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Maryland Network Against Domestic Violence

Domestic Violence Program Standards

2013

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Starting structure based on committee input 04.19.13

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Guiding Principles

Provide access to physical and emotional **safety** for survivors of domestic violence and their children in a **continuum of care** environment.

Dedicate our program to **empowering** survivors of domestic violence by partnering with them to strategize for their safety, to provide access to supportive services and safe accommodations, to make available opportunities for education and healing, and to advocate for victims to assist them in reaching self-defined goals.

Respect the **privacy and confidentiality** of survivors and their children by collecting only essential, necessary information, by keeping records and client information confidential to the fullest extent of the law, and by respecting their personal belongings.

Honor the language and spirit of local, state, and federal **laws, regulations, and grant requirements** that govern domestic violence service provision, provided that they are conducive to victim safety, client confidentiality, and abuser accountability.

Respect the **culture and customs** of survivors, staff, and volunteers by honoring differences and by making reasonable accommodations that allow everyone to participate in the program to the fullest extent possible.

Foster a **trauma-informed**, welcoming environment for survivors and their children that recognizes the impact of abuse and promotes self-sufficiency, independent decision-making, and safer futures.

Partner with local governmental and community organizations to foster effective **collaborations** that improve survivors' access to services and justice and that enhance victim safety and abuser accountability.

Revised by committee 04.19.13 and again on 05.10.13

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Non-Residential Program Standards

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Hotline & Crisis Response

Hotline refers to crisis intervention, information and referral provided 24 hours a day, every day of the year, by any means of communication, by qualified, trained staff members or volunteers. Comprehensive domestic violence programs are required to receive and respond to crisis calls on a 24-hour basis (COMAR 01.04.05A1).

Service Standards and Guidelines

1. A domestic violence hotline must provide 24 hour crisis access to domestic violence services.
2. The hotline number must be widely distributed, listed, advertised, and be available from local information services within the domestic violence program's service area. The domestic violence program should engage in culturally appropriate and linguistically specific marketing of the hotline number, which considers the key demographics of the community.
3. To ensure 24 hour hotline accessibility, domestic violence programs must ensure that they have the capacity to adequately respond to the volume of calls so that callers can get through.
 - a. Callers should not reach a busy signal.
 - b. Staff should always be available to pick up the phone. A special ring tone can signal to staff that a hotline call is coming through and must be picked up.
 - c. If callers must be placed on hold, an appropriate message they could receive is, "Please stay on the line. If this is an emergency, please hang up and call 911. Hold for the next available advocate."
 - d. Having callers leave a voicemail is not ideal and returning calls can jeopardize the privacy and safety of callers. If callers have the option of leaving a voicemail, messages must be checked promptly. Instruct callers to indicate the safest number and time to return the call.
4. In case of emergency, such as losing power or failure of hardware, domestic violence programs must have a backup plan to be able to receive hotline calls that protect a caller's privacy.
5. The hotline must be answered in a manner that identifies the purpose of the hotline and that discloses the limits to confidentiality early in the call. The use of caller ID and call recording equipment is in conflict with the spirit of anonymity. Programs must inform callers of the use of such equipment.
6. When providing callers with referral information, hotline workers should be well-informed about the services to which you are referring. The referral resources should be updated continually.

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7. The hotline must be answered by a program staff member or volunteer who has had domestic violence crisis intervention training.
 - a. Domestic violence programs should offer training on agency policies and procedures including how and when to address confidentiality, how to introduce oneself to callers (ex: first name only), the process for obtaining information for data collection and call sheets, how to handle homicidal or suicidal callers, how to screen or refer for shelter services, and how to handle Lethality calls.
 - b. Hotline workers should receive comprehensive, multi-day domestic violence training provided in-house or by an organization such as MNADV or House of Ruth MD. Additional recommendations for trainings include: Dr. Campbell's Danger Assessment, National Center for Suicide Prevention Training, etc.
8. Programs offering hotline services must provide emergency crisis intervention and advocacy. These services include, but are not limited to:
 - a. Assessment (needs and risk)
 - b. Listening
 - c. Safety planning
 - d. Intervention
 - e. Referrals (?)
9. Victims who are deaf or hard of hearing, and who speak languages other than English must be accommodated on the hotline. Language interpretation access is available at a reduced rate to domestic violence programs through MNADV.
10. Administrative: call sheets, data tracking, etc. [details TBD]

[Break Out Boxes]

Self-Disclosure on the Hotline

Content TBD

Warm Hand-Off

(adopted from California Mental Health Services Authority)

In order to practice self-care and to prevent compassion fatigue, in some situations it is best for hotline workers to transfer the call to someone who is better equipped to handle the specific needs of a caller. In order to preserve the rapport you have already established with the caller, and in the hopes to pass this trust along to the relationship between the caller and your co-worker, use a "warm hand-off" approach. Here is some sample language that you can adopt according to your communication style.

It sounds like you're going through a really difficult and scary time right now. I work with someone who specializes in situations like yours, who may be able to brainstorm some new strategies with you, and I would like to ask them to speak with you. Is it all right if I put them on the line?

It seems like you've tried several smart approaches using the criminal justice system before, but that you've encountered some legal barriers. We have someone on staff who has legal expertise who may be able to help you

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sort out and troubleshoot these issues. They can meet with you tomorrow morning. Would you like to set up an appointment?

Starting draft based on committee input 04.19.13 and 05.10.13

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Residential Program Standards

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Standards for Administration

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