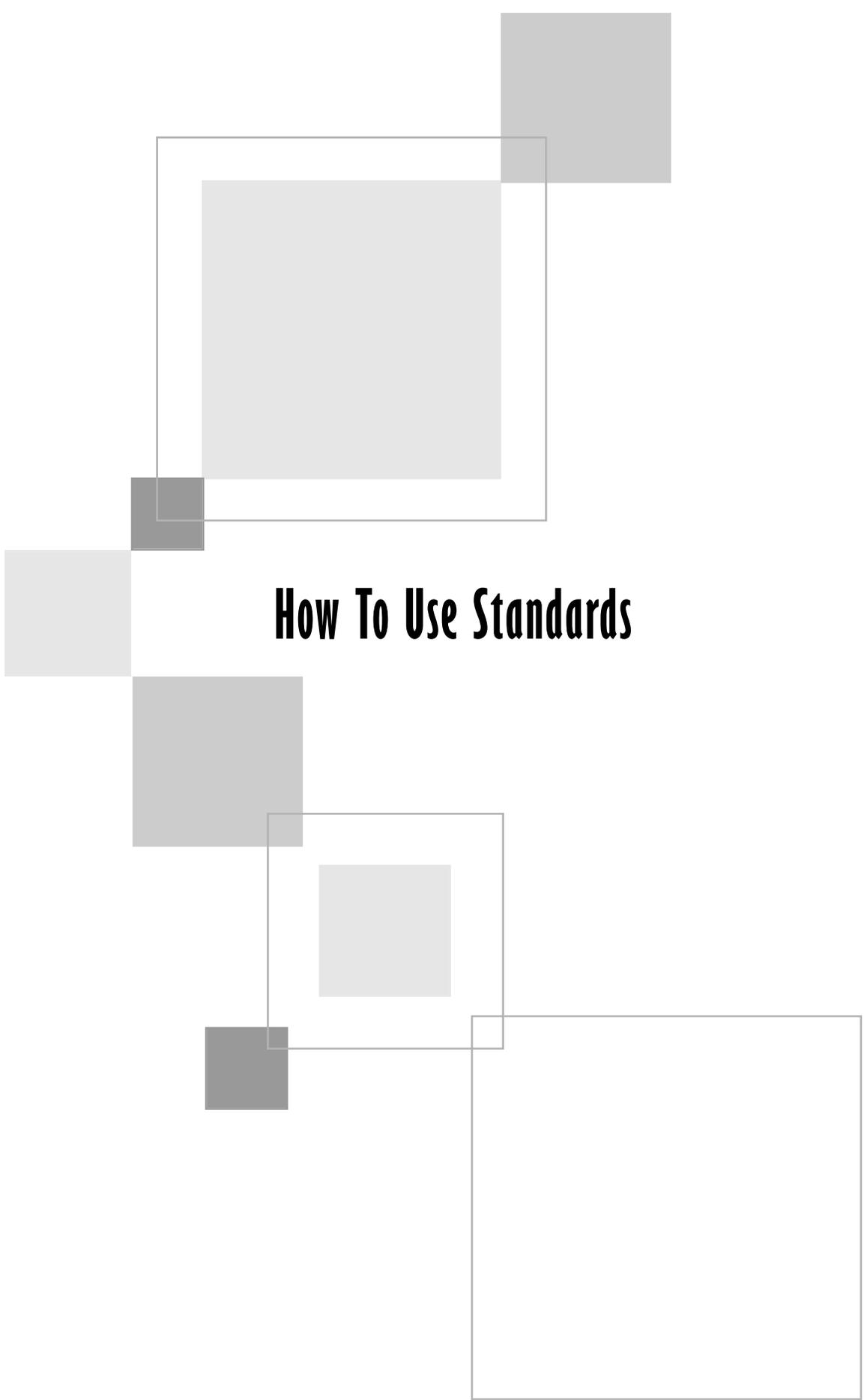
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How To Use Standards

How To Use the Standards

Standards for Victim Assistance Programs and Providers (*NVASC Standards*) offers a model framework for professional development and is intended as a template for users to adapt to specific needs. That is, standards are targeted broadly to address the core of victim assistance, and adjustment to particular settings and specializations is an expected and encouraged use of the standards.

Consortium members feel strongly that individual and program standards should be used as encouragements rather than restrictions, supporting enhancement of programs and practitioners rather than confining practice within rigid boundaries. There is an expectation that programs and practitioners focus their compliance with standards in a way that most effectively meets their individual needs and those of the communities they serve. That is, programs and practitioners must consider their own goals, mandated responsibilities, and service needs in determining how to comply with standards. Each program and practitioner is expected to supplement, but not supplant, the principles herein, guided by their unique values, culture, and experiences.

Purpose of the Standards

NVASC Standards is intended as a resource for victim service practitioners, programs, and communities. Formal regulatory boards do not govern the field of victim assistance, yet there is a growing trend among the states toward greater standardization of training and practice. *NVASC Standards* brings an approach informed by national, state, and local perspectives, as well as by government, private, and nonprofit providers. The standards are guidelines for promoting competence and ethical integrity of providers and quality and consistency of program service. The approach is based on commonalities across the broad field of victim services, and the intent of *NVASC Standards* is to help victim assistance providers serve the public better through access to the

most current cross-disciplinary thinking on professional development.

Role models, field learning, and career climate play an important role in professional development for victim assistance providers. Programs may have a substantial impact on this professional development. By reflecting certain core values and principles in all aspects of program functioning, *NVASC Standards* is an effort to set forth the common values and principles on which the field has been built.

As the field of victim assistance evolves, practitioners and programs need to advance and enhance their roles in the delivery of services for victims of crime. With such increased responsibility comes the need to define and adopt basic guidelines for provision of services. Some might argue that development of standards is both logical and necessary to enhance the confidence of the justice community, the helping professions, and the general public in the integrity and responsibility of victim service programs and practitioners.

About the Contents of This Kit

This standards kit is not intended to be a curriculum to be followed in a specific sequence. Rather, different sections may be used as guides or reference points for varied purposes.

Framework for Standards

Terminology—This section provides a brief introduction to some of the terms or language used in the document.

Working Definition and Mission Statement for Victim Assistance—The Working Definition of Victim Assistance identifies the roles and work settings for victim assistance providers, and helps to define the scope of application for these core standards. The Mission Statement for Victim Assistance includes general goals and specific objectives for the field.

Guiding Values for Victim Assistance—This section describes aspirational goals to guide victim assistance providers toward ideals of practice. These values are not themselves enforceable rules; rather, they are general considerations to guide decisions made in everyday provision of services.

The Standards

Victim Assistance Program Standards—These standards identify ways of documenting and administering services to ensure quality, responsiveness to community needs, and accountability of service programs. These standards can be adopted by programs to help shape methods of service delivery and by communities to encourage communitywide quality and accessibility of victim services.

Competency Standards for Victim Assistance Providers—Work environments, time and resources, and levels of previous training vary widely among victim assistance providers. For this reason, these competencies are set forth as a set of outcome guidelines to be reached through a variety of means. That is, victim assistance providers may achieve competency through personal experience, on-the-job performance, training, formal education, or other ways. The Competency Standards for Victim Assistance Providers comprise attitudes, knowledge, and skills. Educators and trainers can develop curricula, training packages, and other professional development opportunities to help victim assistance providers meet these standards. Victim assistance providers can assess their own progress toward competencies, and administrative staff can use the competency standards to identify inservice training and professional development needs within victim service programs.

Ethical Standards for Victim Assistance Providers—These standards identify behavioral expectations of victim assistance providers based on core values for the field. Ethical Standards for Victim Assistance Providers are intended as aspirational guidelines applicable to a range of issues addressed in daily service provision.

For consistency and ease of reference across the three sets of standards, each set—Victim Assistance Program Standards, Competency Standards for Victim Assistance Providers, and Ethical Standards for Victim Assistance Providers—is organized into four sections. These include standards pertaining to

- **Scope of service.** These standards address purposes of service in relation to the broader community, range of competence, representation of services, and compliance with existing laws, regulations, and policies.

- **Coordinating within the community.** These standards address outreach to underserved populations, service accessibility, prevention, community education, coordination with other professionals, and social change advocacy.
- **Direct services.** These standards address interactions with those served and documentation of services.
- **Administration and evaluation.** These standards address staffing, training, supervision, and evaluation. For individuals, these standards also address self-awareness and self-care issues.

Implementation Tools

Guidelines for Implementing Standards—This section is essential for directing the use of standards and outlines precautions to prevent their misuse.

Sample Assessment Tools—This section includes sample assessment tools for evaluating performance based on the standards.

Resource Materials

Promising Practices in Professional Development—This section profiles innovative practices in victim service professional development.

Directory of Credentialing Programs—This section lists institutions of higher education, components of state government, professional associations, and non-profit organizations that confer degrees, certificates, registration/designation, or academic credit in victim services.

Directory of Related Standards—This section provides information about other standards in victim assistance as well as standards from related fields.

Professional Development Resources—This section cites readings, training curricula, videos, and other resources for professional development of programs and practitioners.

Glossary of Terms—This section provides definitions of terms used throughout the standards kit.

Bibliography

This section provides citations for publications used in developing the standards.

Terminology

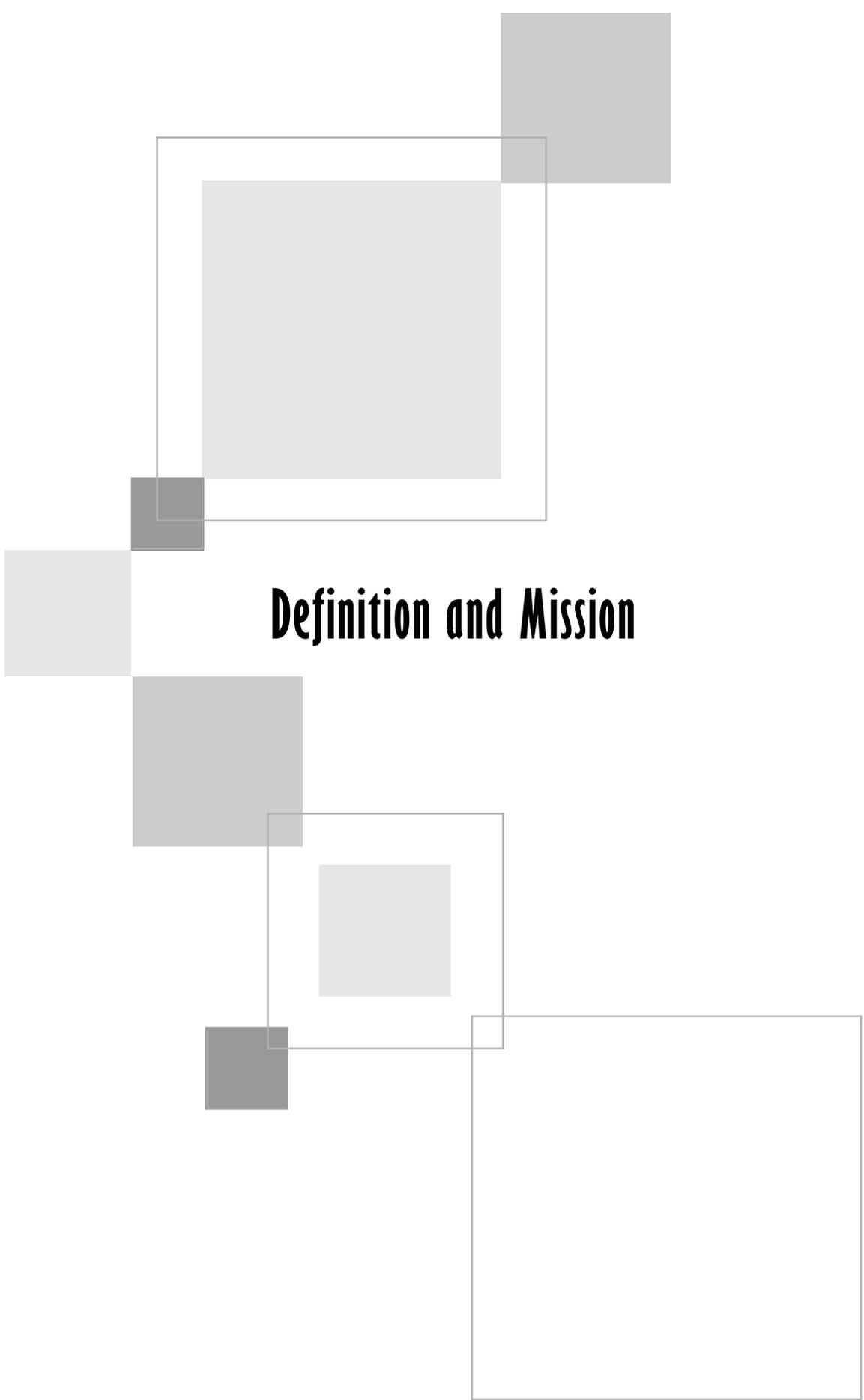
Terminology is an issue of great importance to the Consortium. The group held extensive discussions regarding meanings and implications of different terms used to refer to the field, to providers, and to persons served. It was agreed that, for clarity, varied terms and meanings should be addressed within this document.

A basic decision involves use of the term “victim.” An alternative term, “survivor,” is preferred by some in the field. Many argue that the latter term is less passive and recognizes the strength of having lived through a traumatic event. Although the term “survivor” may be gaining popularity in the field, the term “victim” is far more common at this time. To reflect that, the term “victim” is retained in this document with the understanding that terminology may need to be revised to evolve with the field.

Based on input from those who serve victims of crime, the term “victim assistance” is a term of choice for the field, because this term is broad and inclusive. Victim assistance includes a variety of victim services and functions that may or may not include advocacy.

“Victim assistance providers” is also a broad term and is acceptable to most in the field. “Victim advocate” is problematic because advocacy is not included in some victim services. “Victim assistance practitioner” can be perceived as too clinical, so some have suggested that “practitioner” be reserved as a term for state-licensed or certified professionals. “Victim assistance professional” can be objectionable to those who believe the term to be exclusionary. The term “professional” might become more appropriate at a later stage of the field’s development. The Consortium is a collective effort to raise levels of professionalism in the field, and the field itself is an emerging profession. Accordingly, victim assistance providers are expected to *act professionally*, and colleagues are expected to grant them professional respect.

A Glossary of Terms at the end of this document provides clarification of other terms used throughout the document.



Definition and Mission

Working Definition and Mission Statement

Working Definition of Victim Assistance

The following working definition outlines basic contexts and activities of victim assistance as it exists today:

Victim assistance providers include paid and unpaid individuals working in a variety of settings to respond to crime victims' mental, physical, financial, social, emotional, and spiritual needs. Their work derives from the theory, methods, and ethics of multiple fields, including criminal justice, public health, social work, psychology, theology, women's studies, sociology, biological and health sciences, law, and others.

Victim assistance providers provide intervention, risk reduction, and prevention services to both direct and indirect victims of crime. These crimes range from personal and property crime to acts of terrorism or war crimes. A number of victim assistance providers also lend aid during community crises, including natural disasters. Included among recipients of victim assistance are family members, friends, significant others, coworkers, community members, and others impacted by the crime's/disaster's effects on people and environments.

Victim assistance providers perform many roles, including advocate and supporter for individual victims and their families, educator to the public, trainer to other professionals, supervisor to volunteers and paid staff, consultant to justice personnel and health care providers, administrator to victim service programs, and social-change activist within institutions, communities, states, regions, and the Nation.

They work in institutional and grassroots settings, and within private, government, and nonprofit sectors, including—but not limited to—law enforcement, crisis centers, domestic violence programs, highway patrols,

hotline services, prosecutors' offices, correctional agencies, juvenile justice, probation and parole services, mental health clinics, social services, schools and universities, tribal services, compensation offices, and state, regional, and national organizations, for advocacy and activism.

Typical services and tasks performed by victim assistance providers include crisis intervention, assessment of basic victim needs, assistance with compensation and restitution applications, court accompaniment, information and referral, intermediate and long-term support services, case planning, staff supervision, consultation with other professionals, education and risk reduction, legislative reform and social change, and administration of victim service policies, programs, and activities.

Mission Statement for Victim Assistance

Victim assistance as a field of practice and study is directed toward broadening knowledge of criminal victimization and applying this knowledge to improve the condition of both individuals and society. Victim assistance providers strive to help the public develop informed choices concerning victim-related issues, services, and policies.

The mission of victim assistance is

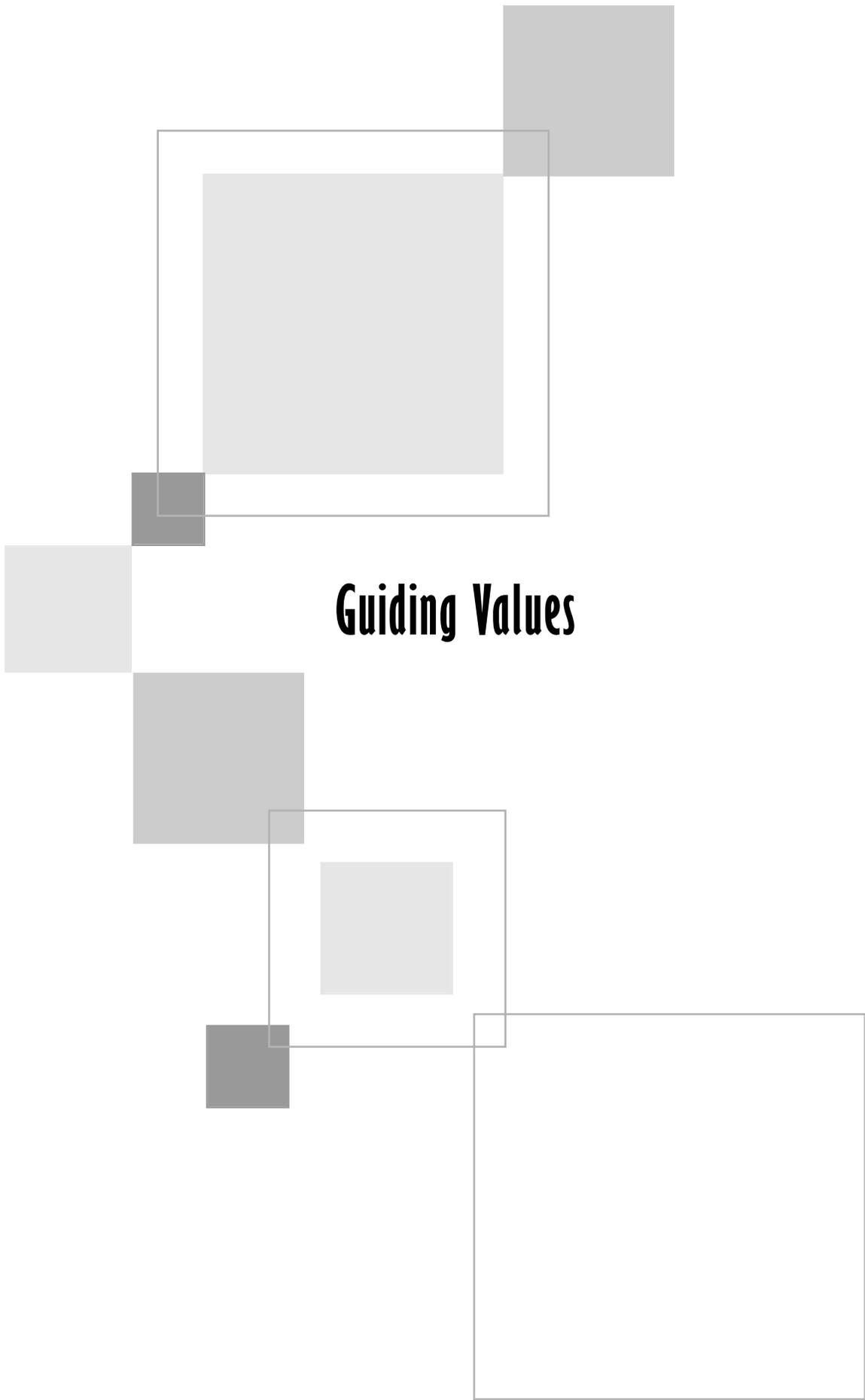
- To provide social, informational, and practical support to crime victims.
- To promote justice for victims.
- To attempt to ensure a voice for victims.
- To promote access for victims to a seamless web of multidisciplinary services.
- To advocate for individual victims as well as for social, institutional, and legal change.

Specific objectives accomplished through practice are

- To increase the range and availability of services for victims of crime, from the time of the criminal act and throughout the aftermath, and in all forums of justice decisionmaking, including criminal, civil, juvenile, military, tribal, and

administrative adjudicative bodies (e.g., school disciplinary proceedings).

- To expand victims' opportunities to participate in justice interventions and in other institutions and systems by helping victims to be informed, present, and heard at all critical stages of the justice process, and by promoting consideration of the impact of crime in all major justice decisions.
- To increase coordination and networking of agencies, organizations, and groups that impact victims in order to develop an integrated community system of victim assistance.
- To increase public knowledge of victimization and its impact, and to promote supportive lay and professional networks for community prevention and intervention.
- To increase outreach and intervention for underserved victims of crime, including victims who are racial or ethnic minorities, linguistic minorities, immigrants or refugees, victims of hate or bias crime, homeless persons, people with disabilities, and others.
- To increase the commitment of federal, state, and local governments; privately funded nonprofit organizations; the faith community; and other traditional and nontraditional programs to do all that is possible to provide services, response, and treatment for victims of crime.



Guiding Values

Guiding Values for Victim Assistance

The guiding values for victim assistance are not unique to this field; they parallel many other professions. The uniqueness of the values in victim assistance rests in their application to specific tasks of daily practice.

The values have been the subject of discussion forums, conference workshops, training curricula, and professional literature in both victim assistance and related fields. In our examination of existing literature, we found a particularly fitting description of values to guide the field in *Ethical Principles of Psychologists and Code of Conduct*, published by the American Psychological Association in 1992. We have adapted and supplemented that text, and credited the source at the end of this section. The resulting interpretation (provided below) outlines ideals of practice to guide everyday decisionmaking in victim assistance.

Competence

Victim assistance providers maintain high standards of competence, recognizing their own particular capabilities, specializations, and limitations in expertise. They only provide services and use techniques for which they are qualified by education, training, or experience. Victim assistance providers understand that the competencies required for serving and educating groups of people vary with the distinctive characteristics of those groups. In those areas in which recognized standards do not yet exist, victim assistance providers exercise careful judgment and take appropriate precautions to protect the welfare of those with whom they work under the guiding principle of “do no harm.” They maintain up-to-date knowledge on services they render, and they recognize the need for ongoing professional development to keep informed of trends and changes in the field. They understand the importance of personal wellness for delivery of services, and they promote self-care and mutual support in their relationships with colleagues and staff. Victim assistance providers make appropriate use of professional, technical, administrative, and community resources.

Integrity

Victim assistance providers promote integrity in practice, policy development, and community education. In these activities, victim assistance providers are honest, fair, and respectful of others. In describing or reporting their qualifications, services, products, fees, research, and teaching, they do not make false, misleading, or deceptive statements. They are honest and objective in fulfilling their commitments and communicating expectations of justice or service systems. Victim assistance providers strive to be aware of their own histories, belief systems, values, needs, and limitations and the effect of these on their work. They make every attempt to clarify for relevant parties the roles they are performing and to function in accord with those roles. Victim assistance providers avoid improper and potentially harmful dual relationships (for example, relationships that blend personal and professional roles).

Professional Responsibility

Victim assistance providers maintain professional standards of conduct, satisfy their own professional roles and obligations, accept appropriate responsibility for their behavior, and adapt their methods to the needs of different populations. Victim assistance providers consult with, refer to, and cooperate with other professionals and institutions to the extent needed to serve the best interests of those served. Victim assistance providers' moral standards and conduct are personal matters, except as personal conduct may compromise professional responsibilities or reduce public trust in victim services. Victim assistance providers are concerned about the ethical compliance of their colleagues' professional conduct, both within their own programs and other programs in the field. As appropriate, they consult with colleagues to prevent or avoid their own unethical conduct and that of others.

Respect for People's Rights and Dignity

Victim assistance providers respect the fundamental rights, dignity, and worth of all people. They recognize that all people they serve merit the benefits of empowerment, and victim assistance providers are committed to developing victims' ability to help themselves. They respect the rights of individuals to privacy, confidentiality, self-determination, and autonomy—mindful

that legal and other obligations may lead to inconsistency and conflict in the exercise of these rights.

Victim assistance providers are aware of cultural, individual, and role differences, including those related to race/ethnicity, language, sex, gender, age, sexual orientation, (dis)ability, social class, economic status, education, marital status, religious affiliation, residency, and HIV status. Victim assistance providers try to identify their own biases and to limit the effect of these biases on their work. They do not knowingly participate in or condone unfair discriminatory practices. Victim assistance providers value justice and equity in service provision and use initiative and commitment to ensure that services are extended to populations in need. They use flexibility, innovation, and persistence to promote fair access and benefits of service—even as confronted by frustration and other motivational or practical barriers.

Concern for Others' Welfare

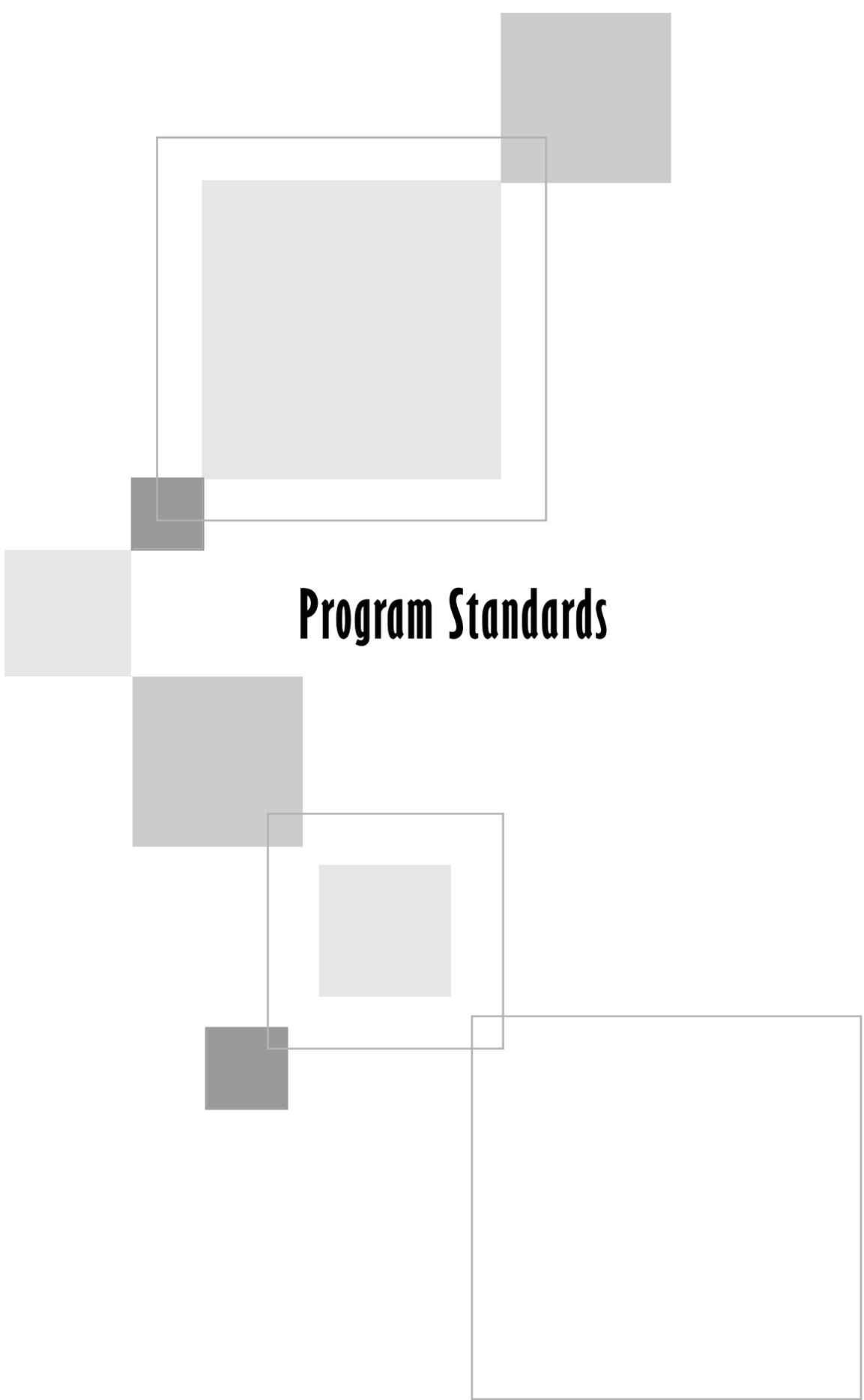
Victim assistance providers contribute to the welfare of those with whom they interact professionally. They are committed to compassion for individuals, and they use empathy and other practical techniques to sincerely understand and address victims' concerns. Victim assistance providers take a holistic view of the person in context, and they draw on needed resources and collaboration to fully address victim, family, and community needs. In their professional actions, victim assistance providers weigh the welfare and rights of those served, staff, and other affected individuals. When conflicts occur with professional obligations or concerns, victim assistance providers attempt to resolve these conflicts and to perform their roles in a responsible fashion that avoids or minimizes harm. Victim assistance providers are sensitive to real and ascribed differences in power between themselves and others. They abstain from abuse of their position, and they do not exploit or mislead other people during or after professional relationships.

Social Responsibility

Victim assistance providers are aware of their professional, legal, and social responsibilities to the community in which they work and live. They are committed to social justice and to the physical and psychological well-being of all in society. They apply and make public their knowledge of victim issues to contribute to human welfare. Victim assistance providers are concerned about and strive to decrease the causes of crime

and victimization. Victim assistance providers comply with the law and encourage the development of laws and social policies that support the interests of victims and the general public.

This chapter was adapted from *Ethical Principles of Psychologists and Code of Conduct* (1992) with permission from the American Psychological Association and supplemented for suitability to the field of victim assistance.



Program Standards

Victim Assistance Program Standards

Victim Assistance Program Standards describes what should be accomplished by the program yet allows wide latitude of program discretion on how to achieve compliance with each standard. Compliance should always be attainable; accordingly, compliance should never be limited to a single means of achievement. The intent of these standards is to promote thoughtful program-specific and community-specific consideration of quality service delivery. This approach is integral to understanding the intended flexibility of standards for adaptation to the philosophies, goals, and needs of various programs and communities.

Each program standard has two components:

- **Standard statement.** The standard statement is a declarative sentence outlining a clear expectation for the program. This generally takes the form of a written guideline (see Glossary of Terms) that articulates the program's policies, procedures, rules, regulations, or other aspects of program functioning. Some standards allow substitution of documentation or documented evidence (see Glossary of Terms) of program efforts.
- **Standard commentary.** The standard commentary clarifies the intent of the standard by providing examples, including suggestions and nonbinding recommendations for achieving the standard. If programs choose to innovate and comply with standards in a manner other than that addressed in the commentary, administrators should be prepared to outline in writing or otherwise (e.g., an oral description by the program director/administrator) how compliance has been achieved.

Standards can be adopted by programs to enhance methods of service delivery, by coalitions to promote consistency of service, and by communities to encourage communitywide quality and accessibility of victim services. They may

be adopted by state, regional, and national organizations. Although standards may require adaptation to fit unique programs, the Consortium recommends general adoption to promote reciprocity and equity of services throughout the Nation.

Section I: Scope of Services

PROGRAM STANDARD 1.1: A written guideline describes the program’s mission, goals, and objectives.

Commentary: The program has a short, succinct statement of purpose, including clearly written goals and objectives. The program’s mission and goal statements are global and general, describing desired states or results. Goals are more specific in defining program purposes than an overriding mission statement. The mission and goals are most meaningful to staff and community members if written to reflect regional needs, priorities, and interests. Program objectives are derived from the mission and goals. Objectives are specific, measurable statements of desired achievements. A program’s objectives should reflect design and implementation of the program and desired program and staff achievements. Objectives specify what should happen to those served, community members, and other target populations or groups as a result of program actions. They reflect changes in behavior, skills, attitudes, values, beliefs, knowledge, and status.

Programs are encouraged to develop an annual and/or long-range action plan for fulfilling program objectives.

PROGRAM STANDARD 1.2: A written guideline describes the geographic area and types of people served by the program.

Commentary: The guideline describes approximate geographical boundaries of the program’s service area. When several of the same type of programs operate concurrently in a single area, it may help to identify overlapping service areas. The guideline outlines the program’s responsibilities for promoting service access under any interagency agreements.

Those served are generally victims and/or significant others of victims (when that significant other is not accused of committing the crime for which the victim is receiving services). In identifying a target population for service, consideration is to be given to the communitywide availability of services for

- Victims of sexual assault.
- Victims of family and relationship violence.
- Victims of stalking.
- Victims of nonfamily assaults/violence.
- Surviving families of homicide victims.
- Victims of drunk-driving death or injury.
- Victims of hate crime.
- Victims of property crime.

Although some programs will specialize in one or two forms of crime or victimization, others may be more general and address many types of crime or victimization. Programs are encouraged to examine overall service availability in the community and to work with other providers to address forms of crime or victimization that are underserved. This might include identifying the provider(s) most suited to handle particular services within an agency/organization or developing collaborative programs to meet needs of underserved populations. Programs are to have sufficient training, supervision, materials, and outreach to provide competent service delivery based on characteristics of the victims. This includes—as appropriate to program goals—services for male and female victims as well as for children, the elderly, ethnic minorities, gay/lesbian/bisexual and transgender persons, people with disabilities, and others with special needs (e.g., non-English speaking, homeless). Program staff are to be aware of the range of services available in the community and are prepared to provide referrals for services that fall beyond the scope of their own program goals (a written list is suggested). If no referral agencies are available or for emergency situations, programs are encouraged to lend services to the extent possible (within the range of competent service delivery).

PROGRAM STANDARD 1.3: A written guideline requires that all program procedures operate in accord with applicable government laws and regulations, as well as within policy guidelines for any overarching agency or institution.

PROGRAM STANDARD 1.4: A written guideline requires all program staff, while serving in the

professional role, to abide by applicable local, state, and federal laws.

PROGRAM STANDARD 1.5: A written guideline requires all program staff, while serving in the professional role, to abide by a code of ethics adopted by the program.

Commentary: (1.3–1.5) Examples of laws and regulations include laws on accessibility through the Americans with Disabilities Act, the National Indian Child Welfare Act, regulations governing nonprofit boards and bylaws, grantor requirements (e.g., drug-free workplace, lobbying), criminal laws, and any state constitutional or statutory rights for victims. Programs housed within larger overarching agencies (e.g., law enforcement) or institutions (e.g., universities) should ensure that procedures do not conflict with those of the overarching agency or institution.

Service in the professional role includes on-the-job performance and also off-duty occasions when the victim assistance provider is acting as a representative of the victim service program (e.g., at professional meetings), delivering victim services in the community (e.g., on volunteer crisis teams), or acting with regard to professional information (e.g., maintaining confidentiality of client information).

Section II: Coordinating Within the Community

Accessibility and Safety of Services

PROGRAM STANDARD 2.1: A written guideline describes the program’s methods for maintaining geographic accessibility of services and accessibility over time, including

- Accessibility of location appropriate to service goals.
- Accessibility of services to people with disabilities and special needs.
- Provision of public information on hours service is available and types of services offered.
- Provision of information about eligibility criteria to the public.

Commentary: Facility accessibility may be promoted through a variety of methods, such as proper posting of signs and providing directions. The program’s accessibility by public transportation (as available) should be a consideration. Special thought must be given to domestic violence programs and other programs that may require a confidential or nontraditional location (e.g., home visits, temporary hours in another agency such as a welfare office) and to programs that operate primarily through electronic or phone communications.

In establishing program space, consideration must be given to accessibility to people with disabilities. Every attempt should be made to ensure that offices are free of barriers to mobility and that helping devices (e.g., translation devices) are available for persons with sensory impairments. Consideration might be given to accessibility of services to persons with language needs (e.g., Spanish-speaking) or other special needs.

Information is to be available to the public regarding hours of service, both for basic services and for crisis or on-call response. As appropriate to services, regular weekday business hours (e.g., 9 a.m. to 5 p.m.) are to be considered as a minimum. Weekend, evening, and on-call 24-hour response may be necessary for some crisis intervention programs. Crises may include not only the victimization incident, but also recent memory, disclosure, traumatic event, or any legal proceeding or involvement. If crisis intervention is limited in the program (e.g., limited hours or limited training of responders), program staff are to be knowledgeable of other providers and have contact information for trained 24-hour crisis intervenors in the community. During hours of unavailability, programs might leave a recorded message with an answering service informing callers how to contact crisis intervenors.

Crisis response time is to be reasonable given the geographic traveling distance (e.g., 15–30 minutes in an urban area, as soon as possible in rural areas). For some crises, responders may be dispatched directly to the crime scene, victim’s home, or hospital; in these cases, program procedures are to be assessed to ensure adequate safety (for persons served and program staff) and ethical precautions.

Information is to be available to the public regarding methods for scheduling services: by appointment, on a

community-based, walk-in basis, or for crisis response. This information may describe any limitations regarding self-referral or referral by professionals, and may include basic eligibility limitations (e.g., information about documentation that may be required to obtain services). Some programs choose to disseminate information on service availability by letters or phone calls, which are provided to victims identified through screening of incoming reports. If such screening is used to identify victims, procedures should comply with local laws on privacy.

PROGRAM STANDARD 2.2: A written guideline specifically describes the program’s policy on nondiscrimination.

Commentary: The guideline is intended to promote equal service access for all individuals and (when applicable) to ensure that training and education are available to the community served. Programs are not to deny service on the basis of race/ethnicity, language, sex, gender, age, sexual orientation, (dis)ability, social class, economic status, education, marital status, religious affiliation, residency, or HIV status. If program service is inappropriate for an individual, referrals are to be provided to that person.

It should be noted that governmental and/or funding restrictions prohibit many programs from promoting religious doctrine, practice, or affiliation in the direct provision of services. Exceptions would most notably be privately funded, clearly identified, religious-based programs. However, special needs of victims may create exceptional circumstances in which it is appropriate to accommodate culture-specific religious practices. Program staff should be well-versed in appropriate and acceptable responses to spiritual dimensions of trauma.

PROGRAM STANDARD 2.3: A written guideline describes the program’s procedures for assessing and maintaining equal access to service.

Commentary: This standard refers to procedures that supplement basic nondiscrimination policy. For instance, geographic jurisdiction, in conjunction with information on victimization rates and the type of victims to be served, can be used to generate population parameters against which the actual client base is measured. Demographics of the service population should roughly reflect those of the geographic area served. An exception is programs specifically targeted toward

underserved populations. Programs may wish to assess whether extent of service use varies for different populations served (e.g., whether some victims discontinue service more quickly than others). When marked discrepancies exist in service use, programs might examine ways of rendering more culturally appropriate service. These could include outreach efforts and culture-specific methods of helping victims access resources and support.

PROGRAM STANDARD 2.4: A written guideline describes the program’s procedures for assessing safety, security, and maintenance of service premises. Components to be addressed include, as applicable,

- Maintenance of physical premises.
- Safety and security of grounds and interior for those served and staff.
- Safety of transportation (if any) provided by staff to those served.
- Safety and security of phone, mail, and electronic communications with those served.

Commentary: Safety, cleanliness, and physical space allotments of the building are to be in compliance with health and safety codes and appropriate to program goals. The building is to be in good condition. Waiting rooms and offices are to be kept clean and the physical environment properly maintained to ensure a reasonable degree of comfort. Whenever possible, interviewing rooms are to ensure privacy.

If program staff provide transportation to the people served, car doors are to be locked and small children secured in safety seats. Program policy might discourage staff from transporting intoxicated, psychotic, or actively suicidal people; runaways; or others who may pose a physical threat or liability to people served or staff. Law enforcement or other emergency transport may be warranted under these circumstances.

The guideline also addresses measures taken by the program to reasonably ensure that staff and those served are protected from intimidation, threat, and physical assault on service premises. These might include procedures for handling instances when victims are stalked by offenders (e.g., in domestic violence or gang-related cases) and when victims or offenders threaten staff.

Special consideration should be given to the safety and security of communications with the people served. For instance, messages left on answering machines and electronic mail messages may be intercepted by those who share a dwelling/account with the victim (or, in some cases, by hackers), thereby presenting risk to the victim's privacy and/or safety (particularly in domestic violence situations). Accordingly, any use of such communications should include added security measures and/or minimal disclosure of information about the nature of the case or agency/organization.

Coordination and Collaboration With Other Providers

PROGRAM STANDARD 2.5: A written guideline describes program procedures for communication and collaboration with other providers.

Commentary: The guideline may be in the form of formal policies or procedures or might derive from interagency contracts and/or protocols. Programs can enhance effectiveness by establishing relationships with other programs/providers in the community. Relationships with other victim service programs and programs outside of direct victim services are crucial to enhancing overall services; these relationships ensure that referrals are based on accurate and up-to-date knowledge of available services, and they are an ongoing channel for exchanging suggestions about how the program and outside sources can work more effectively together. These relationships may be initiated in person or by letter, phone call, or other communication.

Whenever possible, written protocols and interagency agreements are to be established for coordinated community responses to victimization. Such cooperative agreements can advance common goals across programs in the community. Programs may want to have interagency agreements formalized and signed by those in authority or by the top executive of the agency (executive director, chief of police, etc.) to ensure compliance and to demonstrate commitment to the interagency agreement. Interagency agreements should include

- Confidentiality policies.
- Identification of which program is the first responder to a call for service by type of service needed.

- Definition of roles and relationships.
- Communication links for exchange of information between agencies (to ensure prompt and appropriate response).
- Referral procedures between agencies.
- Provision of backup support for community crises and other unforeseen circumstances.
- Responsibilities for recordkeeping and reporting within coordinated networks of responders.
- Name and/or position of the provider to be contacted if protocol is violated.

The program is encouraged to initiate and maintain regular planned exchanges with representatives of educational institutions, justice agencies, and others regarding the program's goals and objectives, training services, direct services, and other issues as they arise. Networks might include state coalitions (domestic violence, sexual assault, general victimization), victim assistance groups, attorneys general's offices, state compensation offices, law enforcement victim service programs, prosecution-based programs, corrections, probation and parole, juvenile justice, medical providers, mental health services, social services, child and adult protective services, campus victim service programs, school-based programs, tribal programs, substance abuse counseling services, faith-based victim service programs, and other groups in the community. Cross-training is especially encouraged for victim assistance providers and other professionals when they work closely with one another or when provision of services requires sharing a work area (e.g., when a victim assistance provider visits a police crime scene or a hospital emergency room).

Community Education/Outreach

PROGRAM STANDARD 2.6: The program conducts ongoing education and outreach in the community, as demonstrated through a written guideline describing procedures or through clear, documented evidence of efforts within the past year. Elements might include, as appropriate to program goals,

- Prevention/education.

- **Training for other professionals.**
- **Public relations.**
- **Social change advocacy.**

Commentary: Programs may be prohibited by funding sources from engaging in some of the listed activities (e.g., some funds cannot be used for prevention) and many funders specifically prohibit lobbying (e.g., proponent/opponent testimony on legislation). If a description of education activity is not provided in the form of a written guideline, programs are expected to produce clear, compelling evidence that this standard set by the funder has been satisfied. Documented evidence should be focused on education and outreach, and might include educational materials, training brochures, press releases, videotaped community-awareness events, or other documentation that clearly demonstrates active education and outreach activities.

Victim service programs can be more effective if their presence is known in the community and if they show a commitment to the welfare of community members. Thus, beyond intervention to address victimization that has already occurred, programs ideally deliver information on primary prevention, risk reduction, and how to access services and report crime/victimization.

Prevention/education includes planning and implementation of awareness events (e.g., vigils, walk-athons) and also presentations to the public addressing issues such as risk reduction, how to report crime, services available for crime victims and trauma responses and coping. Prevention education can be particularly helpful for very young, very old, or at-risk populations, and for those experiencing a turning point in their lives. Programs are to give particular consideration to education at schools and for vulnerable or underserved populations (e.g., elderly, ethnic minority).

Educating other service providers about the scope of victimization helps to enhance the professionalism of those whose work affects victims of crime (e.g., dispatchers, police, medical providers, clergy, funeral directors, psychologists, social workers, substance abuse counselors) in understanding and in meeting the needs of victims and their significant others.

Public relations may include press releases, public service announcements, media interviews, meetings with

newspaper reporters and editorial boards, and meetings with broadcast media reporters and producers.

Social change advocacy can be used to effect change within one's own organization or may be used outside of the program to effect policy/procedures in other systems. Such advocacy may be directed toward improving an agency's or institution's response to those whose lives have been impacted by victimization. Social change advocacy, for instance, can be used to encourage justice systems to respond consistently to the needs of those victimized by violence and to hold offenders accountable.

The extent of program involvement in education and outreach will be such that the program is viewed as a vital member of the community. The development of education and outreach methods should be guided by and reflect the diversity and character of the community. For example, written and broadcast service information might be made available for non-English speaking populations to reflect the diversity of the community.

Section III: Direct Services

General Victim Services

PROGRAM STANDARD 3.1: A written guideline gives a general list of individual victim services provided by the program, including descriptions of any guidelines on the timing and duration of services.

Commentary: Individual victim services are those directed toward the well-being of an individual victim (as opposed to social change advocacy directed toward systems change). Individual victim services may be provided in either individual or group support settings, and can include information and support provided by peers and professionals.

Some programs have guidelines for the onset of services (e.g., within 48 hours of the crime; after a traumatic event). Some also have limitations for duration of service (e.g., 30 days in shelter, 6 months of service if program involved is not prosecution or clinical). Although such guidelines may be helpful, they can be problematic if rigidly enforced or if guidelines supplant good case management and supervision.

As appropriate to the goals and objectives of the program, it is highly recommended that general program services include, with the victim's consent,

- General information on victimization.
- Safety planning.
- Information on prevention and risk reduction (unless prohibited by policy).
- Advocacy or support on behalf of crime victims.
- Assistance with victim compensation applications and restitution.
- Intervention with creditors, landlords, and employers.
- Intervention with medical and mental health providers (especially in cases involving forensic examination, family violence, or concern about HIV).
- Assistance with transportation to services.
- Assistance with protective relocation or shelter.
- Assistance with referral for crime scene cleanup.
- Assistance with identification and transportation of body and with funeral arrangements.
- Information on administrative or justice-related case proceedings.
- Referrals to mental health services, substance abuse services, social services, and legal services.
- Assistance with document replacement (e.g., birth certificate, I.D.).
- Assistance with arrangements for property repair.

PROGRAM STANDARD 3.2: A written guideline outlines resources and procedures for providing information on justice interventions.

Commentary: Although programs vary in their involvement in criminal, juvenile, civil, tribal, or other justice proceedings, basic guidelines should be in place for providing information and referral. Programs should maintain a list of local justice agencies and contact people in each county where services are provided. A list of legal referrals, including pro bono resources, may also be considered; programs should examine liability issues associated with such referrals. Programs are

encouraged to maintain resources on current laws, justice procedures, and other pertinent information. When victims want to pursue civil/criminal justice remedies, advocates are to help victims connect with appropriate resources. However, particular caution should be taken by the program to outline the distinction between legal advice and legal information. The program should strictly monitor and prohibit staff from practicing law or providing legal representation if they are not licensed to engage in such legal practice.

PROGRAM STANDARD 3.3: A written guideline outlines resources and procedures for addressing victim crisis situations.

Commentary: Crisis situations may occur in any victim service setting, and programs are to have a plan in place for addressing such situations. If the program is a first responder, this guideline clearly outlines training and debriefing for crisis intervenors and the crisis intervention model. The model might address

- Identification of issues surrounding crisis.
- Identification of physical and psychological barriers to safety.
- Assistance identifying and evaluating options.
- Assistance developing an action plan.
- Provision of resources and referrals for ongoing support and services.

Crisis intervention services should be directed toward deescalating a situation, establishing physical and emotional safety, and reinforcing the victim's ability to make choices regarding possible courses of action. If crisis intervenors are not licensed mental health professionals, the intervenors are to be aware of resources for mental health backup or consultation. Programs that are not first responders should have procedures for arranging emergency support services, reporting situations to appropriate responders, or taking other action to help the victim connect with immediate aid.

As appropriate, programs are encouraged to develop written policies addressing procedures for unusual but foreseeable occurrences relevant to the program's mission (e.g., inmate escapes, undelivered notifications, community disasters, civil disturbances).

PROGRAM STANDARD 3.4: A written guideline describes procedures for addressing imminent danger, stalking, and intimidation of victims/witnesses.

Commentary: Programs should have strong policies for directly addressing or providing referrals to address imminent danger, stalking, and intimidation of people served or program staff. This includes arranging appropriate assistance to those who have been threatened or who, in the judgment of the program, express specific, credible reasons for fearing intimidation or further victimization. Appropriate assistance may range from arranging physical protection (relocation, protective custody, shelter), to safety planning, assisting with stalking diaries, or offering words of encouragement.

Programs are encouraged to discuss stalking/intimidation policies with victims at the outset of service. In this way, providers can obtain consent to contact law enforcement, prosecutors, probation/parole officers, or others who can take specific steps to enhance safety for the victim. Together, the victim assistance provider and appropriate authority can then contact the victim informing him/her of danger and discussing available options. In advocating for the victim across agencies (e.g., a nonprofit provider acting on behalf of the victim regarding police protection or court orders of protection), the program might encourage that reasonable precautions be taken to protect the victim from intimidation or harm.

PROGRAM STANDARD 3.5: A written guideline outlines written information to be provided to the victim on initial contact and/or throughout the service process.

Commentary: The guideline defines material to be provided to the victim in forms, letters, brochures, checklists, reference cards, or other written form. Because it is difficult for traumatized individuals to retain information mentally, victim assistance providers might use discretion in determining how much information to provide at a given time. Information might include

- Victim rights.
- Confidentiality policies and procedures.
- Services (e.g., counseling, medical, compensation, restitution).

- Subsequent steps of case processing and handling.
- The case number and contact person.
- Contacts for future crisis or emergency.
- What to do if threatened or intimidated.
- Safety planning.

Documentation and Confidentiality

PROGRAM STANDARD 3.6: A written guideline describes the program's procedures for documenting service provision, including

- Dates of service provision.
- Staff member providing service.
- Individuals to whom services were provided.
- Types of service or referral provided.
- Content of interaction.
- Provisions for future or ongoing service.

Commentary: Confidential written records are to be kept documenting all of the above. Because confidentiality of records is typically not protected by statute for victim assistance providers, programs maintain discretion over how much to document (e.g., appropriate "content of interaction" may vary depending on program goals). Programs must carefully consider limitations on confidentiality before deciding specific points to document. Many programs document a description of the crime, problems created by the crime, description of an action plan, followup and referral services, and method or location of service (e.g., phone, in home, e-mail). Programs are encouraged to document provided referrals, even if direct services were not provided to victims. Documentation of victim demographics (e.g., age, race/ethnicity, sex, gender) may be helpful for program evaluation. Programs should maintain records consistent with local, state, federal, and program regulations/laws.

PROGRAM STANDARD 3.7: A written guideline describes the program's procedures for storing and maintaining records, including

- Types of records to be maintained.

- **Short-term and long-term storage of records.**
- **Destroying records.**

Commentary: The guideline establishes procedures for central records, computer files, backup, and storage. Computer files should be backed up according to a regular schedule and are to comply with record retention laws or regulations. Files, tapes, disks, or drives are to be stored in a secure facility or area. If these are not recycled, methods of destruction are to ensure that data are not retrievable from the discarded materials. As applicable, the guideline outlines procedures for distributing reports, including which reports are routed where (e.g., for storage, followup, distribution outside of the program).

PROGRAM STANDARD 3.8: A written guideline describes procedures for maintaining confidentiality of records, including

- **Clearly defined terms/limits of confidentiality.**
- **Disclosure of these terms to those served and to paid and unpaid staff.**
- **Confidentiality agreement forms between those served and providers.**
- **Confidentiality agreements between staff and the program.**
- **As applicable, policies/forms on confidentiality of interagency communications.**

Commentary: Confidentiality is rarely absolute and should be viewed in the context of state statutes on privileged communications and any overarching program policy (e.g., for law enforcement agencies). Special considerations include whether records are subject to subpoena and whether destruction of records is considered destruction of evidence.

To promote confidentiality of communication between the victim and a victim assistance provider, the program is to have a written confidentiality policy. The confidentiality policy should allow for ample supervision and consultation. Staff are to make reasonable efforts to limit access to victim information to appropriate program staff whose duties require access. In

communications among providers involved in the case, discussion of confidential case material should not be conducted in public areas. All client information is confidential even after the staff member leaves the program. Any violation of confidentiality by a staff member or former staff member may result in dismissal and/or legal action by the program or by the person served.

Written records are to be maintained in a secure storage area that is accessible only by paid staff and authorized volunteers. All paid and unpaid staff with access to records are to have a signed confidentiality agreement on file with the program. Such agreements must be secured before providing access to records by people conducting site visits, program monitoring reviews, funding/grant source compliance reviews, and/or financial audits.

Limitations on confidentiality are to be fully disclosed to those served in language they can understand and discussed at the onset of service provision. Programs should make efforts to keep confidentiality agreements simple, clear, and appropriate to the service setting.

PROGRAM STANDARD 3.9: A written guideline describes procedures for reviewing and revising program policies.

Commentary: Program practices and policies (e.g., interagency protocols, staff policies, job descriptions) should be reviewed on a regular basis with the effective date clearly marked. On revision of policy, programs are encouraged to put changes in writing and distribute these to all affected staff and other pertinent people prior to implementation of changes.

Section IV: Administration and Evaluation

General Administration

PROGRAM STANDARD 4.1: If the program is governed by a board of directors or guided by an advisory board, a written guideline provides a reasonable description of the board's

- **Compliance with state laws/regulations.**
- **Roles and responsibilities.**

- **Procedures for review/revision of bylaws.**

Commentary: Routine board activities usually include meeting, planning, fundraising, evaluating program functioning, and setting policy. The board should be provided with regular reports (e.g., monthly or quarterly) documenting program functioning. The board should be involved in making any policy that will affect personnel, budgetary, or program development matters. The board is encouraged to meet regularly, record minutes of meetings, and review the annual report. Bylaws are to be reviewed regularly, with adoption date clearly recorded on the bylaws.

Nonprofit programs are encouraged to include in the guideline procedures for maintaining equitable board membership. Government agencies are encouraged to establish advisory boards and, likewise, outline procedures for maintaining equitable board membership. The governing and/or coordinating body of the program should generally reflect and contain representatives of the racial and ethnic composition of the geographic area served. Some boards choose to include victim representation.

PROGRAM STANDARD 4.2: As applicable, the program has a fiscal management plan, including

- Documented compliance with fiscal and audit requirements.
- Maintenance of appropriate insurance policies.
- Maintenance of a bookkeeping system.

Commentary: This standard applies to programs that have their own fiscal management systems. The standard may not be applicable to some programs if they are located in a state or county agency. All programs are encouraged to remain aware of budgets and monitor expenses, even if the program does not have control over final appropriations or expenditures.

Programs generally are to have fire, theft, building, professional liability, and workers' compensation insurance. Programs that provide transportation to those served may require auto insurance, including coverage for riders. Bookkeeping systems might include expenditures, receipts from all funding sources, accounts receivable from those served, accounts payable to vendors,

payroll, tax/benefit payments, and salary/benefits histories for staff. It is encouraged that fiscal records be kept current within approximately 30 days, and annual audits are recommended. It is also suggested that the budget be monitored quarterly for substantial variance between projected and actual expenditures. A retention policy for records should be in writing.

PROGRAM STANDARD 4.3: A written guideline describes program procedures for maintaining sufficient, continuous, and stable resources to achieve its specified goals.

Commentary: Programs are encouraged to document procedures for ensuring that staff and resources are adequate to meet program goals. This may include plans for volunteer recruitment drives, staff development programs, annual fundraising efforts, grant writing, and relationships with multiple funding sources. If staff and resources are inadequate for achieving goals, programs should consider refining goals to more realistically reflect the program's capacity.

Personnel Policies

PROGRAM STANDARD 4.4: A written guideline includes job descriptions for all administrative and program staff (paid and volunteer), including criteria for training/experience and (when applicable) placement within the organizational chain of supervision.

Commentary: Within these descriptions, it is important to understand not only the duties of individuals *within* their roles but also the relationships *between* individuals in different program roles. For instance, management responsibilities might outline the relationship of the program director to the board and relationship of the director to staff and to those served.

To facilitate understanding of program structure and the roles of administration/staff, an organizational chart is recommended. The chart shows flow of responsibility and accountability for program action and helps to clarify duties of program actors (consistent with job descriptions).

In placement of staff, programs should be in compliance with any state laws or regulations regarding background checks for people who provide direct service to minors.

PROGRAM STANDARD 4.5: A written guideline describes rationale and procedures for staffing, including workload distributions and staff-client ratios.

Commentary: Staff size and composition should be fitting to the program mission, the number and type of services, number of people served, typical victim needs, and staff responsibilities.

In determining staff assignments, workload calculations might account for time needed to supervise volunteers, attend community meetings, perform administrative tasks, conduct research or training, perform basic documentation, do program assessments, and engage in professional development activities. Continuity of leadership requires that a sufficient portion of the chief administrator's workload over a calendar year be devoted directly to program administration. Programs are to have a sufficient infrastructure in place to ensure the mission can be accomplished; accordingly, agencies may need to assign administrative support staff to the victim service program.

PROGRAM STANDARD 4.6: A written guideline describes the program's schedule of salaries and benefits for paid and unpaid staff.

Commentary: The program's philosophy on benefits drives its policy. For instance, certain nonhierarchical philosophies may not support benefits such as seniority-based salary increases. The written schedule of salaries and benefits should be reviewed by management and/or the board on a regular basis and should meet regional standards for salaries and benefits; some nonprofits may choose to establish a range of salaries with the board to keep individual salaries confidential. Whenever possible, programs are encouraged to offer salaries comparable to other jobs requiring similar background and time commitments. Programs are encouraged to provide pay increases based on merit and rises in cost of living. A fringe benefit package is recommended, including basic health insurance (including mental health counseling), unemployment and workers' compensation benefits, vacation time, and customary holidays. Some programs include expanded health benefits (e.g., dental care, eye

care, disability insurance) and pension/retirement plans.

Programs are also encouraged to develop provisions for assisting staff with ethical and/or legal issues that derive from work-related dilemmas. This might include providing legal counsel to a staff member faced with ethical/legal conflicts, developing procedural guidelines for handling conflicts, or otherwise arranging for staff to be supported by the organization when faced with a difficult situation.

PROGRAM STANDARD 4.7: A written guideline describes the program's procedures for assessing and maintaining an environment of nondiscrimination.

Commentary: Programs are to make specific, continuous efforts to ensure equity to staff in recruitment, retention, promotion, assignment, and salaries, including direct service staff, administrative staff, support staff, and volunteers. Programs are encouraged to describe how their components (staff composition, resource allocation, program leadership, speaker series and special programs, research, and other initiatives) reflect understanding of and respect for diversity. Ongoing efforts should be made to enhance cultural competence of staff.

PROGRAM STANDARD 4.8: A written guideline prohibits sexual and other forms of unlawful harassment in the workplace and provides a means by which harassment can be reported, including a means by which it can be reported if the offending party is in the complainant's chain of supervision.

Commentary: Harassment of any program staff by anyone employed by or contracted by the program has the effect of unreasonably interfering with an individual's work performance and/or creating an intimidating, hostile, or offensive work environment. Programs need to have strong policies that prohibit such conduct, immediate and thorough investigation of allegations, appropriate disciplinary action in substantiated cases, and efforts to make paid and unpaid staff aware of their responsibilities and the legal issues involved.[†]

[†]The Commission on Accreditation of Law Enforcement Agencies (CALEA) has requested that specific adaptations of CALEA standards be individually noted. Throughout this section, the cross symbol will be used to denote all Victim Assistance Program Standards that rely heavily on original CALEA standards. These include 4.8, 4.10, 4.15, 4.16, 4.17, and 4.18. Persons wishing to further adapt these standards in any published source are advised to refer to CALEA's (1998) *Standards for Law Enforcement Agencies*, Chapters 25 and 26.

Staff Conduct

PROGRAM STANDARD 4.9: A written guideline describes procedures for orienting paid and unpaid staff to personnel policies and policies on supervision.

Commentary: New program staff are to receive a thorough orientation on program policies, and policies are to be readily available to staff in handbooks or some other written or electronic form.

PROGRAM STANDARD 4.10: A written guideline specifies code-of-conduct guidelines for on-the-job performance.

Commentary: This guideline addresses compliance with program policies; unbecoming conduct; use of alcohol and other drugs; acceptance of gratuities, bribes, or rewards; abuse of authority; and proper care and maintenance of equipment. Prohibitions (e.g., any limitations on physical attire) should be specific, whereas approved behavior (e.g., courtesy) may be stated in general terms.[†]

Staff Development and Training

PROGRAM STANDARD 4.11: A written guideline describes training requirements for program staff (paid and volunteer), including

- A minimum of 20 hours preservice training for all new staff whose positions will require access to confidential communications or client information.
- An additional 20 hours of training for new staff, documented within the first calendar year of service in the program.
- A minimum of 12 hours of ongoing professional development each calendar year of service.
- A clear outline of training content, including hourly requirements per topic.
- Approved methods of training delivery, including curriculum content and trainer qualifications.
- Criteria for documenting completion of training requirements.

Commentary: These hourly requirements are derived from examination of numerous state and national training programs and from feedback from victim assistance providers in the field. The requirements are intended to promote quality of service and to be reasonable for achievement by a variety of individuals, agencies, and locales. Some states may have statutory requirements that exceed these standards.

The standard of 20 preservice and 20 service-onset training hours is directed toward new staff with little or no experience in victim services, whereas ongoing professional development is intended for all staff. Program administrators ultimately have discretion over which staff are experienced enough to opt out of the initial 40 training hours. Suggested criteria include 3 years of service provision (including letters of reference) and/or proof of prior receipt of 40 hours of training in victim services. Approved training sources might include state training academies, regional and national conferences, professional workshops and seminars, college and university programs, independent study, internships, and other sources. Programs are encouraged to recognize the multiple pathways through which competence may be achieved, including formal education, professional training, work experience, and personal experience.

Programs are encouraged to consider a range of training topics to build necessary knowledge and skills for both direct service and coordination of service networks. Programs may exercise discretion in prioritizing topics; the accompanying Competency Standards for Victim Assistance Providers may be helpful in this respect. Suggested topics include (as appropriate to program goals)

- Overview of the community's victim service programs.
- History of victims' movements and theories of victimization.
- Mental, physical, financial, social, emotional, and spiritual concerns of victims.
- Crisis intervention.
- Intermediate and long-term services.
- Victim trauma, grief, and loss.

- Crime and justice systems.
- Victims' state and federal rights.
- Victim expectations and involvement in justice.
- Compensation, restitution, and civil reparations.
- Victim assistance ethics.
- Documentation and confidentiality.
- Diversity and values clarification.
- Personal safety.
- Communication and conflict management.
- Property crime.
- Assault.
- Domestic violence.
- Sexual assault.
- Drunk-driving death and injury.
- Homicide/suicide.
- Death notification.
- Child victims.
- Working with the media.
- Burnout, compassion fatigue, and vicarious traumatization.
- Office and case management.
- Interagency roles and referral.
- Prevention, outreach, and social change advocacy.
- Supervised internship.

Preservice training is ideally structured to assist new staff in assessing their aptitude and motivation for working in victim assistance. Although preservice is intended to occur before the victim assistance provider begins work, some exceptional circumstances may make this unworkable. If preservice training is not

possible, the training is to be delivered as soon as possible after the onset of service, with new staff working only under supervision.

All programs are to provide a clearly designated period of supervised performance (on-the-job training) as new providers begin service delivery at the program. This supervision is different from preservice training, in that on-the-job training is typically less focused on conceptual knowledge and more concentrated on rehearsal, application, and refinement of applied skills. On-the-job training includes interning with experienced staff, preferably on at least 10 actual or simulated cases. The program is encouraged to have a structured means for evaluating staff performance during the internship, and for providing feedback to enhance performance appropriate to program goals.

Ongoing professional development (e.g., continuing education, inservice training, cross-training) should include a designated number of hours devoted to topics including victims' rights legislation, promising practices, technology, and other issues of contemporary relevance.

Programs should take steps to ensure that training for staff is of good quality. For instance, before accepting outside training as fulfillment of required training hours, programs should evaluate the quality of these outside sources. When possible, individual courses should demonstrate consistency among course objectives, course outlines, and participant materials. Programs may want to assess whether underlying theories and philosophies in training content are consistent with program goals. Ideally, methods of training delivery support cognitive, affective, and experiential components of learning appropriate to the course and to the program's goals. Training programs are encouraged to show that those receiving training can reasonably synthesize, apply, and demonstrate what they have learned. Furthermore, programs are strongly encouraged to develop routine procedures for incorporating new ideas into training (e.g., biannual review and revision of curricula, ongoing supplementation of course materials).

The program should identify the credentials it requires to qualify trainers, including expertise in the content area, knowledge of adult education, and, to the extent possible, applied experience in the victim assistance field.

Programs are to retain records documenting the number of hours and type of training that each staff member receives. Programs are responsible for ensuring that individuals transferring from another program have received comparable training.

Supervision

PROGRAM STANDARD 4.12: A written guideline describes procedures for supervision of staff, including, as applicable

- Chain of supervision.
- Hourly/weekly requirements.
- Nature of supervision.
- Varying levels of supervision depending on work experience, training, and position in the program.
- Procedures for staff review.

Commentary: Supervisory duties include supervising staff, arranging training, scheduling, and assigning job duties of staff (e.g., leave, holiday, and overtime approval). Supervision also includes ongoing assessment of burnout, compassion fatigue, and vicarious traumatization, with arrangements for support when these conditions are detected.

In terms of direct supervision, the beginning service provider requires regular case consultation and supervision. For instance, some programs provide new staff with about an hour of supervision for every 15 hours of face-to-face contact with people served. More or less supervision may be needed, depending on agency size and caseload. Additional consultation may be required when the provider encounters difficult issues in direct service or when the supervisor perceives problems in the provider's handling of a situation. Staff meetings and individual consultation should be scheduled on a regular basis, preferably no less than twice per month. Supervisors are to be readily accessible by phone, electronic communication, or in person. It is encouraged that staff members receive public recognition for superior work, and any reprimand delivered confidentially.

Staff performance evaluations are to be prepared regularly (some programs schedule these annually or

semiannually). Programs are encouraged to allow staff members a role in setting their own performance objectives and incentives. Staff are to be provided with clear expectations and objective feedback on performance.

PROGRAM STANDARD 4.13: As applicable, a written guideline describes procedures for volunteer management, including

- The program's philosophy on volunteer participation.
- Recruitment and placement.
- Job descriptions.
- Training and supervision.
- A system of recognition and reward.
- Recordkeeping on volunteer participation.

Commentary: If management and supervision procedures differ for paid staff and volunteers, programs should supplement paid staff guidelines with guidelines for volunteers. These might include written policies and procedures addressing the recruitment, screening, training, supervision, and/or dismissal of volunteers who provide both direct and indirect services. Such policies will clarify the roles and contributions of volunteers in the program's provision of services, with specific detail addressing how, when, where, and the frequency with which volunteers will be used. These policies might include special provisions for student volunteers, whose service is generally provided in exchange for educational credit. Programs are encouraged to explore liability issues associated with use of volunteers.

Recruitment should receive some publicity, including media coverage or outreach to civic groups, churches, and educational institutions. Job descriptions are to be provided to volunteers when they are accepted in the program. All volunteers are to be provided with preservice and inservice training. For quality service delivery, volunteers should have the same training requirements and opportunities as paid staff (see Program Standard 4.11). Though exceptions because of time and resource limitations are foreseeable, programs are nevertheless encouraged to promote professional development for volunteers to the extent possible. Volunteers and paid staff routinely interact, and volunteers should

be actively recognized by paid staff for their contributions. Many programs sponsor annual recognition days during which volunteers are given awards, certificates, or other formal means of recognition for service.

Programs are to maintain a confidential file for each volunteer, including a signed confidentiality statement and a record of all training completed by the volunteer.

PROGRAM STANDARD 4.14: A written guideline describes program procedures for provider stress assessment and management.

Commentary: Everyday stressors of providing support to crime victims can take a substantial toll on the provider. A good plan for stress management will enhance morale and reduce burnout and staff turnover. The plan can be simple and can include informal opportunities for staff to discuss cases, concerns, and their own reactions to everyday events. Smaller programs might have staff keep stress diaries or write out strategies for personal coping. More elaborate plans might include weekly debriefing, scheduled days away from work, scheduled staff time with outside counselors, stress-management seminars, staff retreats, exercise and health plans, or stress-reduction techniques. The work environment should allow flexibility and opportunity for creativity among staff.

Rewards and Discipline

PROGRAM STANDARD 4.15: A written guideline describes program procedures and/or criteria for recognizing and rewarding staff for good performance.

Commentary: A consistent way of recognizing and rewarding staff is necessary. Compensation may include additional time off with pay, monetary supplement, and/or sabbaticals. A system for recognizing volunteer performance might also be in place. Programs that present regular awards for meritorious services should ensure that criteria are established for these awards. Programs should consider whether civil service rules or collective bargaining agreements limit ways in which staff may be recognized.[†]

PROGRAM STANDARD 4.16: A written guideline describes the discipline system, including recordkeeping, due process, and appeals for disciplinary actions.

Commentary: The disciplinary system should be a positive process directed toward education and development of staff. The system is to be based on confidentiality and fairness to the staff person and the program and should stimulate staff morale and motivation. The system might include training, rewarding, and advising as well as a means of establishing accountability. Finally, the guideline is to be used to establish consistency in any punitive actions.

The written guideline provides recommendations for alternative disciplinary actions, including a progressive sequence of action for multiple violations. For hierarchical programs, the guideline might describe the role and/or authority of firstline supervisors in the disciplinary process. These supervisors often have the best opportunity to observe staff conduct and to notice instances when disciplinary actions may be warranted. Firstline supervisors also have the opportunity to understand the personality traits of the staff under their supervision and to determine the most effective methods of discipline. In theory and practice, the severity associated with disciplinary advisement increases with the position of the advisor in a hierarchically structured program.

The guideline requires written records of disciplinary actions (and outcomes) and should include where the records are to be filed, how long they will be maintained, and under what circumstances they will be purged. As applicable, a system of appeals is to be available for disciplinary action, with the guideline describing initiation procedures, timeframes, method of recording, and scope of the appeal process. Appeals should go to a higher level of authority for review.[†]

PROGRAM STANDARD 4.17: A written guideline describes procedures for termination of staff, including procedures for notifying staff and any postemployment review.

Commentary: If staff misconduct or loss of funding or other circumstances result in dismissal, programs are to provide the staffperson with

- A written statement citing the reason for dismissal.
- The effective date of the dismissal.

- **A statement of the status of fringe/retirement benefits after dismissal.**

Program administrators are encouraged to provide exit interviews, during which terminated staff may voice concerns (these are to be documented). Such interviews not only provide a forum for voicing differences between staff and program philosophies, but also help programs to recognize inequities and refine staff policies and/or supervision techniques. Programs should consider whether civil service rules or collective bargaining agreements limit ways in which termination can be carried out.[†]

Negotiation and Grievances

PROGRAM STANDARD 4.18: A written guideline describes the program’s procedures for grievances filed by staff, including (as applicable)

- **Matters that are grievable.**
- **Levels in the program or government to which the grievance may be filed and/or appealed.**
- **Description of the type of information to be submitted when filing a grievance.**
- **Procedural steps and time limitations for each level in responding to grievances and appeals.**
- **Any criteria for staff representation (e.g., on committee, legal counsel).**
- **Who among program staff coordinates grievance procedures.**

Commentary: Since a formal grievance procedure is designed to resolve differences between the staff member and the program, it follows that such procedures should be written in clear, concise terms. A written statement of the grievance and the facts on which it is based, a written allegation of the specific wrongful act and harm done, and a written statement of the remedy or adjustment sought are basic information that should be required from a grievant. A form may be designed for this purpose that includes spaces for noting significant times, dates, and actions taken relative to a grievance. Once the grievance has been filed, it is to be handled formally. Each level is to acknowledge receipt by noting time, date, and person receiving the grievance. The facts or allegations should be carefully analyzed and

affirmed or denied in writing. A legitimate attempt is to be made at each level to resolve the grievance rather than merely passing it on to the next level. If applicable, remedies or adjustments are to be identified in writing. The procedure should include an appeal process that goes to a higher level or authority for review. The guideline may identify the levels of appeal, the time limits within which each level should respond, and the final level of authority.

The guideline should specify who is responsible for coordinating grievance procedures, including maintenance of records. The sensitivity of such records dictates additional precautions in controlling access to them. Records of all grievances should be analyzed annually by the program administrator or board of directors. If analysis reveals a trend in filed grievances, steps may be taken to minimize the causes of such grievances in the future.[†]

PROGRAM STANDARD 4.19: A written guideline describes mechanisms for victims to lodge complaints regarding violation of rights, poor treatment by staff, or lack of appropriate service response.

Commentary: Information on complaint procedures is available to persons served in general program materials or upon request. Staff might also follow specific procedures for handling complaints that arise in the course of service. Some states have specific grievance mechanisms for victim complaints. Other possible referral sources include the highest program authority (e.g., agency director), the funding authority, the state coalition, or the state ombudsperson (if applicable).

Program Evaluation

PROGRAM STANDARD 4.20: A written guideline describes a plan for regular program evaluation, including

- **Summary data on victims served and services rendered.**
- **Performance-based assessments of staff’s service delivery.**
- **Measures of victim satisfaction with services.**
- **Periodic assessment of community service needs.**

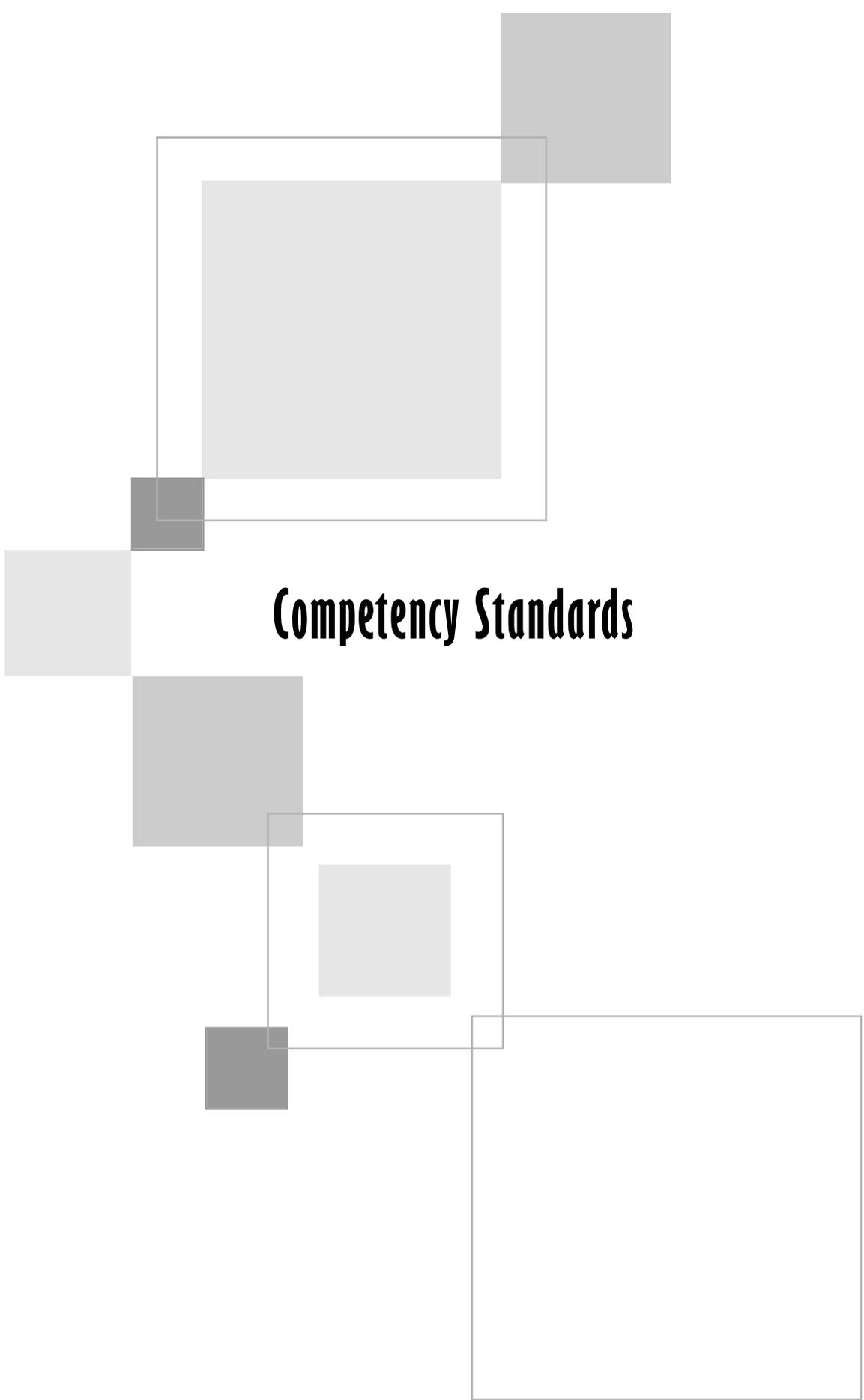
■ **Outcome-based assessment of victim service use (resources permitting).**

Commentary: Routine recordkeeping is to include a data management system for general measures of number of persons served and type and frequency of services rendered. The system can be used for descriptive statistics (summary data) and allow for efficient retrieval of data needed to measure the program's performance in relationship to its stated goals, objectives, and funds received for services. Supervision, regular staff reviews, and written performance evaluations can be used to assess and enhance quality of service delivery. In addition, client satisfaction surveys might be used—at a minimum—on a semiregular basis. "Satisfaction" may be conceptualized broadly, as appropriate to program goals (e.g., client had needs met, client thought program beneficial, client willing to use service in future). Surveys, interviews, or other measures can be implemented several times each year to spot check victim satisfaction with service delivery and to identify areas for service refinement. Other types of evaluation may require greater resources.

To keep services in step with evolving community needs, the program is encouraged to conduct a regional needs assessment every few years (or maintain access to current data). If program funding and expertise are insufficient for an extensive needs assessment, programs may wish to recruit researchers from nearby universities and colleges. Students often fulfill internship, thesis, or dissertation requirements through research, and may be helpful in developing data systems, designing evaluation methodology, collecting data, performing analyses, and preparing reports. Furthermore, many national and state-based agencies (e.g., law enforcement divisions, victims' fund administrators) have research and statistics centers or training and technical assistance centers that can either assist programs with evaluation or direct programs to regional resources.

Elements for consideration in a needs assessment include extent and types of victimization in the program's service area, an inventory of informational and service needs of victims, and other services and providers in the service area. These assessment measures can reveal gaps and duplication in service delivery, unfulfilled community needs, and needs that are appropriate for the program to meet.

Each of the above types of evaluation is fairly routine and may be regarded as integral to quality program performance. Additional measures (encouraged for programs that have the available resources) include cost-effectiveness analyses and outcome-based measures of victim service use. Though extensive evaluation can be costly, program administrators are encouraged to consider devoting appropriate time and funding to evaluation tasks.



Competency Standards

Competency Standards for Victim Assistance Providers

Competency Standards for Victim Assistance Providers describes core competencies that are necessary for delivery of quality victim services. These competencies are common to a number of different types of victim assistance providers and are intended to apply to a broad variety of victim service settings.

Each competency standard has two components:

- **Standard statement.** The statement is phrased as a competency standard (see Glossary of Terms), which describes work-related abilities necessary for provision of service.
- **Standard elements.** Elements include knowledge (e.g., “describe,” “recognize”), attitudes (e.g., “value,” “respect”), and skills (e.g., “apply”) that, taken together, constitute the required competency.

Competency Standards for Victim Assistance Providers describes *what* should be accomplished by the individual, yet allows discretion on *how* to achieve that competency. Victim assistance providers may achieve competency through personal experience, on-the-job performance, training and formal education, or in other ways.

Competency Standards for Victim Assistance Providers consists of attitudes, knowledge, and skills. Educators and trainers can develop curricula, training packages, and other professional development opportunities to help victim assistance providers meet these standards. Victim assistance providers can assess their own progress toward competencies, and administrative staff can use the competency standards to identify inservice training and professional development needs within victim service programs. To promote staff development, programs should provide opportunities for staff to obtain training, education, and other professional skill in competencies for which staff are evaluated.

Although all competencies are likely to improve with on-the-job performance, some (e.g., those on coordinating in Section II and on self-awareness in Section IV) are likely to require greater practice and experience. Therefore, assessment of these competencies should not be undertaken for several months, until the victim assistance provider has the opportunity to achieve competency.

Section I: Scope of Services

COMPETENCY STANDARD 1.1: The victim assistance provider adheres to legal, ethical, and behavioral standards of conduct in the helping relationship.

Elements include the ability to

- Describe major laws or regulations related to one's own provision of services.
- Describe basic legal, ethical, and behavioral standards related to one's own provision of services.
- Value the need to comply with regulatory and professional expectations, including those for conduct and ethical decisionmaking.
- Apply strategies for organizing one's workload and case handling to meet designated responsibilities.
- Respect boundaries of the victim assistance provider's role, including distinguishing one's personal feelings from professional responses, and promoting empowerment for victims rather than "rescuing" them.
- Describe, in lay terms, capabilities and limitations of the victim assistance provider's role for crime victims (as these are relevant to persons served).

COMPETENCY STANDARD 1.2: The victim assistance provider describes the overall services of the victim assistance system in the geographic area served.

Elements include the ability to

- Describe purposes, goals, and interdependence of major programs serving victims.
- Recognize that the historical roots of the victims' movement may result in differing ideologies held by victim assistance providers.

- Understand basic practical implications of the statutory rights of victims, including the general parameters of each program's service.
- Value the need to provide accurate, thorough, and unbiased information on available services.

COMPETENCY STANDARD 1.3: The victim assistance provider describes the community's justice systems and their relation to public and private victim service programs.

Elements include the ability to

- Describe, in general terms, the justice systems that serve individuals in the geographic area served by the program (e.g., city, state, tribal, and federal systems for criminal, civil, juvenile, and military justice).
- Describe in practical detail the structure and components of the justice system(s) most closely associated with one's own services (e.g., important procedures or places).
- Describe the key victim-related components of criminal codes and juvenile laws most closely associated with one's own services.
- Recognize the significance of different phases of justice processing, from crime reporting through parole and aftercare.
- Recognize roles that nonprofit and private programs and organizations may play throughout the justice process (e.g., victim assistance, restorative justice).

COMPETENCY STANDARD 1.4: The victim assistance provider describes other service systems that impact victims in the geographic area served.

Elements include the ability to

- Describe key government and community-based programs that provide financial assistance to individuals and families (e.g., compensation programs, aid to needy families, emergency funds).
- Describe key programs that provide health care services to individuals and families (e.g., hospitals, clinics, dentists).

- Describe key programs that provide shelter and housing to individuals and families (e.g., homeless shelters, housing authority).
- Describe key programs that address social welfare of children, families, and the elderly (e.g., social services, child protective services, adult protective services, guardians ad litem).
- Recognize the significance that financial, medical, housing, and social services programs can have in victim resiliency and risk reduction.

COMPETENCY STANDARD 1.5: The victim assistance provider describes the purpose of his/her program and its place within the justice and service systems of the community.

Elements include the ability to

- Understand the organizational structure of the program and its relationship to any overarching boards and agencies.
- Understand basic program policy and procedure.
- Describe the link that the program serves for victims, within the justice system and/or relative to other human services programs.
- Describe, in lay terms, the program's services and procedures for accessing these services.

Section II: Coordinating Within the Community

The development of some competencies in this section will require practice and experience. Accordingly, assessment of these competencies should not be undertaken for several months, until the victim assistance provider has the opportunity to achieve competency.

COMPETENCY STANDARD 2.1: The victim assistance provider coordinates with an array of individuals and organizations to address victim needs.

Elements include the ability to

- Describe a variety of resources for services, referral, advocacy, and outreach.

- Apply strategies for communicating and collaborating with other service providers both within and outside the program.
- Apply procedures for comprehensive case handling, including assessment, planning, linking to resources, monitoring progress, and termination.
- Describe basic aspects of services at referral agencies, including eligibility requirements, hours of service, and contact information.
- Value benefits of multidisciplinary service provision for persons served and for providers.

COMPETENCY STANDARD 2.2: The victim assistance provider collaborates on efforts to improve systems, laws, institutions, and policies that impact crime victims.

Elements include, as appropriate to personal and program goals, the ability to

- Describe social change needs that would support the victim population served by one's program.
- Recognize the need to advocate for social change using terms and concepts that interest administrators, prospective funding sources, the public, and legislators.
- Apply strategies for coordinating community education campaigns, such as serving on speaker's bureaus, distributing brochures and educational materials, talking with media representatives, and conducting outreach to underserved populations.
- Apply strategies for coordinating inservice training for coworkers and/or cross-disciplinary training for other professionals.
- Value the need to transmit one's own learning to others.

Section III: Direct Services

COMPETENCY STANDARD 3.1: The victim assistance provider develops rapport and communicates effectively with victims.

Elements include the ability to

- Recognize basic principles of effective communication, including verbal, nonverbal, and cultural variation.
- Apply basic strategies for good communication, including development of rapport, active listening, and access to resources for translation (e.g., language translators, TTY devices).
- Apply strategies for using verbal and nonverbal communication to de-escalate crisis situations so that assessment and case planning may take place.
- Apply strategies for eliciting case-specific information and assembling the relevant facts for case planning.
- Value the need to communicate as a service provider or supporter, as opposed to eliciting case information as part of an investigation.
- Apply strategies for addressing conflict and moderating one's own verbal and nonverbal reactions to victim communications as needed.
- Value the significance of effective communication in providing services.

COMPETENCY STANDARD 3.2: The victim assistance provider helps victims to identify appropriate resources.

Elements include the ability to

- Identify the effect of crime on victims' lives, including mental, physical, financial, social, emotional, and spiritual impact.
- Describe appropriate service options and how to access each.
- Apply strategies for using flexibility and innovative solutions to address victims' needs.

- Recognize major signs of conditions that influence victim vulnerability or resiliency (e.g., symptoms of mental disorder, trauma reactions, substance abuse).
- Describe appropriate referral resources for addressing those needs that are beyond the scope of one's program (e.g., mental health referrals, substance abuse counseling, child and adult protective services).

COMPETENCY STANDARD 3.3: The victim assistance provider advocates appropriately for individual victims within the organization and the community.

Elements include the ability to

- Describe, in lay terms, what advocacy is.
- Recognize the contribution that advocacy can make toward victim well-being and the effectiveness of interventions.
- Apply strategies for educating nonadvocate colleagues and administrators about the victim assistance provider's role.
- Value the victim's right to self-determination and advocate for victim wants, rights, and needs throughout service delivery (within limits of ethics and program policy).
- Apply strategies appropriate to organizations, systems, and communities in negotiating victim needs.

COMPETENCY STANDARD 3.4: The victim assistance provider assists individual victims to address their traumatic responses to victimization.

Elements include the ability to

- Identify short-term and long-term consequences of and reactions to trauma, including grief and loss and reactions in crisis situations.
- Recognize the range of normal reactions to having been victimized (e.g., anger, self-blame, helplessness).

- Recognize the impact of trauma on victims' abilities to connect to services and to assist in the criminal justice process.
- Understand the general concepts of human development, relationship dynamics, and environmental stressors (e.g., previous victimization, poverty) as these relate to victim response and resiliency.
- Describe services to reduce the negative impact of victimization and to empower victims.
- Apply strategies for effectively responding to victim crisis or trauma, as appropriate to program goals.
- Describe strategies for victim self-care to supplement formal service options.

COMPETENCY STANDARD 3.5: The victim assistance provider uses effective crisis intervention skills when confronted with a crisis situation.

Elements include the ability to

- Understand program policies and procedures for crisis situations.
- Recognize what constitutes a crisis or danger to the person served and/or others.
- Apply "safety and security" strategies of crisis intervention to assess victim concerns about immediate safety and take steps to reduce these concerns.
- Apply "ventilation and validation" strategies of crisis intervention, using active listening to allow and accept the victim's retelling of the event.
- Apply "prediction and preparation" strategies of crisis intervention to help victims identify and plan for potential stressors.
- Apply specific strategies for addressing foreseeable crisis situations (e.g., suicidal persons).
- Recognize exceptions to confidentiality rules in crisis or dangerous situations.
- Understand and apply safety procedures as they apply to dangers affecting staff.

COMPETENCY STANDARD 3.6: The victim assistance provider adequately prepares victims for interacting with justice and service systems.

Elements include the ability to

- Describe, in lay terms, basic victims' rights and how they apply to victims' situations.
- Describe, in lay terms, roles and processes in justice and service systems.
- Identify routes for gathering accurate information on case processes and potential outcomes.
- Apply strategies for preparing victims for involvement in the justice and service processes.
- Apply strategies for helping victims access and fully participate in justice and service systems (e.g., victim services, health services, community services).
- Recognize the significance that justice proceedings can have for victims, both as a vehicle of empowerment and of retraumatization.
- Value the need for realistic expectations of justice proceedings and victim service plans.

COMPETENCY STANDARD 3.7: The victim assistance provider successfully advocates for victims in criminal justice settings (as appropriate to program goals).

Elements include the ability to

- Understand basic components of legal decorum and courtroom proceedings.
- Recognize basic legal options of victims and some possible ramifications of these actions.
- Apply strategies for communicating effectively and positively with attorneys and other legal personnel as needed.
- Identify resources for learning more about legal process and justice issues.
- Understand what constitutes legal advice and legal representation, and understand the

prohibitions against providing such advice or representation without a license to do so.

COMPETENCY STANDARD 3.8: The victim assistance provider engages in ongoing support and followup for individual victims, families, and groups.

Elements include the ability to

- Recognize the mental, physical, financial, social, emotional, and/or spiritual support needs of victims of crime, including both direct and indirect victims.
- Recognize unique benefits of different forms of support, including peer and professional support, and also group and individual support.
- Apply strategies to address individual and group conflicts.
- As appropriate to program goals, apply strategies for facilitating the organization of self-help and other support groups.
- As appropriate to task demands, recognize basic dynamics of group process, including roles, norms, cohesiveness, leadership, and phases of group development.
- As appropriate to task demands, apply strategies that foster empowerment and positive interpersonal support within group intervention settings.
- As appropriate to task demands, apply strategies for promoting equity and respectfulness within group intervention settings (e.g., ground rules).

COMPETENCY STANDARD 3.9: The victim assistance provider uses specific interventions appropriate to the type of victimization.

Elements include the ability to

- Identify key issues for high-incidence cases addressed by one's own program, including (as applicable) homicide, suicide, death notification, sexual violence, domestic violence, stalking, hate crimes, property crimes, drunk driving death and injury, elder abuse, and child victimization.

- Identify key issues relating to case characteristics (e.g., relationship to offender).
- Identify the impact of specific types of crime and the needs of victims.
- Describe appropriate services and referrals for victims based on the crime and victims' individual needs.
- Describe victim options for self-care and community activism based on the crime and victims' individual interests.
- Apply strategies for addressing crime-specific types of interventions (e.g., safety planning with domestic violence victims).
- Recognize interventions that are inappropriate for particular types of cases (e.g., mediation in domestic violence cases).
- Make referrals as needed when personal biases, training, expertise, or resources limit the provider's effectiveness.

Section IV: Administration and Evaluation

Self-Awareness and Self-Care

Development of some of the competencies in this section will require practice and experience. Accordingly, assessment of these competencies should not be undertaken for several months, until the victim assistance provider has the opportunity to achieve competency.

COMPETENCY STANDARD 4.1: The victim assistance provider uses self-awareness to monitor and enhance his/her provision of services.

Elements include the ability to

- Recognize one's own personal and professional strengths and limitations.
- Recognize personal cultural, racial or ethnic, or gender biases.
- Value the need to grow and change personally and professionally.

- Value the need for equitable delivery of services to all people served.
- Identify resources available for professional development and self-improvement.
- Value benefits of self-assessment and supervision for professional growth and development.
- Apply strategies for translating personal mistakes into learning experiences.

COMPETENCY STANDARD 4.2: The victim assistance provider competently responds to diverse and underserved victim populations.

Elements include the ability to

- Recognize major types of cultural variation that influence victimization and victim response, including race/ethnicity, language, sex, gender, age, sexual orientation, (dis)ability, social class, economic status, education, marital status, religious affiliation, residency, and HIV status.
- Appreciate the validity of multiple perspectives and diverse value systems.
- Describe options for service and referral based on diverse population and individual needs.
- Identify community resources for professional consultation on diversity issues.
- Apply strategies to be more respectful to cultural diversity among victims.

COMPETENCY STANDARD 4.3: The victim assistance provider manages job-related stress.

Elements include the ability to

- Understand the concepts of burnout, compassion fatigue, and vicarious traumatization.
- Appreciate benefits of stress-management for personal and professional well-being, workplace climate, and overall program functioning.
- Recognize job-related events and experiences that may be stressors for victim advocates.

- Recognize personal indicators of stress, including physical, psychological, and social symptoms.
- Identify resources for learning about and/or accessing stress-management activities.
- Apply stress-management techniques appropriate to one's own interests, values, and personal or professional demands.

Competencies for Directors/Administrators

COMPETENCY STANDARD 4.4: The director/administrator integrates general knowledge of organizational structure into program practices.

Elements include the ability to

- Recognize ways that goals and objectives of various victims movements have been shaped by perspectives on causes of victimization (e.g., social oppression, family dynamics, individual psychology).
- Recognize how different ideologies and/or historical roots of victims movements may influence personal beliefs and organize program functioning.
- Recognize the influence of management style and cultural beliefs on organizational structure.
- Analyze ways that organizational structure influences intra-agency and interagency functioning.
- Apply strategies for refining the organizational structure to accomplish the program's mission and meet communitywide service goals.

COMPETENCY STANDARD 4.5: The director/administrator engages in general administrative and managerial tasks.

Elements include the ability to

- Formulate goals, objectives, and plans appropriate to the victim service program.
- Identify resources for administrative problem solving and enhancement of general administrative skills (e.g., consultation or educational resources on bookkeeping, etc.).

- Apply marketing and educational strategies appropriate to the people served, collaborators, and funders.
- Apply basic strategies for recruiting, assigning, and supervising staff (e.g., screening, communicating expectations, monitoring performance).
- Apply procedures for managing relationships between the program director and the board or overarching agency.
- Apply conflict resolution skills to facilitate positive change within the organization.
- Analyze techniques for allocating resources (labor, office space, equipment) and monitoring usage and expenditure.
- Apply strategies for soliciting nonmonetary resources from local businesses, major corporations, state and national organizations, and other sources.
- Apply strategies for identifying local, state, federal, and private funding sources.
- Apply the basic procedures involved in writing effective grant proposals.

COMPETENCY STANDARD 4.6: The director/administrator monitors and enhances program functioning through program evaluation.

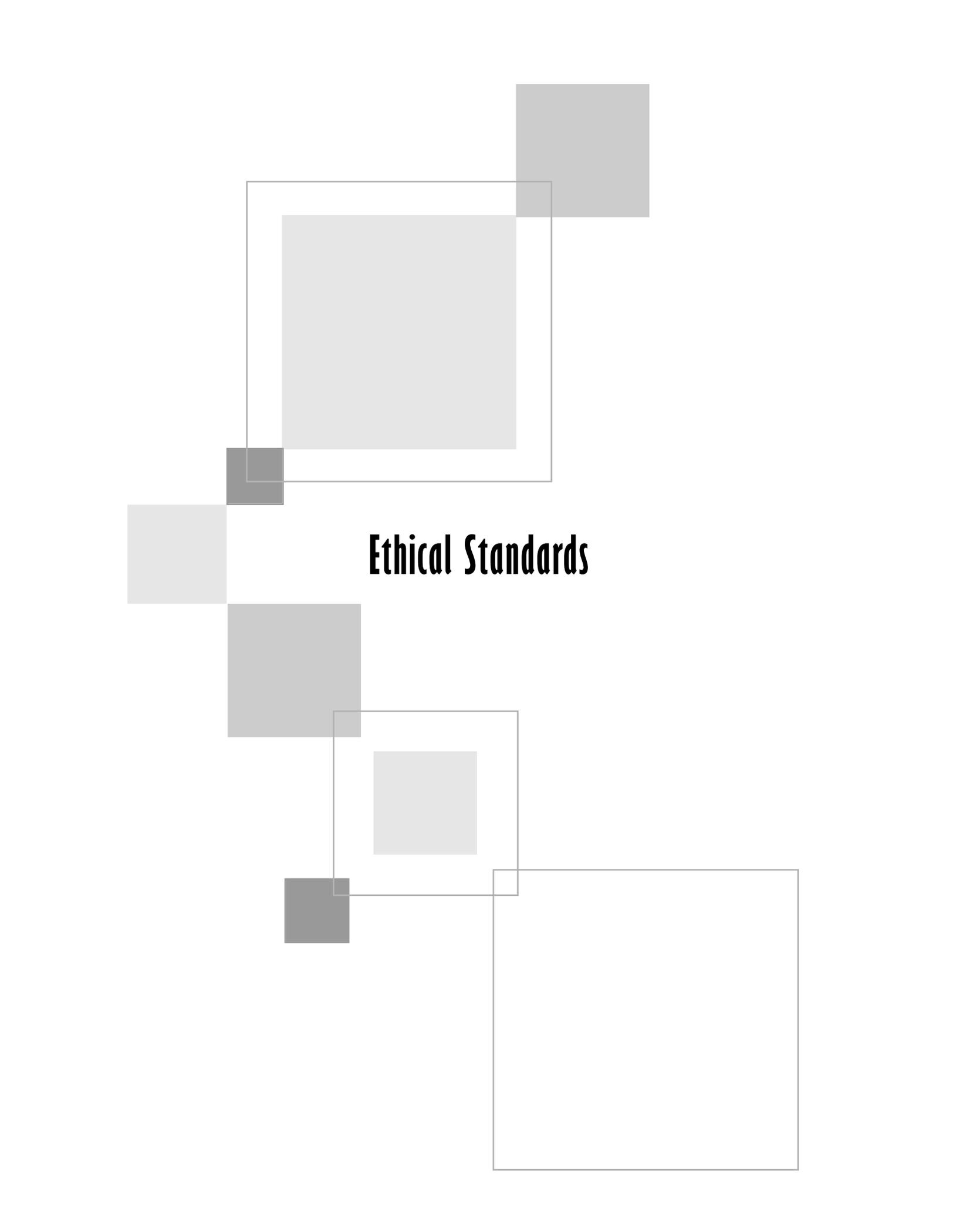
Elements include the ability to

- Respect program evaluation as an important contributor to program plans, goals, and outcomes.
- Apply strategies to review current professional literature relevant to service delivery.
- Identify program components that require descriptive analysis (e.g., people served, services provided, program expenditures).
- Apply basic concepts in documentation, analysis, and reporting of service.
- Identify program and community service needs using recent statistical reports, interviews, or survey data collection.
- Synthesize evaluation findings to develop recommendations for program enhancement.

COMPETENCY STANDARD 4.7: The director/administrator secures and manages resources to carry out program goals.

Elements include, as appropriate within legal and agency guidelines, the ability to

- Apply standard procedures for projecting resource needs and ordering/procuring resources.



Ethical Standards

Ethical Standards for Victim Assistance Providers

Ethical Standards for Victim Assistance Providers identifies behavioral expectations for victim assistance providers based on core values for the field. Ethical Standards for Victim Assistance Providers is intended as an aspirational guideline applicable to a range of issues addressed in daily service provision. The standards apply only to the victim assistance provider's work-related activities; that is, activities that are part of the victim assistance provider's functions or that deal explicitly with victim service issues. Included are activities involved in on-the-job performance and off-duty times when the victim assistance provider is acting as a representative of the victim service program (e.g., at professional meetings), delivering victim services in the community (e.g., on volunteer crisis teams), and responding to professional information (e.g., maintaining confidentiality of client information). Work-related activities should be distinguished from the purely private conduct of a victim assistance provider, which ordinarily is not within the scope of the Ethical Standards for Victim Assistance Providers.

Each ethical standard has two components:

- **Standard statement.** A declarative sentence outlining a clear expectation for ethical conduct.
- **Standard commentary.** The commentary clarifies intent of the standard by providing narrative and/or examples. Although all examples may not be applicable to individual situations, the victim assistance provider is strongly encouraged to comply with principles set forth in the commentary for Ethical Standards for Victim Assistance Providers.

Professionals formally trained in another field (e.g., psychology, social work) but engaging in victim services will abide by their own professional codes of ethics. If Ethical Standards for Victim Assistance Providers establishes a higher standard of conduct than is required by law or another professional ethic,

the victim assistance provider must meet the higher ethical standard. If Ethical Standards for Victim Assistance Providers appears to conflict with the requirements of law or another professional ethic, the victim assistance provider should make known his/her commitment to the Ethical Standards for Victim Assistance Providers and take steps to resolve the conflict in a responsible manner. If neither law nor the Ethical Standards for Victim Assistance Providers resolves an issue, the victim assistance provider might consider other professional materials and the dictates of conscience, and perhaps seek consultation with others in the field.

Section I: Scope of Services

ETHICAL STANDARD 1.1: The victim assistance provider understands his/her legal responsibilities, limitations, and the implications of his/her actions within the service delivery setting and performs duties in accordance with laws, regulations, policies, and legislated rights of persons served.

ETHICAL STANDARD 1.2: The victim assistance provider accurately represents his/her professional title, qualifications, and/or credentials in relationships with the people served and in public advertising.

Commentary: The victim assistance provider's job title and/or professional credentials are to be disclosed to all the people served and in written professional communications to avoid misunderstandings and misconceptions about the victim assistance provider's credentials, role, and responsibilities. An exception may be when credentials are unrelated to the job or role being performed (e.g., one may choose not to list a counseling degree when employed in a position that does not allow counseling). The victim assistance provider has an obligation to inform the victim of the nature of services to be provided and the purposes, goals, procedures, and limitations that may affect the professional relationship.

The victim assistance provider's title is to be included if the victim assistance provider's name appears on business cards, letterhead, brochures, directories, and advertisements. In advertisements, the victim assistance provider may describe fees, professional qualifications, contact information, and services provided. The victim

assistance provider is discouraged from advertising services in terms of quality or uniqueness and from using victim testimonials. Advertisements are to be factual and are to avoid false promises of cures.

The victim assistance provider is to abstain from fraudulent use of letterhead, business cards, and other promotional materials or of any record, diploma, or certificate. Fraudulent use includes materials that have been illegally or fraudulently obtained or issued or which are misrepresentative in any way.

ETHICAL STANDARD 1.3: The victim assistance provider maintains a high standard of professional conduct.

Commentary: The victim assistance provider is to be respectful of rules, procedures, and decorum before a court or other adjudicatory body. The victim assistance provider is to avoid impropriety and the appearance of impropriety and should not engage in any conduct that would adversely affect his/her fitness to provide services. Such conduct may include, but is not limited to violence, dishonesty, interference with the administration of justice, and/or abuse of a professional position or public office. In rare cases, exceptions might include conduct explicitly directed toward demonstration, protest, or other forms of social change advocacy; victim assistance providers are strongly encouraged to seriously consider costs, benefits, and ethical implications of such actions and to seek consultation and/or supervision about such advocacy.

The victim assistance provider is not to use his/her official position to secure gifts, monetary rewards, or special privileges or advantages. The victim assistance provider is to clearly distinguish his/her personal views from positions adopted by organizations for which he/she works or is a member, and is not to communicate personal views on organizational letterhead or any other organizational communication tools.

ETHICAL STANDARD 1.4: The victim assistance provider achieves and maintains a high level of professional competence.

Commentary: The victim assistance provider is to take all necessary and reasonable steps to maintain continuing competence in service provision, including knowledge of relevant scientific and professional information

related to the services he/she renders. The victim assistance provider will recognize the need for ongoing professional development and make appropriate use of professional, technical, and administrative resources. The victim assistance provider is to obtain supervision or engage in consultation when necessary to serve the best interests of a victim.

The victim assistance provider is to limit services to those permitted in the program position, and service will be confined to tasks within the victim assistance provider's range of knowledge and skill. The victim assistance provider is to make a referral to other professionals when the services required are beyond the victim assistance provider's competence.

When acting as a supervisory authority, the victim assistance provider refrains from assigning a task to another individual when the victim assistance provider knows that the other individual is not licensed to perform the task or has not developed the competence to perform such a task.

The victim assistance provider will not provide services while impaired by medication, alcohol, drugs, or other chemicals, and will refrain from providing services when experiencing a mental or physical condition that impairs the ability to practice safely.

ETHICAL STANDARD 1.5: The victim assistance provider who provides a service for a fee informs a person served about the fee at the initial session or meeting.

Commentary: For any billed services, payment must be arranged at the beginning of the professional relationship. Discussion is to include the use of insurance reimbursement and how it will be handled and charges for missed or canceled appointments, vacations, and any other financial issues. The payment arrangement must be provided in writing to the person served. The victim assistance provider is to furnish, on request from a person served, his/her legal guardian, or other authorized representative, a written explanation of the charges for any services rendered.

The victim assistance provider may not accept goods or services from the person served or a third party in exchange for the victim assistance provider's services (e.g., bartering). Only in exceptional circumstances would acceptance of goods or services be appropriate

(e.g., when refusal would disrespect culturally specific customs), in which case the victim assistance provider is to seek consultation or supervision regarding possible conflicts of interest.

The victim assistance provider will neither accept nor give a commission, rebate, fee split, or other form of remuneration for the referral of a person served.

Section II: Coordinating Within the Community

ETHICAL STANDARD 2.1: The victim assistance provider conducts relationships with colleagues and other professionals in a way that promotes mutual respect, public confidence, and improvement of service.

ETHICAL STANDARD 2.2: The victim assistance provider shares knowledge and encourages proficiency in victim assistance among colleagues and other professionals.

Commentary: The victim assistance provider possesses a willingness to transmit his/her knowledge and skills to others, including paid and volunteer victim assistance providers. This includes attempting to ensure that volunteers have access to the training, supervision, resources, and support required in their efforts to assist the people served.

The victim assistance provider is to view his/her role and responsibilities as part of an overall team effort by justice and service personnel, with knowledge sharing directed to delivery of quality victim services. The victim assistance provider is to interact effectively and sensitively with all members of the team. This interaction includes use of group skills, such as cooperation, leadership, and listening; respect for cultural and religious differences of team members; management of conflict in the workplace through consideration of others' points of view; and respect for philosophies and practices of various disciplines.

ETHICAL STANDARD 2.3: The victim assistance provider serves the public interest by contributing to the improvement of systems that impact victims of crime.

Commentary: The victim assistance provider is expected to participate in professional activities and to assume community responsibilities when these are

essential to the attainment of program goals. The victim assistance provider is to be sensitive to service needs of the public and to promote the development and implementation of programs that address such needs. As allowed by agency policy and/or funding source, the victim assistance provider is encouraged to participate in community efforts to prevent victimization, improve the justice/services systems, or improve access to these systems. The victim assistance provider is further encouraged to work toward change in policies, laws, and systems that are unjust, discriminatory, or ineffective.

Section III: Direct Services

ETHICAL STANDARD 3.1: The victim assistance provider respects and attempts to protect the victim's civil rights.

Commentary: In addition to basic civil rights, a number of other rights have been prescribed for victims through state standards, legislative proposals, and other sources. The victim assistance provider is encouraged to abide by the following guidelines for victim rights:

- The victim retains all basic civil rights in the professional relationship.
- The victim retains the right not to be discriminated against on the basis of race/ethnicity, language, sex, gender, age, sexual orientation, (dis)ability, social class, economic status, education, marital status, religious affiliation, residency, or HIV status in the provision of services.
- The victim retains the right to release her/his confidential information and records and have that right protected.
- The victim retains the right to know any and all exceptions to the confidentiality privilege, including state or federal laws governing the victim assistance provider's duty to report child abuse and elder abuse.

ETHICAL STANDARD 3.2: The victim assistance provider recognizes the interests of the person served as a primary responsibility.

Commentary: Although service provision is dictated by the limits of ethics, program policy, and state and

federal laws, the victim assistance provider should pursue the best interest of the person served and should advocate for what the victim desires (see Ethical Standard 3.4). When conflicts arise between the victim's interests and those of the victim assistance provider or program, the victim assistance provider is to offer verbal disclosure to the victim, give the victim a referral for an alternate provider, or seek professional consultation regarding appropriate resolution of the conflict.

ETHICAL STANDARD 3.3: The victim assistance provider refrains from behaviors that communicate victim blame, suspicion regarding victim accounts of the crime, condemnation for past behavior, or other judgmental, antivictim sentiment.

Commentary: The victim assistance provider will make efforts to suspend judgment in order to maintain professional trust and to advocate effectively for the victim.

ETHICAL STANDARD 3.4: The victim assistance provider respects the victim's right to self-determination.

Commentary: In some cases, the victim assistance provider's perception of victim wants, needs, and rights may not correspond with the victim's perception. Unless dictated by program policy, the victim assistance provider shall under no circumstances use ultimatums in provision of services (e.g., only providing services if a battered woman agrees to leave a relationship). The victim assistance provider is also prohibited from intentionally withholding service information that might contribute to the victim's decisionmaking. The victim has the most informed perspective of his/her own history, inclinations, risks, and resources. Accordingly, the victim carries ultimate authority over his/her own interests. When victim wants are at stark odds with the victim assistance provider's perception of the victim's best interest, the victim assistance provider can present information to help the victim gain a fuller perspective. Nevertheless, the victim assistance provider is to ultimately encourage the victim to make his/her own decision, and the victim assistance provider is encouraged to support the victim in this decision.

ETHICAL STANDARD 3.5: The victim assistance provider preserves the confidentiality of information provided by the person served or acquired from other sources before, during, and after the course of the professional relationship.

Commentary: The victim assistance provider is to be aware of and abide by program policy and legal authority governing confidential information in the jurisdiction. The person served is to be provided with information regarding limits of confidentiality; preferably, this information should be provided in the first meeting (unless crisis circumstances render this infeasible).

Confidential communications are not to be disclosed *except*

- In the course of formally reporting to, or conferring or consulting with administrative superiors, colleagues, and consultants who share professional responsibility, in which instance all recipients of such information are similarly bound to regard the communication as confidential.
- With the written consent of the person who provided the information.
- In the case of death or disability, with the written consent of a personal representative or the beneficiary of an insurance policy on the person's life, health, or physical condition. Special consideration may be given to domestic violence cases or other cases in which disability may have been inflicted by the personal representative (e.g., if a batterer is the personal representative, disclosure of confidential communications could put the victim at future risk).
- When a communication reveals the intent to commit a crime or harmful act and such disclosure is judged necessary to protect any person from a clear, imminent risk of serious mental or physical harm or injury or to thwart a serious threat to the public safety.
- When a medical emergency occurs and the victim is not able to authorize the release of information, information limited to the medical emergency may be disclosed.
- When the person waives confidentiality by bringing any public charges against the provider.
- As appropriate, in accordance with legal authority, program policy, and in certain exceptional crisis situations.

When the person is a minor under state laws, certain conditions may warrant disclosure of confidential information. Like adults, minors should be forewarned, in language they can understand, of limitations on confidentiality. The victim assistance provider is encouraged to make efforts to avoid unnecessary disclosure of victim confidences, unless a compelling reason exists to warn parents/guardians of danger to the child or to others. If the information acquired by the victim assistance provider indicates a minor or vulnerable adult was the victim or subject of an unreported crime, the victim assistance provider may be required to report the crime or testify by state law.

When confidential communications are disclosed in response to the above conditions, the victim assistance provider is to discuss with the person served the information that is being disclosed. Furthermore, the victim assistance provider should be prepared to address the reactions evoked by discussion of the disclosure.

It is appropriate to provide statistical information to an outside source, without revealing victim identity.

The victim assistance provider shall not use confidential communications to the disadvantage of the victim or to the advantage of the victim assistance provider.

Any person having access to records or anyone who participates in providing services who, in providing services, is supervised by a victim assistance provider, is similarly bound to regard all information and communications as privileged in accordance with the above conditions.

ETHICAL STANDARD 3.6: The victim assistance provider avoids conflicts of interest and discloses any possible conflict to the program or person served, and also to prospective programs or persons to be served.

Commentary: The victim assistance provider is to act within the bounds of the law, for the benefit of the person served, and to make efforts to avoid compromising influences and loyalties. Although avoiding all such conflicts may be more difficult in small towns, reasonable efforts are to be made. Neither the victim assistance provider's personal or professional interest, nor those of other clients or third persons should compromise professional judgment and loyalty to the person

served. The victim assistance provider is to avoid conflicts of interest that may arise from previous assignments, whether for a present or past employer/program or person served. The victim assistance provider is also encouraged to avoid conflicts of interest that arise from family relationships and from personal and business interests. The victim assistance provider may reveal sufficient nonconfidential information about a person served (preferably to other program staff) to reasonably ascertain if an actual or potential conflict of interest exists.

ETHICAL STANDARD 3.7: The victim assistance provider terminates a professional relationship with a victim when the victim is not likely to benefit from continued services.

Commentary: The victim assistance provider who anticipates the termination of services is encouraged to give reasonable notice to the victim. As appropriate, the victim assistance provider is to take reasonable steps to inform the victim of the termination of a professional relationship. The victim assistance provider should provide referrals as needed or at the request of the person served. The victim assistance provider is strongly discouraged from terminating a professional relationship for the purpose of beginning a personal or business relationship with a person served.

ETHICAL STANDARD 3.8: The victim assistance provider does not engage in personal relationships with persons served that exploit professional trust or that could impair the victim assistance provider's objectivity and professional judgement.

Commentary: When a victim assistance provider is unable to avoid a personal relationship with a person served, the victim assistance provider must take appropriate precautions, including informed consent and consultation or supervision to ensure that the victim assistance provider's objectivity and professional judgement are not impaired.

The victim assistance provider is strongly discouraged from engaging in social or business relationships with clients, both past and present. This does not include purchases made by the victim assistance provider from the person served when that person is providing necessary goods or services to the general public, and the victim assistance provider determines that it is not possible or reasonable to obtain the necessary goods or

services from another provider. The victim assistance provider may engage in a professional relationship with an individual with whom the victim assistance provider had a previous personal or business relationship only if a reasonable person would conclude that the victim assistance provider's objectivity and professional judgement will not be impaired by reason of the previous relationship.

If the victim assistance provider plans to engage in a personal relationship with a client, the provider must seek consultation and/or supervision and must notify the person served of the termination of the professional relationship. The victim assistance provider should continue to consider the best interests of the former client, and not engage in a personal relationship with a person served if it is reasonable to conclude that the person continues to relate to the victim assistance provider in the victim assistance provider's professional capacity. It is the responsibility of the victim assistance provider to demonstrate that the former client has not been exploited or abused either intentionally or unintentionally.

The victim assistance provider is prohibited from engaging in or requesting sexual contact with a person served under any circumstances. Under no circumstance is the victim assistance provider to engage in verbal or physical behavior toward a person served that a reasonable person would find to be sexually seductive, sexually demeaning, or sexually harassing.

The victim assistance provider is not to offer medication or controlled substances to a person served, or to accept these substances from a client for personal use or gain. Under no circumstance should a victim assistance provider offer alcoholic beverages to a person served or accept such from a person served.

The victim assistance provider is solely responsible for acting appropriately in relationships with persons served. A client or a former client's initiation of a personal, sexual, or business relationship is not a defense by the victim assistance provider for a violation of standards.

These guidelines also apply to the victim assistance provider's relationship with persons supervised, other staff, and family members or significant others of a person served.

ETHICAL STANDARD 3.9: The victim assistance provider does not discriminate against a victim or another staff member on the basis of race/ethnicity, language, sex, gender, age, sexual orientation, (dis)ability, social class, economic status, education, marital status, religious affiliation, residency, or HIV status.

Commentary: If the victim assistance provider is unable to offer services because of a concern about potential discrimination, the victim assistance provider is to make an appropriate and timely referral. When a referral is not possible, the victim assistance provider should obtain supervision or consultation to address the concern.

ETHICAL STANDARD 3.10: The victim assistance provider furnishes opportunities for colleague victim assistance providers to seek appropriate services when traumatized by a criminal event or client interaction.

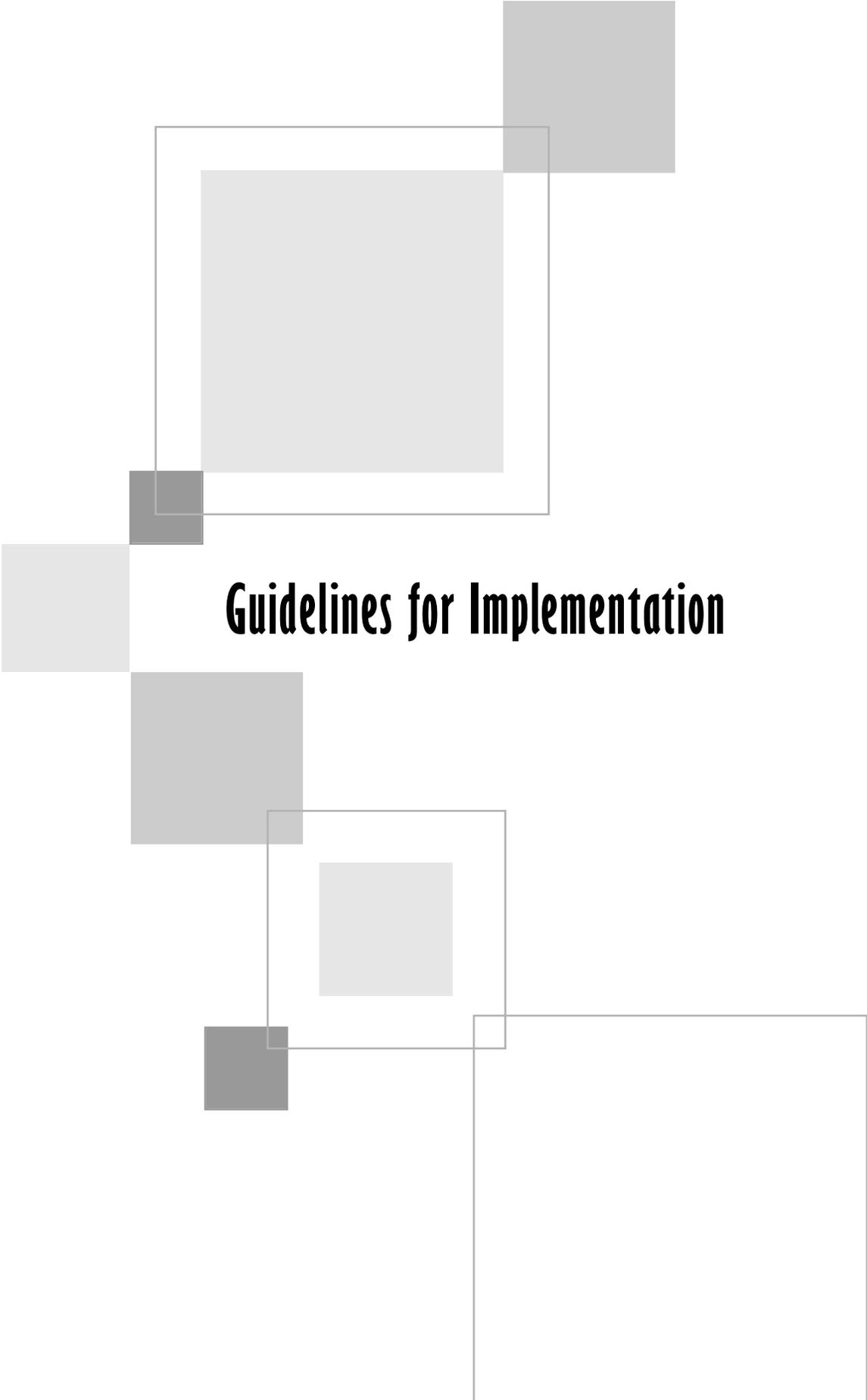
Commentary: Although seeing a colleague as a client may present a conflict of interest, limited resources within the victim assistance community may necessitate provision of services to colleagues under some conditions. When the victim assistance provider seeks victim services, it is suggested that he/she attempt to utilize providers in other jurisdictions or take other measures to minimize conflicts of professional interest.

Section IV: Administration and Evaluation

ETHICAL STANDARD 4.1: The victim assistance provider reports to appropriate authorities the conduct of any colleague or other professional (including oneself) that constitutes mistreatment of a person served or that brings the profession into dishonor.

Commentary: The victim assistance provider reports to appropriate authorities clear violations of ethical standards. Appropriate authorities might be professional boards, program administrators, funding administrators, or other entities responsible for adoption of standards. The victim assistance provider is not knowingly to assist any individual with the commission of an act that is in direct violation of the standards or governing

laws. A victim assistance provider is encouraged to self-report any personal action that would require that a report be filed. Generally, reports are to be submitted no later than 30 days after the occurrence of the reportable event or transaction.



Guidelines for Implementation

Guidelines for Implementing Standards

Implementation of standards is not a task to be taken lightly, and any efforts to adopt standards should involve careful consideration of options and implications. Whether standards are used by providers, programs, communities, or organizations, three basic principles are of the greatest importance. They relate to **involvement** of providers in decisionmaking, **inclusion** of providers in a supportive network of colleagues, and **enhancement** of overall service quality for victims of crime:

- Any effort to use standards must involve representation of the people/programs to be held to the standards in planning, decision-making, and enforcement.
- The standards are intended to be inclusionary rather than exclusionary; administration must be directed toward bringing people into compliance versus keeping them out on the basis of noncompliance.
- Administrators are to remain mindful that the ultimate purpose of standards is to provide victims with the highest quality of service; administration of standards must do no harm to victims or to overall service quality for victims.

The Consortium established guidelines for implementing standards with special consideration to regional administration and national coordination of efforts. It is **strongly recommended** that anyone wishing to adopt *NVASC Standards* carefully review implementation guidelines and the precautions for use.

Responsibilities for National Coordination

The Consortium recommends that a National Clearinghouse be convened to lend coherence, synthesis, and coordination to use of standards at the

individual, program, community, state, and regional levels. To promote national coordination, any program, organization, council, or other entity adopting standards is encouraged to register with the Clearinghouse, which will in return provide updates and information on other standards efforts. Participation by the programs in the Clearinghouse will be essential for benefiting from the most up-to-date and informed national leadership on standards issues. To promote trust and use of the Clearinghouse by providers in the field, the Consortium recommends that the National Clearinghouse **be explicitly prohibited from serving as a credentialing or accrediting body** for its first 3 to 5 years of tenure. The Clearinghouse is not intended as a credentialing or accrediting body, and any change in its function would warrant discussion and support from the field.

The Clearinghouse will not serve a restrictive or punitive function. One of the first tasks of the Clearinghouse will be to outline a values framework under which it will function throughout changes in membership and evolution of the field. This framework will ensure that the Clearinghouse exists to support the field rather than confine it. The Clearinghouse will

- Collect information regarding state, regional, and organizational efforts to implement standards and/or credentialing, including information on the successes and failures of different efforts.
- Provide training and technical assistance to sites for implementation of standards.
- Facilitate links between various efforts and promote coordination and mentoring among implementation sites.
- Disseminate information on standards development, trends, controversies, evaluation, needs, and other standards-related issues. Dissemination would be in a variety of formats, including reports, bulletins, press releases, listservs, Web sites, conference presentations, and workshops.
- Recognize promising practices in standards implementation.
- Convene policy discussion groups and subcommittees to bring state-level and special issue interests to national discussions.

- Establish a review process for *NVASC Standards* and outline procedures for periodic national review of state and regional efforts (e.g., sampling and assessing a subset of efforts every few years).

The Clearinghouse will derive its credibility—and thereby its authority—through participation in and representation of diverse sectors of the victim assistance field. Elitism or impropriety in participation will necessarily diminish that authority to the disadvantage of the field. The intended function of the Clearinghouse is to resolve confusion in the field regarding multiple methods, sites, and experiences involved in implementing professional standards. To foster trust and commitment, participation in the Clearinghouse will be voluntary. Benefits of participation will include information updates and technical assistance, recognition of commitment to standards of excellence, enhanced accountability within the field, and increased support from the general public.

Composition of the Clearinghouse

It is important that all sectors of the field feel equitably represented in the Clearinghouse and that philosophies and membership are directed toward decentralizing and demonopolizing power to eradicate imbalances in the field.

The Clearinghouse will include 15 to 20 members who will vary along the following dimensions:

- Disciplinary background, with primary identification in the field of victim assistance.
- Demographics (e.g., age, sex, gender, race/ethnicity, and economic and educational background).
- Geographic locale, with residence in the United States.
- Content area of professional expertise (e.g., by type of crime or aspect of service).

Membership will include practitioners, policymakers, researchers, and academicians from state, regional, and national levels. Efforts will be made to balance voices at the table by including substantial (e.g., 51 percent) representation of current or past victim assistance

providers and substantial representation of victim-centered interests. Overrepresentation of marginalized and underserved populations is encouraged, and efforts will be made to achieve balance regarding different interests and philosophies on standards and credentialing. This might be accomplished by soliciting annual nominations for membership from key agencies, organizations, and interest holders in the field.

Selection of members must include a commitment from prospective members (and their employers) to devote the necessary time to service in the Clearinghouse and to attend scheduled membership meetings. Membership will be inclusive, with rotating membership and staggered terms to continually bring new voices to the process.

Membership positions will be voluntary, although travel and per diem expenses will be provided when Clearinghouse business is being conducted. Members perform a number of functions through the Clearinghouse:

- Collecting and disseminating information on standards use.
- Providing training and technical assistance.
- Evaluating regional and national standards efforts.
- Researching, drafting, and reviewing recommendations on standards issues.
- Convening subcommittees and conducting town hall meetings, focus groups, and policy discussions.
- Representing the Clearinghouse at regional and national events.

All Clearinghouse members will participate in a brief orientation at the outset of their service on the project. The diversity of membership will require group processes that support development of trust, respect, and open rapport. These issues will be explicitly addressed in introductory membership materials and in ground rules for initial meetings. Within the NVASC initiative, for example, persons serving on the Consortium represented themselves rather than affiliated organizations; this was done to promote equity and to balance power among all members of the group.

Because membership in the core group is limited by practical demands of group process (i.e., 15–20 members), the Clearinghouse will incorporate procedures for reaching beyond the group in discussions and decision-making. Strategies might include town hall meetings, focus groups, surveys, solicitation of outside reviewers for written materials, and videoconferencing. Also, because membership requires one's primary identification to be within the field of victim assistance, the group will make efforts to include allied professionals and experts on standards from other fields (e.g., substance abuse counseling, social work) as consultants, discussants, subcommittee members, or in other roles.

The Clearinghouse will be a separate initiative from the National Victim Assistance Standards Consortium, but will build on the foundation set by that group. Strong consideration will be given to continuity between the National Victim Assistance Standards Consortium and the Clearinghouse (e.g., several common members). A meeting will be scheduled between Clearinghouse members and Consortium members at the outset of the Clearinghouse project, and Clearinghouse members will receive copies of key materials used in the NVASC project.

Clearinghouse members will meet three times a year; one meeting might be used to host a conference or workshop. The Clearinghouse will maintain a small paid staff, including a project director and administrative support staff. Staff will address inquiries, provide technical support and professional consultation, and perform research and dissemination functions. Staff will prepare a semiannual newsletter and hold several regional workshops annually to explain standards use.

Implementing Standards at the State and Regional Levels

Discretion will be left to states and regions regarding the methods they use for implementing standards.

Options for implementing standards vary depending on 1) the organization or entity that adopts or uses the standards, 2) nature and extent of use, and 3) methods of assessment.

Entities That Use Standards

Institutes of higher education, e.g., community colleges, universities, professional schools.

- Bachelor's, master's, and Ph.D. degrees.
- Associate's degrees, certificate programs.
- Coursework under criminal justice, social work, or other relevant major.

Government agencies, e.g., Victims of Crime Act (VOCA) administrators, state offices of victim assistance, offices of attorneys general, prosecuting attorney councils, law enforcement victim assistance programs, departments of corrections, probation and parole victim assistance programs.

- Federal, state, and regional policy and funding agencies.
- Direct service victim assistance programs.

Nonprofit organizations, e.g., national membership organizations, state victim networks, national volunteer-based service organizations, national and state coalitions, shelters, crisis centers.

- National and regional policy and professional organizations.
- National and regional direct service organizations.

Multiagency boards or councils, e.g., state-based crime victim advisory boards, professional regulatory boards, certification and accreditation boards, domestic violence coordinating councils, interagency councils.

- National- and state-level policy and regulatory boards.
- Regional coordinating boards and interagency councils.

Victim assistance practitioners

Nature and Extent of Use

Program Standards can be used as

- Aspirational guidelines for programs to improve service/administration.
- Coalition builders for dialog, training, and peer review.
- Benchmarks for program evaluation.
- Tools to recognize and award quality in service.
- Accreditation criteria for programs in states and regions.
- Criteria for program funding.
- Criteria for membership in state and professional coalitions.
- Required conditions of service and administration for programs.

Competency and Ethical Standards can be used as

- Aspirational guidelines for providers to identify professional development needs and alternatives.
- A reference for ethical decisionmaking.
- Coalition builders for dialog, training, and peer review.
- The basis for learning objectives and course design.
- Tools to recognize and award quality in service.
- Criteria for certification or credentialing.
- Criteria for membership in professional organizations.
- Criteria for employment, retention, and promotion.
- Required conditions of practice.

Methods of Assessment

The following methods can be used to assess individual victim assistance providers:

- Evaluation of work-based performance.
- Evaluation of performance in a classroom setting or in a group process.

- Evaluation of the actual result, product, or outcome of performance.
- Review of written documents.
- Evaluation of self-assessments and peer critiques.
- Evaluation of reports by supervisors, peers, and persons served.
- Evaluation of verbal presentations.
- Evaluation of learning demonstrated in portfolios.
- Tests of learner's knowledge.
- Evaluation of creative product or project.

The following methods can be used to evaluate programs:

- Self-assessments using standards checklists/forms.
- Self-assessments using program-set goals for phase-in of standards.
- Examination of program evaluation reports to assess products and outcomes.
- Site visits for observation of on-the-job staff performance.
- Site visits for program evaluation using checklists/forms.
- Review of program portfolios to assess program strengths and weaknesses.

These methods of assessment can be used to monitor compliance or to assess processes and outcomes associated with compliance. Some users of standards may wish to supplement assessment with proactive (or future-oriented) encouragements for compliance. Oaths and signed agreements, for instance, have been demonstrated to influence future behavior. Such verbal or written contracts may be used to increase motivation to comply with standards. They might include signed statements indicating who has read the standards (e.g., an individual or a representative of a program) and how that person/program will comply. Use of such verbal or written contracts, however, should include consideration of liability issues (see Precautions, page 61).

Examples of Current Practice

Any combination of users, types of use, and assessment has potential for both negative and positive implications, depending on individual and community characteristics and methods of standards implementation. Each combination of options should be considered carefully, and precautions (detailed on page 61) should be discussed among program developers. The following are examples of some ways that standards are currently being used.

Academic certificate and degree programs

- California State University at Fresno, Washburn University, the University of New Haven, and Sam Houston State University have developed academic programs with degrees or specializations in victim services. Some have graduate degree programs, certificate programs, and special summer/distance programs.
- A number of community colleges offer certificates and/or associate's degrees in victim services.

Professional training and/or certification programs for voluntary participation

- The National Victim Assistance Academy is a federally funded program offering victim assistance training annually at sites across the Nation.
- The Oregon Crime Victims Assistance Network is a nonprofit organization offering standard victim assistance training using VOCA funds.
- The Victim Assistance Institute (VAI) is a collaborative project of the South Carolina state compensation office and the University of South Carolina. VAI offers a statewide standard training and certification academy.
- Several nonprofit organizations provide certification for victim service practitioners who have submitted applications and other materials.

State-based agencies or councils with funding contingent on compliance with standards

- The California Victim/Witness Coordinating Council is composed of representatives from man-

dated service agencies. The council requires that all state-based victim assistance providers receive standardized training, and funding is withheld from programs that employ untrained victim assistance providers. Nonprofits have a similar program administered through the state coalition.

- The Florida Attorney General's Office offers standardized training. Funding for VOCA grants requires at least one staff person on the grant to be certified through the program, and certification is required for employment at some law enforcement agencies or for provision of testimony in some circuit courts.

Professional organizations that provide domestic violence or sexual assault certification and/or accreditation

- The Kentucky Domestic Violence Association provides certification for advocates and accredits programs that 1) adhere to service standards, 2) provide a staff mentor for certification candidates, and 3) require certification for all full-time staff.
- Virginians Against Domestic Violence accredits programs based on self-assessment and site visits. Program certification is required for eligibility for Department of Social Service formula funding.
- The Washington Coalition of Sexual Assault Programs accredits training programs upon submission of application, curricula, and other materials.

Developing Coalitions for Implementation

Consortium members supported the idea of communitywide coordinating councils for the administration of standards. Like membership for the National Clearinghouse, council membership should have a diverse representation, including practitioners, policymakers, researchers, and academicians from government, nonprofit, and private sectors. The council should strive toward balance and equity of participation *throughout* planning and administration of standards by recruiting members from varied backgrounds, including

- Disciplinary background, with primary identification in the field of victim assistance.

- Demographic characteristics (e.g., age, sex, gender, race/ethnicity, and economic and educational backgrounds).
- Geographic locale, with residence in the region.
- Content area of professional expertise (e.g., by type of crime or aspect of service).

The council should have a substantial (e.g., 51 percent) representation of current or past practitioners and a substantial representation of victim-centered interests. In standards and credentialing, efforts should be made to represent underserved populations in addition to any existing regional interests.

When communities opt for an administering body other than a newly formed council (e.g., an existing board, agency, or other preexisting infrastructure within the victim service community), efforts should be made to strive toward balanced membership as new members/representatives are elected or appointed, and to strive toward equitable representation throughout the decisionmaking processes. If standards are applied solely within a government setting, efforts should be made to involve advisory groups of government practitioners (rather than administration being strictly the task of a single or elite group of administrators). Administrators and/or advisory groups are further encouraged to actively involve those persons or programs held to standards in the decisionmaking process.

To keep council size manageable, some councils use subcommittees branching off from core membership to ensure equitable representation of interests. The San Diego Domestic Violence Council, for instance, includes more than 200 members who function through 12 working subcommittees. Subcommittees address components such as law enforcement, shelter services, medical services, and legal action. Each subcommittee is interdisciplinary and three task forces address general service needs within geographic regions (e.g., North County, South County, East County).

Consortium members encourage that institutes of higher education be drawn into program partnerships, but that such institutes not attempt to adopt or administer standards without involvement of the field. Without conscious efforts to incorporate such involvement, institutes of higher education may be too removed from everyday

practices for their education and/or research initiatives to adequately reflect and evolve with the field. Institutes of higher education can contribute technical skill and state-of-the-art resources to project design in the field and can provide course credit, academic certificates, and degrees for participants in education/training programs. Selection of institutes for partnerships should include consideration of their interest in the project, faculty expertise, existing involvement with the field, ability to develop courses based on standards, and the understanding of crucial training/ practice issues. Models for involving higher education institutions might derive from state training academies or from credentialing efforts in California, Pennsylvania, and South Carolina, all of which purposefully involve institutes of higher education (see Directory of Credentialing Programs).

It is also recommended that state-level efforts draw in federal staff/employees, with the understanding that federal employees often operate under different rules, policies, and employers and thus may not be subject to standards compliance. Although most areas will opt for community-level or state-level implementation, in some areas it may be necessary or desirable to establish coalitions across several states. National organizations with state and local branches might engage in national implementation. Through collective implementation, smaller states or groups may be aided by larger states or groups in organizing efforts and procuring resources.

A Step-by-Step Model for Implementation

Whether implementing Victim Assistance Program Standards, Competency Standards for Victim Assistance Providers, or Ethical Standards for Victim Assistance Providers, the following general steps are recommended:

1. Organize a general meeting to ascertain how broad interest is in implementing standards. The meeting should be as inclusive and nonpartisan as possible, with particular efforts to represent equitably the various providers in the community. Agencies or providers to invite to a meeting for community implementation might include the following:

- Children’s shelters.
- Department of corrections victim services.

- Department of juvenile justice victim services.
- Department of probation, parole, and pardon victim services.
- Department of social services.
- Domestic violence shelters.
- Ethnic outreach victim services.
- Law enforcement victim services (federal, state, county, city, campus).
- Mental health services for victims.
- Military victim services.
- Mothers Against Drunk Driving.
- National Center for Missing and Exploited Children.
- Parents of Murdered Children.
- Prosecution-based victim services (federal, state, district, local).
- Rape crisis centers.
- School-based victim services.
- Spiritually based victim services.
- State coalition against domestic violence and sexual assault.
- State victim assistance organization.
- State victim compensation program.
- Tribal victim services.
- Victim service grievance or ombudsperson program.
- Victim support group leaders.
- Victims of Crime Act representatives.
- Violence Against Women Act representatives.

It is advisable that the meeting be held on neutral ground so that no single program or agency seems to be

monopolizing a leadership role. The meeting should be jointly sponsored by several major victim service agencies or organizations, including both government and nonprofit interests. Those who attend the meeting are prospective partners in the effort—agencies or individuals who wish to participate. Advertisement for the meeting should reach all potential partners with timely forewarning and accessibility of the scheduled event. Methods of advertising might include flyers, mailed invitations, listserv announcements, and presentations at professional meetings or in newsletters.

2. Work with the Office for Victims of Crime to select a consultant. After ascertaining general interest in standards at the meeting, organizers should contact OVC's Training and Technical Assistance Center (TTAC), to request technical support on standards issues. OVC TTAC staff will help tailor assistance to the program's needs. TTAC staff can be contacted by telephone at 1-866-682-8822 (TTY 1-866-682-8880), by e-mail at TTAC@ovcttac.org, or through the OVC Web site at www.ojp.usdoj.gov/ovc/assist/welcome.html. The Web site contains an application for assistance. The TTAC consultant may be involved throughout the project for onsite consultation and phone/mail correspondence.

3. Work with consultants to conduct a regional assessment. Consultants can guide organizers through assessment of expectations, service needs, and attitudes and concerns of prospective partners in the effort. Needs assessment might specifically address service gaps, resources, existing infrastructures on which to build, and key laws or mandates that might impact standards requirements. Consultants will work with organizers to prepare an assessment report to be distributed to prospective partners.

4. Review the assessment report at a second general meeting. The meeting will be structured as a workshop, with facilitation and consultation from project consultants. The meeting will begin with some instructional content presented by consultants (e.g., assessment findings, different options for implementing standards, strengths/limitations of each option). Although this may be a team presentation that also involves local organizers, local politics may warrant sole or primary presentation by consultants to maintain objectivity and credibility. Consultants will present information from a balanced perspective, strategically mixing indepth

discussions, brainstorming, and group planning. Consultants will *not* act as experts who impose solutions on partners. Rather, consultants are facilitators, assisting partners in identifying their *own* choices of action.

5. Form working groups to draft goals and basic plans. If a large number of participants are interested in pursuing implementation further, consultants will assist in forming subcommittees or multidisciplinary workgroups to outline implementation goals before the next workshop (a 2- or 3-month interim). Outlines will include timelines, proposed accomplishments, resources, foreseeable barriers, and funding/matching considerations (e.g., materials, any travel expenses).

6. Hold a third meeting to discuss and refine plans before implementation. A third general meeting will be held to discuss outlines, including discussion of potential problems and general protocols for implementation. Consultants will help regional partners draft a formal mission statement and detailed protocols. The draft will include anticipated questions, and barriers to implementation and balanced responses and/or strategies to alleviate concerns.

7. Implement the plan. During initial implementation, particular attention should be devoted to informal evaluation. This might include discussing the plan's effectiveness with those involved in implementation, recording potential problems to be worked out in the plan, and generating ideas for refinement. These can be discussed with consultants in phone communication or on the final site visit.

8. Invite the consultant for a site visit. The process will be followed up with a site visit, during which the consultant will help to address emerging issues and conduct initial evaluation.

9. Conduct a followup meeting. A final group meeting will reinforce shared ownership and followthrough among partners.

10. Prepare and disseminate an initial project report. This report will summarize what has been accomplished and what is planned. The report will also include initial evaluation findings. Project evaluation should include evaluation forms at workshops, analysis of participation and attrition at meetings, program participation in implementation, and/or pursuit of

credentialing by individuals. The report should be disseminated to partners, consultants, and OVC.

Precautions

Consortium members generated the pros and cons, and precautions associated with each possible approach to implementing the standards. Themes tended to address three aspects of standards use: whether use is voluntary,

whether use incorporates objective measurement, and whether use requires accountability for the standards. Table 1 summarizes different uses of standards, along with check marks to indicate voluntary use, objective measurement, and accountability.

Those who adopt standards should make every effort to consider positive and negative implications of use, including prospective strategies to overcome barriers and

Table 1. Uses of Program and Individual Standards

Program Standards	Voluntary Use	Objective Measurement	Accountability
Aspirational guidelines for programs to improve services and administration	◆		
Coalition builders for dialog, training, and peer review	◆		
Benchmarks for program evaluation	◆	◆	
Tools to recognize and award quality in service	◆	◆	
Accreditation criteria for programs in states and regions	◆	◆	◆
Criteria for program funding		◆	◆
Criteria for membership in state and professional coalitions		◆	◆
Required conditions of service and administration for programs		◆	◆
Individual Standards			
Aspirational guidelines for providers to identify professional development needs and alternatives	◆		
Reference for ethical decisionmaking	◆		
Coalition builders for dialog, training, and peer review	◆		
Basis for learning objectives and course design	◆		
Tools to recognize and award quality in service	◆	◆	
Criteria for certification or credentialing	◆	◆	◆
Criteria for membership in professional organizations		◆	◆
Criteria for employment, retention, and promotion		◆	◆
Required conditions of practice		◆	◆

Table 2. Considerations When Implementing Standards

Considerations on voluntary use	Precautions for voluntary use
<p>Aspirational standards could contribute to training and job performance. Uses that are strictly voluntary may also be intrinsically motivating. They could lead to goal setting and are implicitly directed toward bringing people into the fold rather than keeping them out.</p> <p>Because compliance is chosen rather than compelled, voluntary use also leaves standards open to innovation and growth. Programs and individuals can strive toward enhanced service and can try new approaches without fear of sanction. Evolution of standards is fostered in contexts that promote active decisionmaking and discussion around standards (e.g., standards as the basis for ethical decisionmaking and discussion within coalitions or classrooms). Voluntary approaches that include public discussion and recognition affirm the standards and create normative acceptance of desirable approaches to service delivery.</p> <p>Strictly voluntary use of standards, however, tends to lack accountability and often lacks the requisite measurement to assess and refine program performance.</p>	<p>Voluntary use of standards should be accompanied by full discussion of any unintended but foreseeable consequences (e.g., unauthorized use of assessment findings to impose penalties). Explicit plans should be prepared to prevent misuse and to minimize harmful consequences of use.</p> <p>Although some uses of standards do not require objective measurement, users are strongly encouraged to discuss and bring in sources of such measurement. This might include client surveys, self-assessment, peer review, or board review, any of which can provide a mechanism for feedback to enhance performance. Discussion should address desired depth and breadth of any self-assessment.</p>
Considerations on objective measurement	Precautions for objective measurement
<p>Introduction of objective measurement provides a mechanism for clear performance feedback, whether this measurement is self-assessment or assessment by others. Objective measurement also allows for recognition of quality performance. Yet, use of standards as a condition of practice could exclude unfit programs and practitioners, thereby decreasing a comparative sense of recognition and preventing growth into acceptability.</p>	<p>Efforts should be made to keep assessment tools clear, simple, and affordable.</p>
Considerations on accountability	Precautions for accountability
<p>When the recognition system becomes public and formalized and participation in the system is normative, accountability is introduced. This brings credibility, consistency, and quality control to service, which can enhance educational opportunities, funding for services, statutory protection for privileged communication, and portability of skills/services across geographic locales.</p> <p>Yet, a formal system has the potential to be costly and bureaucratic. Formality also tends toward more static use of standards, thereby restricting opportunity for innovation and possibly excluding those who fail to fall outside the bounds of standardized service. Such exclusionary tendencies have potential not only for culturally biased misapplication, but also may hinder overall availability of services.</p>	<p>Any nonvoluntary program should be pilot tested, with evaluation of outcomes for victims served and for the service community. Attention should be devoted to overall accessibility of services and whether cultural bias affects the service community (e.g., minority providers unequally impacted).</p> <p>All procedures or curricula derived from standards should be reviewed regularly with revisions disseminated to the field. This will help the program incorporate into use state-of-the-art information.</p>

optimize outcomes. Table 2 summarizes some considerations having to do with voluntary use, objective measurement, and accountability. The first column outlines issues to be discussed before putting standards in use. The second column suggests precautions for implementation. Ideal strategies will vary depending on needs, resources, motivations, and politics.

The following **general precautions** are recommended to prevent harmful use of standards:

Whenever possible, special blocks of funding should be created to support standards—but efforts should be made NOT to divert these funds from direct services. Startup and maintenance costs for implementing standards can be substantial, including costs for meetings/travel, needs assessment, consultation, ongoing communication, training and technical support, and administrative support staff. For ultimate stability and longevity of implementation efforts, consideration should be given to a variety of funding streams, including state and federal funds in justice, health and human services, and child welfare. This is crucial if implementation focuses less on aspirational use than on compliance with standards. More formal administration has the potential to create a financial burden on programs and states. Consortium members suggest that credentialing and/or processing costs for providers be kept low and that any profits be diverted to help struggling individuals and agencies meet standards.

Training opportunities must be frequent, accessible, and affordable. It is not possible to measure or enforce compliance before opportunities for individuals and programs to achieve competency or meet the standard have been provided. This may include training for individuals and technical assistance for programs. Mentoring systems are highly recommended. Although state training academies (where they exist) should be included as one possible source of training, Consortium members encourage that a broader range of opportunities be accepted as part of training and credentialing requirements. These opportunities should be evaluated for content, quality, and innovation, and distance learning and train-the-trainer events should be considered.

Any implementation effort should include a minimum of a 1-year grace period for programs to comply with standards. Consideration should be given to whether programs are new or preexisting and to

program size and resources. A suggested model for phase-in uses “percentage-improvement contracts” to help bring programs in compliance. This involves 1) using a rating scale to measure the current level of service and performance relative to the standard, 2) establishing a contract through which the program agrees to a specified percentage change in rating toward meeting the standard, and 3) reassessing and setting percentage goals for a subsequent contract. Compliance requires availability of qualified technical assistance for assessment. It is encouraged that evaluators and any other training and technical assistance involving implementing standards be distinct and separate from regional VOCA contract managers or others that may impose penalties on programs. Exceptions might include circumstances when a strong infrastructure already exists for administering standards.

Any use of penalties must involve a progressive system of remediation, including due process with notification of substandard performance and opportunities to improve performance. Consortium members felt strongly that penalties should not be imposed on small programs that cannot meet standards. Rather, communities and/or larger agencies and organizations are encouraged to support smaller agencies in meeting standards, including assistance toward funding, staffing, and technical assistance. Examples might be drawn from existing models of coordinated community response. The San Francisco Domestic Violence Consortium, for instance, provides smaller agencies with funding and support they may not otherwise have, with member agencies rallying around other agencies as they face financial difficulties. The Domestic Violence Coordinating Committee of Baltimore facilitates joint fundraising among member agencies, with members informing each other about submissions and collaborating on projects. Similarly, implementation of standards should be a supportive process, through which the professional bar is raised thoughtfully, methodically, and with respect and support for those who strive to meet standards. Support might include technical support and, specifically, funding allocated for efforts to meet standards and for training, supervision, and mentoring.

Cultural experts should be used to promote culturally sensitive use of standards, including fair assessment of compliance with standards. Cultural factors may play a role in the interpretation of whether individuals

and/or programs are in compliance with standards. Cultural practices may influence impressions of what constitutes best practice, harm, and so on. Those who adopt standards are encouraged to bring in community or national experts on particular cultures, with these persons working as consultants or on ad hoc committees to help address cultural variations in service provision and assessment. This is especially crucial in populations with large or growing numbers of ethnic or other cultural minorities.

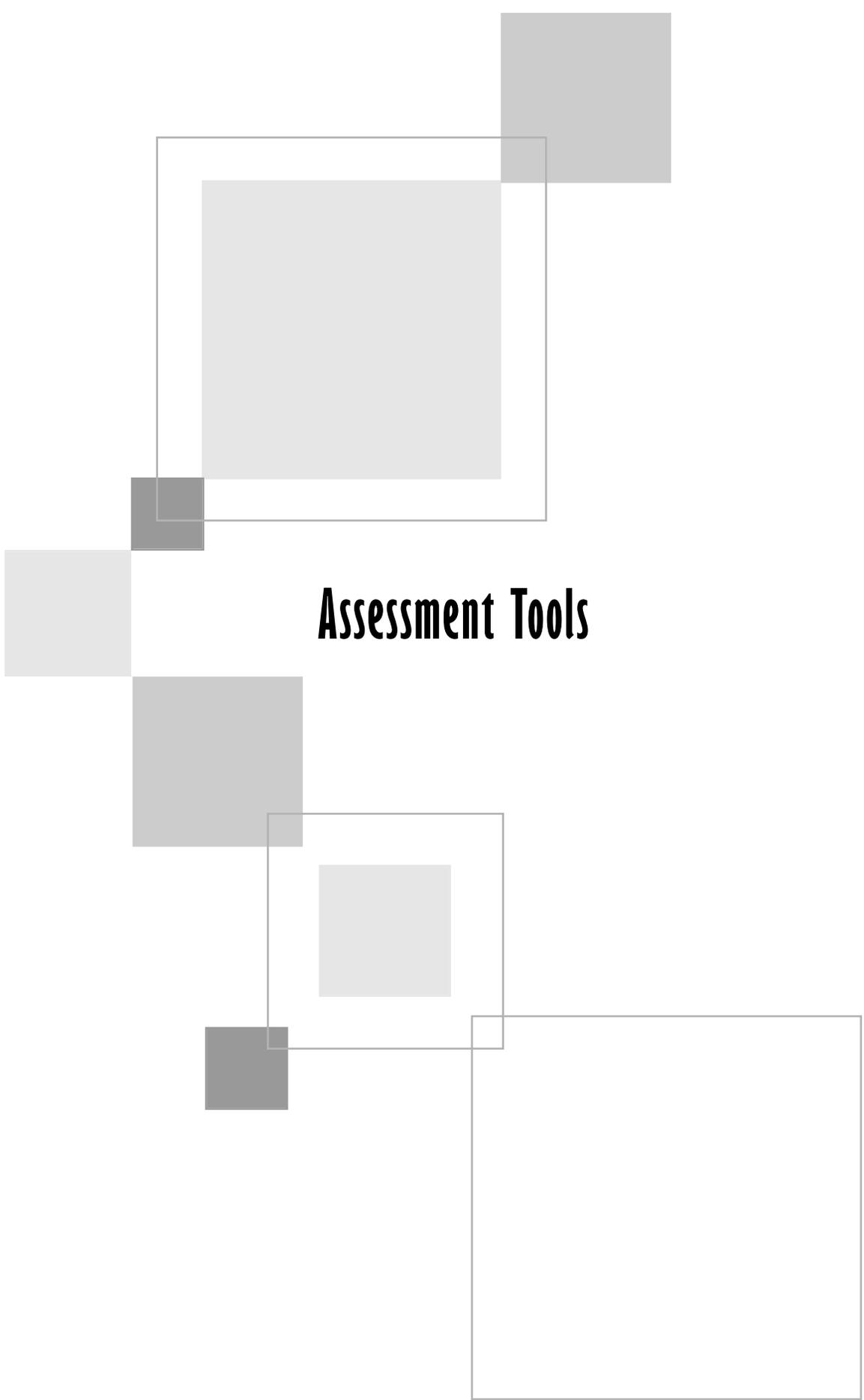
Innovation should be not only allowed, but encouraged. Consortium members were concerned that as the use of standards became more formal, they might discourage creativity and promising practices. Therefore, members recommended that funding be set aside for demonstration projects and/or innovative initiatives. Also, exemptions for noncompliance with standards could be used when innovation was conducted under quality-controlled guidelines; that is, innovative deviations from standards should include evaluation of outcomes and should do no harm. The evolution of the field rests on innovation, and standards must support and enhance services, not restrict programs to function at an established level of mediocrity.

Liability issues should be carefully considered before formal use of standards. Many of the program and ethical standards in this kit address written guidelines for interactions with persons served by the program or individual provider. Although written guidelines may include contracts, programs and providers are cautioned that contracts may incur liability (e.g., civil suits brought by victims or staff for a program's failure to comply with a standard). Accordingly, programs or providers should work with an attorney to verify that nothing produced may be inappropriately construed as a contract between the program and a staff member, person served, or other entity. Similarly, use of oaths of compliance or other such written agreements should be carefully considered, including consultation with an attorney. Finally, liability is an important consideration

for credentialing programs, and explicit assurances should be made that 1) certification does not guarantee competence and 2) the certifying body shall not be held liable for actions of the individual provider.

Several specific uses of standards warrant further discussion. Consortium members felt that using standards as a condition of practice was generally not appropriate. In the absence of baseline data on the benefits of using the standards, strict enforcement of compliance is currently unfounded. Consortium members were also concerned about use of standards as a condition of membership in coalitions. The exclusionary nature of such a condition is clearly in conflict with the values on which the standards were crafted, and many members felt this was a harmful and restrictive use of standards. Conditional membership could create allegiances that discourage new ideas and would weaken the effectiveness of mentoring among programs.

Finally, at least three states have established funding decisions based on standards compliance (California, Florida, Pennsylvania). The former two states use models involving individual standards for credentialing (see Directory of Credentialing Programs for California Victim/Witness Coordinating Council and Florida Attorney General's Office). The latter focuses on compliance with program standards (see Directory of Related Standards for Pennsylvania Coalition Against Domestic Violence, Pennsylvania Coalition Against Rape, and Pennsylvania Commission on Crime and Delinquency). States considering linking funding to standards might look to existing models. In Pennsylvania, for instance, separate program standards were drafted for comprehensive victim services, domestic violence services, and sexual assault services. Compliance with standards is linked to VOCA funding for each type of service, and service providers from each sector have indicated a high level of satisfaction with the system. They indicated that joint ownership and involvement in developing the standards and administrative system were crucial to this success.



Assessment Tools

Sample Assessment Tools

Administrators of standards are encouraged to use flexibility and creativity in measuring compliance with standards. Traditional instruments such as checklists can be simple to develop and use, but they also have drawbacks. Checklists sometimes focus attention on deficits (i.e., what people are *not* doing) rather than identifying strengths or promising practices in service delivery. This may prevent providers from going beyond the standards when setting goals, and may restrict the ability of providers to try new ideas or build on innovative practices. A balanced assessment system offers simplicity, but also allows some flexibility for providers to use alternative methods and to generate their own goals.

The following examples are rudimentary ideas about possible formats for assessment. These samples address assessment of program and competency standards. Ethical standards represent value-based rules for future behavior rather than benchmarks to be achieved and are thereby not addressed by our assessment samples. We will be drafting and pilot testing a variety of assessment tools in the future, and we are interested in hearing from others developing tools based on *NVASC Standards*.

Sample Assessment for a Program Standard

Two samples are provided. Either would be appropriate to a self-study context in which a program administrator reviews performance relative to the standard. The second format (essay-style) may require greater writing and assessment skills on the part of the administrator. Both formats provide flexibility in explaining alternative methods, adding practices, and setting goals.

PROGRAM STANDARD 1.1: A written guideline describes the program's mission, goals, and objectives.

Commentary: The program has a short, succinct statement of purpose, including clearly written program goals and objectives. The program's mission and goal statements are global and general in nature, describing desired states or results. Goals are more specific than an overriding mission statement in defining program purposes. The mission and goals are most meaningful to staff and community members if written to reflect regional needs, priorities, and interests. Program objectives are derived from the mission and goals. Objectives are specific, measurable statements of desired achievements. A program's objectives should reflect design and implementation of the program and desired program and staff achievements. Objectives specify what should happen to persons served, community members, or other target populations or groups as a result of program actions. They reflect changes in behavior, skills, attitudes, values, beliefs (*continued*).

Checklist-Style Assessment

Standard 1.1

No Some Yes

A written guideline describes the program's mission, goals, and objectives.

Comments: _____

Options

No Some Yes

Clear, general mission statement.

Comments: _____

Clear, general goals.

Measurable objectives address outcomes.

Consistency among mission, goals, and objectives.

Mission, goals, and objectives are appropriate to program/region.

Other:

Other:

Rate level of satisfaction with program's performance relative to this standard:

Not at all satisfied

Very satisfied

1

2

3

4

5

List specific goals for improving performance relative to this standard:

1. _____

2. _____

3. _____

Essay-Style Assessment With Sample Responses

Attach a copy of the program's mission statement.

(attached)

Describe methods for developing and updating the program's mission, goals, and objectives. Discuss how the program ensures that the mission, goals, and objectives are consistent with one another and suitable to regional needs.

Our mission, goals, and objectives were first developed in 1989 and have been updated annually since. Annually, we review the mission statement and—as needed—revise goals and objectives to reflect emerging needs. Within this process, we make efforts to ensure that any changes maintain consistency between the mission and goals/objectives. To ensure that year-to-year activities are focused on community needs, revisions in program objectives are based on 1) our annual report of program accomplishments, 2) an annual victimization survey and needs assessment conducted through the state office of victim assistance, and 3) program surveys of client satisfaction and outcomes. We try to ensure that objectives address both stable, long-term needs of the community and emerging trends in victimization (e.g., drug-facilitated sexual assault). Objectives form the basis for long- and short-range program plans and are thereby integrated into day-to-day practice.

Describe outcomes addressed in objectives and how these outcomes are measured.

Program objectives include

- 1. **Increasing access to service**—We measure this through summary statistics of trends and demographic profiles of persons served. We also have items addressing accessibility on our client satisfaction surveys and on our general community surveys.*
- 2. **Reducing revictimization by systems**—Currently, this is measured largely through informal “word of mouth” (e.g., horror stories or lack thereof from victims dealing with the systems). We plan to develop survey measures of revictimization to include in our community surveys.*

Sample Assessment for a Competency Standard

Ideally, assessment of competency occurs in a non-threatening context in which participants share expertise and enhance skills. Sample 2 shows how Competency Standards for Victim Assistance Providers might be translated through training into activity-based assessment. This allows qualified trainers to assess participant knowledge and skills, to identify strengths and areas for improvement, and to structure opportunities for rehearsal and refinement of skills. The group learning environment can be enjoyable for participants and helps to build supportive networks for professional development.

EXCERPT FROM COMPETENCY STANDARDS FOR VICTIM ASSISTANCE PROVIDERS

COMPETENCY STANDARD 2.2: *The victim assistance provider collaborates on efforts to improve systems, laws, institutions, and policies that impact crime victims.*

Elements include, as appropriate to personal and program goals, the ability to

- ◆ Describe social change needs that would support the victim population served by one's program.
- ◆ Recognize the need to advocate for social change using terms and concepts that interest administrators, prospective funding sources, the public, and legislators.
- ◆ Apply strategies for coordinating community education campaigns, such as serving on speaker's bureaus, distributing brochures and educational materials, talking with media representatives, and conducting outreach to underserved populations (*continued*).

Element: Describe social change needs that would support the victim population served by one's program.

The trainer divides students into workgroups based on program affiliation or geographic region. Each group spends a few minutes brainstorming about service barriers faced by victims in their program/region. The group then identifies one major barrier from the list. They discuss general methods and goals for addressing the barrier. Finally, they draft an action plan with three specific objectives for change.

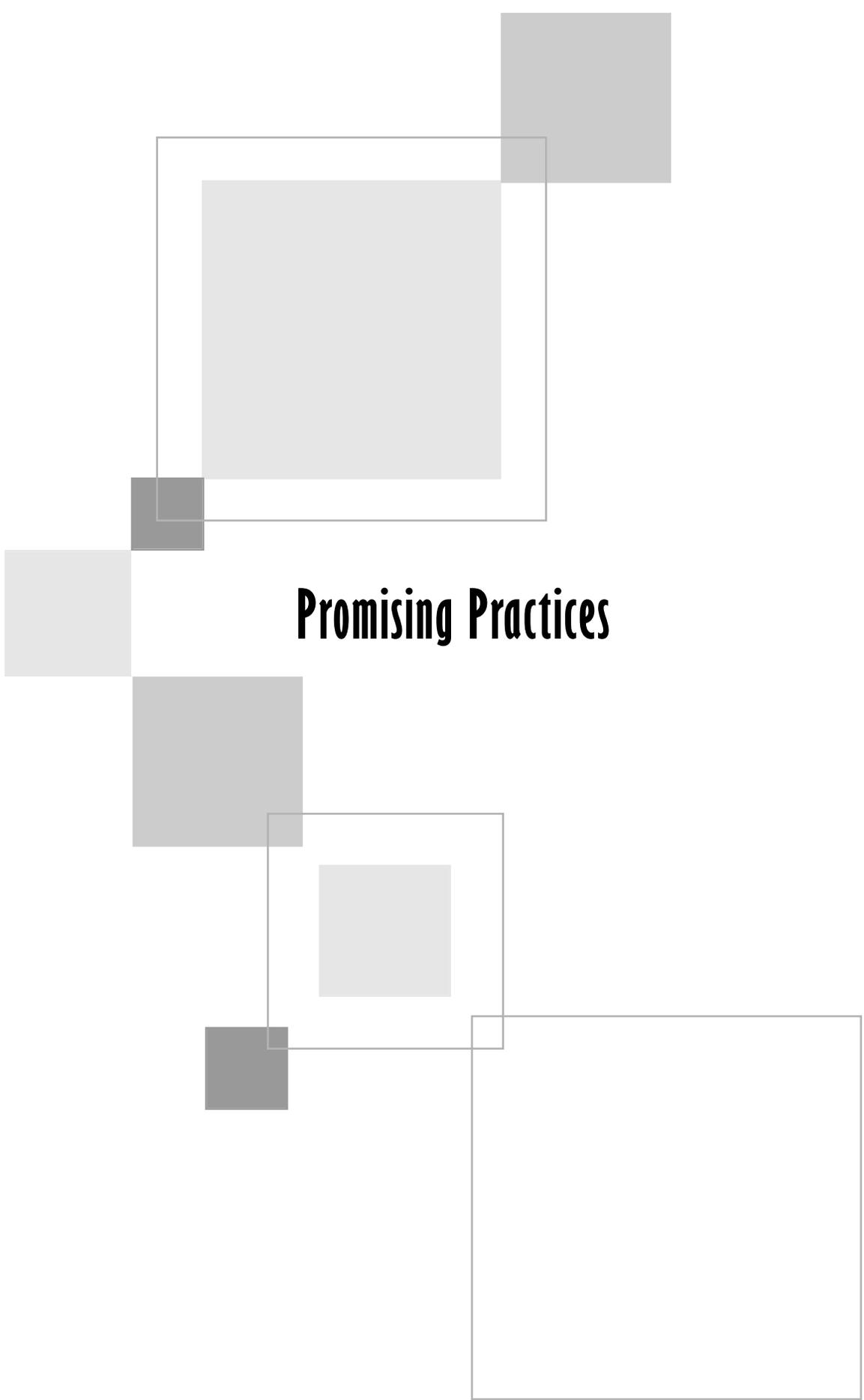
Element: Recognize the need to advocate for social change using terms and concepts that interest administrators, prospective funding sources, the public, and legislators.

Using the same workgroups, the trainer asks each group to draft a 1-page letter to a legislator (or administrator, funder, etc.) requesting support for the proposed change. Letters include clear rationales and explanations of the actions requested (e.g., We request that you vote *Yes* on *Amendment X* because . . .)

Element: Apply strategies for coordinating community education campaigns, such as serving on speakers bureaus, distributing brochures and educational materials, talking with media representatives, and conducting outreach to underserved populations.

Continuing the activity from above, the trainer leads a discussion on ways to gain public support for proposed social changes. The class discusses the effectiveness and feasibility of different options given resources, current policy, and so on.

Activities are integrated into the overall training experience, with instruction on concepts, clear objectives for each activity, and debriefing on activity processes and conclusions.



Promising Practices

Promising Practices in Professional Development

The following represent innovative approaches to professional development, including practices for individuals, programs, and community-wide service networks. Practices include academic programs, distance learning, mentoring and team training, training for outreach, interagency program development, and innovative policy.

Academic Training and Degree Programs

The National Victim Assistance Academy (NVAA) provides academic credit to participants who attend weeklong training at university sites around the Nation. Partners in the effort include OVC, the Victims' Assistance Legal Organization, American University, California State University–Fresno, Medical University of South Carolina, University of New Haven, and Washburn University. The foundation-level Academy is held at university sites, with each site hosting a core faculty that includes national leaders in academic, nonprofit, direct service, and governmental and public policy sectors of victim assistance. Academic credit at both the undergraduate and graduate levels is available to Academy students from several of the cosponsoring universities. For limited portions of the Academy curriculum, the multiple sites are linked via teleconferencing to give all students access to select national speakers and to create a national identity among the sites. To date, more than 1,300 students from all 50 states, 4 U.S. territories, and 6 foreign countries have completed NVAA. A number of the university partners involved in NVAA have now developed coursework and degree programs in victim assistance.

Contact information:

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McLean, VA 22102
703-748-0811
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Web site: www.nvaa.org

South Carolina's Victim Assistance Institute (VAI) uses interdisciplinary training and community projects to promote regional networks of skilled providers. A collaborative effort of the State Office of Victim Assistance and the University of South Carolina, this competency-based training is delivered in six regions of South Carolina. Registration procedures ensure a mix of disciplinary backgrounds among victim assistance providers attending the training. Basic training includes three 2-day training sessions, delivered weeks apart to allow time for application and rehearsal of concepts. The training ends in a team capstone project, through which interdisciplinary groups of VAI participants plan and deliver their own training in the community. Examples include senior citizen safety breakfasts, roll call trainings for law enforcement, and training for housing residents on crime reporting. The capstone project helps VAI participants integrate knowledge and demonstrate skills while working with a team of colleagues and contributing to the community. Through capstone projects, VAI participants delivered more than 250 direct training hours to approximately 3,000 laypersons and professionals.

Contact information:

Dana DeHart
Center for Child and Family Studies
College of Social Work
University of South Carolina
Columbia, SC 29208
803-777-7867
E-mail: dana.dehart@sc.edu
Web site: www.sc.edu/cosw/center

The Office for Victims of Crime assists states in developing academically based education for victim assistance providers, criminal justice personnel, and allied professionals who routinely interact with victims of crime. The State Victim Assistance Academy (SVAA) initiative supports development of comprehensive, fundamental professional education and currently includes academies in Colorado, Connecticut, Pennsylvania, Texas, and Utah. The initiative is intended to encourage development of academies in other states with the ultimate goal of establishing a nationwide network of state academies capable of meeting foundation level educational needs of victim assistance providers. Already, a number of additional states have initiated or are developing similar

academic training through partnerships among state and federal governments, higher education, and non-profit organizations (e.g., California, Florida, Michigan, Missouri, New Mexico, Oregon, South Carolina, Wisconsin, Vermont).

Contact information:

Laura Ivkovich
Office for Victims of Crime
U.S. Department of Justice
810 Seventh Street NW.
Washington, DC 20531
202-307-5983
E-mail: LauraI@ojp.usdoj.gov
Web site: www.ojp.usdoj.gov/ovc

The University of Colorado provides a degree program on domestic violence through the Graduate School of Public Affairs. The education and training program was developed in collaboration with the domestic violence practitioner community and offers a master of public administration specialty in domestic violence and nonprofit management. The Program on Domestic Violence is designed to enhance the ability of domestic violence advocates, activists, and administrators, as well as others interested in the field, to manage organizations that address violence against women and children. Coursework and other educational opportunities are also available to members of the community at large.

Contact information:

Pete Wolfe or Barbara Paradiso
Graduate School of Public Affairs
University of Colorado Program on Domestic Violence
Campus Box 142
P.O. Box 173364
Denver, CO 80217-3364
303-556-5970
E-mail: Pete.Wolfe@cudenver.edu
Web site: <http://carbon.cudenver.edu/public/gspa/programs/c054.html>

Distance Learning

The Ministry of Attorney General in Vancouver, British Columbia (BC) incorporates home study and phone tutoring into its volunteer training curriculum. BC has developed a series of competency-based curricula, including detailed learning objectives, core values,

and instructional principles. The curricula include helpful activities, overhead masters, and self-assessments. In-class learning is supplemented with home study, through which participants complete readings, view videos, write assignments, and consult with phone tutors for discussion and guidance. The orientation is offered as a guided independent study that allows new workers to begin basic training as soon as possible upon hire. New workers are paired with an experienced victim service worker who takes on the role of tutor. Tutors set their own hours for consultation and provide clarification, in-depth discussion, feedback on assignments, and information about community resources. Service delivery and management development modules are 5-day classroom courses. Experienced advocates may opt out of some classroom training via a prior learning assessment module. BC also has developed an advanced regional training, a multidisciplinary training, several special topics trainings, and detailed interagency protocols for communitywide service.

Contact information:

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302–815 Hornby Street
Vancouver, BC V6Z 2E6
604–660–5199
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Web site: www.ag.gov.bc.ca/programs/victim_services.htm

The National Institute of Corrections (NIC) broadcasts 1-day videoconferences on important topics in correctional policy and practice. Videoconferences are transmitted via live satellite/Internet broadcast, with participants viewing through downlinked classrooms or individual Internet access. Individual viewers or sites can register on the Internet for participation, and NIC can provide assistance in locating a site for satellite links. Programs are typically several hours in length and often incorporate expert panels and questions from viewers/participants. To support videoconference events, NIC provides each viewing site with a master copy of participant materials and covers all costs for uplinking to the satellite and telephone time for questions.

Contact information:

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Longmont, CO 80501
1–800–995–6429, ext. 131
E-mail: ewolahan@bop.gov
Web site: www.nicic.org

The On-line Domestic Violence Health Care Provider Education Project educates health care professionals to recognize, diagnose, and respond to patients who may have been victims of domestic violence.

Posted on the popular Web site of the American Medical Women's Association, the online course includes materials developed by the Family Violence Prevention Fund and was developed with funding from OVC. The program is designed for physicians, residents in all specialties, medical students, and other health care professionals and is approved for continuing medical education credit. The course includes topics such as the nature and dynamics of domestic violence, screening and clinical presentations, safety planning, the legal aspects of domestic violence, the effects of domestic violence on children, and interacting with offenders. In addition to the course text, hyperlinks to video and audio clips, case studies, and reference charts are included in each unit to make the course an interactive multimedia experience.

Contact information:

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E-mail: jschafer@amwa-doc.org
Web site: www.amwa-doc.org

Washburn University's Victim Assistance Program combines classroom instruction with Web-based distance-learning technology.

The program is an academically based advanced professional education program that draws from multiple disciplines. The first part of the program is an intensive 5-day classroom interaction. The focus of this phase is instruction and discussion of issues considered essential for professional understanding in the field, including theoretical and historical concepts, physical and psychological issues of victimization, special victim populations, systemic and policy issues, and other victim service issues. The second phase of Washburn's program continues the learning experience through Web-based support and discussion as participants prepare for a professional

certificate. A final session integrates the two forms of learning 5 months later. This capstone event consists of a presentation of the analysis paper in a collegial discussion environment. The combined in-class and distance format makes Washburn's continuing education program accessible to providers across the country.

Contact information:

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E-mail: underwood@washburn.edu
Web site: www.washburn.edu/ce/cvvs

Innovative Policy

An Arizona state statute grants professional privilege to victim assistance providers, protecting confidentiality of communications between the provider and persons served. The statute (13-4430) specifies that victims must provide written consent for release of "records, notes, documents, correspondence, reports or memoranda, except compensation or restitution information, that contain opinions, theories, or other information made while advising, counseling, or assisting the victim or that are based on communication between the victim and the advocate." Several other states (e.g., Colorado, Iowa, Kentucky) have limited statutes granting confidentiality to domestic violence and/or sexual assault counselors who have received a specified amount of training.

Contact information:

Arizona Legislative Computer Services
1700 West Washington
Phoenix, AZ 85007
Web site: www.azleg.state.az.us

Mothers Against Drunk Driving (MADD) incorporates flexibility in policy to support professional development of programs and staff. For instance, MADD occasionally supports programs beyond the scope of its mission to enhance the public good. The organization granted its National Director of Victim Services a sabbatical to complete writing projects of value to all homicide survivors. MADD also granted an advocate opportunity to enhance the Victim Impact

Classes program for all crime victims, and encouraged its Hawaii state office to provide services to all homicide survivors. A national administrator supported annual revision of job descriptions for staff. This allowed individuals who were experiencing burnout to exchange tasks with colleagues while still ensuring that all tasks were adequately addressed. Furthermore, staff were able to build skills and broaden their range of service knowledge through the exchange.

Contact information:

Stephanie Frogge
Mothers Against Drunk Driving
P.O. Box 541688
Dallas, TX 75354-1688
1-800-GET-MADD
E-mail: Frogge@madd.org
Web site: www.madd.org

New York's Safe Horizon created an Anti-Stalking Unit to develop intra-agency antistalking policies and procedures, coordinate agencywide antistalking services, and create internal and external training curricula. The Anti-Stalking Unit and Safe Horizon's Communications Division collaborate on designing and distributing educational materials for victims of stalking, including an antistalking resource directory. The Anti-Stalking Coordinator is also available to provide consultation to Safe Horizon staff and other service providers.

Contact information:

Melissa Collins
Safe Horizon
2 Lafayette Street
New York, NY 10007
212-577-5085
E-mail: mcollins@safehorizon.org
Web site: www.safehorizon.org

Numerous businesses and service agencies have adopted health initiatives for employees, including fitness classes, meditation, self-defense, nutrition seminars, health consumer information sessions, and onsite health screening. Such offerings are frequently scheduled before and after working hours or at lunchtime, and are sometimes accompanied by Web-based health information sites, health care guidebooks for staff, and financial incentives for participation in health programs. Workplace fitness programs not only

contribute to health of individual employees and their families, but also boost morale and retention, reduce absenteeism, and cut company health care costs. The scope of implementing such programs varies with program size and resources. Smaller programs might adopt simple initiatives or programs might establish coalitions to support regional or statewide health initiatives for victim assistance providers. Community agencies might cosponsor annual health fairs to heighten awareness of nutrition, fitness, and stress-management issues. Stanford University's Health Promotion Resource Center offers resources and information for implementing health promotion practices.

Contact information:

Health Promotion Resource Center
Stanford Center for Research in Disease Prevention
730 Welch Road, Suite B (MC: 5736)
Palo Alto, CA 94304
650-723-0003
E-mail: askHPRC@med.stanford.edu
Web site: <http://hprc.stanford.edu>

The U.S. Office of Personnel Management (OPM) allows demonstration projects for testing innovative policy in Federal Government settings. Implementing health promotion programs or new personnel policies sometimes warrants programmatic flexibility. OPM provides a mechanism for waiving particular regulations to propose, develop, test, and evaluate workplace innovations. The agency's Employee Health Services Branch provides information and support on employee health and workplace violence prevention and response.

Contact information:

U.S. Office of Personnel Management
Center for Human Resources Innovation
1900 E Street NW., Room 7458
Washington, DC 20415-6000
202-606-2920
E-mail: hrinnovation@opm.gov
Web site: www.opm.gov

Interagency Program Development

Justice agencies all over the Nation are implementing integrated technology systems to improve information reporting, access, and exchange across agencies.

Internet systems allow citizens to access public information, and secured systems allow access by justice personnel. Technology has been applied to automated victim notification systems, case tracking systems, order-of-protection registries, and other interagency computer networks. Tracking systems, for instance, allow persons from law enforcement, courts, probation and parole, and other justice agencies to share a collective database so that personnel have institutionally available information at key decision points.

Authorized personnel such as judges can obtain information on whether a victim has been notified, whether restitution has been paid, and so on. SEARCH, the National Consortium for Justice Information and Statistics, identifies and helps to solve information management problems of state and local justice agencies. Their goals include improving public safety by making more timely, accurate, and complete information available, and by reducing duplication in justice data management. SEARCH's Web site provides state and local technology profiles, model case studies, and state-of-the-art information on integrated justice systems.

Contact information:

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SEARCH
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Web site: www.search.org

New Haven's Family Violence Outreach Program provides support and resources to protect women and children in families experiencing paternal child abuse.

Using an experienced social worker and a domestic violence advocate, the Family Violence Outreach Program receives referrals from social service agencies in the Greater New Haven area—including Legal Assistance, the New Haven Police Department, mental health centers, hospitals, child guidance centers, drug treatment programs, schools, the Department of Children and Families (DCF), the Visiting Nurses Association,

and the Department of Social Services, as well as private physicians and attorneys. Rather than blaming women for paternal child abuse, the agency uses home visits and advocacy to prevent child abuse, neglect, and out-of-home placement of children. Support and educational counseling are the cornerstones of the intervention with mothers, and play therapy and support are offered to children ages 4 and older. Staff also accompany women to appointments at DCF, court, or other social service agencies, and ensure that services for mothers and children are coordinated.

Contact information:

Danielle Morriss
Family Violence Outreach Program
131 Dwight Street
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E-mail: dmorrisseccc@nh.org

New York's Domestic Violence Court Preparation System (DVCPS) streamlines the link between victim assistance providers and the family court system.

DVCPS uses Internet technology to assist domestic violence victims seeking, or considering whether to seek, an order of protection. Victim assistance providers have access to the software and provide computer access to victims in a secure and supportive location. The screens take the petitioner through a series of questions that check eligibility for a civil protective order. In each case, the screen gives a list of possible options; if the user checks any of them, the petitioner is passed on to the next step in the program. If the victim does not qualify for a civil protective order, the software automatically offers information on alternatives such as initiating a criminal prosecution. Once eligibility and grounds for prosecution are established, the software collects information for the petition. Finally, the victim is given a checklist of possible conditions to request. Once the online questionnaire is complete, the computer automatically assembles and prints out all the legal papers that the victim needs for a protective order. In New York City, the Fund for the City of New York is working with the court system to provide access to an expedited filing for victims who arrive at family court with petitions prepared by this system. A recently completed Spanish version will allow petitioners to answer questions in Spanish and produce documents in both Spanish and English. Demonstration versions can be viewed at www.fcny.org/nydvdemo or www.fcny.org/spanishdemo.

Contact information:

Joyce Klemperer or Harriet Gianoulis
Center for Internet Innovation
Fund for the City of New York
121 Sixth Avenue
New York, NY 10013
212-925-6675
E-mail: jklempere@fcny.org
Web site: www.fcny.org

New York's Metro Area Support for Survivors of Torture Consortium establishes comprehensive community-focused services on behalf of torture survivors. A partnership between Safe Horizon, Doctors of the World/USA, the International Institute of New Jersey, and New York University's International Trauma Studies' Refuge, the Consortium's goal is to engage torture survivors, their families, and communities in comprehensive services through community-based approaches. Services include care management through a network of bicultural counselors providing outreach, education, and linkage/referral; community-focused interventions; and medical, psychological, legal, and interpreter services. The long-term goal of the Consortium is to support the development of community-based programs that empower refugee communities so that torture survivors are less isolated and stigmatized, can articulate their own needs, and maintain systems of support after intervention.

Contact information:

Ernie Duff
Safe Horizon
2 Lafayette Street
New York, NY 10007
212-577-7700
E-mail: eduff@safehorizon.org
Web site: www.safehorizon.org

Safe Horizon in New York has been a pioneer in colocating advocacy services to improve accessibility and support for victims and their families. Safe Horizon staff members are stationed in high-crime Bronx County precinct courts to provide court-based counseling and advocacy and assist with safety planning. Partners in the project include the district attorney's office, the New York Police Department, and the Bronx court staff. By colocating Safe Horizon staff in precincts and in the courthouse, victims are better able to obtain legal remedies. Safe Horizon has also established colocated child advocacy centers that house

under one roof multidisciplinary teams from law enforcement, child protective services, prosecution, medical services, and victim advocacy. The centers work to ensure that the investigative response is more humane and coordinated and that the child and nonoffending family member receive immediate support following disclosure. They also seek to build collaboration among investigative agencies to improve the chances of successful protection of the child and prosecution of the offender. The relationships between the agencies are solidified by operating protocols and legal memoranda of understanding.

Contact information:

Paula Calby (Court-Based Programs) or
Steven Matz (Child Advocacy Programs)
Safe Horizon
2 Lafayette Street
New York, NY 10007
212-577-7700
E-mail: pcalby@safehorizon.org or
smatz@safehorizon.org
Web site: www.safehorizon.org

Victim Services 2000 involves 50 Denver victim service agencies in instituting innovative strategies to improve services to victims. The collaborative effort includes a shared case management system, an online resource directory and training center, a citywide cross-training plan, training for allied professionals, and community advocates. The online site includes searchable databases for regional services and trainings and employment announcements for posting of positions.

Contact information:

Marti Kovener
Victim Services 2000
303 West Colfax Avenue, Suite 1300
Denver, CO 80204
720-913-9256
E-mail: mkovener@vs2000.org
Web site: www.vs2000.org

Mentoring and Team Training

The Colorado Coalition Against Domestic Violence promotes mentoring in a number of ways, including annual statewide training programs and cross-program mentoring for new executive directors. The coalition's New Worker Training brings together new staff

members from domestic violence programs across the state. The 2-day educational program provides basic information on the history and purposes of the domestic violence movement as well as information on specialized program services (e.g., services for children). The coalition's Executive Director Training Program, also 2 days in length, is designed to enhance knowledge and skills of those in top leadership positions within their organizations. Finally, the Mentoring Program helps new executive directors succeed in their new roles. Experienced executive directors are partnered with newly hired directors for an initial period of 1 year. Efforts are made to arrange matches in accordance with the stated needs of the apprentice and expertise of the mentor. A resource bank is maintained of individuals in the coalition who are skilled in management and willing to share their knowledge on a short-term basis.

Contact information:

Yolanda Gotier
Colorado Coalition Against Domestic Violence
P.O. Box 18902
Denver, CO 80218
303-831-9632
E-mail: ccadv@ccadv.org
Web site: www.ccadv.org

The first National Sexual Assault Response Team (SART) Training Conference is the first conference of a national scope designed to provide training for members of a SART team. SART members, including rape crisis center advocates, are expected to work together but rarely have the opportunity to train together. The conference includes workshops on a variety of topics, including team member roles and boundaries. This multidisciplinary conference was held in San Antonio, Texas in May 2001, administered by the Sexual Assault Resource Service of Minneapolis, Minnesota and funded by OVC.

Contact information:

Linda Ledray
Sexual Assault Resource Service
SART Training Conference
525 Portland Avenue South, Seventh Level
Minneapolis, MN 55415
612-347-5832
E-mail: Linda@sane-sart.com
Web site: www.sane-sart.com

OVC provides mentoring to VOCA state administrators on grant management issues affecting service delivery. Through the mentor program, OVC helps to develop skills, knowledge, and abilities of VOCA administrators and their staffs. The purpose of the mentor program is to facilitate peer consultation whereby an administrator from one state can offer technical assistance and skills training to an administrator in another state. The range of assistance available is as diverse as the work experience of VOCA administrators, including establishing standards, developing manuals, developing statewide training, upgrading technologies, streamlining programs, and offering other assistance. There is no cost to the trainers, those receiving assistance, or their agencies. OVC compensates trainers, reimburses travel expenses associated with onsite assistance or staff consultations, and covers the cost of any materials needed for the technical assistance visit.

Contact information:

Training and Technical Assistance Center Mentor Program
Office for Victims of Crime
U.S. Department of Justice
10530 Rosehaven Street, Suite 400
Fairfax, VA 22030
1-866-682-8822
E-mail: TTAC@ovcttac.org
Web site: www.ojp.usdoj.gov/ovc/assist/mentor.htm

Training for Outreach Providers

The Abused Deaf Women's Advocacy Service (ADWAS) in Seattle has trained leaders in deaf communities in 15 cities to develop programs for culturally competent services to deaf victims of domestic violence and sexual assault. Founded in 1986, ADWAS has methodically expanded its services, providing direct services to more than 600 victims/survivors of sexual assault and domestic violence, and educating more than 15,000 hearing and deaf/deaf-blind people. Because the agency is run by deaf people, women who come for services do not have to deal with teaching the providers about community dynamics and deaf cultural rules, and a third-person interpreter does not have to be used for communication. The agency's most extensive expansion began with the Justice for Deaf Victims national training program, under a 3-year grant from the U.S. Department of Justice. Each year of the project, ADWAS selected five deaf communities to take

the national training. There are now 15 communities that have gone through training: Austin, Texas; Boston; Burlington, Vermont; Chicago; Columbus, Ohio; Denver; Des Moines; Detroit; Honolulu; Minneapolis/St. Paul; Philadelphia; Rochester, New York; Salt Lake City; San Francisco/Bay Area; and Washington, D.C. The coalition will continue to provide training and support to others.

Contact information:

Marilyn Jean Smith
Abused Deaf Women's Advocacy Services (ADWAS)
2627 Eastlake Avenue East
Seattle, WA 98102-3213
(TTY only): 206-726-0093
Fax: 206-726-0017
E-mail: adwas@adwas.org
Web site: www.adwas.org

The agency does not accept incoming voice calls for both practical and political reasons, a decision that may help hearing people accept that real diversity sometimes necessitates alternative methods.

Casa Myrna Vazquez (CMV), Inc., in Boston provides training to expand the types of professionals who can recognize domestic violence and respond appropriately to women seeking help. Formed in 1977, this community-based, multicultural organization is dedicated to the eradication of domestic violence against women and children. CMV uses a participatory education model to train street outreach workers, day-care providers, health care providers, HIV counselors, and teachers to identify battered women whom they may be assisting in the course of their work.

Contact information:

Debra Robbin
Casa Myrna Vazquez
P.O. Box 180019
Boston, MA 02118
617-521-0100
E-mail: drobbin@casamyrna.org
Web site: www.casamyrna.org

Florida's Rural Victimization Project addresses rural victimization by training "Meals on Wheels" volunteers to identify signs of domestic violence and elder abuse. The project is a collaborative effort of the Institute for Family Violence Studies at Florida State

University, the Florida Department of Community Affairs, the Florida Department of Health, Meals on Wheels, and the Violence Against Women Office of the U.S. Department of Justice. The competency-based curriculum includes information on the dynamics of abuse, impact of domestic violence on nutritional outcomes, appropriate methods for assessing violence and making referrals, and utilizing community resources.

Contact information:

Institute for Family Violence Studies
FSU School of Social Work
C-3405 University Center
Tallahassee, FL 32306-2570
850-644-6303
E-mail: fsuvisit@aol.com
Web site: <http://familyvio.ssw.fsu.edu>

The Generation Next Leadership Training Academy trains young people to work with other youth to identify and incorporate nonviolent solutions into their daily lives. A core group of young people from throughout New York City are trained as peer educators, and they, in turn, train their peers about violence prevention. The training provides young people with skills and techniques to address issues of violence in their homes, schools, and communities. Since 1993, Generation Next has trained more than 500 young people as peer educators and trainers, who in turn have conducted more than 1,000 workshops and trainings for about 10,000 young people and adults. The Generation Next Extended Day program, which Safe Horizon currently operates at a New York City intermediate school, uses the principles of Generation Next to focus on literacy and violence prevention during after-school hours.

Contact information:

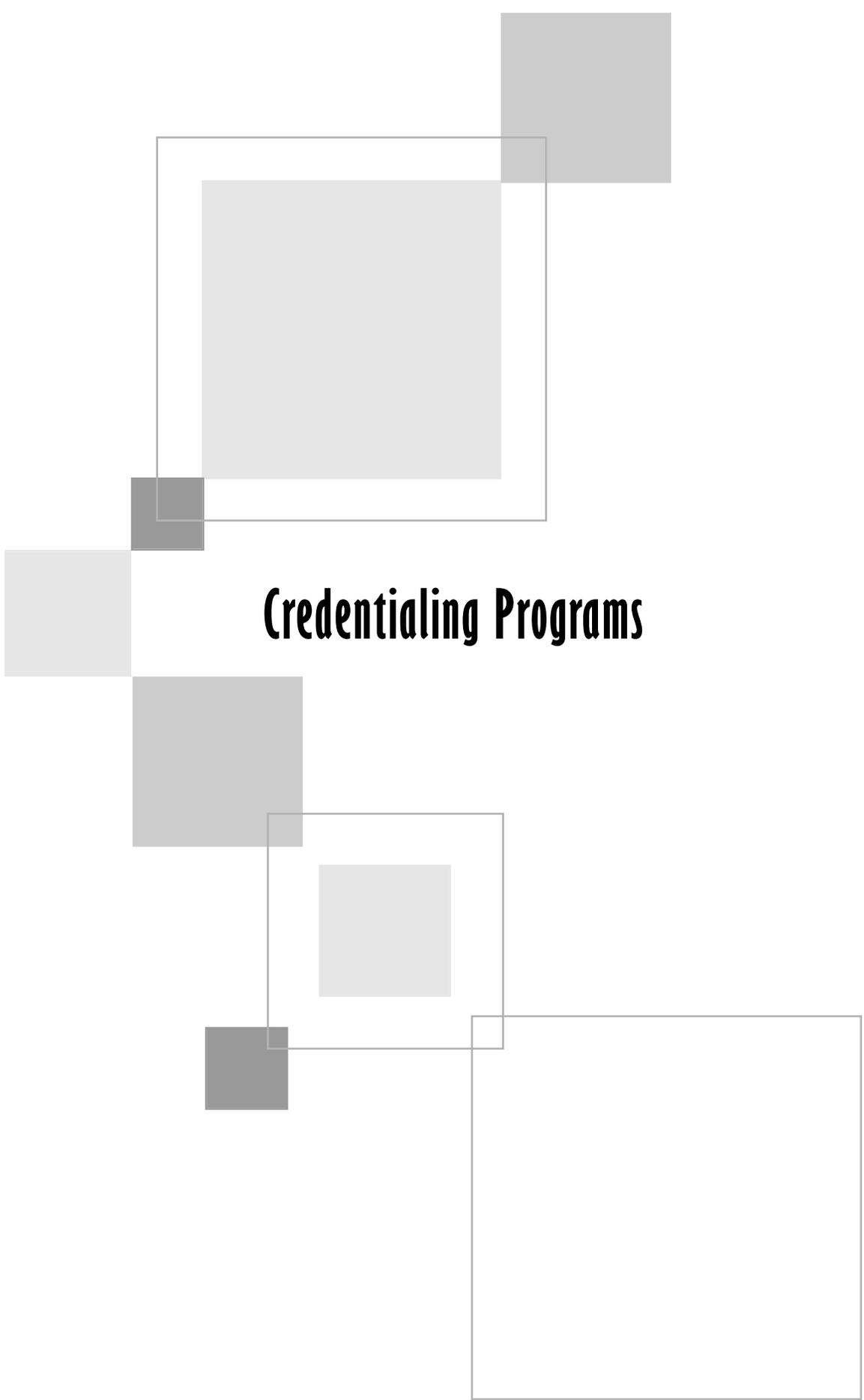
Richard Harris
Safe Horizon
2 Lafayette Street
New York, NY 10007
212-577-7700
E-mail: rharris@safehorizon.org
Web site: www.safehorizon.org

Pennsylvania's Victim Outreach Intervention Center is developing a training curriculum to help care providers identify sexual abuse of people with mental disabilities. The curriculum is designed specifically for

people who work with mentally challenged people and people with learning disabilities. The project will provide education surrounding sexual assault prevention and identification of abuse. The training program and curriculum guide will include a basic overview of sexual abuse and the risk factors of the targeted population, an overview of state-mandated reporting guidelines, appropriate responses to sexual abuse disclosures, and a referral guide for followup counseling and advocacy. The program is designed to be shared with sister centers throughout Pennsylvania and will be sold nationwide.

Contact information:

Esther Voelker
Victim Outreach Intervention Center
P.O. Box 293
Evans City, PA 16033
724-776-5910



Credentialing Programs

Directory of Credentialing Programs

Credentialing programs include institutes of higher education, components of state government, professional associations, and non-profit organizations that confer degrees, certificates, or registration/designation in general or specialized victim services. This directory also lists a number of state-based victim assistance academies that do not currently offer credentials but do provide academic credit for participation. Criteria and benefits of credentials vary widely depending on the program, and victim assistance providers are encouraged to examine options relative to their own professional development needs. Similarly, organizations, agencies, councils, or other prospective credentialing entities are encouraged to evaluate the costs and benefits of varied models.

Association of Traumatic Stress Specialists (ATSS)

Credentials: Certifications include certified trauma specialist, certified trauma responder, and certified trauma services specialist.

Participant audience: International.

Program structure: ATSS is a membership organization that offers certification in three practice areas: response, services and/or treatment. Candidates must submit an application demonstrating trauma-specific training and letters of reference addressing the applicant's expertise and professional conduct. Training and education can be selected from academic courses, continuing education, conferences, and other approved providers. Courses for certified trauma responders include topics such as disaster administration and crisis response management, crisis intervention, impact of trauma, vicarious victimization, stress management, conflict resolution, special victim populations, workplace violence, assistance to combat and military veterans, emergency rescue, hostage response and negotiation, posttraumatic stress, grief, pastoral

counseling, terrorism, and numerous other topics. Courses for certified trauma services specialists include many similar topics as well as courses on child victimization, domestic violence, homicide, spiritual issues, hospice care, mental illness, Holocaust victims, and other topics. Courses for certified trauma specialists include additional topics such as intake, differential diagnosis/dual diagnosis, treatment planning/case management, counseling, community resources, and ethical and legal issues.

Contact information:

Jayne Crisp
Association of Traumatic Stress Specialists
7338 Broad River Road
Irmo, SC 29063
864-294-0761
E-mail: admin@atss.com
Web site: www.ATSS-HQ.com

California State University, Fresno (CSUF)–Victim Services Certificate Program

Credentials: Certificate in victim services, bachelor's degree in victimology, doctorate in victimology (anticipated).

Participant audience: Nationwide.

Program structure: The CSUF certificate program may be taken through regular course offerings or in a 4-week intensive summer institute (180 contact hours, 12 credits). Internships are encouraged for both options. The bachelor's program offers a 4-year degree with 128 units of coursework, including a victim services internship. Course topics include spousal abuse, emotional abuse, sexual abuse, elder abuse, child abuse, victimology and violence, restitution, compensation, culpability, victim services, victim rights, social services, and legislative issues. Programs require tuition and fees. CSUF also serves as one of several site hosts for the National Victim Assistance Academy (NVAA). Many academic and continuing education programs are now offered jointly with Washburn University (Topeka, Kansas) through the Joint Center on Violence and Victim Studies.

Contact information:
Steven D. Walker, Ph.D.
Victim Service Programs

Department of Criminology–Justice Center
MS/MF 104
California State University–Fresno
2225 East San Ramon
Fresno, CA 93740–8029
559–278–2305
E-mail: stevend@csufresno.edu
Web site: www.csufresno.edu/criminology/
victimservices.htm

California Victim/Witness Coordinating Council (CVWCC)

Credentials: Certification as victim advocate, upgraded to victim advocate with senior standing after 5 years service/education.

Participant audience: California.

Program structure: This state-based council of mandated service agencies is funded through the State of California's Criminal Justice Planning Office (VOCA administrator). CVWCC received 3-year funding to establish a Victim Services Training Institute in Sacramento and has hired a full-time staff member to manage operations. Programs mandated to provide victim/witness services cannot receive funding unless all employees are certified. Basic training is required of all state advocates within their first year of employment, advanced training is required within their first 3 years of employment, and a special coordinator's training is required of all first-line supervisors and program coordinators. Basic training includes 40 hours addressing direct service issues (such as compensation, restitution, resources, and trauma). Advanced training includes 32 hours of training with greater depth of coverage (such as appeals), and the coordinator's training is a 36-hour training on programmatic issues (such as volunteer management, personnel, leadership, and policy). "Grandparenting" exemptions allow persons with 5 years of experience to forego basic (but not advanced) training. A registration fee of \$250 for members and \$275 for nonmembers covers the cost of the 5-day basic training; 16 hours of continuing education are required each year to maintain certification. Certification procedures are evaluated and reviewed regularly.

Contact information:
Harold Boscovitch
California Victim/Witness Coordinating Council

Alameda County District Attorney's Office
Victim/Witness Assistance Division
1401 Lakeside Drive, Suite 802
Oakland, CA 94612
510-272-6176
E-mail: hboscovi@co.alameda.ca.us
Web site: www.co.alameda.ca.us/da

Colorado Victim Assistance Academy (CVAA)

Credentials: At this time, Colorado does not offer a certification for victim advocacy, but academic credit will be available to participants.

Participant audience: Colorado.

Program structure: The Colorado Organization for Victim Assistance has received a grant from OVC to establish the Colorado Victim Assistance Academy. The purpose of the Academy is to provide basic victim advocacy training to people working with victims of crime. CVAA will be modeled on the curriculum of the NVAA, but tailored to meet unique needs of Colorado. Some material will be used prior to training in 40 hours of self-study and assessment, and other material will be presented in 5 days (40 hours) of classroom training. Selection priority will be given to providers in rural areas who are new to victim services. Training will be held in two locations across the state. Class sizes will be small and include a mix of law enforcement, prosecution, post-sentencing, and nonprofit victim assistance providers. The registration fee for CVAA is \$275 and participants must pay for lodging, food, and travel expenses. Some partial scholarships are available.

Contact information:

Colorado Victim Assistance Academy
Colorado Organization for Victim Assistance
789 Sherman Street, Suite 670
Denver, CO 80203
303-861-1160
E-mail: COVA789@aol.com
Web site: www.coloorg.com/academy.htm

Community College of Aurora–Victim Advocacy Certificate Program

Credentials: Certificate specialization in victim advocacy services.

Participant audience: Colorado.

Program structure: The certificate is available through the college's criminal justice program and includes specialized coursework in victimology, principles of counseling, culture and conflict resolution, and crisis intervention, with additional coursework in either child advocacy or adult advocacy. Options include study of child victimization, juvenile law and procedure, domestic violence, sexual assault, and addictive processes. Internet course options are also available.

Contact information:

Paula Bonell
Victim Advocacy Certificate Program
Business and Professional Studies, Division C-208
Community College of Aurora
16000 East Centre Tech Parkway
Aurora, CO 80011-9036
303-340-7051
E-mail: Paula.Bonell@cca.cccoes.edu
Web site: <http://cs.cca.cccoes.edu/crj150/index.html>

Connecticut Victim Assistance Academy (CVAA)

Credentials: No information available.

Participant audience: Connecticut.

Program structure: CVAA is a state-based victim assistance academy funded through OVC.

Contact information:

Linda Cimino
Connecticut Victim Assistance Academy
c/o Office of Victim Services
31 Cooke Street
Plainville, CT 06062
860-747-6070
E-mail: linda.cimino@jud.state.ct.us
Web site: www.jud.state.ct.us

Delaware Coalition Against Domestic Violence

Credentials: Certification as a domestic violence specialist.

Participant audience: Delaware (domestic violence service providers only).

Program structure: Delaware reviews applications, which must include direct service experience, number of training hours received, references, self-evaluation, personal history criminal background, and pledge to abide by ethical code. Training requirements include 70 hours of approved domestic violence education in specified content areas and 120 hours of supervised practical training under the supervision of a certified mentor. Training content areas include history of domestic violence, current trends in practice and policy, basic domestic violence dynamics, gender issues and empowerment, cultural sensitivity, family dynamics, advocacy, confidentiality and ethics, crisis intervention, suicide and lethality issues, batterer's treatment, women's treatment (for women who use violence), hotline work, shelter, community resources, mental health issues, trauma responses, substance abuse, sexual abuse, the criminal justice system, the civil justice system, court preparation, safety planning, documentation, gay/lesbian/transgender issues, elderly victims, dating violence, victims with disabilities, effects on children, child abuse, parenting/discipline, funding, professionalism, stress reduction, boundaries, values clarification, and liability. Training hours are also allotted for court observation/visits, observing intervention, and observing group processes. "Grandparenting" exemptions apply to persons with extensive applied service experience (2,000 hours or 1 year of full-time employment) and 70 hours of education/training.

Contact information:

Polli Funk
Delaware Coalition Against Domestic Violence
100 West 10th Street, Suite 703
Community Service Building
Wilmington, DE 19801
302-658-2958
E-mail: dcadv@dcadv.org
Web site: www.dcadv.org

Florida Attorney General's Office—Crime Prevention Training Institute

Credentials: Designation as victim services practitioner.

Participant audience: Florida.

Program structure: In Florida, at least one staff person on a VOCA grant must be designated as a victim services practitioner. Designation is also required for

employment in some law enforcement agencies and the provision of testimony in some judicial circuits. National and local trainers follow prescriptive guidelines on training content and delivery. A 3-day basic training addresses the impact of crime, the nature and scope of crime, crisis intervention, child abuse, domestic violence, sexual assault, homicide, diversity, the role of the advocate, legislative mandates, community resources, and other basic issues. Participants receive a 1,000-page resource guide, which gives more detailed information on topics referenced in the training. There are also 1-day "grandfather-clause" issue briefings provided on an occasional basis. These cover legislation, diversity, and compensation issues. Advanced (recertification) offerings include interactive seminars and workshops on cutting-edge issues. Advanced topics include referrals to counseling, alternative trauma therapies, advanced study of domestic violence, advanced study of sexual assault, hate/bias crimes, legal rights and legal advocacy, police culture, and working with police. A \$125 registration fee covers costs for initial basic training. Recertification every 3 years is contingent on completion of 24 contact hours of approved training, most of which costs approximately \$35 per 8-hour day.

Contact information:

Rick Nuss
Florida Crime Prevention Training Institute
Office of the Attorney General
The Capitol, PL-01
Tallahassee, FL 32399-1050
850-414-3360
E-mail: rick_nuss@oag.state.fl.us
Web site: <http://legal.firn.edu/victims/programs.html>

Florida Network on Victim/Witness Services (FNVWS)

Credentials: Certification in victim services (proposed).

Participant audience: Florida.

Program structure: This nonprofit organization has proposed three levels of training and certification, but plans to move forward are under review. FNVWS also has a code of ethics and holds regular training conferences.

Contact information:

Sandy Duncan

Florida Network of Victim/Witness Services
205 North Dixie Highway, Suite 1100
West Palm Beach, FL 33401
561-355-4409
E-mail: sduncan@co.palm-beach.fl.us
Web site: www.afn.org/~fnvws

Housatonic Community College–Victim Services Certificate Program

Credentials: Certificate in victim services.

Participant audience: Connecticut area.

Program structure: Coursework includes introduction to criminal justice, introduction to counseling, human service skills and methods, victim services and advocacy, and a criminal justice practicum.

Contact information:

Dr. Edward C. Keane
Victim Services Certificate Program
Housatonic Community College
900 Lafayette Boulevard
Bridgeport, CT 06604
203-332-5000
E-mail: ho_keane@commnet.edu
Web site: www.hctc.commnet.edu

Iowa Coalition Against Domestic Violence

Credentials: Domestic violence advocate certification (in development).

Participant audience: Iowa (domestic violence service providers only).

Program structure: The Iowa statutory code on confidential communications specifies that domestic violence counselors must have a minimum of 20 hours of training to qualify for privileged communication. This program will assist providers in demonstrating compliance with statutory requirements.

Contact information:

Iowa Coalition Against Domestic Violence
2603 Bell Avenue, Suite 100
Des Moines, IA 50321-1120
515-244-8028
E-mail: info@icadv.org
Web site: www.icadv.org

Iowa Coalition Against Sexual Assault

Credentials: Certification as a sexual assault counselor.

Participant audience: Iowa (sexual assault service providers only).

Program structure: The Iowa statutory code on confidential communications specifies that sexual assault counselors must have a minimum of 20 hours of training to qualify for privileged communication. This program will assist providers in demonstrating compliance with statutory requirements. The certification program requires 40 hours of approved training and 36 hours of direct service. Standards for training include specifications for content and trainer qualifications. Content includes “herstory,” victims’ rights and legal issues, issues of rural women, adults molested as children, incest survivors, skill building, diversity, systems advocacy, and coalition building. “Grandparenting” exemptions exist for persons with 2 years of experience and other training; these candidates must complete the 40-hour certification training but are exempt from other requirements. Continuing education is required for recertification.

Contact information:

Iowa Coalition Against Sexual Assault
2603 Bell Avenue, Suite 102
Des Moines, IA 50321-1120
515-244-7424
E-mail: iowacasa@aol.com
Web site: http://showcase.netins.net/web/i_weaver/iowacasa

Kansas City Kansas Community College–Victim Services Program

Credentials: Certificate in victim services, AAS degree in victim services, AA degree in victim services.

Participant audience: Kansas.

Program structure: The certificate program includes a field practicum and coursework in victimology, victim/survivor services, family violence, rape and child abuse, and legal policy. Degree programs include additional coursework in psychology, sociology, law enforcement, victim services, and general education. Courses include crisis counseling, general psychology, sociology, crime and delinquency, social psychology, introduction

to law enforcement, criminal law, diversity issues, grieving processes, social problems, computer concepts, foreign languages, composition, ethics, public speaking, and math electives. University tuition and fees are required. The program has cooperative relationships with Washburn University victim service programs.

Contact information:

Jesus Baeza
Victim Services Program
Kansas City Kansas Community College
7250 State Avenue
Kansas City, KS 66112
913-334-1100
E-mail: baeza@toto.net
Web site: www.kckcc.cc.ks.us/catalog/vsaa.htm

Kentucky Domestic Violence Association (KDVA)

Credentials: Certification as domestic violence counselor, two levels of certification available.

Participant audience: Kentucky (domestic violence service providers only).

Program structure: KDVA administers standards for individuals and programs (see Directory of Related Standards for information on program standards). Individual certification requires compliance with an ethical code and completion of approved training. Training includes supervised service as well as readings, videos, and classroom training in specified content areas.

Contact information:

Kentucky Domestic Violence Association
P.O. Box 356
Frankfort, KY, 40602
502-695-2444
E-mail: kydvasoc@aol.com
Web site: www.kdva.org

Michigan Victim Assistance Academy (MVAA)

Credentials: No formal credential offered, but academic credits are available.

Participant audience: Michigan.

Program structure: The Academy is held annually and is funded through VOCA and sponsored by the Crime Victim Services Commission, Michigan Department of

Community Health, Michigan State University, and the Prosecuting Attorneys' Association of Michigan. The intensive 45-hour Academy is conducted on the campus of Michigan State University and features recognized speakers and instructors. MVAA is modeled after the National Victim Assistance Academy but tailored to the state of Michigan. The Academy focuses on coordinated community response and interdisciplinary teams of participants are encouraged to apply. Approximately 40 candidates are selected to attend each year. A certificate of graduation is awarded on successful completion of the course and academic credit is available. Housing and partial meal costs are covered for all participants, but participants are responsible for the application fee, transportation, and the remaining meals.

Contact information:

Michigan Victim Assistance Academy
1407 South Harrison Road
321 Nisbet Building
East Lansing, MI 48823
517-432-3594
E-mail: Karen.Sherman@ssc.msu.edu
Web site: www.cj.msu.edu/~outreach/mvaa

National Government Management Association, Inc.

Credentials: Certified government manager in victim assistance.

Participant audience: Nationwide.

Program structure: Membership in this professional organization is required for certification. Certification requires 10 "points" achieved through the combination of 1) undergraduate degree (4 points), 2) master's degree (1 point), 3) 3 years minimum in present position as supervisor (3 points), and 4) additional work experience or supportive educational experience (points accrue balance). Certification is renewed every 3 years with continuing membership and demonstration of continuing education or work experience.

Contact information:

National Government Management Association, Inc.
P.O. Box 40398
Raleigh, NC 27629-0398
919-954-8199
E-mail: ngma@crosswinds.net

National Organization for Victim Assistance (NOVA)

Credentials: Certification not yet offered but under consideration.

Participant audience: Nationwide.

Program structure: The proposed certification program will include an application process. Applicants must demonstrate completion of 40 hours of approved training plus NOVA's written knowledge test. Advanced certification will be available to persons who had been certified for 2 years and who have also completed specific requirements for supervisor observation, training, and/or continuing education. For a limited time, experienced advocates will be "grandparented" into advanced certification through testing and references. Recertification will be required every 2 years with 32 hours of specified continuing education. Basic certification is proposed to cost \$100; recertification, \$75; and advanced certification, \$150. Proposed advisors include representatives from national organizations.

Contact information:

National Organization for Victim Assistance
1757 Park Road NW
Washington, DC 20010
202-232-6682
E-mail: Nova@try-nova.org
Web site: www.try-nova.org

National Victim Assistance Academy

Credentials: Academic credit and certificate of graduation from the U.S. Department of Justice.

Participant audience: Nationwide.

Program structure: NVAA is an academic-based training program funded by OVC and cosponsored by the Victims' Assistance Legal Organization. Cosponsors include American University, California State University-Fresno, the Medical University of South Carolina, the University of New Haven, and Washburn University. The course includes 40 hours of classroom-style training with accompanying skills-building laboratory sessions, faculty mentoring, and a videotape series. Topics include scope of crime and impact of

victimization, history of victims' rights and services, theories of victimology, law and criminal/civil justice systems, crime victims' mental health needs, financial crime, restorative justice, child victimization, domestic violence, victimization of people with disabilities, victimization of the elderly, media coverage of crime, underserved victim populations, collaboration, and innovative technologies. Sixty faculty present on curriculum topics at university sites nationwide. Trainees are selected on basis of geographic, cultural, and professional diversity. Students cover costs of transportation, housing, and meals. Beginning in fall 2000, the Academy also offers the Advanced Topic Series, 2- to 3-day trainings that focus exclusively on single-topic areas; this series continues the same academic-based training style of the foundation-level Academy. These trainings are offered throughout the calendar year.

Contact information:

Morna Murray
National Victim Assistance Academy
Victims' Assistance Legal Organization
8180 Greensboro Drive, Suite 1070
McLean, VA 22102
703-748-0811
E-mail: mmurray@valor-national.org
Web site: www.nvaa.org

New Mexico Victim Advocacy Training (NM VAT)

Credentials: Academic credit and a certificate of completion from the New Mexico Crime Victims Reparation Commission.

Participant audience: New Mexico.

Program structure: NM VAT is a state-based training academy.

Contact information:

New Mexico Victim Advocacy Training
New Mexico Crime Victims Reparation Commission
8100 Mountain Road NE., Suite 106
Albuquerque, NM 87110
505-841-9432
E-mail: CVRC@state.nm.us
Web site: www.state.nm.us/cvrc

Ohio Advocate Network for Training and Registration

Credentials: Registered advocate (RA), registered advocate with advanced standing (RAAS), registered advocate with senior standing (RASS).

Participant audience: Ohio.

Program structure: The Ohio Advocate Network is an interorganizational group that includes committees and representation from the Ohio Victim/Witness Association, Ohio Domestic Violence Network, Mothers Against Drunk Driving, Parents of Murdered Children, and ACTION Ohio. Certification through the Network requires a specified number of years experience (1 for RA, 3 for RAAS, and 5 for RASS), an oath of agreement with the Network's ethical code, and no criminal background of felony or violent crime. Certification also requires 20 hours of approved training, in topic areas including crisis intervention, suicide lethality assessment, case management, advocacy, the criminal justice system, history of victims' movement, cultural competency, ethics/confidentiality, and compensation. Training hours also include electives for specialization in domestic violence, sexual assault, homicide, drunk driving offenses, general services, or program administration and activism. Certification requires a \$25 application fee, 20 hours of continuing education, and reapplication every 2 years (\$10 renewal fee or \$25 for status upgrade). Providers of training may apply to the Network for registration for a training program if the program provides 20 hours of approved preservice training as well as 20 hours of continuing education.

Contact information:

Jeannette Adkins
Ohio Advocate Network
c/o Victim/Witness Division
Greene County Prosecutor's Office
61 Greene Street, Lower Level
Xenia, OH 45385
937-562-5087
E-mail: JMAdkins84@aol.com

Oregon Crime Victims Assistance Network (OCVAN)

Credentials: Certification currently under consideration by multidisciplinary committee.

Participant audience: Oregon.

Program structure: The proposed certification effort may be a collaboration between OCVAN (a primarily prosecution-based victim assistance organization) and the state VOCA administration office. The Oregon Department of Justice currently provides VOCA-funded training, which may become the cornerstone for a credentialing program. Current training includes 40 hours of classroom-style training held in four regions of the state. Topics include principles of victim assistance, ethics and boundaries, history of victim assistance, victims' rights, crisis intervention, death notification, counseling and advocacy, communication skills, psychological trauma, spirituality and trauma, justice system, intra-agency and interagency collaboration, sexual assault, domestic abuse, stalking, child victimization, homicide, victims of drunk driving, special victim populations, and cross-cultural service delivery.

Contact information:

Pam Heimuller
Oregon Crime Victims Assistance Network
c/o Department of Justice
1162 Court Street NE.
Salem, OR 97310
503-727-1036
E-mail: pam.heimuller@usdoj.gov
Web site: www.doj.state.or.us

Pennsylvania Victim Assistance Academy (PVAA)

Credentials: No credential is provided. Academic credit and a certificate of completion are issued jointly by the University of Scranton and the Pennsylvania Commission on Crime and Delinquency.

Participant audience: Pennsylvania.

Program structure: PVAA is designed primarily for victim service providers and allied professionals with a minimum of 2 years in the field and are currently in their third year of service. The selection process is intended to promote an Academy class that represents the state's urban, suburban, and rural communities, and is geographically, culturally, and professionally diverse. State leaders in the fields of victimology, criminal justice, and victims' rights join expert practitioners and host faculty from the University of Scranton to provide an educational foundation grounded in practical applications across the field. The 5-day curriculum includes

topics such as the criminal justice continuum, crisis and trauma in victimization, domestic violence, drunk driving, financial assistance for victims of crime, hate and bias crimes, homicide, innovative technology and the information age, professionalizing the discipline of victim services, respecting diversity, responding to underserved victims of crime, restorative justice, sexual assault, specific justice systems (juvenile, adult, federal, and military), victimization of individuals with disabilities, and victimization of the elderly. The curriculum provides the 10 hours of training needed to meet the crisis intervention training requirements and the 40 hours needed to meet the annual training requirements set by Pennsylvania standards for comprehensive victim service programs (see Directory of Related Standards). Cost for tuition, all course materials, housing, and meals is \$300.

Contact information:

Jan Bechtel
Pennsylvania Victim Assistance Academy
Pennsylvania Commission on Crime and Delinquency
P.O. Box 1167
Harrisburg, PA 17108-1167
717-787-2040
E-mail: jabechtel@state.pa.us
Web site: www.pccd.state.pa.us

Red Rocks Community College–Victim Assistance Program

Credentials: Direct service victim assistance certificate, administrative victim assistance certificate, associate of applied science degree in victim assistance.

Participant audience: Colorado.

Program structure: The direct service certificate requires submission of a writing sample evaluated by the English department, completion of a microcomputer requirement, a basic skills test, and 30 credits of selected coursework in criminal justice, psychology, and sociology. The administration certificate requires 25 credits of selected coursework in criminal justice, accounting, management, and marketing. A criminology degree allows concentration in victim assistance (21 of 63 credits required in selected criminology, social work, and psychology courses). Topics of study include criminal justice, victims and trauma, domestic violence, sexual

assault, violence against children, crisis intervention, managing compassion fatigue, adult survivors, and death and dying. Administrative coursework includes additional emphasis on grant writing for nonprofit organizations, accounting, resource management, and marketing. University tuition and fees are required.

Contact information:

Terri Lukavitch
Victim Assistance Program
Red Rocks Lakewood Campus
1300 West Sixth Avenue
Lakewood, CO 80228-1255
303-914-6434
E-mail: terri.lukavitch@rrcc.cccoes.edu
Web site: www.rrcc.cccoes.edu/degrmset.html

Sam Houston State University–National Institute for Victim Studies

Credentials: Bachelor's degree in victim studies (proposed), master's degree in victim services administration (proposed), and coursework and continuing education programs (currently available).

Participant audience: Nationwide.

Program structure: Degree programs are currently under development in partnership with MADD. Online courses will also be available. University tuition and fees will be required.

Contact information:

Jim Marquart
National Institute for Victim Studies
Sam Houston State University
Box 2180
Huntsville, TX 77341
936-294-4295
E-mail: icc_jwm@shsu.edu
Web site: www.shsu.edu/text.html

South Carolina Victim Assistance Standards and Certification Board (SCVASCB)

Credentials: Certified victim assistance specialist.

Participant audience: National.

Program structure: SCVASCB reviews applications for certification. Approval requires a pledge to comply with the organization's ethical code, 2,000 hours of applied work experience, 500 hours of supervised work experience, a resume, two letters of recommendation, and 68 hours of specialized course work. Training is not provided by SCVASCB, but approved training includes coursework in the criminal justice system, short-term and long-term reactions to victimization, crisis intervention, values clarification, ethics, community resources/referrals, stress management, communication skills, grief, program administration, family systems, case management, and community crisis. Costs include a \$10 application fee, a \$100 certification fee, and a \$75 fee for recertification every 3 years (recertification also requires completion of 30 contact hours of training).

Contact information:

Jayne Crisp
South Carolina Victim Assistance Standards
and Certification Board
5000 Old Buncombe Road
Unit #27-133
Greenville, SC 29609
864-294-0761
E-mail: Jcrisp@aol.com
Web site: www.sc-certification.org

**Southwest Missouri State University
(SMSU)-Victim Advocacy Certificate Program**

Credentials: Certificate in victim advocacy.

Participant audience: Missouri area.

Program structure: SMSU's Center for Continuing and Professional Education offers a 45-hour training delivered in three sessions. Topics include history of victim services, victimology, legal processes, Missouri legislation, property crimes, family violence, child victimization, sexual assault, drunk driving offenses, homicide, elderly victims, hate/bias crimes, crisis intervention, community trauma, victim trauma, lobbying, and promising practices. The class also participates in observance of victims rights week, and special skill-building workshops are offered periodically. A \$165 fee is required for each 15-hour session. The curriculum is approved training for VOCA and State Services to Victim Funds.

Contact information:

Center for Continuing and Professional Education
Southwest Missouri State University
901 National Avenue
Springfield, MO 65804
417-863-6660
E-mail: doryholmes@smsu.edu
Web site: <http://ccpe.smsu.edu/vac>

**Texas District and County Attorneys Association
(TDCAA)**

Credentials: Recognition as a professional victim assistance coordinator.

Participant audience: Texas (prosecution victim assistance providers only).

Program structure: The goal of this voluntary program is to recognize professional standards in prosecutor-based victim assistance, including a minimum standard of training in the field. Recognition requires: 3 years of direct service in prosecution advocacy or 1 year in prosecution advocacy, with 4 additional years in general victim services; five letters of recommendation from specified individuals (including the elected prosecutor); an oath of agreement to conditions; and demonstration of 45 hours of approved training. The hourly training requirement is based on that of the National Victim Assistance Academy. Training content is relatively flexible, however, the TDCAA Victim Services Committee stipulates 1 hour minimum in four key areas: Texas Code of Criminal Procedure Article 56, crime victims' compensation, victim issues, and crisis intervention. The elected prosecutor must agree to allow the provider to attend 12 hours of continuing education annually. Membership in TDCAA is required for certification, with membership costs of \$25 per year. Organizational funds from membership and book sales pay for the program costs, and a similar program has been offered to investigators in prosecutor offices since 1988. A disclaimer on the certification application protects the organization against liability.

Contact information:

Joni Sager
Texas District and County Attorneys' Association
Professional Victim Assistance Coordinator
Recognition Program
1210 Nueces

Austin, TX 78701
512-474-2436
E-mail: sager@tdcaa.com
Web site: www.tdcaa.com

Texas Victim Assistance Academy

Credentials: No credential currently offered, but long-term plans call for certificate and degree programs in the field of victim assistance. University course credits and continuing education credits are being offered.

Participant audience: Texas.

Program structure: The Crime Victims' Institute is developing the Texas Victim Assistance Academy through a grant from OVC. The Institute conducted a training needs survey among service providers and has convened a steering committee of major stakeholders. The Institute is writing a Texas-specific curriculum based on minimum service guidelines recommended by the State Agency Task Force on Victim Services and Intervention Mapping methodology. The first Academy offering included 50 students and was held at Southwest Texas State University in San Marcos in June 2001. Other university sites across the state and distance learning will be incorporated in the future.

Contact information:

Texas Victim Assistance Academy
Texas Attorney General's Office
Crime Victims' Institute
P.O. Box 12548
300 West 15th Street
Austin, TX 78711-2548
512-936-1655
E-mail: cvi@oag.state.tx.us
Web site: www.oag.state.tx.us/victims/cvi.htm

Tri-State Victim Assistance Consortium

Credentials: To be determined.

Participant audience: Maine, New Hampshire, Vermont.

Program structure: An advanced training academy for the tri-state region is under development. The Consortium will offer advanced training opportunities to primary and secondary victim assistance providers.

Fifteen representatives of three states serve on the Consortium steering committee and are broadly representative of the victim assistance community, state universities, and state grant funders.

Contact information:

Tri-State Victim Assistance Consortium
Justiceworks
University of New Hampshire
105 Thompson Hall
Durham, NH 03824
603-862-4748 (Robyn Mantel)
E-mail: robyn.mantel@unh.edu

University of Colorado at Denver—Program on Domestic Violence

Credentials: Master of public administration with concentration in domestic violence and nonprofit management.

Participant audience: Nationwide.

Program structure: The Graduate School of Public Affairs Program on Domestic Violence combines nonprofit and public organization management skills with expertise in domestic violence. The graduate degree program includes public affairs courses (e.g., organizational change, economics and finance), domestic violence electives (e.g., sociology of violence against women, rhetoric of new social movements), nonprofit management courses, and an integrative capstone project. The program has a multidisciplinary faculty with expertise in law, political science, women's studies, criminal justice, public administration, child and family therapy, human development, social change activism, psychology, health and nursing, and other areas.

Contact information:

Graduate School of Public Affairs
Program on Domestic Violence
University of Colorado—Denver
Campus Box 142
P.O. Box 173364
Denver, CO 80217-3364
303-556-5971
E-mail: Pete.Wolfe@cudenver.edu
Web site: <http://carbon.cudenver.edu/public/gspa/programs/c054.html>

University of New Haven (UNH)–Victim Service Programs

Credentials: Undergraduate certificate in victim services, graduate certificate in victim services, undergraduate concentration in victim services administration, graduate concentration in victimology.

Participant audience: Nationwide.

Program structure: The UNH Department of Criminal Justice, School of Public Safety and Professional Studies offers a number of certificate and degree options in victim services. The undergraduate concentration in victim services administration includes 15 credit hours of coursework as part of a criminal justice major (121 credit hours) plus a required internship at a victim service agency. The undergraduate victim services administration certificate program includes 15 credit hours taken without the other coursework but completion of an internship is encouraged. A graduate concentration in victimology includes 18 credits within a masters program. A graduate certificate in victim advocacy and services management includes 12 credit hours, and an internship is encouraged. Topics of study include ethnic and gender issues in criminal justice, juvenile justice, domestic violence, victimology, victim law and service administration, domestic and sexual violence, research methods and statistics, advanced victimology, and crime victims' rights/services. University tuition and fees are required.

Contact information:

Victim Services Programs
Department of Criminal Justice
School of Public Safety and Professional Studies
University of New Haven
300 Orange Avenue
West Haven, CT 06516
1-800-342-5864
E-mail: nanjazz@charger.newhaven.edu
Web site: www.newhaven.edu/psps/criminaljustice.html

University of South Carolina (USC)–Victim Assistance Institute

Credentials: Primary certificate in victim services, specialty certificate in coordinated community response.

Participant audience: South Carolina.

Program structure: The USC Victim Assistance Institute was formed in collaboration with the State Office of Victim Assistance, with certificates sanctioned by the state Crime Victims' Advisory Board and curricula approved by the Crime Victims' Policy Committee. Basic Training includes 30 hours of direct training delivered in three 2-day sessions. Topics include history and theories of victimization, crime and the justice system, constitutional rights, documentation, ethics, compensation, restitution, civil remedies, crisis intervention, victim expectations, victim trauma, property crime, drunk-driving felony, homicide/suicide, death notification, child victims, domestic abuse, criminal sexual conduct, interagency roles and referral, working with the media, communication in advocacy, diversity, compassion fatigue and self care, and intervention and outreach. An additional 15 hours is split between applied "fieldwork" (homework) and team "capstone project." The capstone project is a 4 to 6 person team effort to develop and deliver a community training (for example, to police, laypersons, seniors) or to develop an interagency agreement. Participants who complete all training, fieldwork, and the capstone project receive a primary certificate. A specialty certificate is currently being offered for training in coordinated community response. The training is delivered in a 3-day session with multidisciplinary teams of participants, focusing on topics of domestic abuse, sexual assault, and child victimization. All training is currently free to victim assistance providers, although registration fees may be required in the future.

Contact information:

Victim Assistance Institute
Center for Child and Family Studies
College of Social Work
University of South Carolina
Columbia, SC 29208
803-777-7867
E-mail: dana.dehart@sc.edu
Web site: www.sc.edu/cosw/center

Utah Victim Assistance Academy (UVAA)

Credentials: No information available.

Participant audience: Utah.

Program structure: UVAA is a state-based training academy funded through OVC.

Contact information:

Jacci Graham
Utah Victim Assistance Academy
Criminal Justice Center
800 West State Street
P.O. Box 618
Farmington, UT 84025–0618
801–451–4344
E-mail: jacci@co.davis.ut.us

Vermont Victim Assistance Academy (VVAA)

Credentials: No credentials are proposed at this time, but VVAA will offer undergraduate and graduate academic credit as well as continuing educational credit.

Participant audience: Vermont.

Program structure: The Vermont Center for Crime Victim Services (the Center) is establishing VVAA with the support of a Victim Services 2000–Vermont grant from OVC. The Center conducted a statewide needs assessment of victims/survivors and those non-profit and system stakeholders who have contact with victims of crime. The needs assessment helped determine priorities and preferred training structure. The Center then convened an advisory group of major stakeholders to focus on implementation of the project. These stakeholders include expert practitioners as well as leaders in the field of trauma research, criminal justice, and victims' rights. A subcommittee of stakeholders is developing a Vermont-specific curriculum based on approved minimum competencies. VVAA will offer 2-day trainings quarterly. Over the course of 1 year, participants will complete a 40-hour foundation-level course in victims' rights, victim services, and victimology. Plans are underway for an advanced track and a judicial track.

Contact information:

Jac Patrissi
Vermont Victim Assistance Academy
Vermont Center for Crime Victim Services
Ladd Hall
103 South Main Street
Waterbury, VT 05671–2001
802–241–1259
E-mail: jacpatrissi@ccvs.state.vt.us

Washburn University (WU)–Center on Violence and Victims Studies

Credentials: Professional certificate in victim/survivor services, bachelor's degree in victim/survivor services, academic certificate in victim/survivor services.

Participant audience: Nationwide.

Program structure: The WU professional certificate program is an advanced academically based program to promote professional skills, understanding, and critical reflection. Instructional approaches are intended to challenge the professional learner while recognizing the expertise of each individual and enhancing services to victims at individual, organizational, and societal levels. The intensive course includes 5 days of training (40 contact hours), ongoing listserv support, and a 1-day followup session for examination and presentation. Topics include history and theories of victimization, attitudes about victimization, stress and health issues, trauma responses, laws and the justice system, roles within the system, domestic violence, critical incident stress, sexual assault, diversity, hate crimes, death notification, and legislation and policy. A small class size provides a learning environment that enhances collegial professional interaction and encourages participant contribution to learning goals. An academic degree and certificate program is housed in the Human Services Department in the School of Applied Studies. These programs are administered through regular course offerings as well as online learning opportunities. The bachelor's degree in victim/survivor services requires coursework and includes four applied internships in the field. The academic certificate in victim/survivor services requires coursework including English, victimology, victim/survivor services, legal policy, and family violence. Tuition and fees are required. WU also serves as one of several host sites for the National Victim Assistance Academy.

Contact information:

Thomas Underwood
Professional Certificate in Victim/Survivor Services
Center on Violence and Victim Studies
1700 Southwest College Avenue, Benton Hall 408
Washburn University
Topeka, KS 66621
785–231–1010, ext. 1242
E-mail: underwood@washburn.edu
Web site: www.washburn.edu/ce/cvvs

Richard Ellis
Academic Degree/Certificate in Victim/Survivor
Services
Human Services Department
School of Applied Studies
Washburn University
Topeka, KS 66621
785-231-1010, ext. 1279
E-mail: zzelli@washburn.edu
Web site: www.washburn.edu/sas/human-services

Wisconsin Victim Assistance Academy (WVAA)

Credentials: No information available.

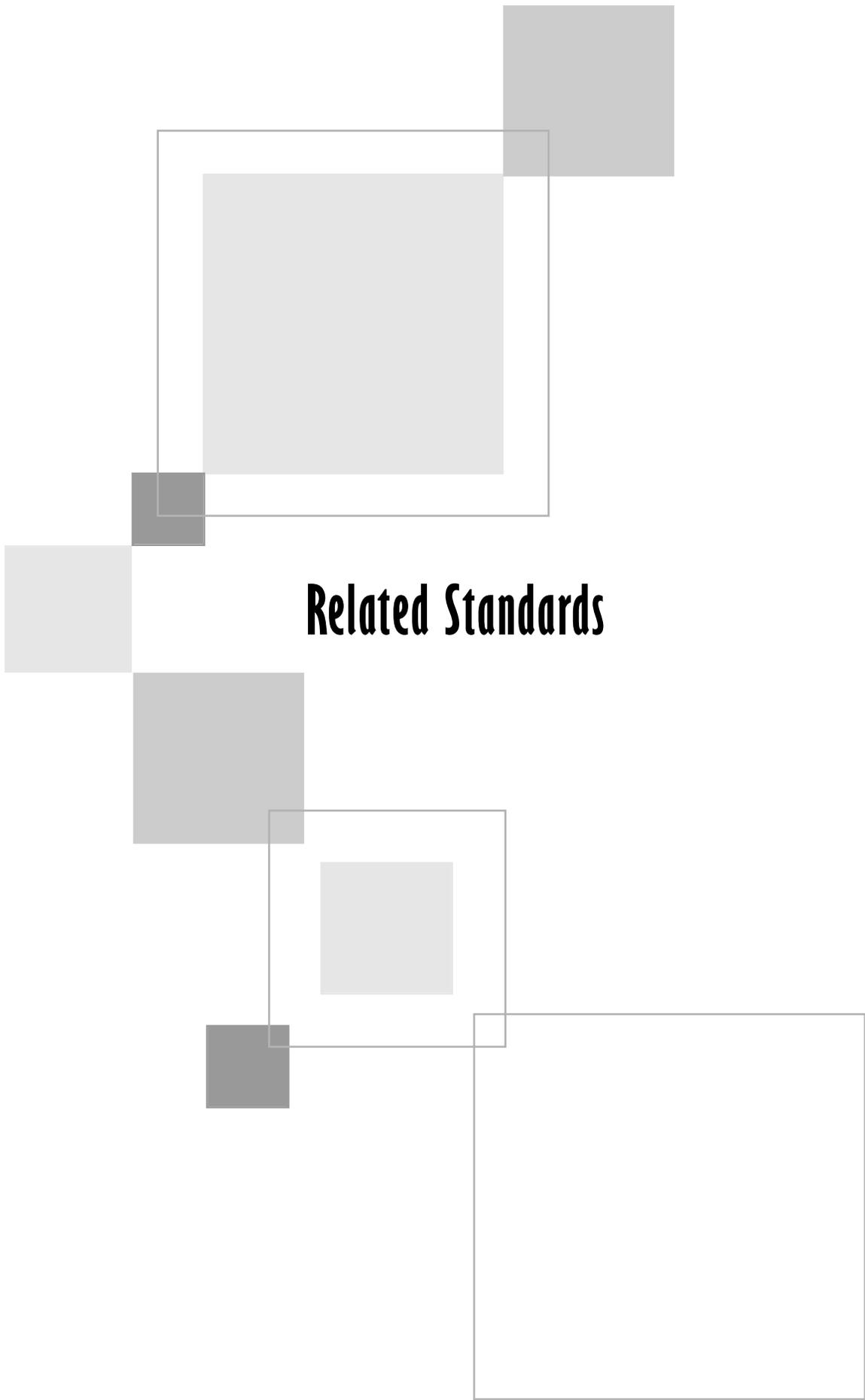
Participant audience: Wisconsin.

Program structure: WVAA is an intensive 5-day course designed to provide a basic foundation in the principles, policy, and philosophy of helping crime victims. The Academy involves collaboration between the Wisconsin Office of Crime Victim Services and Marquette University, as well as consultation from national experts. The interactive, comprehensive, and academically based program was offered for the first time last year. WVAA uses the National Victim Assistance Academy manual supplemented with Wisconsin-specific information.

Contact information:

Jo Kolanda
Wisconsin Victim Assistance Academy
Marquette University
262-243-5070
E-mail: jo@execpc.com
Web site: www.doj.state.wi.us/cvs/wvaa.htm

Steve Derene
Wisconsin Victim Assistance Academy
Wisconsin Office of Crime Victim Services
P.O. Box 7951
Madison, WI 53707
608-267-2251
Web site: www.doj.state.wi.us/cvs/wvaa.htm



Related Standards

Directory of Related Standards

Standards in Related Fields

These include program standards, competency standards, and ethical standards in fields other than victim assistance.

Addiction Technology Transfer Centers Curriculum Committee

Title: *TAP 21—Addiction counseling competencies: The knowledge, skills, and attitudes of professional practice*

Description: Competency standards address topics including assessment, treatment planning, referral, service coordination, counseling, education, documentation, and ethics.

Contact information:

Addiction Technology Transfer Centers
5100 Rockhill Road
Kansas City, MO 64110
1-877-652-ATTC
E-mail: no@nattc.org
Web site: www.nattc.org

Association of Social Work Boards Model Law Task Force

Title: *Model social work practice act*

Description: This model act includes guidelines for accreditation of programs, a complete set of ethical standards, and disciplinary actions.

Contact information:

Association of Social Work Boards
400 South Ridge Parkway, Suite B

Culpeper, VA 22701
1-800-225-6880
E-mail: info@aswb.org
Web site: www.aswb.org

American Psychological Association

Title: *Ethical principles of psychologists and code of conduct*

Description: These ethical principles include a complete set of ethical standards, guidelines for compliance, and disciplinary actions.

Contact information:

American Psychological Association
750 First Street NE
Washington, DC 20002-4242
202-336-5500
E-mail: ethics@apa.org
Web site: www.apa.org

Commission on Accreditation of Law Enforcement Agencies

Title: *Standards for law enforcement agencies*

Description: These complete program standards address more than 75 topics ranging from agency role to discipline to resource management. Standards include a chapter on victim assistance standards for law enforcement agencies.

Contact information:

Commission on Accreditation of Law Enforcement Agencies
10306 Eaton Place, Suite 320
Fairfax, VA 22030-2201
1-800-368-3757
E-mail: calea@calea.org
Web site: www.calea.org

Council on Social Work Education

Title: *Handbook of accreditation standards and procedures*

Description: These standards for educational programs address training methods, curricula, staffing, and other areas.

Contact information:

Council on Social Work Education
1725 Duke Street, Suite 500
Alexandria, VA 22314
703-683-8080
E-mail: info@cswe.org
Web site: www.cswe.org

Human Services Research Institute

Title: *Community support skill standards project: National skill standards for entry-level roles in the human service industry*

Description: These skill standards and performance indicators address areas including empowerment, communication, assessment, networking, facilitation of services, life-skills development, professional development, advocacy, crisis intervention, program development, documentation, and other areas.

Contact information:

Human Services Research Institute
2336 Massachusetts Avenue
Cambridge, MA 02140
617-876-0426
E-mail: webmaster@hsri.org
Web site: www.hsri.org

National Association of Social Workers Provisional Council on Clinical Social Work

Title: *Standards of practice of clinical social work*

Description: These competency standards address ethical and program functioning.

Contact information:

Diane McGurgan
National Association of Social Workers
P.O. Box 294
Greenlawn, NY 11740
631-757-5664
E-mail: diane@nasw.org
Web site: www.nasw.org

National Federation of Paralegal Associations, Inc.

Title: *Model code of ethics and professional responsibility and guidelines for enforcement*

Description: These complete ethical standards include guidelines for compliance and disciplinary actions.

Contact information:

National Federation of Paralegal Associations, Inc.
P.O. Box 33108
Kansas City, MO 64114-0108
816-941-4000
E-mail: info@paralegals.org
Web site: www.paralegals.org

National Health Care Skill Standards Project

Title: *Quality and excellence: Health care skill standards*

Description: These competency standards include performance indicators on topics including communication, legal responsibilities, ethics, safety standards, interpersonal dynamics, resource management, and other areas.

Contact information:

National Health Care Skill Standards Project
730 Harrison Street
San Francisco, CA 94107
415-241-2761
E-mail: mcrepea@wested.org
Web site: www.wested.org/nhcssp

Victim Service Program Standards

These include standards for general programs, compensation programs, domestic violence programs, and sexual assault programs.

Georgia Network to End Sexual Assault

Description: The Georgia Network to End Sexual Assault accredits sexual assault service providers based on standards. Standards address agency governance and administration, agency activity in the community, client information and confidentiality, facilities and equipment, fiscal management, personnel, quality assurance, and core services. Standards also specify

procedures for onsite evaluation of compliance with standards (e.g., “the evaluation team will inspect documents”).

Contact information:

Georgia Network to End Sexual Assault
Studioplex on Auburn
659 Auburn Avenue, Suite 139
Atlanta, GA 30312
404-659-6482
E-mail: gnesa@msn.com
Web site: www.gnesa.org

Illinois Coalition Against Sexual Assault

Description: Standards address intake and case management, counseling, criminal justice/medical advocacy, information and referral, crisis line service, intra-agency and interagency training, public education, institutional advocacy, interagency coordination, documentation of services and of supervision, staff credentials for providing service and supervision, procedures for supervision and review, facility accessibility, security, provision of a child-centered area, and requirements for satellite offices.

Contact information:

Illinois Coalition Against Sexual Assault
100 North 16th Street
Springfield, IL 62703-1102
217-753-4117
E-mail: sblack@icasa.org
Web site: www.icasa.org

Kentucky Association of Sexual Assault Programs

Description: Standards address accessibility of services, counseling, documentation of services, legal and medical advocacy, staff qualifications, supervision, training, and interagency protocols.

Contact information:

Kentucky Association of Sexual Assault Programs
P.O. Box 602
Frankfort, KY 40602-0602
502-226-2704
Web site: www.kasap.org

Kentucky Domestic Violence Association

Description: Standards include accreditation system for programs that adhere to standards as well as requirements for mentoring staff and certifying a specified percentage of staff (see Directory of Credentialing Programs).

Contact information:

Kentucky Domestic Violence Association
P.O. Box 356
Frankfort, KY 40602-0602
502-695-2444
E-mail: kydvasoc@aol.com
Web site: www.kdva.org

Maryland State Board of Victim Services

Description: Justice-based program standards address basic, good, and best-practice standards for victim services, including law enforcement, state attorneys, juvenile justice, corrections, probation and parole, and attorney general victim/witness services. Standards address first aid and on-scene comfort, information and referral, accessibility, security, transportation, notification and impact statements, court accompaniment, support services, and on-call systems. Administrative standards address written guidelines, staffing, documentation, protocol development, policies on supervision, training, termination, file storage, program evaluation, and special circumstances.

Contact information:

Maryland State Board of Victim Services
300 East Joppa Road
Baltimore, MD 21286
410-321-3521
E-mail: denise@goccp-state-md.org
Web site: www.oag.state.md.us/victim/rights.htm

Missouri Coalition Against Domestic Violence

Description: Standards address accessibility, staffing, service, and referral for crisis line, crisis intervention, counseling, support group services, court advocacy, interagency services, shelter services, documentation of policies, documentation of service provision, volunteer policies, and supervision.

Contact information:

Missouri Coalition Against Domestic Violence
415 East McCarty
Jefferson City, MO 65101
573-634-4161
E-mail: mcadv@sockets.net
Web site: <http://mova.missouri.org/members/mcadv.htm>

National Association of Crime Victims Compensation Boards

Description: Standards for compensation programs provide goals and objectives in areas including outreach, training, and communication; claims processing; decisionmaking; and financial planning.

Contact information:

National Association of Crime Victim
Compensation Boards
P.O. Box 16003
Alexandria, VA 22303
703-370-2996
E-mail: Nacvcb@aol.com
Web site: <http://nacvcb.org>

National Organization for Victim Assistance (NOVA)

Description: Program standards include guidelines for assessing service needs, defining program parameters, implementing service delivery, and program performance. Tiered performance guidelines facilitate program self-assessment. Performance guidelines for programs delineate basic, good, very good, and excellent standards addressing crisis intervention, counseling and advocacy, support during justice processes, public education, prevention services, and detailed qualifications/training standards based on individual role/agency. Program management standards address management plans and policies, communication and documentation, staff review, employee benefits, stress-reduction plans, volunteer management, financial management, and program evaluation. NOVA has also developed ethical standards for victim assistance providers.

Contact information:

National Organization for Victim Assistance
1757 Park Road West
Washington, DC 20010

1-800-TRY-NOVA
E-mail: Nova@try-nova.org
Web site: www.try-nova.org

Pennsylvania Coalition Against Domestic Violence

Description: Standards are linked to VOCA funding for Pennsylvania's domestic violence programs. Standards address core services (hotline, crisis intervention, safety planning, shelter, counseling/advocacy, support/education, children's services, systems advocacy, transportation, information, and referral), intake, documentation, confidentiality, mandated reporting, empowerment model of service provision, termination of service, organizational purpose and procedures, governing body and bylaws, general program administration, personnel management, fiscal administration, volunteers/interns, training, data collection and program evaluation, outreach, fundraising, technological resources, physical space and structural requirements for buildings, insurance, and emergency procedures.

Contact information:

Pennsylvania Coalition Against Domestic Violence
6400 Flank Drive, Suite 1300
Harrisburg, PA 17112
1-800-537-2258
E-mail: vawnet@pcadv.org
Web site: www.pcadv.org

Pennsylvania Coalition Against Rape

Description: Standards are linked to VOCA funding for sexual assault services. Standards address composition of board of directors and bylaws, personnel policies and job descriptions, maintenance of confidentiality, file storage, documentation of service and training, records, service accessibility, nondiscrimination, crisis line, court and medical accompaniment, crisis intervention, case management, information and referral, prevention and education, inservice and community training, institutional advocacy, religious nonaffiliation, HIV-testing policies, fiscal records, insurance, and bookkeeping. A code of ethics addresses organizational and individual ethics.

Contact information:

Pennsylvania Coalition Against Rape
125 North Enola Drive
Enola, PA 17025

717-728-9740
E-mail: stop@pcar.org
Web site: www.pcar.org

Pennsylvania Commission on Crime and Delinquency: Comprehensive Victim Service Centers

Description: Standards are linked to VOCA funding for comprehensive victim services. The accompanying manual describes the victims' rights movement within Pennsylvania, the philosophy and core values of service providers, ethical standards for victim services program staff, and reference information. The manual outlines basic and enhanced standards for comprehensive victim service centers. Service standards include definitions, standards, and suggested procedures for confidential communications, crisis intervention, referral, intake and assessment, victim orientation and education, crime victims' compensation assistance and other financial recovery, accompaniment, advocacy, counseling, outreach, systems advocacy, media advocacy, community education, and training of professionals. Program standards provide definitions, standards, and procedures for administrative functions, including quality assurance, accessibility, training, and media relations.

Contact information:

Mr. Jan Bechtel
Pennsylvania Commission on Crime and Delinquency
P.O. Box 1167
Harrisburg, PA 17108-1167
717-787-2040
E-mail: jabechtel@state.pa.us
Web site: www.pccd.state.pa.us

Pennsylvania Commission on Crime and Delinquency: State Victim/Witness Assistance Programs

Description: Standards are linked to Pennsylvania's Rights and Services Act funding for victim/witness assistance programs serving victims proceeding through the criminal justice system. The accompanying manual describes the victims' rights movement within Pennsylvania, the philosophy, vision, and mission of victim/witness coordinators, ethical standards for victim services program staff, and reference information. The manual outlines base, enhanced, and model standards for program management and services. Service standards include standards and

procedures for legislatively mandated activities, such as correctional facility release notification and crime victims' compensation assistance, and best practice services, such as crisis intervention, early outreach, and property return. The program management standards detail procedures for administrative activities as well as identifying alternate resources, confidentiality, training, program and services evaluations, salary and benefits, grievances, and media procedures.

Contact information:

Mr. Jan Bechtel
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Web site: www.pccd.state.pa.us

Pennsylvania Commission on Crime and Delinquency: Victims of Juvenile Offenders Programs

Description: Standards are linked to Pennsylvania's Rights and Services Act funding for victims of juvenile offenders programs. The accompanying manual describes the victims' rights movement within Pennsylvania, the philosophy, vision, and mission of victim/witness coordinators, ethical standards for victim services program staff, and reference information. The manual outlines base, enhanced, and model standards for program management and services. Service standards include standards and procedures for legislatively mandated activities, such as victim rights notification and accompaniment to proceedings, and best practice services, such as opportunities for restorative justice and transportation. The program management standards detail procedures for administrative activities as well as confidentiality, training, policy board requirements, program evaluation, salary and benefits, and media procedures.

Contact information:

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South Carolina Coalition Against Domestic Violence and Sexual Assault

Description: Standards for sexual assault programs are currently under development. Proposed standards are outcome-based and include three agency levels. Level I is a required minimum of basic services for all agencies. Level II agencies provide basic services plus training for school staff, short-term counseling, outreach to underserved populations, and community partnerships. Level III agencies provide individual and group therapy as well as court watch/advocacy programs.

Contact information:

Vicki Bourus
South Carolina Coalition Against Domestic Violence and Sexual Assault
P.O. Box 7776
Columbia, SC 29202-7776
803-256-2900
E-mail: vickib1@bellsouth.net
Web site: www.sccadvasa.org

Virginians Against Domestic Violence

Description: Virginians Against Domestic Violence is a coalition of individuals, agencies, and organizations that provides accreditation of domestic violence programs. Their manual includes guidelines for composition of the certification committee, detailed guidelines on the certification process and appeals, procedures for site visits, and forms for program self-assessment. Standards address accessibility of services, confidentiality, provision of information and education, referral, nondiscrimination, crisis line, crisis intervention and safety planning, emergency transportation, temporary and residential shelter, counseling, case management and service coordination, legal advocacy, children's services, volunteer program, institutional advocacy, outreach to underserved populations, training, community education, and program administration. Standards outline minimum criteria, suggested guidelines, and competency levels for staffing. As appropriate, standards differentiate among requirements for new versus established programs, and among private, public, non-profit, government, and umbrella agencies.

Contact information:

Virginians Against Domestic Violence
2850 Sandy Bay Road, Suite 101
Williamsburg, VA 23185
757-221-0990
E-mail: vadv@tni.net
Web site: www.vadv.org

Contact information:

Washington Coalition Against Sexual Assault
2415 Pacific Avenue SE.
Olympia, WA 98501
360-754-7583
E-mail: wcsap@wcsap.org
Web site: www.wcsap.org

**Washington Office of Crime Victims' Advocacy
(OCVA)**

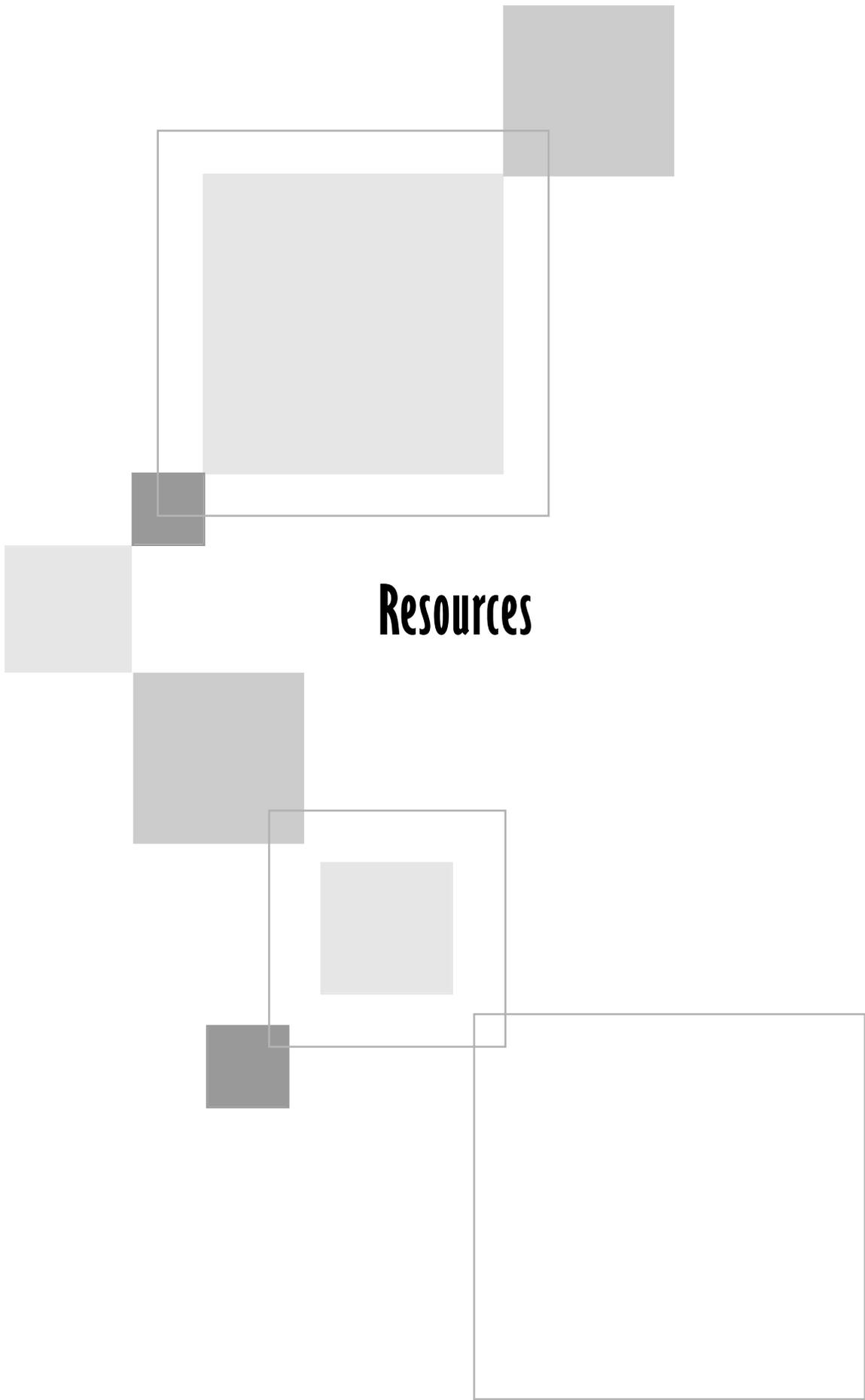
Description: OCVA established a statewide advisory committee representative of sexual abuse and assault victim services programs throughout Washington. The advisory committee assisted OCVA in the development of a system of accreditation for sexual assault programs. Accredited community sexual assault programs meet a standard level of accountability, service delivery, quality assurance, and community recognition. Accreditation provides a framework for assessing the extent to which program policies and procedures, management practices, and qualifications demonstrate organizational capacity to provide sexual assault victim services.

Contact information:

Stephanie Condon
Washington Office of Crime Victims' Advocacy
Department of Community, Trade and Economic
Development
P.O. Box 48304
Olympia, WA 98504-8304
360-725-2889
E-mail: stephaniec@cted.wa.gov
Web site: www.ocva.wa.gov

Washington Coalition of Sexual Assault Programs

Description: The Washington Coalition of Sexual Assault Programs accredits training programs based on submission of an application, mission statement, curriculum, and hourly requirements in specified content areas. Accreditation of training programs is one aspect of a broader accreditation and certification effort established by the Washington Office of Crime Victims' Advocacy (see above entry and Directory of Credentialing Programs). The Washington Coalition also provides technical assistance and support to programs in gaining accreditation.



Resources

Professional Development Resources

Coordination and Prevention

Bobo, K., Kendall, J., and Max, S. 1996. *Organizing for social change: A manual for activists in the 1990s*. Santa Ana, CA: Seven Locks. 1-800-354-5348

Clark, S., et al. 1996. *Coordinated community responses to domestic violence in six communities: Beyond the justice system*. Rockville, MD: Urban Institute, in conjunction with U.S. Department of Justice, National Institute of Justice. NCJ 166056

Domestic Abuse Intervention Project (variety of training resources on coordinated community response). Duluth, MN: DAIP. www.duluth-model.org

Domestic Abuse Project (variety of training resources on coordinated community response). Minneapolis, MN: DAP. www.mndap.org

Ledray, L. 1999. *Sexual Assault Nurse Examiner (SANE) development and operation guide*. Washington, DC: U.S. Department of Justice, Office for Victims of Crime. NCJ 170609

National Center for Victims of Crime. 1996. *Victims' rights sourcebook: A compilation and comparison of victims' rights laws*. Washington, DC: U.S. Department of Justice, Office for Victims of Crime. NCJ 165359

Pennsylvania Coalition Against Rape. 1996. *Victim empowerment: Bridging the systems—Mental health and victim service providers*. Washington, DC: U.S. Department of Justice, Office for Victims of Crime. NCJ 161862.

Schechter, S., and Edleson, J. 1999. *Effective intervention in domestic violence and child maltreatment cases: Guidelines for policy and practice*. Reno, NV: National Council of Juvenile and Family Court Judges, in conjunction with

U.S. Department of Health and Human Services, Packard Foundation, Johnson Foundation, and Office for Victims of Crime. NCJ 180603

Shepard, M., and Pence, E. 1999. *Coordinating community responses to domestic violence: Lessons from Duluth and beyond*. Thousand Oaks, CA: Sage. www.sagepub.com

U.S. Department of Justice, Office for Victims of Crime. 1999. *Breaking the cycle of violence: Recommendations to improve the criminal justice system response to child victims and witnesses*. Washington, DC: U.S. Department of Justice, Office for Victims of Crime. NCJ 176983

General Victim Assistance Training

DeHart, D. 2000. *Victim Assistance Institute basic training, trainer's and participants' manuals*. Columbia, SC: Center for Child and Family Studies. www.sc.edu/cosw/center

Seymour, A., et. al. 2000. *National Victim Assistance Academy 2000*. Washington, DC: U.S. Department of Justice, Office for Victims of Crime. NCJ 184052

Program Administration and Management

Hummel, J. 1996. *Starting and running a nonprofit organization*. Minneapolis, MN: University of Minnesota. www.upress.umn.edu

Kinney, J. 1995. *Preventing violence at work: A step-by-step program to protect your employees, company and assets*. Upper Saddle River, NJ: Prentice Hall. <http://vig.prenhall.com>

Nonprofit Collections (information on program and resource development, general management, fundraising, accounting, on-the-job training, mentoring, volunteers, and other aspects of administration and management). New York, NY: John Wiley & Sons. www.wiley.com; San Francisco, CA: Jossey-Bass. www.josseybass.com

Program Development and Evaluation

American Probation and Parole Association. 1999. *Promising victim-related practices and strategies in probation and parole*. Washington, DC: U.S. Department of Justice, Office for Victims of Crime. NCJ 166606

Beatty, D., et.al. 2000. *New directions from the field: Victims' rights and services for the 21st century*. Washington, DC: U.S. Department of Justice, Office for Victims of Crime. NCJ 180315

Boles, A., and Patterson, J. 1996. *Improving community response to crime victims: An eight-step model for developing protocol*. Thousand Oaks, CA: Sage. www.sagepub.com

DeHart, D. 1998. *Victim Assistance Institute: Needs assessment report and recommendations*. Columbia, SC: Center for Child and Family Studies. www.sc.edu/cosw/center

Hale, J.A. 1999. *Performance-based certification: How to design a valid, defensible, and cost effective program*. San Francisco, CA: Jossey-Bass. www.josseybass.com

Patton, M.Q. 1996. *Utilization-focused evaluation: The new century text*. Thousand Oaks, CA: Sage. www.sagepub.com

Pence, E., and Lizdas, K. 1998. *Domestic violence safety and accountability audit*. Duluth, MN: Minnesota Program Development. www.duluth-model.org

Seymour, A. 1999. *Promising practices and strategies for victim services in corrections*. Rockville, MD: National Center for Victims of Crime, in conjunction with U.S. Department of Justice, Office for Victims of Crime. NCJ 166605

Stark, E. October 2000. *Denver Victim Services 2000 needs assessment report*. Washington, DC: U.S. Department of Justice, Office for Victims of Crime. NCJ 183397

Tomz, J., and McGillis, D. 1997. *Serving crime victims and witnesses, second edition*. Washington, DC: Abt Associates, in conjunction with U.S. Department of Justice, National Institute of Justice. NCJ 163174

Technology

AGENT (panic buttons for victims; 1-800-988-3509).

AfmTech VAS-C (case management software; www.afmttech.com).

Pro Tech SMART (electronic offender monitoring; www.ptm.com).

R/Client for Windows (case management software; 412-261-5577).

Victim Assistance Relational Database (case management software; 1-800-849-0348).

Victim Information and Notification Everyday (victim notification system; www.vineco.com).

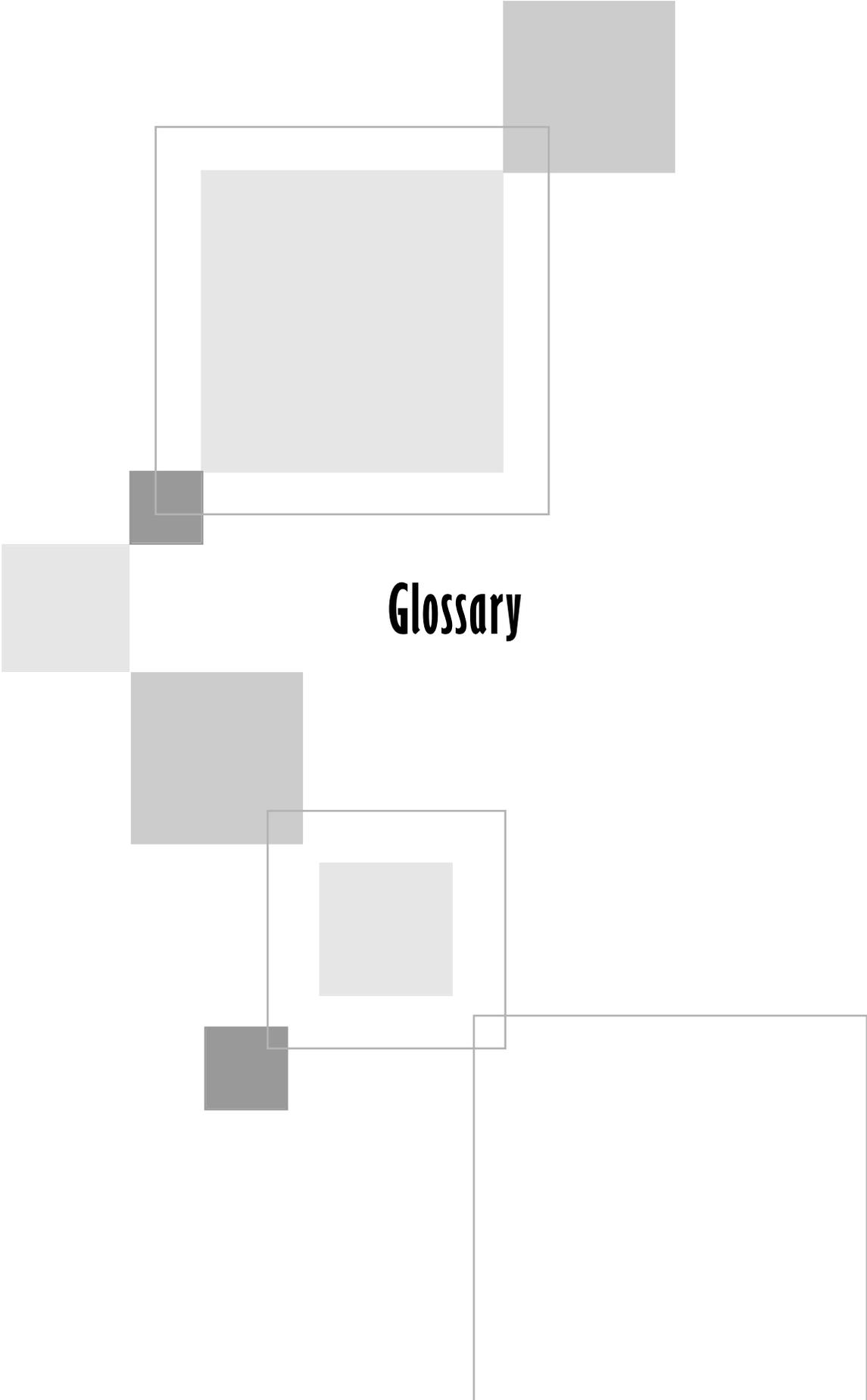
Training Development

Kansas Curriculum Center (curriculum consultation and development, established by a consortium of 11 states). Kansas City, KS. 785-231-1010

McCowan, R.J., and Wegenast, D.P. 1998a. *Defining competence*. Buffalo, NY: Center for Development of Human Services. www.bsc-cdhs.org

McCowan, R.J., and Wegenast, D.P. 1998b. *Origins of competency-based training*. Buffalo, NY: Center for Development of Human Services. www.bsc-cdhs.org

Silberman, M., and Auerbach, C. 1998. *Active training: A handbook of techniques, designs, case examples, and tips*. San Francisco, CA: Pfeiffer. www.pfeiffer.com



Glossary

Academician—Member of an academy; one employed by a university or college.

Accountability—State of an individual or program being held responsible for one's/its own actions; typically one is held accountable by the community or by a higher authority.

Accreditation—To give official authorization to or approval of; to provide with credentials; to recognize or vouch for as conforming to a standard.

Activism, activist—Doctrine or practice that emphasizes direct vigorous action especially in support of, or opposition to, one side of a controversial issue; an activist is one who engages in activism.

Adjudicated, adjudicative, adjudicatory—To settle judicially; having to do with judicial settlement.

Advocacy, advocate—Active support for a cause, person, or policy; to advocate is to speak or act on another's behalf, to intercede; an advocate is an intercessor or one who engages in advocacy. Advocacy may be individual (for a person served) or social change advocacy (directed at changing social systems, institutions, and broader functioning of society). The latter type of advocacy may also be called *institutional advocacy* or *systems advocacy*.

Affective—Relating to, arising from, or influencing feelings or emotions.

Aspirational—That which is pursued voluntarily; chosen as a goal.

Assault—Intentionally inflicting, attempting, or threatening to inflict bodily injury on another person; victim assistance providers should consult state and federal laws for statutory definitions.

Assessment—Term denoting general measurement; or with persons served, denotes the process of using interviews and case information to establish the victim's service needs; in victim services, "assessment" does not refer to clinical assessment (e.g., diagnosing clinical disorders) unless the victim assistance provider is a licensed mental health provider.

Burnout—Physical or psychological depletion experienced from persistent efforts to meet excessive work-related demands.

Case management—Process of prioritizing, managing, and facilitating implementation of activities in an individual's case plan.

Chain of supervision—Formal lines of communication going downward or upward through each successive level of supervision within an organizational hierarchy.

Child abuse, child neglect—Physical or mental injury, sexual abuse, exploitation, or negligent treatment of a child; victim assistance providers should consult state and federal laws for statutory definitions.

Client—Individual who presents for victim services, either through his or her own initiation of service (e.g., visiting or calling the program) or through the victim assistance provider's initiation of service (e.g., contacting the individual with a phone call, letter, or in person); a person served may be a client whether or not service is provided for a fee.

Clinician—Person qualified in the clinical practice of medicine, psychiatry, social work, or psychology; clinicians possess advanced clinical degrees distinguished from those for persons who specialize in research or theory.

Cognitive—Of, relating to, or involving mental functioning, especially intellectual functioning.

Collaborative—To work jointly with others.

Commentary—The second part of ethical and program standards; supports the standard by clarifying intent or providing examples.

Compassion fatigue—Stress experienced from investing in and committing to one's work too heavily.

Competence, competency—Requisite knowledge, skills, and attitudes to perform tasks and responsibilities essential to victim services. Competency herein is an educational term, not a legal term; demonstrating educational acquisition of a competency thereby does not guarantee legal competency to provide services.

Compliance—Act or process of conforming to a desire, demand, or proposal; to meet official requirements.

Confidentiality—Body of federal and state statutes, as well as program policies, that protect the privacy of individuals seeking treatment services; confidentiality is rarely absolute and limitations should be fully disclosed to persons served.

Continuing education—Professional training obtained from an institute of higher education or other provider approved by a professional board; completion is typically denoted by a certificate specifying number of "continuing education units."

Counseling—Process involving a supportive relationship between a victim who is asking for help and a clinician (see *Clinician*) trained to provide that help. Victim assistance providers are counselors only if they are degreed, licensed, or certified clinicians.

Credentialing—To furnish with credentials, such as a certification, degree, or license.

Crisis intervention—Methods of communication and action designed to protect, stabilize, and mobilize individuals in crisis situations.

Cross-disciplinary—Activities that span across several disciplines or specializations (e.g., training provided by nonprofit programs for law enforcement).

Cross-training—Brief training in the core concepts of a discipline or specialization other than one's primary specialization (e.g., a rape-crisis provider trained in concepts from prosecution advocacy); cross-training is intended to broaden one's base in victim service knowledge and help adapt to multidisciplinary response teams.

Cultural competence—Awareness, sensitivity, and effectiveness in response to diverse populations.

Curricula, curriculum—Written course materials for administration of a training or educational program.

Direct victim—See *Victim*.

Disseminate—To spread abroad, typically through publication, presentation, or media.

Diverse populations—Groups of individuals having a unique culture, heritage, or background.

Diversity—Recognition and appreciation of the vast array of different cultural groups based on varying behaviors, attitudes, values, languages, rituals, or histories.

Documentation, documented evidence—Any written, audio, video, or digital materials that clearly demonstrate that the standard has been satisfied. Some standards require *documentation* as evidence to satisfy the standard; this may include brochures, curricula, education or training materials, program records or policies, and interagency agreements, among other materials. The nature and extent of documentation required to satisfy a standard are under the program administrator's discretion.

Domestic violence—Broad term that includes physical, psychological, or sexual violence toward a family member or relationship partner. Additional terms include *family violence, relationship violence, dating violence, child abuse, domestic abuse, courtship violence, spousal violence*, and others that vary in specificity. Victim assistance providers should consult state laws for statutory definitions of domestic violence.

Education—Form of study accomplished in schools or universities; type of professional development.

Elements—Specific attitudes, knowledge, and skills that together constitute a competency.

Emergency situation—Actual or potential condition that poses an immediate threat to life or property.

Empathy—To imagine oneself in the subjective state of another; to attempt to feel what another person feels.

Empower—To give authority or power; to help a person by sharing information or resources so that they may help themselves.

Equitable, equity—Justice according to natural law or right; freedom from bias or favoritism.

Ethnicity—Classification based on culture and origin, regardless of race.

Exclusive, exclusionary—Act or an instance of excluding.

Experiential—Relating to, derived from, or providing experience.

Family violence—See *Domestic violence*.

Gender—Refers to social and psychological components of masculinity and femininity, regardless of biological sex; a person may vary in degree of expressing masculinity or femininity, or of identifying as male or female.

Generalist—One whose skills or work requirements are general, varied, or without particular specialization.

Grandparenting—Creating exemptions based on previously existing circumstances (for example, exempting victim assistance providers from new certification requirements based on the provider's past experience or training in the field).

Goal—Relatively broad statement of the end or result that one intends to ultimately achieve; goals usually require a long timespan to achieve.

Hate crimes—Sometimes called bias crimes, offenses motivated by hatred against a victim based on his or her beliefs or mental or physical characteristics, including race, gender, religion, sexual orientation, ethnicity, or disability of the victim. Victim assistance providers should consult state and federal laws for statutory definitions.

Hierarchical—Of, relating to, or arranged in a hierarchy; structured with a formal chain of supervision.

Holistic—Comprehensive approach that recognizes multiple components of one's life or functioning.

Homicide—All deaths caused by willful murder and nonnegligent manslaughter. Vehicular homicide may include deaths due to drunk driving or other highly negligent driving behaviors that represent disregard for human life. Victim assistance providers should consult state and federal laws for statutory definitions.

Identifying information—Data included in written records that directly or indirectly make a specific individual recognizable or known.

Implement, implementation—To carry out or accomplish; to give practical effect to and ensure actual fulfillment through concrete measures.

Inclusive—Including; bringing in.

Indirect victim—Person who is affected by a crime but who was not the direct victim of the crime; often a friend, family member, or significant other to a direct victim, or a member of the victim's workplace or community.

Informed consent—Voluntary agreement to participate in an activity and/or allow an activity or procedure to be performed based on the availability of all pertinent information and the ability to understand the consequences of the agreement decision.

Infrastructure—Substructure, skeleton, or framework.

Innovate, innovation—Introduction of something new.

Inservice training—Training in addition to preservice training, which may include periodic retraining or refresher training, specialized training, career development, promotional training, and advanced training.

Internship—Advanced student or graduate, usually in a professional field gaining supervised practical experience.

Intervenor—One who intervenes.

Job description—Position description; official written statement setting forth the duties and responsibilities of a job, and the skills, knowledge, and abilities necessary to perform it.

Mandates, mandated—Formal order from the court or legislature.

Marginalized—To relegate to a marginal position within a society or group.

Mediation—Intervention between conflicting parties to promote reconciliation, settlement, or compromise.

Mental—Relating to one's mind or cognitive functioning, especially intellectual functioning as distinguished from emotional, social, and spiritual functioning.

Mentor, mentoring—Advisor or senior colleague who supports the education of another through instruction, demonstration, and support.

Multidisciplinary—Planned and coordinated program of care involving two or more specializations (e.g., law enforcement and nonprofit) for the purpose of improving victim services as a result of their joint contributions.

Nonpartisan—Free from party affiliation, bias, or designation.

Objective—An end or result that one intends to attain in order to achieve partial fulfillment of a goal; an objective is a subgoal or an element of a goal and therefore requires shorter time to accomplish than does a goal.

Offender—Perpetrator of a crime.

Outreach—Efforts toward identifying and providing information or resources to persons who might otherwise not receive service.

Persons served—See *Client*.

Physical—Relating to one's bodily well-being or functioning; in a broad sense, *physical* may include issues of food, shelter, finances, and other material resources.

Policy—Written guideline that is a broad statement of program principles; policy statements usually do not establish fixed rules or set procedures, but rather provide a framework for development of procedures, rules, and regulations.

Position—Status, duties, or responsibilities assigned to a staff member.

Practitioner—Person who provides clinical services; see *Clinician*.

Prerequisites—Something that is necessary to carrying out another step or function.

Preservice training—Training required of an individual prior to that individual being permitted to deliver services.

Prevention—Theory and means for reducing the harmful effects of victimization in specific populations; prevention objectives are to protect individuals prior to victimization, to identify persons at risk for victimization, and to intervene.

Procedure—Written guideline describing how to carry out program activities.

Professional (noun)—Individual with acknowledged job-specific training, experience, and/or credentials; within this document, professional victim assistance providers may include paid or unpaid persons working in victim services, with or without academic degrees or membership in other professional organizations.

Professional (adjective)—That which pertains to such an individual's training, applied work, ethical compliance, or demonstration of knowledge, skills, and attitudes.

Professional development—Training, education, on-the-job experience, or other endeavor directed toward building professional knowledge, skills, and values.

Program—Agency or division within an agency that performs a distinct and specified function; in victim services, many nonprofit victim service programs are independent agencies, while government-based victim service programs often exist within a larger agency (for example, law enforcement, corrections).

Property crime—Offenses against property: burglary, larceny, motor vehicle theft, arson, transportation of stolen property, and other property offenses (destruction of property and trespassing). Some property offenses involve elements of deceit or intentional misrepresentation, including embezzlement, fraud (excluding tax fraud), forgery, and counterfeiting. Victim assistance providers should consult state and federal laws for statutory definitions.

Protocol—Original draft, plan, or record of a document or transaction.

Provider—Person who provides a specific service (for example, victim assistance providers, medical service provider, mental health provider).

Psychological—Relating to mental functioning, especially that which is cognitive or intellectual; in a broad sense, *psychological* may also include emotional, social, and spiritual functioning.

Rapport—Relationship marked by harmony, comfort, or affinity.

Referral—Act, action, or an instance of referring (for example, gave the patient a *referral* to a specialist).

Relationship violence—See *Domestic violence*.

Remediation—Act or process of remedying.

Residency—Geographic origins or place of residence; within this document, residency is used to refer to urban/rural status, status of having a residence or being homeless, or other variation regarding the community in which an individual lives.

Restitution—Act of restoring or contributing to being restored.

Rules and regulations—Set of specific guidelines to which all staff must adhere; rules and regulations typically allow less latitude and flexibility than policies and procedures.

Sexual assault—Sexual act directed against another person forcibly and/or against that person's will; or, not forcibly or against the person's will where the victim is incapable of giving consent. Victim assistance providers should consult state and federal laws for statutory definitions.

Significant others—Romantic or sexual partners, family members, or others on whom an individual is dependent for meeting part of his or her mental, physical, financial, social, emotional, and spiritual needs.

Social—Relating to one's interpersonal activity and/or social relationships.

Social change advocacy—See *Advocacy*.

Specialized, specialization—Defined area of expertise in working with victims of crime; specialization can vary by program affiliation (for example, prosecution-based, domestic violence program), crime type (for example, homicide, sexual assault), or victim characteristics (for example, elderly victims, ethnic minority victims).

Spiritual—Relating to spiritual belief systems, those that acknowledge and appreciate the influence in one's life of a higher power or state of being.

Staff—Person who performs administrative or direct service tasks for a victim service program; staff include both paid and volunteer workers.

Stalking—Course of conduct that places a person in fear for his or her safety, including harassing or threatening another person. Victim assistance providers should consult state and federal laws for statutory definitions.

Statutory—Of or relating to statutes.

Stressor—Stimulus that causes stress.

Training—To form or make qualified through instruction, usually skill-based; type of professional development.

Trauma—Physical or emotional injury resulting from an event outside the range of normal life experience; generally includes severe physical harm or injury, threat to life or limb, receipt of intentional harm or injury, exposure to violent or sudden loss of a significant other, witnessing or learning of violence to a significant other, or causing death or severe harm to another.

TTY—Teletypewriter or telecommunications device for deaf or hearing impaired persons.

Underserved—Persons who have less access to, or less utilization of, services.

Vicarious traumatization—Trauma suffered by a helper through exposure to another person's trauma; the cumulative effect on the helper of working with victims of traumatic life events.

Victim—Person who experiences mental, physical, financial, social, emotional, or spiritual harm as the direct result of a specified crime committed on his or her person or property; also regarded as victims are family members and significant others, community members, or others indirectly impacted by the crime. The term *survivor* is also a common term for either a direct victim who has survived a violent crime or a significant other who has survived a deceased crime victim. Victim assistance providers should consult state laws for statutory definitions.

Victim assistance—Field of practice and study including paid and unpaid individuals working in a variety of settings to respond to crime victims' mental, physical, financial, social, emotional, and spiritual needs. Victim assistance is a broad term and may or may not include victim advocacy. See also the Working Definition of Victim Assistance following the introduction of this document.

Victim assistance provider—Person authorized by the program to assist victims in specific ways; victim assistance providers may include paid or unpaid staff and citizen volunteers.

VOCA—Victims of Crime Act, one means by which funds are allocated to victim services.

Volunteer—Unpaid staff; may include student volunteers, whose work is generally provided in exchange for educational credit.

Written guideline—Any written document used to direct or affect the performance or conduct of program staff; the term includes policies, procedures, rules and regulations, memorandums, and instructional material. Each standard need not derive from a single document (for example, Standard X might be achieved in part by a written policy and in part by a memorandum). For programs housed within overarching agencies (for example, law enforcement agencies), policies or guidelines of the overarching agency may be used to satisfy the requirement for a written guideline.

Addiction Technology Transfer Centers Curriculum Committee. 1998. *TAP 21—Addiction counseling competencies: The knowledge, skills, and attitudes of professional practice*. Rockville, MD: U.S. Department of Health and Human Services.

Association of Social Work Boards Model Law Task Force. 1997. *Model social work practice act*. Culpeper, VA.

American Psychological Association. 1992. *Ethical principles of psychologists and code of conduct*. Washington, DC.

Austin Police Department—Victim Services Division. 1999. *Victim service program standards*. Austin, TX.

Commission on Accreditation of Law Enforcement Agencies. 1998. *Standards for law enforcement agencies*. Fairfax, VA.

Council on Social Work Education Commission on Accreditation. 1994. *Handbook of accreditation standards and procedures*. Alexandria, VA.

Danis, Fran. 1999. *Professional social work competencies and the crime victim assistance field: Is there a fit?* Unpublished manuscript.

Human Services Research Institute. 1995. *Community support skill standards project: National skill standards for entry-level roles in the human service industry*. Cambridge, MA.

Kentucky Domestic Violence Association. 1998. *Domestic violence program standards*. Frankfort, KY.

Missouri Coalition Against Domestic Violence. 1999. *Domestic violence program monitoring standards*. Jefferson City, MO.

National Association of Social Workers Provisional Council on Clinical Social Work. 1989. *Standards of practice of clinical social work*. Greenlawn, NY.

National Federation of Paralegal Associations, Inc. 1997. *Model code of ethics and professional responsibility and guidelines for enforcement*. Kansas City, MO.

National Health Care Skill Standards Project. 2000. *Quality and excellence: Health care skill standards*. Des Moines, IA.

National Organization for Victim Assistance (no date). *Model victim assistance program brief*. Washington, DC.

Pennsylvania Coalition Against Rape. 1999. *Organizational standards*. Harrisburg, PA.

Form for Raising Standards-Related Issues

INSTRUCTIONS: Please use one form per standard and attach additional pages if more space is required. Duplicate form for additional standards.

Standard set (circle one):

Program standards

Ethical standards

Competency standards

Standard number: _____

Action requested (circle one):

Change in standard

Change in commentary

Both

Explanation of action requested:

141

How may we contact you?

Name: _____

Affiliation: _____

Address: _____

E-mail: _____

Return feedback forms to:

National Victim Assistance Standards Consortium
c/o Dana DeHart, Center for Child and Family Studies
University of South Carolina, College of Social Work
Columbia, SC 29208