

# Marion County Batterer Intervention Program Standards

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# TABLE OF CONTENTS

	Page
Section - 1	Definitions.....2
Section - 2	Purpose and Implementation..... 3
Section - 3	Total Community Response to Domestic Violence .....4
Section – 4	Interface Standards – Victims and Current Partners.....5
Section – 5	Confidentiality of Victim and Partner Information.....8
Section – 6	Interface Standards – Victim Advocacy Programs.....8
Section – 7	Interface Standards – Criminal Justice System.....9
Section – 8	Interface Standards – Other Programs or Providers.....10
Section – 9	Interface Standards – Social Services.....11
Section – 10	Intervention Strategies.....11
Section – 11	Intervention Curriculum.....13
Section – 12	Culturally Informed Interventions.....18
Section – 13	Program Format.....19
Section – 14	Policies and Procedures as to Release.....22
Section – 15	Post-Release Services.....22
Section -- 16	Personnel Standards.....22
Section – 17	Research Programs.....30
Section – 18	Demonstration Projects.....31
<u>Attachments</u>	
A	History
B	Referral Process
C	Admission Process
D	Record Keeping
E	Program Review Process (LSA will draft to reflect current practice & procedure)

## BATTERER INTERVENTION PROGRAM STANDARDS

### SECTION (1)

#### Definitions:

***The current definition of “batterer” in the new OARs, defines the act of battering as a behavior conducted by persons of the male gender. Thus pursuant to the OARs the terms “battering” and “batterer” have the meanings set forth below:***

(1) “Batterer” means:

(a) A male adult 18 years of age or older who engages in “battering” against women.

(b) A male minor criminally convicted as an adult of conduct against women and/or men that constitutes “battering” in whole or in part.

(2) “Battering” includes but is not limited to physical violence, sexual violence, threats, isolation, emotional and psychological intimidation, verbal abuse, stalking, economic abuse, or other controlling behaviors against women in, but not limited to, the following relationships:

(a) A current or former spouse of the batterer;

(b) An unmarried parent of a child fathered by the batterer;

(c) A woman who is cohabiting with or has cohabited with the batterer;

(d) A woman who has been involved in a sexually intimate relationship with the batterer within the past two years;

(e) A woman who has a dating relationship with the batterer;

(f) An adult woman related by blood, marriage or adoption to the batterer; or

(g) A woman who relies on the batterer for ongoing personal care or assistance.

(3) “Batterer Intervention Program” (program) is a curriculum of activities, education and intervention services designed to bring about change in a participant, resulting in the cessation of battering behavior.

(4) “Batterer Intervention provider” (provider) means an agency, whether public or private, profit or non-profit, that provides intervention and education services to batterers related to ending their battering behavior.

(5) “Demonstration Projects” clearly outlines research based projects used to demonstrate the viability or sustainability of a program. Community-based demonstration projects represent the translation of research findings into practice.

(6) “Facilitator” means any person who provides intervention services, whether in a group, class or individual setting.

(7) “Leave of Absence” means a participant missing two or more sessions with advance knowledge and approval of the provider.

(8) “Local Domestic Violence Coordinating Council” (Council) means a council set up by local entities that works to intervene with or prevent domestic violence, and to foster a coordinated community response to reduce domestic violence. A Council shall include representatives of the criminal justice system (such as law enforcement, prosecution, and judiciary) and victims’ advocacy providers. A Council may also include medical professionals, mental health professionals, health agencies, substance abuse providers, culturally specific providers, child protective services, child support enforcement, school personnel, senior services, disability services, self-sufficiency services (public assistance) and other applicable programs of the Oregon Department of Human Services (DHS), representatives from faith communities, other community groups, and Program or providers .

(9) “Local Supervisory Authority” (LSA) means the state or local corrections agency or official designated in each county by that county’s board of county commissioners or county court to operate corrections supervision services, or custodial facilities, or both.

(10) “Mandating Authority” (MA) means the court, or corrections system authority that has ordered or required the batterer to participate in a Batterer Intervention Program.

(11) “Participant” means a batterer who participates in a Batterer Intervention Program.

(12) “Partner” means a person in a past or present intimate relationship with a batterer, including persons described in subsection (2) of this section. A partner may be under the age of 18 and may or may not be an identified victim of the participant’s battering.

(13) “Protection Order” includes but is not limited to a Family Abuse Prevention Act (FAPA) order, Elderly Persons with Disabilities Abuse Prevention Act (EPDAPA) Order, Sexual Abuse Protective Order (SAPO), a no-contact order, post prison or parole order, jail release order, stalking order or restraining order.

(14) “Victim” means any past or present partner, subjected to battering. A victim may be under the age of 18. In no event shall the batterer be considered a victim for purposes of these standards.

(15) “Session” means a facilitated group or class with more than one participant, lasting one and one half to two hours.

(16) “Victim advocacy program” (VP) means a nonprofit organization, agency or program that assists domestic violence or sexual assault victims. VPs include, but are not limited to, battered women’s shelters, rape crisis centers, and other sexual assault and domestic violence programs assisting victims of battering.

## **SECTION (2)**

### **Purpose and Implementation**

(1) These standards address batterer intervention programs violence by male batterers in a heterosexual relationship.

(2) The purpose of the standards are to:

- (a) Help ensure the safety of victims and their children;
- (b) Ensure that all programs, providers and facilitators use appropriate intervention strategies to foster stopping a batterer's violence, a batterers acceptance of personal accountability for battering and personal responsibility for the decision to stop, or not to stop, battering; and to promote change in a batterer's attitude and beliefs that support coercive behavior;
- (c) Ensure that all programs, providers and facilitators address all forms of battering;
- (d) Ensure that all programs, providers and facilitators are culturally informed and provide culturally appropriate services to participants;
- (e) Ensure egalitarian and respectful behavior by all programs, providers and facilitators toward women and men of all races, cultures and sexual orientation;
- (f) Ensure that all programs, providers and facilitators provide services that are affordable and accessible to all participants, including participants with disabilities;
- (g) Provide a uniform standard for evaluating **program, provider and facilitator** performance;
- (h) Encourage programs and practices, based on consensus of research and proven field experiences to enhance victim safety;
- (i) Foster local and statewide communication and interaction between all victim programs;
- (j) Foster local and statewide communication and interaction among **providers**; and
- (k) Ensure that providers operate as an integrated part of the wider community response to battering.

(3) The Implementation and transition provisions shall:

- (a) Apply to any current or prospective program, provider or facilitator.
  - (A) Programs and providers currently in operation on the effective date of these standards shall make reasonable efforts to conform their programs, practices, and facilitator requirements to the new standards as soon as practicable but no later than three months after the effective date of the standards.

### **SECTION (3)**

#### **Total Community Response to Domestic Violence**

(1) Programs and providers shall be part of a wider community response to battering and not a "stand alone" form of response. Providers and facilitators shall interface with VPs, the Council,

the criminal justice system including the LSA, other providers, members of the Council, and entities recommended to be part of the Council in OARs, to achieve the following objectives:

- (a) Increase victim safety and batterer accountability and responsibility;
- (b) Increase program, provider, facilitator coordination, communication with the criminal justice system, VPs, other programs or providers, and all other entities involved in the total community response to domestic violence;
- (c) Decrease the likelihood that a lack of communication between Program or providers and other representatives in the community response to domestic violence will jeopardize victim safety or be used by the batterer to manipulate the response system;
- (d) Increase the likelihood that providers are not working at cross-purposes with other agencies serving domestic violence and sexual assault victims and offenders;
- (e) Increase the likelihood that providers are providing services representing best practices; evidence based practices: SB 267 required crime-prevention and some mental health programs to be “evidence-based”. SB 267 requires prevention, treatment or intervention programs which are intended to reduce future criminal behavior in adults and juveniles or to reduce the need for emergency mental health services to be evidence-based. Evidence based programs are those programs that are based on research principles and whose costs are realized over a reasonable period of time through cost savings:
- (f) Promote community beliefs and attitudes that discourage battering; and
- (g) Support other programs that work to reduce or prevent battering.

(2) A program or provider shall participate in the Marion County Domestic Violence Council

## **SECTION (4)**

### **Interface Standards – Victims and Current Partners**

#### **(1) Victim/Current Partner Notification Policies**

- (a) A provider shall have written policies and procedures that govern provider and facilitator contact with identified victims and current partners, and that adequately address the safety of victims, including present and past partners. Program and provider policies relating to victims or partner contacts shall include a policy as to how to document victim or partner contact information consistent with OAR 137-087-0060(4)(b), and shall require the segregation and protection of victim or partner contact records. A provider or facilitator shall provide VP with the opportunity to review and comment on the provider’s proposed victim or partner contact policies, procedures, informational materials as described in subsection 2 of this section, and any amendments to those policies, procedures and informational materials before a provider adopts them.
- (b) In all provider and facilitator contacts with victims or partners, the primary goal is the safety of the victim or partner. Any victim or partner contact procedure shall consider

victim or partner safety, including the risk of identifying victim location, and the risk of any other unauthorized provider or facilitator disclosure of information from the victim or partner.

(c) A program, provider and facilitator shall not pressure, coerce or require victims or partners to disclose any information, have any future contact with the program, provider and facilitator or participant, or attend any program, provider and facilitator or other program, provider and facilitator sessions, meetings or education groups as a condition of the participant's involvement with the Batterer Intervention Program.

(d) Victim or partner contact initiated by a provider or facilitator normally shall be limited to the following circumstances:

(A) Notifying the victim or partner that the participant has been accepted or denied admission to the program;

(B) Notifying the victim or partner of any conditions imposed on the participant's admission to the program;

(C) Notifying the victim or partner of the participant's attendance record;

(D) Notifying the victim or partner that the participant has been suspended, discharged or terminated from the program; and

(E) Giving the victim or partner general information about the program, provider, and facilitator, community resources, and safety planning, consistent with section (2) of this standard.

(e) A provider may adopt a victim or partner contact policy that provides for victim or partner contact using a VP in any of the circumstances described in section (1)(d) of this standard, or other contacts requested by the provider. This policy was historically established by a formal interagency agreement with the VP.

## **(2) Informational Materials**

(a) A provider or facilitator shall prepare for distribution to victims and partners informational materials written in plain language, tailored to the community and responsive to relevant cultural components. The information shall be made available by the provider or facilitator upon request to any victim or partner, provided to the VP and LSA, and made available in a form that may be distributed through community resources.

(b) The materials shall include information about the following:

(A) A brief description of the program, including expectations, content and philosophy;

(B) A clear statement that the victim or partner is not expected in any way to help the participant complete any program requirements, and that the participant's eligibility for services is not contingent in any way on victim or partner participation or on other victim or partner contact with the provider;

(C) The limitations of the program, including a statement that the batterer's participation in a program does not ensure the participant will stop battering behavior;

(D) The risk of participants misusing information they receive from the program or other program participants to support their continued battering behavior.

(E) The risk of participants reoffending, or changing their control tactics, while in the program or in the after completion of the program;

(F) The victim's or partner's right, at his/her discretion, to contact the provider, or facilitators of the group or classes the participant attends, with any questions or concerns,

(G) The victim's or partner's right to have communications kept confidential unless confidentiality is waived by the victim or partner, or unless release of victim information is required by federal or state law, regulation or court order;

(H) A statement that the victim or partner may complain to the provider, LSA, a VP, or the Marion County Domestic Violence Council: Program Review Subcommittee if he/she has a concern about how the program, provider and facilitator is contacting him/her;

(I) Contact information related to victim services, such as services offered by VPs in the victim's community, the statewide automated victim notification system (VINE), Oregon Crime Victims' Compensation Program, and other victims' rights information;

(J) Information for victims regarding how to make safety plans to protect themselves and their children, including community resources to contact if they believe they are at risk; and

(K) Notification that a VP may be available as a means by which the information set forth in section (1)(d) of this standard may be communicated, thereby allowing the victim to choose to avoid direct contact with the provider.

(c) Upon request, a provider shall make a reasonable effort to provide its informational materials in a form suitable for victims or partners with vision impairments or with limited English proficiency.

**(3) Imminent Threat to Health or Safety.** A provider or facilitator shall disclose participant information when, and to the extent, the provider or facilitator in good faith believes such disclosure is necessary to prevent or lessen an imminent threat to the health or safety of a person or the public. No authorization to release information is required in such circumstances. The provider or facilitator may provide information to a person or persons reasonably able to prevent or lessen the risk of harm, including but not limited to the victim and past or present partners, law enforcement, VPs, DHS, the Court, and Community Corrections officials.

**(4) Victim-Initiated or Partner-Initiated Contacts.** If a victim or partner contacts the provider, the provider may provide information and referral as allowed by state and federal confidentiality



laws. The provider shall not inform the batterer about the victim or partner contact. In response to victim-initiated or partner-initiated contacts, any information the provider wants to request from the victim or partner (e.g., level of concern for his/her own safety, recent behaviors of her partner) shall only be sought after the victim or partner has given full consent. The provider shall make clear that the victim or partner is under no obligation to provide any information, and that refusal to do so shall not affect the status of the participant. The information shared with the provider shall be kept completely confidential unless the victim or partner expressly authorizes its disclosure, or unless release of information is required by law. In considering whether to request such information from the victim or partner, the provider or facilitator shall prioritize victim or partner safety over any other concerns.

(5) No provision above shall override the mandatory obligation to report child abuse pursuant to ORS 419B.010 (Definitions 419B.005).

## **SECTION (5)**

### **Confidentiality of Victim and Partner Information**

(1) **Confidentiality.** All information about or from a victim or partner shall be confidential to the extent permitted by law.

(2) **Treatment of Information.** Any information about a victim or partner, including victim or partner contact information received from any source other than the participant shall be kept in a secure location separate from information regarding the participant.

(3) **Restriction of Access to Information.** A provider or facilitator shall restrict access to and use of victim or partner information to only provider staff who have a specific need to know the information and who are accountable for their access to and use of that information.

(4) **Disclosure of Information.** Any disclosure of information about the victim or partner shall be made only with the victim's or partner's authorization, or as otherwise required by law or by court order.

(5) **Notification of Possible Disclosure of Information.** If a provider or facilitator is put on notice that federal or state law, regulation or court order may require the disclosure of information provided by a victim or partner, the provider or facilitator shall immediately notify the victim or partner or the appropriate VP unless such notification would endanger the safety of the victim or partner.

## **SECTION (6)**

### **Interface Standards – Victim Advocacy Programs**

(1) **Liaison.** A provider shall designate a staff member to serve as a liaison to at least one VP and to MCDVC. Through the liaison, the provider shall work collaboratively with VPs to:

(a) Help ensure that victims are provided informational materials about or are referred to a VP or other advocacy agency, safety planning, and assistance agencies;

(b) Provide current provider policies, procedures and informational materials to the VPs and MCDVC Program Review Subcommittee for review and comment upon request;

- (c) Post, in appropriate locations, information about how victims can contact the provider, LSA or MA for more information about the provider;
- (d) Respond to VP concerns or problems related to program, provider or facilitator;
- (e) Develop a procedure to notify VPs when the provider or facilitator believes in good faith that such notification is necessary to prevent or lessen an imminent threat to the health or safety of the victim or the public.

## **SECTION (7)**

### **Interface Standards – Criminal Justice System**

**(1) Participation in Judicial or Corrections Response**. A provider's intervention services may be part of a judicial or corrections response to battering, either as a condition of probation or post-prison supervision, through a domestic violence deferred sentencing agreement, or as otherwise authorized by law. When the intervention comes as a result of probation or post-prison supervision, the program shall work with the criminal justice system to hold participants accountable.

**(2) Liaison**. A provider shall designate a staff person to serve as a liaison to the LSA and the MA. The liaison:

- (a) Shall request information such as court orders, parole, probation and post-prison supervision orders, protection orders, and police reports;
- (b) Shall work collaboratively with the LSA and MA to facilitate coordination of services with supervision requirements so the provider is not working at cross-purposes with criminal justice system requirements applicable to the batterer;
- (c) Shall report to the appropriate LSA or MA, or both, any known violations of a court order, criminal assaults, or threats of harm to another. A provider or facilitator must make such a report in a way that does not jeopardize the safety of the victim. No provision above shall override the mandatory obligation to report child abuse pursuant to ORS 419B.010 (Definitions 419B.005);
- (d) Shall report any substantial violations of the program's standards including but not limited to violations that create a risk of termination to the appropriate LSA or MA, or both;
- (e) Shall submit monthly status reports to the LSA or MA about participant attendance, participation, violations of court orders, protection orders, post-prison supervision or parole orders, and any known changes in risk factors;
- (f) Shall submit a 32 session progress report and projected program completion date, without cost to participant;
- (g) Shall report any other information requested by the LSA or MA as ordered by the court or authorized by the participant. Shall submit a final report to LSA or MA upon completion, without cost to participant;

(h) Shall provide status reports to participants for any pending court hearing or meeting with the LSA without cost to participant.

**(3) Communications about Participant Release.** In communication about participants' completion of program, provider and facilitator intervention services, a program, provider and facilitator shall note that completion of the program does not mean that the participant is presently non-abusive, nor is it an indication of future behavior.

**(4) Consistency with Court Orders or DHS Child Welfare Requirements.** A program, provider and facilitator shall ensure program, provider and facilitator actions are consistent with all court orders, protection orders, post-prison supervision, parole orders or DHS Child Welfare requirements, including orders affecting batterer contact with the victim(s) or partner(s).

**(5) Training.** A program, provider and facilitator shall participate in training and cross-training in conjunction with VPs and criminal justice agencies, and shall offer technical assistance to the criminal justice system and VPs relating to batterers and appropriate intervention strategies to eliminate battering behavior and abuse of children.

**(6) Imminent Threat to Health or Safety.** The program, provider and facilitator shall disclose participant information when, and to the extent, the program, provider and facilitator in good faith believes such disclosure is necessary to prevent or lessen an imminent threat to the health or safety of a person or the public. No authorization to release information is required in such circumstances. The program, provider and facilitator may provide information to a person or persons reasonably able to prevent or lessen the risk of harm, including but not limited to the LSA, the MA, and other law enforcement or corrections personnel.

## **SECTION (8)**

### **Interface Standards – Other Programs or Providers**

**(1) Purpose.** The purpose of sections (2) – (4) of this standard is to promote accountability and completion of program, provider and facilitator requirements and to deter participants from changing enrollment from one program, provider and facilitator to another program, provider and facilitator to avoid accountability.

**(2) Restrictions on Participant Transfer.** A participant may not transfer from one program or provider to another program or provider without the specific authorization of the LSA or MA.

**(3) Authorization to Obtain Information.** After receiving a referral for a new provider from the LSA or MA, a provider shall require the participant to authorize any former provider to send the new provider all information about the participant's attendance, participation, payment record, accountability plan, exit summary and transfer plan. The new provider shall request the authorized information from any former provider.

**(4) Credit for Sessions.** The new provider shall extend credit for the number of sessions attended at the former program, unless otherwise ordered by the Court.

**(5) Provision of Copies of Standards.** Participant shall be provided copies of the standards set forth in Section 8 at the time of requested transfer at no cost to participant.

**(6) Participation in Statewide Programs.** Programs, providers and facilitators shall be active in local and statewide programs in order to:

- (a) Provide quality services to enhance the safety of victims;
- (b) Participate in peer review that fosters statewide compliance with the standards set out in these rules;
- (c) Discourage practices by other BIPs that do not comply with these standards;
- (d) Assist in the development of relationships with VPs and others in the coordinated community response to domestic violence;
- (e) Share research results and new practices with other BIPs; and
- (f) Cooperate, to the extent practicable, in research on domestic violence that is approved by the Council and otherwise consistent with victim or partner safety, and collaborate in the production and dissemination of research findings.

## **SECTION (9)**

### **Interface Standards – Social Services**

**Provider and Facilitator Responsibilities.** To the extent reasonably practicable, a provider and facilitator shall:

- (1) Establish a liaison with the DHS office in the provider's service area(s);
- (2) Coordinate with community members to provide community education and public awareness campaigns related to domestic violence;
- (3) Assist in training professionals in the community about batterers, services for batterers and accountability for batterers; and
- (4) Collaborate with community representatives on issues of public policy related to victim safety and intervention with batterers.

## **SECTION (10)**

### **Intervention Strategies**

#### **(1) Appropriate Intervention Strategies**

A program, provider and facilitator's intervention strategies shall include, but are not limited to the following:

- (a) Use curriculum that includes cognitive-behavioral, cognitive restructuring, and social learning, targeting criminogenic behavior and related thought processes;

- (b) Use a culturally specific curriculum whenever possible;
- (c) Increase the participant's understanding of the causes, types and effects of battering behavior;
- (d) Identify beliefs that support battering;
- (e) Use respectful confrontation that encourages participants to challenge and change their beliefs and behaviors;
- (f) Address tactics used to justify battering such as denial, victim blaming, and minimizing; increasing participant recognition of the criminal aspect of the batterer's thoughts and behavior; and reinforcing participant identification and acceptance of personal responsibility and accountability for such tactics;
- (g) Reinforce appropriate respectful beliefs and behavioral alternatives;
- (h) Promote participant recognition of and accountability for patterns of controlling and abusive behaviors and their impacts, and participant responsibility for becoming non-controlling and non-abusive;
- (i) Ensure that the impact of battering on victims, partners and children, including their safety and their right to be treated respectfully as individuals, remains in the forefront of intervention work;
- (j) Match participants' risk, needs and responsivity factors;
- (k) Utilize positive re-enforcements and negative consequences;
- (l) Practice cognitive skills in increasingly difficult situations (graduated practice); and
- (m) Consist of concrete verbal suggestions.

**(2) Inappropriate Intervention Strategies.** The following intervention strategies are inappropriate and inconsistent with the MCDVC philosophy and may compromise victim safety:

- (a) Blaming the participant's decision to batter on the victim's qualities or behaviors;
- (b) Coercing, mandating, requiring or encouraging victim or partner disclosure of information or participation in the intervention with the participant;
- (c) Offering, supporting, or recommending the use of couple, marriage or family counseling or mediation as appropriate intervention for battering;
- (d) Identifying any of the following as a primary cause of battering or a basis for batterer intervention: poor impulse control, anger, past experience, unconscious motivations, substance use or abuse, low self-esteem, or mental health problems of either participant or victim;

- (e) Using ventilation techniques such as punching pillows, use of batakas or encouraging the expression of rage;
- (f) Viewing battering as a bi-directional process with responsibility shared by the victim;
- (g) Viewing battering as an addiction and the victim as enabling or co-dependent in the battering; or
- (h) Using actions or attitudes of moral superiority, or controlling or abusive behaviors toward participants.
- (i) Identifying anger as an excuse for violence;
- (j) Using psychodynamic individual or group therapy, which center causality on violence in the past;
- (k) Using approaches that are primarily lectures, self-help and/or talking cures/process groups;
- (l) Facilitation groups with more than 12 participants;
- (m) Providing programs that are vague/unstructured/non-directive;
- (n) Supporting or providing programs that utilize 'Punishing Smarter' techniques (boot camps, scared straight, etc.);
- (o) Supporting or providing programs that are based on a 'Medical Model'; or
- (p) Supporting or providing a program that relies on writing, poetry, and/or autobiography assignments as a sole mode of treatment, as these have been proven to be ineffective with a Corrections population.

## **SECTION (11)**

### **Intervention Curriculum**

**(1) Basic Intervention Curriculum Requirements.** Challenging and confronting participant beliefs and behaviors shall be balanced by creating a safe and respectful environment for change. To accord with these standards, the curriculum shall include, but is not limited to, the following basic requirements:

- (a) Address belief systems that legitimize and sustain battering and abuse of children;
- (b) Inform participants types of battering as defined in OAR 137-087-0005(2);
- (c) Challenge participants to identify the patterns of their battering behaviors and all tactics used to justify battering such as denial, victim blaming, and minimizing;
- (d) Increase participant recognition of the criminal aspect of the participants thoughts and behavior;

- (e) Reinforce participant identification and acceptance of personal responsibility and accountability for all such tactics;
- (f) Reinforce alternatives to non-battering behavior which includes skill building practice;
- (g) Encourage participants to identify the cultural factors that are used by a batterer to legitimize both individual acts of abuse and control and battering as a whole;
- (h) Model respectful and egalitarian behaviors and attitudes;
- (i) Increase participants' understanding and acceptance of the adverse legal, interpersonal and social consequences of battering;
- (j) Increase the participants' overall understanding of the effects of battering upon victims, themselves, and their community;
- (k) Encourage participants to go beyond the minimum requirements of the law in providing victims and their children financial support and restitution for the losses caused by battering;
- (l) Identify the effects on children by battering directed at their parent, including but not limited to the incompatibility of the participant's battering with the child's well-being and the damage done to children witnessing battering. Educating participants about the child's need for a close parental bond, nurturance, age appropriate interactions and safety;
- (m) Encourage participants to recognize the responsibility of being a parent, including responsibility for the emotional, physical and financial support necessary to provide a healthy environment that encourages growth and stability;
- (n) Facilitate participants' examination of values and beliefs that are used to justify and excuse battering;
- (o) Require participants to speak with respect about their partners and others;
- (p) Challenge participants to respect their partner and others, to recognize their partner and others as equals who have the right to make their own choices;
- (q) Encourage participants to show empathy and awareness of the effect of participants' behavior on others, and reinforcing alternatives to non-battering behavior which includes skill building practice;
- (r) Challenge participants to accept personal responsibility and accountability for their actions;
- (s) Encourage participants to challenge and change their own battering beliefs and behaviors;
- (t) Identifying how the participant uses alcohol and other drugs to support battering behaviors;

- (u) Identify how power & control issues are used to control others, and;
- (v) Appropriately describe the Cycle of Violence.

**(2) Curriculum.** The curriculum shall:

- (a) Be clearly written and structured;
- (b) Reflect specific intervention procedures;
- (c) Reflect the goals of each session in detail;
- (d) Clearly outline exercises and homework, accompanied by distinct objectives;
- (e) Consist of a cognitive behavioral / social learning skill-building approach, and;
- (f) Be consistent with the manual used by the facilitator.

**(3) Intervention Process and Curriculum.** The intervention process and curriculum shall be designed to:

- (a) Replace anti-social thoughts and behaviors with pro-social thoughts and behaviors,
- (b) Encourage participants to associate with those who engage in pro social behavior,
- (c) Address problems, myths and facts associated with alcohol and drug abuse,
- (d) Reduce the power and control tactics used by participants,
- (e) Increase knowledge of non-abusive actions, self-management and problem-solving skills, or,
- (f) Teach the skills of positive non-abusive choice-making,
- (g) Teach the skills of anticipating and coping with problem solutions,
- (h) Teach the negative consequences of battering behavior on family, extended family, friends, and the community,
- (i) Teach violence prevention strategies,
- (j) Require the participant to describe the participant's specific actions that caused harm, including the entire range of attempts used to control and dominate the victim(s) or partner(s), the specific actions that led to the participant being in the program, and the participant's intentions or purpose in choosing those actions.
- (k) Discuss with the participant the beliefs, values, and thinking patterns the participant uses to:
  - (A) Prepare to batter,



(B) Justify battering to self and others,

(C) Blame others and circumstances outside participant's control for battering, and

(D) To minimize and deny participant's behavior, the harmful effects, and the accountability and responsibility for battering,

(l) Discuss the thoughts, beliefs and actions a participant will need to change to non-abusive and non-controlling behavior, and a description of alternative thoughts, beliefs and actions participant can use to make non-abusive and non-controlling choices,

(m) Describe the thoughts, beliefs and actions that the participant uses in other areas of participant's life that demonstrate that participant is already aware and capable of making responsible non-abusive and non-controlling choices,

(n) Help the participant to accept of full responsibility for the participant's choices and their consequences,

(o) Help the participant to understand that:

(A) The participant's actions that cause harm to the victim(s), partner(s), children and the community are participant's choice;

(B) That participant had other options; and

(C) That participant is fully accountable for participant's choices and the consequences of those choices for participant and others; and

(p) Help the participant to accept full responsibility for having brought the criminal justice system into participant's life.

(4) **Accountability Plan**. A program shall require every participant to develop an Accountability Plan (Plan). The curriculum used by the provider shall provide information a participant can use to develop an Accountability Plan. Accountability planning is an ongoing process intended to increase the participant's self-awareness, honesty and acceptance of responsibility for battering and its consequences. A participant's Accountability Plan shall include specific and concrete steps to be identified and implemented by the participant. A provider and facilitator shall always prioritize the safety and best interests of the victim when teaching and reporting on an Accountability Plan. Under no circumstances may the terms of an Accountability Plan require, or imply, authorization of or permission for conduct that violates the terms of a court order or other legally binding requirement.

(5) **Elements of the Plan**. The Accountability Plan shall include, but need not be limited to, the following elements:

(a) A description of the conduct participant shall cease, and the conduct the participant shall be held accountable for, including:

(A) A description of the specific actions that cause harm, including the entire range of attempts used to control and dominate the victim(s) or partner(s), specific actions that led to the participant being in the program, and the participant's intentions, reasons or purpose for choosing those actions.

(B) Identification of the beliefs, values, and thinking patterns the participant used to:

(i) Prepare and plan to batter;

(ii) Justify battering to participant and to others;

(iii) Blame other persons and circumstances outside participant's control for participant's battering; and

(iv) Minimize or deny participant's battering, its harmful effects, and refusal to take personal accountability and responsibility for the battering and its effects.

(C) Identification of the full range of effects and consequences of the battering on the victim(s), partner(s), children, the community and the participant.

(b) Participant's plan for choosing to treat his former, current or future partner(s) and children in a continually respectful and egalitarian manner, including:

(A) A description of the participant's plan for intervening in participant's battering to prevent participant from continuing participant's pattern of battering;

(B) A description of how the participant is currently utilizing the Plan;

(C) A description of how the participant is intervening in participant's battering, including the excuses, beliefs and behaviors participant is addressing;

(D) A description of how the participant will choose to act in ways that no longer cause harm to the victim(s), partner(s), children and the community;

(E) A description of how the participant will take responsibility for choosing to act in ways that no longer cause harm to the victim(s), partner(s), children and the community.

(G) A description of the thoughts, beliefs and actions the participant will need to change to become non-abusive and non-controlling;

(H) A description of alternative thoughts, beliefs and actions the participant can use to make non-abusive and non-controlling choices; and

(I) A description of the thoughts, beliefs and actions that the participant uses in other areas of participant's life that demonstrate that participant is already aware and capable of making responsible, non-abusive and non-controlling choices.

(c) The participant's acceptance of full responsibility for the participant's choices and their consequences, including:

(A) Acknowledgement that the participant's actions causing harm to the victim(s), partner(s), children and the community were participant's choice, that participant had other options, that participant is fully accountable for participant's choices and the consequences of those choices for participant and others;

(B) Acceptance of full responsibility for having brought the criminal justice system into participant's life, if applicable, and for other consequences of participant's behaviors; and

(C) Participant's plan for beginning and continuing to make reparation and restitution for the harms caused, either directly to the victim(s) or a representative of the victim(s) if appropriate, or to an agency approved by the victim(s).

## **SECTION (12)**

### **Culturally Informed Interventions**

**(1) Familiarity with Cultural Demographics.** A provider or facilitator shall maintain familiarity with the cultural demographics of its service area to help the provider or facilitator:

(a) Anticipate the various cultural backgrounds that may be represented by participants; and

(b) Identify factors within a particular cultural background that influence battering, or that can be used by the participant to excuse the battering. The facilitator shall assist the participant in ending battering without using such participants cultural background as an excuse for battering.

**(2) Scope.** For purposes of these standards, cultural groups shall be construed broadly to include age, gender, ethnicity, national origin, race, sexual orientation, religion, disabilities, language, socioeconomic status and social groups that are identifiable within the provider's service area.

**(3) Basic Service Requirement.** Culturally-specific services shall be offered to the extent practicable. However, if culturally-specific services are not available, providers shall offer culturally informed services.

**(4) Culturally Informed Curriculum.** A provider's curriculum shall address the factors within the particular cultural background of a participant that influence battering. The curriculum shall avoid cultural stereotyping. Facilitators shall show videos and provide information from a variety of cultural perspectives to staff and participants.

**(5) Personnel Policies and Procedures.** A provider's personnel policies and procedures shall require training and other activities that:

(a) Promote recognition and understanding of the factors within a particular cultural background that support battering and hinder batterers from stopping violence.

(b) Educate staff to understand:

(A) The negative effects of all forms of oppression and about how individuals within each specific cultural background in the provider's service area may experience oppression within their own culture or within the dominant community;

(B) How the cultural backgrounds of the populations in the provider's service area view gender roles and family structure, and how those cultures typically respond to domestic violence, sexual assault, and conflict;

(C) Specific strengths of the cultural backgrounds in the provider's service area, such as, strong kinship ties, work ethic, adaptability of family roles, egalitarianism, high achievement goals, and strong religious orientation;

(D) Specific traditions within particular cultural backgrounds that support battering and hinder batterers from stopping their battering.

(E) Recognition and avoidance of culturally stereotypical views and beliefs by program personnel;

(F) Biases and preconceptions about people from specific cultures, and how to avoid such biases or preconceptions in the provision of program services and activities.

**(6) Library of Information and Resources.** A provider shall develop and maintain a library of information and resources about specific cultural backgrounds and culturally sensitive modes of intervention.

**(7) Diverse Staff and Environment.** To the extent possible, a provider shall employ staff and provide an environment that reflects the diversity of cultural backgrounds in the provider's service area.

**(8) Relationship with Other Providers.** Providers shall develop relationships with appropriate culturally-specific programs or providers to obtain information or training about the culture, and to refer participants for non-program culturally-specific services as needed. Providers shall cooperate with other providers in developing culturally-specific programs that comply with these standards.

## **SECTION (13)**

### **Program Format**

**(1) Use of Session Format.** A provider shall ordinarily provide intervention sessions in a group or class format. Exceptions to this session or class format shall be rare and the reasons clearly documented and provided to the MCDVC: Program Review Sub-committee prior to amending the format.

**(2) Gender-specific.** Provider sessions or classes shall be gender-specific.

**(3) Session Size.** To maximize the impact of the curriculum, groups or classes shall ideally be composed of 7-12 participants. ***A group or class shall include no more than 12 participants***

***unless previously approved by the LSA.*** If this exception is made, it is with the condition there are to be two facilitators present at all times.

**(4) Monthly Group Report.** Providers shall provide to the LSA a monthly group report, which reflects the number of participants in attendance at each session.

**(5) Co-facilitation.** ***Except in an emergency, program sessions shall be conducted by at least one male and one female co-facilitator*** to establish an egalitarian model of intervention, increase accountability, and model healthy egalitarian relationships. The provider shall within 10 working days notify the LSA of any session that was not co-facilitated by male and female co-facilitators. The notification shall state the reasons and justifications for such action.

**(6) Guidelines for Intervention Sessions and Provider Reporting.**

(a) It is intended that most participants will complete an intervention program within 36 sessions.

(b) If a participant at any time falls behind in three or more sessions completing his or her assignments, a report will be immediately provided to the referral agency. At no time is a participant to be allowed to fall behind more than three assignments.

(A) The report shall include the number of sessions attended, number of assignments completed, number of missed assignments, number of assignments remaining, and participant's plan of action on correcting the issue within a specified time frame. The participant shall sign the report reflecting knowledge and agreement to corrective action. A copy of this report shall be given to the participant at no cost.

***(B) If a participant is behind up to three assignments, the participant may not be terminated from a program or extended in a program by a provider.***

***(c) The provider and/or facilitator shall allot time in each session for all participants to share and receive feedback on their required assignments. At the beginning of each session, the facilitator shall inquire as to who is prepared to share their assignments.***

***(d) Participants may share assignments in regular group sessions as well as make-up and/or sanction group sessions.***

***(e) A provider may not extend a participant's program beyond 36 sessions without a valid Court order. Only the Court may order intervention sessions beyond 36 sessions.***

(f) No later than after completion of 32 sessions, the provider shall submit a Summary Report of the participant's participation to date, and a recommendation as to further program participation. The Summary Report should address compliance with program requirements, reporting of any violation of Court orders, protection orders, post-prison supervision or parole orders, identification of risk factors (as detailed in Admissions Policies and Procedures), level of engagement and participation in provider activities.

(A) If the participant is on supervised probation, the provider shall submit the Summary Report and recommendations to the LSA, providing, a copy to the participant at no cost. If after delivery of the Summary Report, the provider receives no order for continuation of services, intervention services **SHALL** cease upon completion of the 36<sup>th</sup> session.

(B) If the participant is on bench probation, the provider shall submit the Summary Report and recommendations to the Court, providing at no cost, a copy to the participant. If after delivery of the Summary Report, the provider receives no order for continuation of services, intervention services **SHALL** cease upon completion of the 36<sup>th</sup> session.

(g) If the provider is recommending services beyond 36 sessions, the Summary Report shall include the following:

- (A) A recent score from the evaluation tool approved by the LSA,
- (B) Number of groups attended,
- (C) Reasons for any approved or unapproved absences,
- (D) Number of assignments completed and dates of completion,
- (E) Number of assignments remaining, and
- (F) Basis for recommendation of continuation.
- (G) If the participant, as determined above, continues in the program after completion of 36 sessions, the provider shall provide an updated Summary Report to the appropriate authority after completion of each additional 4 sessions.

**(7) Written Attendance Policies.** A provider shall adopt written group or class attendance and tardiness policies approved by the LSA. At a minimum, such policies shall address punctuality, criteria for excused and unexcused absences, criteria for a maximum number of absences allowed, and criteria for obtaining exceptions to the attendance policies. The provider shall provide participant with a copy of the written attendance and tardiness policies (without cost), which will include any leave of absence requirements.

**(8) Leaves of Absence.** A “leave of absence” is defined as absence for 3 or more consecutive sessions. A provider may not permit a leave of absence (as defined above) without approval by the MA or LSA. A participant may remain in the program while temporarily not attending groups or classes for reasons the provider and MA or LSA determine to be justified. Leaves of absence shall be rare, time limited and granted only upon receipt of proper supporting documentation and when there are no other viable options.

**(9) Tardiness Policies.** Tardiness is defined as arriving more than five (5) minutes after the time scheduled for the session. Participants who are not tardy by this definition shall not be sanctioned. The provider’s written tardiness policy must be in compliance with this rule and approved by the LSA.

(10) **Written Completion Requirements.** A provider shall adopt written completion requirements as set forth in Section (13)(4)(b)(O), and approved by the LSA, MA and MCDVC.

**Note: The provider shall provide participants with a copy of all policies without cost to participants.**

## **SECTION (14)**

### **Policies and Procedures as to Release**

(1) **Policies and Procedures.** A provider may release a participant based upon completion of minimum requirements or by Court order.

(2) **Exit Summary.** Upon a participant's completion of minimum requirements or receipt of a Court order releasing a participant, a provider shall prepare a timely exit summary. An exit summary shall include documentation describing participant's completion of minimum requirements. The provider shall provide a copy of the exit summary to the LSA or MA, or both, and to the participant within seven days after its preparation. The summary report must be prepared and provided to the MA prior to any Court proceeding. ***The participant may not be charged for an exit summary.***

(a) In communications with others about release of a participant from a program, the provider shall note that release from a program is not evidence that the participant is presently non-abusive or non-violent outside of the Batterer Intervention Program, and release of participant does not predict future behavior.

(b) A provider shall immediately inform MA if a participant has completed 36 sessions of the program but not yet completed the program's minimum requirements.

(3) **Program Duration.** A provider may not for any reason require a participant to attend more than 36 sessions, without a valid and specific Court order.

## **SECTION (15)**

### **Post-Release Services**

(1) **Service Eligibility.** A provider may provide voluntary post-release services to a participant only after participant has met minimum requirements and received an exit summary from the program.

(2) **Cost of Services.** A provider may offer post-release services at little or no cost to former participants to encourage long-term and on-going participation in such services.

## SECTION (16)

### Personnel Standards

(1) **Personnel Policies.** A provider shall adopt the following written personnel policies and procedures. Such policies and procedures shall be applicable to providers, facilitators, managers or supervisors, administrative staff, volunteers, interns, board members and owners (collectively referred to as “staff”):

(a) Standards of conduct and standards for ethical practices of staff involved in program services with participants or contact with victims or partners;

(b) Standards for use and abuse of alcohol and other drugs, and procedures for managing incidents of use and abuse that, at a minimum, would be sufficient to comply with Drug Free Workplace Standards, 41 U.S.C. § 701 et seq. as described in 45 CFR Part 76 Appendix C;

(c) Compliance with laws relating to domestic violence, sexual assault, stalking and these standards, and applicable federal and state personnel regulations including the Civil Rights Act of 1964 as amended, Equal Pay Act of 1963, the Age Discrimination in Employment Act of 1967, Title 1 of the Americans With Disabilities Act, and Oregon civil rights laws related to employment practices;

(d) Policies and procedures relating to the commission of domestic violence, sexual assault, stalking or abuse by any staff, and providing that the provider shall terminate employment or volunteer service for such conduct unless the provider documents reasons for not doing so in the personnel file;

(e) Policies and procedures relating to discipline of staff for misuse or unauthorized disclosure of information obtained from or about participants, partners or victims; and

(f) Policies that clearly outline an emergency safety plan for facilitators.

(2) **Background Checks for Facilitators.** A provider shall use an appropriate method to obtain and review a fingerprint-based state and federal criminal record check for facilitators.

(a) A provider may ask an applicant, as a condition of employment or volunteer service, to certify whether he or she is, or has been, a respondent in any civil enforcement proceeding, including but not limited to a protective order or delinquent child support order. The following shall constitute grounds for dismissal or grounds not to rehire:

(A) Failure to disclose the existence of any protective order or no-contact order, or

(B) If the applicant is being charged with battering, child abuse/neglect, or elder abuse in court.

(b) An applicant shall be disqualified if the individual has ever been convicted of any crime or has been subjected to a protective order or no-contact order, or if the applicant has been held responsible for battering, child abuse/neglect, or elder abuse in court. The



provider may make an exception to this disqualification if the provider can document reasons for hiring or retaining the individual consistent with factors in section (5)(d) of this standard. If the facts underlying the conviction were related to domestic violence, the applicant must have completed a program with standards similar to these standards, including length of intervention and implementation of an Accountability Plan, and the applicant must have complied with all court orders, including child and spousal support. In addition, a period of more than five years shall have passed since the conviction of the crime **or** expiration of a court including any protective order, the individual shall have complied with all the terms of his or her sentence or court order, and the individual shall be in compliance with all other qualifications as a facilitator. The provider shall provide this documentation to the LSA for review and comment before hire or continuation of employment, document the response of the LSA, and place documentation of the reasons for hiring or retention, and of the LSA's response, in the applicant's or employee's personnel file for permanent retention.

(c) A facilitator has an ongoing responsibility to inform the provider within three working days of any changes in his or her history, including new arrests, convictions, protection orders or rehabilitation services.

**(3) Qualifications of Facilitators.** A provider shall adopt the following minimum qualification standards for facilitators, and as a condition of employment or volunteer services. A facilitator shall provide this provider documentation of compliance with these standards.

**(a) Facilitator Experience.** A facilitator shall document completion of a minimum of 200 hours of face-to-face contact co-facilitating groups or classes with a facilitator who has met all the facilitator qualification requirements in these standards using a model consistent with these standards. A facilitator shall document that this experience was obtained over a period of at least one year; but must be completed in two years. A maximum total amount of 100 hours of this requirement can also be satisfied in one or more of the following ways:

(A) By up to 50 hours of supervised face-to-face contact facilitating victim or survivor support or education classes, or up to 50 hours of working with a caseload primarily of domestic violence participants on probation or parole;

(B) By up to 50 hours of facilitating offender-related non-domestic violence groups or classes;

(C) By earning a bachelor's degree (50 hours credit for required experience) or Master's degree (100 hours credit for required experience) in women's studies, social work, criminal justice, psychology, sociology or other related field from an accredited institution of higher education. The facilitator shall document receipt of the required degree.

(D) To comply fully with the current process (attached), the following are required:

(i) 70% or more of direct service providers have an Associate's Degree or higher in a helping profession (i.e. counseling, criminal justice, psychology, social work or specialized fields (e.g. addictions).

(ii) 75% of personnel have worked in treatment/intervention Program or providers with participants for at least 2 years. Experience may also include their work at the current Batterer Intervention Program.

(iii) Direct service providers are hired based on skills and values including strong support for offender intervention and change, empathy, fairness, life experiences, non- confrontational but firm, problem solving, and prior training or licensure.

**(iv) Direct service providers are to be thoroughly trained to specific curriculum utilized by a Program.**

**(b) Facilitator Training.**

**(A)** A facilitator shall document completion of 40 hours of training provided by a nongovernmental victim advocacy program approved by the local MCDVC. For purposes of this section, “local” refers to a program that is located in or serves victims in the county in which the facilitator is applying to work. When the required training has been or will be provided by a nongovernmental victim advocacy program that is not local, at least 8 of the possible 40 hours must be provided by a local nongovernmental victim advocacy program, if one exists. The training shall include the following topics:

(i) Dynamics of domestic violence, including sexual assault and stalking, and power and control models;

(ii) Effects on children of exposure to a battering parent and to battering directed at their parent, including but not limited to, the incompatibility of the battering with the child’s well-being, the damage done to children witnessing battering, the child’s need for close parent bond, and how abusers use children to gain and maintain control;

(iii) Historical views and social attitudes about male dominance, domestic violence including sexual assault and stalking, and the respective status of men and women;

(iv) Risk factors for future or additional battering, aggressive or controlling behavior;

(v) Cultural competence as it relates to domestic violence, sexual assault, stalking and abuse;

- To satisfy the training requirements set forth above, a facilitator shall document completion of seven hours of training in oppression theory, cultural factors and anti-racism as it relates to domestic violence;

(vii) An overview of current state and federal domestic violence laws, including sexual abuse, sexual assault, stalking, child custody and visitation;

- (viii) An overview of battering behavior and tactics, including sexual abuse and stalking;
- (ix) Risk of facilitator and system collusion with the program participant;
- (x) Appropriate safety guidelines for facilitator contact with victims;
- (xi) An overview of the criminal justice system;
- (xii) State and local requirements for programs and providers, including intervention curriculum requirements;
- (xiii) Importance and elements of a coordinated community response to domestic violence and methods of collaborating with community providers and related services.

**(B) A facilitator shall complete and document 48 hours of additional training as follows:**

- (i) **Interviewing Skills.** In addition to the experience and training requirements above, a facilitator shall document completion of at least 18 hours of training in the following areas;
- (ii) **Substance Abuse.** In addition to the training requirements above, a facilitator shall document completion of at least 18 hours of training in substance abuse identification and screening;
- (iii) **Mental Health.** In addition to the training requirements above, a facilitator shall document completion of and at least 12 hours of training in mental health identification and screening.

(C) Agency staff shall also receive thorough training in the theory and practice of interventions employed by the provider, which shall include but not be limited to the following:

- (i) Formal training period in which personnel are trained on the interventions, assessment and curricula used by the provider;
- (ii) Co-facilitation with senior personnel;
- (iii) Regular clinical review (at least annual evaluation on service-delivery);
- (iv) Personnel to attend at least bi-monthly personnel meetings to discuss new intakes, case reviews, problems, programming, etc;
- (v) Job shadowing;
- (vi) Formal training on assessments and use of all assessment tools used by the provider.

(D) **Documentation requirements.** A facilitator shall provide the provider documentation of his or her training for each of the topics required above, and shall include the number of hours and dates of training for each specific topic. If the training in any specific topic was received more than five years before the employment application, and the applicant has not been continuously engaged in the domestic violence field either as a facilitator, provider, victim advocate or probation officer supervising domestic violence participants, the facilitator must also document completion of additional training in the specific topics(s) during the five years prior to the application date, equal to a minimum of 25 percent of the required hours in that topic. Additional training may be needed to ensure sufficient knowledge.

(4) **Staff Orientation.** Providers shall provide orientation for all new paid and volunteer personnel to acquaint them with the provider's philosophy, organization, curriculum, goals, policies, procedures and the Marion County Batterer Intervention Standards. This orientation must be successfully completed prior to a facilitator providing intervention services.

(5) **Continuing Education for Facilitators.** After a facilitator has met the basic qualification standards in section (3) of this standard, the facilitator shall document a minimum of 40 hours over a two calendar-year period of continuing education or training in topics related to the training requirements under sections 3(b) – (e) of this standard. Not more than eight hours of in-house provider training, or eight hours of internet or correspondence training, may be used annually to satisfy this biennial requirement.

(6) **Background Checks for provider staff other than Facilitators.** A provider shall use an appropriate method to obtain and review background information for personnel and applicants other than facilitators before employment or volunteer service, as follows:

(a) The applicant may, as a condition of employment or volunteer service, apply for and receive a criminal history check from a local Oregon State Police office and furnish a copy of it to the provider; or

(b) The applicant may, as a condition of employment or volunteer service, sign an authorization for the provider to contact the local Oregon State Police office for an "Oregon only" criminal history check on the individual.

(c) The provider may ask the applicant to certify whether he or she is, or has been, a respondent in any civil enforcement proceeding, including but not limited to:

(A) A protection order as defined in these standards; or

(B) A delinquent child support order.

(d) Failure to disclose the existence of a protection order, or delinquent child support order shall constitute grounds for dismissal or grounds not to hire or to allow volunteer service.

(e) The provider shall establish policies to evaluate the criminal history of potential staff. Said policies shall include:

(A) The severity and nature of the crime(s);

- (B) The number of criminal offenses;
- (C) The time elapsed since commission of the crime(s);
- (D) The facts of the crime(s);
- (E) The applicant's participation in intervention or rehabilitation program, counseling, therapy, or education evidencing a sustained change in behavior; and
- (F) A review of the police or arrest report confirming the applicant's explanation of the crime(s).

(e) If the applicant has been convicted of a crime, the provider shall determine whether the person poses a risk to this provider's staff, participants, victims or partners, and whether the criminal history indicates a propensity to engage in collusion with batterers. If the provider intends to hire the applicant, the provider shall confirm in writing the reasons for doing so.

These reasons shall address the applicant's suitability to work with the provider's staff, participants, or to have contact with victims or partners in a safe and trustworthy manner. The provider shall place this information in the staff's personnel file for permanent retention.

(f) Provider staff have an ongoing responsibility to inform the provider within three working days of any changes in their history, including new arrests, convictions, protective orders, no-contact orders, delinquent child support orders, or if the applicant has been held responsible for sexual abuse, assault, child abuse/neglect or elder abuse in court.

**(7) Professional Standards for Staff.** A provider shall include the following professional standards/personnel policies to ensure that staff maintain their professional objectivity and to minimize collusion or any appearance of favoritism or impropriety by the provider or its staff:

- (a) Staff shall not be delinquent in paying any required child support or spousal support;
- (b) Staff shall not be involved in any criminal activity;
- (c) Staff shall not be under the influence of alcohol or controlled substances while providing services;
- (d) Staff shall not use their position to secure special privilege or advantage with participants;
- (e) Staff shall not in any way collude with participants by implicitly or explicitly acting in a manner that minimizes or excuses the battering or joins into the batterer's system of denial or rationalization for the abuse. Collusion includes, but is not limited to: legitimizing participants' use of abuse against partners; defending their abusive actions for any reason; laughing at jokes about partners, spouses or violence and supporting participant distortions, disparagement or contempt of their partners by omission (not

interrupting) or by commission (actively engaging in supporting or affirming). Staff shall not imply that any victim deserves abuse nor show disrespect of any victim.

(f) Staff shall not allow personal interest to impair performance of professional duties;

(g) Staff shall not act as a facilitator for a group or class that includes a family member, personal friend, or past or current business associate of the personnel member;

(h) Staff shall not accept any gift or favor from current or former participants, or enter into any business contract or association with participants currently enrolled with the provider. Cultural or traditional values and customs shall at all times be balanced against this principle;

(i) Staff shall report any potential conflict of interest to supervisors.

(j) Staff shall immediately report to an appropriate licensing authority and to the MA or LSA, any unethical or illegal behavior by staff. A provider shall not take retaliatory action against personnel making such a report.

**(8) Prohibition of Sexual Harassment or Sexual Exploitation.** A provider shall adopt a written policy prohibiting sexual harassment and sexual exploitation, and shall document in each staff member's file that he or she has reviewed the policy and agreed to comply with it. The policy shall include disciplinary steps available to the provider if a staff person violates the policy.

**(9) Maintenance of Qualification Records.** A provider shall maintain individual records documenting each staff member's compliance with applicable qualification standards. The provider shall maintain the record for three years after the departure of a staff member.

**(10) Mentoring and Internships.** A provider is encouraged to provide mentoring or internship opportunities between its staff and staff of other providers or VPs to promote professionalism, provide experienced role models for less experienced personnel, interns or volunteers, and to provide cross-training for the provider's staff. Interns or those being mentored shall be required to comply with all of the provider's policies and procedures and with instruction of the supervising staff.

**(11) Facilitators in Training.** Individuals in training who have not met all the training and experience requirements applicable to facilitators under these standards may co-facilitate under the active supervision of a facilitator who meets these standards. Facilitator-trainees can co-facilitate under this status for up to two years from the start of the co-facilitating. The facilitator-trainee is immediately responsible for compliance with all other requirements of these standards applicable to a facilitator.

(12) A provider may request an exemption to the co-facilitation (male-female) requirement if in consultation with the MA and the LSA it is determined that the provider is unable to meet this requirement.

## **SECTION (17)**

### **Research Programs**

(1) Nothing in this section applies to a provider's disclosure of its own aggregate or non-personally identifying data, or the conduct of its own quality assurance activities.

(2) A provider may use and disclose participant information for research purposes consistent with this standard. Before making use or disclosure of participant information for research purposes, a provider shall obtain the following in writing from an independent researcher:

(a) Description of specific actions the researcher shall take to ensure the safety, confidentiality, and anonymity of victims;

(b) An adequate plan to protect participant information from improper use or disclosure;

(c) Description of steps to ensure that any victim or partner participation, or access to information about a victim or partner by the researcher, shall be based solely on the victim's or partner's informed consent obtained in a manner consistent with these Batterer Intervention standards;

(d) Description of steps to ensure that any procedure involving any victim, partner, or family member, and other collateral contacts including but not limited to past or present employers of the research participant, victim or partner, and a request for participation in the research, shall be developed in consultation with a VP to address victim or partner safety;

(e) Description of steps taken to ensure the input and involvement of community based domestic violence VPs in the design and implementation of the project;

(f) Description of steps to ensure that the research product shall:

(A) Report both positive and negative data about the program outcomes and the research participants if applicable and acknowledge alternative hypotheses, modalities and explanations;

(B) Include a statement about the limitations of self-reporting in accurately measuring a participant's progress, behavior, or attitudes/beliefs when the research includes information based on self-reporting by participants, including self-reports of program, provider, and facilitator effectiveness; and

(C) Clarify that release for program compliance does not provide any evidence that the participant is presently non-abusive, describe present behavior outside the Batterer Intervention Program, or predict future behavior.

(g) Description of a plan to destroy identifiable information at the earliest opportunity or at the conclusion of the research, and to keep confidential any information about, gathered from, or traceable to the victim or partner;

(h) An agreement by the researcher, and his or her agents, not to use or further disclose the research information other than for purposes directly related to the research, and to use appropriate safeguards to prevent misuse of that information;

(i) An agreement by the researcher, and his or her agents, not to publicly identify the research participant or past or current victims or partners; and

(j) An agreement by the researcher to follow federal guidelines relating to Human Subject Research, 45 CFR Part 46, if applicable.

(2) **Complaints about Research Conduct.** The provider or other researcher shall make available a person independent of the provider or other researcher with whom ethical complaints about the conduct of the research can be filed, and establish a procedure for filing such complaints. The provider or other researcher shall inform both the participant and the victim or partner, and any other person or entity about the complaint procedure,

(3) **Reporting Research.** The provider shall require a researcher conducting research on a program to advise the LSA and the MCDVC Program Review Subcommittee about the nature, scope and intent of the research.

(4) **Marion County Research Projects.** The provider shall provide the LSA and MA with statistical data as outlined by the LSA and MA. The provider shall provide statistical data on P&P participants to the LSA on a monthly basis. The provider shall provide statistical data on Bench participants to the MA on a monthly basis.

## **SECTION (18)**

### **Demonstration Projects**

(1) **Demonstration Projects.** Programs shall continue to evolve and change as evidence based practices for corrections clients and best practices are developed. These standards are intended to encourage innovative demonstration projects with a maintained focus on victim safety, participant accountability and participant internalization vs. compliance and/or conformity.

(a) Eligible Entities:

(A) All approved programs and providers, and

(B) The Court or LSA, in accordance to their mission and compliance with the evidence-based practice.

### **(2) Application Process**

(a) Formally propose the demonstration project via written request for demonstration project approval by the MCDVC Program Subcommittee.

(b) The application will consist of the following components:

(A) Provide a casual model in intervention design;



- (B) Describe proposed demonstration and clearly outlined goals and objectives;
- (C) Outline employment of appropriate assessment process, evaluation tools and techniques;
- (D) Describe curriculum to be utilized;
- (E) Qualifications/expertise of individuals, who will conduct the demonstration project;
- (F) Utilizing the potential of community groups: other agencies and organization (i.e. VPs, LSA, MA, and other professional partners) and an outline of their prospective roles;
- (G) Identification of the sections and subsections of these standards that project approval would want waived.
- (H) Identification of implemented process if there occurs any changes in initial request or change in business or identified individuals conducting demonstration project;
- (I) Agreement to yearly review of demonstration project; and
- (J) A means, independent of the provider, for evaluating the effectiveness of the project;

**(3) Informing Community Partners of the Demonstration Project.**

After approval of the project by the MCDVC Program Review Subcommittee and before implementing the project, the provider shall inform community partners (VPs, LSA, Courts, MCDVC, community justice, District Attorney's Office, alcohol and drug treatment providers and other agencies that come in contact with batterers or with victims or partners) of the demonstration project and changes in the program design. Informational materials shall be revised to state clearly the project's changes so as to avoid any misleading or inaccurate information about the Batterer Intervention Program. On a quarterly basis, the provider shall report to the community partners on the progress of the demonstration project, including concerns about its efficacy. A copy of each report shall also be mailed to the MCDVC Program Review Subcommittee.

**(4) Demonstration Project Time Period.** In general, a proposed demonstration project shall not exceed a 12 - 24 month period. While the demonstration project is being conducted, a provider may petition to extend the demonstration project. The petition shall provide updated information on all the criteria identified in the original request for approval.

**(5) Discontinuation of Demonstration Project.** After a proposed project is approved, evidence of an increase in batterer abuse, or a decrease in batterer accountability, shall lead to immediate discontinuation of the project. The provider shall immediately inform the community partners specified in section (2) of this standard of the discontinuation of the project.