VIRGINIA SEXUAL AND DOMESTIC VIOLENCE PROGRAM PROFESSIONAL STANDARDS

GUIDELINES FOR PROCESSES & PROCEDURES

INTRODUCTION

The Virginia Sexual and Domestic Violence Program Professional Standards Committee

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

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

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

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

The Department of Criminal Justice Services Professional Standards Team

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

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

EXPLANATION OF ROLES

Professional Standards Operations Coordinator: Employee of DCJS who coordinates and facilitates meetings of the Committee, serves as the Committee liaison, and maintains the Professional Standards <u>website</u>. The Operations Coordinator also reviews and processes applications for accreditation, provides technical assistance to applicants, develops and delivers

training, develops and implements accreditation policies and procedures, and assists the Compliance Coordinator as necessary.

Professional Standards Compliance Coordinator: Employee of DCJS who schedules and completes site visit reviews for all applicants for accreditation. The Compliance Coordinator also reviews and processes applications for accreditation, provides technical assistance to applicants, develops and delivers training, develops and implements accreditation policies and procedures, and assists the Operations Coordinator as necessary.

The Professional Standards Team may be contacted via email at sdvstandards@dcjs.virginia.gov.

PROFESSIONAL STANDARDS ACCREDITATION PROCESS

The accreditation process is divided into cycles. Each cycle contains three rounds in which applications for accreditation will be accepted. Rounds will be opened approximately once per year, generally in the early fall. When a round is opened, agencies may begin the application process by submitting an Organizational Self-Assessment Summary, as discussed below.

Once three rounds of applications have been submitted, the cycle is complete. At that point, the Committee, with assistance from the Team, will begin the process of revising the Professional Standards. The purpose of this revision process is to update the Standards to correspond with emerging best practices and to address any issues that were identified during the previous cycle. When the revision process is completed, the Team will begin a new accreditation application cycle of three rounds.

APPLICATION SUBMISSION PROCEDURE

Organizational Self-Assessment Summary

An Organizational Self-Assessment should be completed internally by agencies interested in seeking accreditation. Upon completion, if an agency believes it substantially meets the requirements of the Professional Standards, an Organizational Self-Assessment Summary should be completed and submitted to the Team at sdvstandards@dcjs.virginia.gov. Both the Self-Assessment and the Summary can be found on the Professional Standards website.

Organizational Self-Assessment Summaries are only accepted during the time periods that are announced by DCJS. Agencies that submit Summaries outside of these time periods will not be considered for the accreditation application process. Once the period for submission is closed, the Team will inform the Committee of the number of Summaries received but will not provide the names of the agencies.

Out of the agencies that submit Organizational Self-Assessment Summaries, up to 20 will be randomly selected to apply for accreditation during a particular round. Application information, instructions, and due dates will be sent to those agencies. Agencies that are not selected to apply will be notified.

If there are many agencies applying to renew their accreditation during a specific application round, the Team may opt to select more than 20 agencies at its discretion to avoid any lapses in accreditation.

Professional Standards Application

The Professional Standards application is completed online and is password-protected. Eligible applicants will be provided with a link to the application and the password once they are selected to apply. An example of the current Professional Standards application may be found on the DCJS Professional Standards Application page.

Agencies must submit applications by the deadline established by DCJS. The Team may accept late applications at its discretion, provided that the applicable agency has requested a reasonable extension and an acceptable reason for the extension is provided.

Once the period for the submission of applications is closed, the Team will inform the Committee of the number of applications received but will not provide the names of the agencies.

Plans of Action

If, while completing its application, an agency determines that it does not meet a particular Standard, the agency is encouraged to submit a Plan of Action along with the application. The Plan of Action must describe how the agency intends to meet such Standard and the timeline for doing so. Plans of Action may also be requested at any time by the Committee or the Team if they believe a Standard is not being met.

Application Fee

The fee for an agency to apply for accreditation is \$150.00. This fee is to be paid at the time the application for accreditation is submitted to DCJS. Information about the online payment of the fee will be emailed to the agency once the application is submitted. Should an agency be unable to make an online payment, the Operations Coordinator must be contacted immediately so that alternate arrangements can be made. The application fee must be received within 24 hours of the submission of the application.

The fee will be paid one time for every three-year accreditation period; and it is non-refundable. There is no annual fee to be an accredited agency.

If an agency that has paid the fee withdraws an application for accreditation during a particular round and then reapplies during a later round in the same cycle, the agency will not be required to pay the application fee again. However, if such agency chooses to apply during a different cycle, the application fee will have to be paid at that time.

Fees will be used to support administrative costs of DCJS to manage the application process, as

outlined in *Code of Virginia* § 9.1-116.3.

Application Withdrawal

Agencies may choose to withdraw their applications for accreditation for any reason at any point during the application review process. Once the Team presents an accreditation status recommendation to the Committee, however, applications may no longer be withdrawn.

The Team will inform the Committee that an agency has withdrawn its application; but will not provide the name of the agency.

An agency that withdraws its application for accreditation will be eligible to apply in a future round. If an agency chooses to reapply, the agency must complete all steps of the application process as though it were applying for the first time. Therefore, a new Organizational Self-Assessment Summary must be submitted, the agency must be selected to apply, and a new application must be submitted. As stated above, the application fee will need to be paid again only if the agency is applying during a different accreditation application cycle.

ACCREDITATION APPLICATION REVIEW PROCEDURE

Initial Application Review

Once a complete application for accreditation is submitted to DCJS, the Team will confirm receipt of application. The Team will then create a schedule for reviewing applications and begin the evaluation process. As applications are reviewed, the Operations Coordinator may send out requests for additional information. These initial requests should be answered within 60 days.

During the initial application review, the Team may determine that an agency does not have certain policies that are required by the Professional Standards. In that case, the agency may create the required policy upon a request by the Team. Any policy that is so new that the event or system the policy governs has not yet occurred shall be considered a "wet ink" policy. The number of policies, if any, defined as "wet ink" will be recorded by the Team and this information will be provided to the Committee during its consideration of accreditation level.

Site Visit

Once the initial application review is complete, the agency's site visit will be scheduled. Site visits will be scheduled and conducted by the Compliance Coordinator. During the site visit, the Compliance Coordinator will ask questions and complete the Site Visit Checklist to assess compliance with the Professional Standards. A sample of the current Site Visit Checklist is available on the DCJS Professional Standards Application page.

Site visits will typically be scheduled for two days. On the first day, the Compliance Coordinator will meet with the director of the agency or the applicable sexual and/or domestic violence program to conduct a preliminary interview and tour the agency's office and shelter facilities, if applicable.

In addition, the Compliance Coordinator will review all paperwork that is required by the Site Visit Checklist.

On the second day of the site visit, the Compliance Coordinator will conduct interviews with selected staff members, volunteers, and board members. Finally, the Compliance Coordinator will conduct an exit interview with the director to request information as needed and to provide any necessary technical assistance.

The director should be available throughout the entire two-day review.

Follow Up Procedure

Once the site visit has been completed, the Operations Coordinator and the Compliance Coordinator will meet to discuss their findings. If additional information is needed from the applicant agency, it will be requested at this time. Agencies will have 45 days from the date of this request to respond with the required information. This 45-day period will include any questions from the agency and subsequent responses by the Team. Once this period has been completed, the Team will not accept any further submissions of information.

The Team may extend the 45-day deadline at its discretion, provided that the applicable agency has requested a reasonable extension and an acceptable reason for the extension is provided.

Recommendation to Committee

After all information has been received or the 45-day period has ended, the Team will draft a presentation of their findings and the status recommendation to be presented at the next meeting of the Committee. Recommendations to the Committee will be based on responses to the application questions, documentation submitted with the application, site visit questions and observations, Site Visit Checklist criteria, and responses to requests for information. Neither the Committee nor the applicable agency will be informed of the status recommendation prior to the Committee meeting.

The Committee will discuss the recommendation and vote on the applicant's status determination. Decisions regarding status determinations shall be made by the majority of those present and voting. Members of the Committee affiliated with an applicant agency will withdraw their participation during discussion and decision-making regarding that agency's application.

Notification of Accreditation Decision

The Operations Coordinator will notify the applicant of the accreditation status determination within ten days following the date of the meeting of the Committee. Each agency will receive a letter detailing the status determination and the dates of status validity. In addition, the letter will include any opportunities for enhancements that have been identified by the Team. These items are suggested improvements and are not mandatory. Finally, every agency that is granted full

accreditation status will receive a certificate acknowledging this achievement and will be listed on the <u>Accredited Agencies page</u>.

ACCREDITATION STATUS

Status Determinations

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

Fully Accredited

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

Provisionally Accredited

Agencies that do not meet 100% of the Professional Standards may be *Provisionally Accredited*.

To be considered provisionally accredited, applicant agencies must, at a minimum, demonstrate that they provide 24-hour crisis intervention services to all victims of sexual and/or domestic violence in their communities, and that these services are confidential and free of charge. These services must include a hotline, provisions for emergency housing, and emergency accompaniment for victims of sexual and/or domestic violence.

Provisionally accredited agencies have up to 30 days from the time of receiving provisional accreditation status to submit a Plan of Action that will be used to comply with all unmet criteria. Once the Plan of Action is submitted, agencies will have up to 90 days to document that the Plan of Action has been followed and that the Professional Standards are being met. Plans of Action and associated timelines are the responsibility of the applicant agencies.

The Team may extend the 30-day or 90-day deadlines at its discretion, provided that the applicable agency has requested a reasonable extension and an acceptable reason for the extension is provided.

As available, the Team will provide support, assistance, and resources to provisionally accredited agencies as they endeavor to become fully accredited. The Committee may request a site visit prior to granting a change in status, which will be completed by the Compliance Coordinator.

At any time during the 90-day period, documentation in response to Plans of Action may be submitted by the agency to the Team. At the end of this period, the Team will review all submitted information and draft a presentation of their findings and the status recommendation to be presented at the next meeting of the Committee.

The Committee will discuss the recommendation and vote on the applicant's status determination. Decisions regarding status determinations shall be made by the majority of those present and

voting. Members of the Committee affiliated with an applicant agency will withdraw their participation during discussion and decision-making regarding that agency's application.

Denied

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

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

Denied applicants may be given preference to apply during the next application round. As available, support, assistance, and resources will be provided to agencies in preparing for future applications.

Status Validity

Full accreditation status will be valid for three years beginning the July 1st of the year that the agency's accreditation status was first considered by the Committee. The dates of status validity will be clearly listed in accreditation materials provided to the agency, documented for the Committee by the Team, and listed on the <u>Accredited Agencies page</u>.

Agencies that are fully accredited will be notified 12 months prior to the expiration of such accreditation. Accredited agencies wishing to retain their accreditation status must apply for renewal at the beginning of their third accreditation year to avoid a gap or lapse in their accreditation status. For example, if an agency was accredited beginning on July 1, 2023, such agency would need to apply in the beginning of its third accreditation year, or the Fall of 2025, to avoid a lapse in accreditation status.

STATUS DETERMINATION APPEALS

The Committee will accept requests for appeal from Professional Standards accreditation applicants that dispute a **denied accreditation status.** Agencies may initiate an appeal by submitting a letter of appeal via email to the Team within 30 days of notification of the denied accreditation status. The letter must include the reasons why the denied status is disputed and provide specific supporting documentation.

Once a letter of appeal has been received, the Operations Coordinator will notify members of the Committee. The Committee Chairperson will appoint an Appeals Subcommittee of three current and/or former Committee members. Current or former members of the Committee who are

affiliated with the appealing agency will not be appointed. The Appeals Subcommittee will also include the Operations Coordinator and the Compliance Coordinator as nonvoting members.

The Appeals Subcommittee will review the appeal and any related documentation and make a determination within 90 days of receipt. Decisions regarding status determinations shall be made by the majority of those present and voting. The decision of the Appeals Subcommittee is final and will be provided to the Committee and to the appealing agency within ten days of the decision.

REVOCATION OF FULL ACCREDITATION STATUS

The Committee shall have the authority to revoke an agency's full accreditation status for disregarding applicable standards or committing serious violations of program rules and regulations. This action will only be taken in extreme cases and as a last resort. For example, a situation involving an agency presenting misinformation or falsified documentation to the Committee or the Team would be considered an extreme case. In addition, extreme cases would include violations of client rights or client confidentiality, endangerment of the safety, health, and/or the physical or mental well-being of a client served by the program, inappropriate conduct by program staff or its governing authority, or any other just cause.

The Team may be notified of any potential violations by a survivor, other sexual and/or domestic violence agencies, community partners, or funding agencies, including DCJS. Upon receiving any such information, the Team will contact the agency as well as the agency's board of directors, if applicable, to discuss the violation and how the agency has addressed it or will address it. If such response is deemed inadequate, the Team will formally notify the agency that a recommendation for revocation will be offered to the Committee. The Team will then present the alleged violations to the Committee at the next meeting. Agency representatives shall be given an opportunity to appear before the Committee to dispute the allegations.

The Committee will then vote on whether the full accreditation status will be revoked. Decisions regarding revocation shall be made by the majority of those present and voting. Members of the Committee affiliated with the agency under consideration will withdraw their participation during discussion and decision-making.

If an agency's full accreditation status is revoked by the Committee, the agency must wait at least two years before reapplying for accreditation.

ANNUAL VERIFICATION OF COMPLIANCE

Accredited agencies shall be required to file an annual report by the July 1st that begins their second and third years of full accreditation status. For example, an agency accredited on July 1, 2025, would be required to file an annual report by July 1, 2026, and July 1, 2027. The due dates for these reports will be listed on the accreditation letter provided to the agency. The verification form is available on the Professional Standards website.

As necessary, the Team may also conduct site visits to ensure compliance. Such visits will be conducted after notification to the agency.