

CF OPERATING PROCEDURE
NO. 170-25

STATE OF FLORIDA
DEPARTMENT OF
CHILDREN AND FAMILIES
TALLAHASSEE, September 16, 2022

Child and Family Well-Being/Domestic Violence

DOMESTIC VIOLENCE CENTER CERTIFICATION STANDARDS

This operating procedure describes the requirements for certified domestic violence center service provision and is intended to supplement the requirements set forth in Florida Statutes and Florida Administrative Code.

Questions about this certification process may be directed to:

DCF Office of Domestic Violence
2415 North Monroe Street, Suite 400
Tallahassee, FL 32303-4190
Phone: (850) 300-5000

BY DIRECTION OF THE SECRETARY:

(Signed original copy on file)

JESSICA THARPE
Assistant Secretary for
Child and Family Well-Being

SUMMARY OF REVISED, DELETED, OR ADDED MATERIAL

Updated to list current authority references, and incorporate additional and/or updated fiscal, administrative, and programmatic certification standards for domestic violence centers.

INTRODUCTION

The Department of Children and Families (Department) operates the statewide Office of Domestic Violence, which is responsible for providing supervision, direction, coordination, and administration of activities related to domestic violence prevention and intervention services. These activities include contracting with local agencies to provide services to victims and their dependents, managing the state certification and evaluation of domestic violence centers, directing policy, conducting training, and providing technical support to public and private agencies on domestic violence issues.

The minimum standards for certification were developed to ensure the health and safety of center participants. These standards provide a blueprint for domestic violence centers in developing, implementing, and improving domestic violence services for survivors and their children. This document is inclusive of all center services, unless otherwise specified, and are utilized along with Chapter 65H-1, Florida Administrative Code, federal and state laws and regulations, and contractual requirements in developing criteria for annual monitoring of Florida's certified domestic violence centers. Certified domestic violence centers (centers) are responsible for developing policies and procedures based on regional, demographic, architectural, cultural, and programmatic diversity to address the unique characteristics of the center's service area.

The Department's Office of Domestic Violence recognizes a survivor-focused, empowerment-based philosophy is necessary in working with victims of domestic violence and their children. Florida's certified domestic violence centers align their services with this philosophy and advance perpetrator accountability responses within their communities, so that victims are able to thrive in a self-sustained life, free of violence.

Core principles of empowerment-based advocacy are:

1. Partnership to develop survivor-driven goals
2. Respect survivor's confidentiality
3. Believe and validate survivor's experiences
4. Promote access to community resources
5. Help the survivor plan for safety
6. Respect the survivor's autonomy
7. Peer model
8. Voluntary services

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Chapter 1

GENERAL

1-1. Purpose. This operating procedure establishes Departmental procedures and guidelines for domestic violence centers seeking initial and annual state certification. It further explains the minimum standards as established in sections [39.903](#) and [39.905](#), Florida Statutes (F.S.), Chapter [65H-1](#), Florida Administrative Code (F.A.C.), and Department procedures.

1-2. Definitions. For purposes of this operating procedure, the following definitions apply:

a. "Advocate-victim privilege" means communication between a domestic violence advocate and a victim is confidential if it relates to the incident of domestic violence for which the victim is seeking assistance and if it is not intended to be disclosed to third persons other than:

(1) Those persons present to further the interest of the victim in the consultation, assessment, or interview.

(2) Those persons to whom disclosure is reasonably necessary to accomplish the purpose for which the domestic violence advocate is consulted. (Section [90.5036](#), F.S.)

b. "Certification" means a process of satisfying the requirements set forth herein, in statute, rule and Departmental procedures for establishing a certified domestic violence center.

c. "Coercive control" means the use of force or manipulation to control an intimate partner's thoughts, actions, and behaviors through violence, intimidation, threats, degradation, isolation, and/or stalking and monitoring. In the context of domestic violence, coercion can involve financial, psychological, physical, sexual, reproductive, and other kinds of abuse to undermine and control an intimate partner.

d. "Department" means the Department of Children and Families.

e. "Direct Service" means the rendering of support, counsel, or assistance to a victim of domestic violence who seeks assistance specific to their situation from a domestic violence center staff member (employee or volunteer) and who is employed by or associated with a certified domestic violence center.

f. "Direct Services Staff" means center employees or volunteers (including interns) who have face-to-face, telephonic, electronic, or other direct communication with adult and child participants receiving any services such as: advocacy; supportive counseling; safety planning; service management; information, resources, and referrals; or other assistance to help address the immediate or long-term needs of participants receiving services from a certified domestic violence center.

(1) "Employees" are individuals paid to work any number of hours for a certified domestic violence center.

(2) "Direct Service Volunteers" are non-paid individuals who provide direct services (as defined above) to victims of domestic violence.

g. "Domestic Violence" means any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, kidnapping, false imprisonment, or any criminal offense resulting in physical injury or death of one family or household member by another family or household member. (Section [741.28\(2\)](#), F.S.)

h. "Domestic Violence Advocate" means any employee or volunteer of a certified domestic violence center who has 30 hours of training in assisting victims of domestic violence and whose primary purpose is the rendering of advice, counseling, or assistance to victims of domestic violence. (Section [90.5036\(1\)\(b\)](#), F.S.)

i. "Domestic Violence Center" means an agency that provides services to victims of domestic violence as its primary mission. (section [39.902](#), F.S.)

j. "Monitoring" means a process of reviewing the fiscal, administrative, and programmatic components of the certified domestic violence centers to ensure compliance with statutes, rules, Departmental procedures and contracts between the domestic violence centers and the Department.

k. "Participant" means a person who consults a domestic violence advocate for the purpose of securing advice, counseling, assistance, or shelter concerning a mental, physical, or emotional condition caused by an act of domestic violence, an alleged act of domestic violence, or an attempted act of domestic violence.

Chapter 2

FISCAL CERTIFICATION STANDARDS

2-1. Principles. Certified domestic violence centers are required to maintain and adhere to sound financial policies in order to meet stewardship obligations in accordance with the provisions of state and federal laws and regulations, contractual requirements, and Generally Accepted Accounting Principles. These principles are mandated by the American Standards Board, American Institute of Certified Public Accountants, Federal Regulations of the Office of Management (OMB) Circulars, A-87 (2 CFR, Part 225), A-102, A-110 (2 CFR, Part 215), A-122 (2 CFR, Part 230), A-133, along with Florida Statutes.

2-2. Fund Accounting. In accordance with Rule [65H-1.013\(10\)\(b\)](#), F.A.C., certified centers shall utilize fund accounting to classify all resources and expenditures by fund groups that differentiate the sources of revenue and specific activities. Fund accounting is an accounting system for recording resources whose use has been limited by the donor or grantor and emphasizes accountability by using a self-balancing set of accounts for each funding stream. Fund accounting distinguishes between those funds that have an unrestricted use that can be spent for any purpose and those that have a restricted use. Fund accounting does not always mean accounting for every federal or state fund source individually, but rather accounting to accommodate restrictions on fund sources or groups of fund sources.

2-3. Record Retention. Certified domestic violence centers shall have a policy that addresses retention of financial records in accordance with Rule [65H-1.013](#), F.A.C., contractual requirements, and Internal Revenue Service guidelines.

2-4. Purchasing.

a. Certified domestic violence centers shall have a written policy that addresses purchasing procedures.

b. Procedures shall address the conditions or values at which three or more competitive bids are required. It shall also acknowledge that some funders may require bids on other items purchased with grant funds.

2-5. Contracts/Signatures. Centers shall have a written policy stating that only the Executive Director and/or the President of the Board of Directors are authorized to sign contracts and to financially obligate the agency. Centers may not subcontract any of the services they are required to provide pursuant to their contract with the Department and section [39.905](#), F.S., without prior written approval of the Department.

2-6. Cash Disbursements/Internal Controls.

a. Certified domestic violence centers shall have a written policy that addresses cash disbursement procedures.

b. Fiscal procedures should include, at minimum, the following internal controls:

(1) The payroll is approved by a member of upper management who is not responsible for preparation (calculation of wages, taxes, etc.) of the payroll and who is outside the payroll department.

(2) The preparer of the payroll is not the same person who signs the payroll checks.

(3) Check signing is limited to those authorized by the board of directors and whose duties exclude the posting and recording of disbursements.

(4) The person receiving and opening the mail is not the same person involved in posting, deposit preparation, and depositing funds.

(5) The person depositing funds is different from the person who prepares the deposit.

(6) The person who enters the payables or generates the checks is not the same person who signs the checks.

(7) The person receiving and reviewing the monthly bank statement is not the same person responsible for performing the monthly reconciliation of the bank account(s).

(8) Personnel generating checks are excluded from purchasing, receiving inventory, and entering general ledger functions. Where the number of administrative staff limits the center's ability to appropriately segregate duties, documented mitigating controls shall be in place.

(9) The bank statements shall be received by the person reconciling the account after they have been reviewed and analyzed for any anomalies such as missing checks and checks with missing signatures.

2-7. Financial Statements. Financial statements (Income/Expense Statements for each fund and Balance Sheet) shall be reviewed by management monthly and variances between budgeted and actual revenues and expenses shall be analyzed. This review is a means for the center to ensure fiscal jeopardy and material deviations from the budget do not occur.

2-8. Payroll. Certified domestic violence centers shall have a written policy that addresses payroll procedures.

a. Payroll policies shall specify that timesheets or activity reports are completed and signed by the employee and approved by the employee's supervisor. Any changes made to the timesheet shall be authorized by the employee and the supervisor. Payments to employees shall match their approved pay rate.

b. Policies shall specify that the center will remit its Federal Quarterly Payroll Tax Return (Form 941) and, with payment, its Florida Reemployment Tax form (Form RT-6) and supporting documentation for state unemployment compensation.

2-9. Independent Audit. Certified domestic violence centers shall have a written policy to contract for an independent audit of agency records for each fiscal year, which will include review by the board of directors, if required by state and federal regulations. Center policy shall comply with the Federal Circular A-133 Single Audit Act and the Florida Single Audit Act.

2-10. Bank Accounts. Certified domestic violence centers shall have a written policy that addresses maintenance of bank accounts for agency funds.

a. Policy shall specify that checks will be released and cleared timely.

b. Policy shall specify that bank accounts have available funds to cover agency expenses, so unnecessary fees are not incurred, such as overdraft or insufficient fund charges.

c. Policy shall specify that bank reconciliations are performed monthly, reviewed, and approved by the next level of management or as designated in the center's relevant policies.

2-11. Travel. Certified domestic violence centers shall have a written policy that addresses employee travel and reimbursement procedures.

a. Policy shall state that disbursements are made in accordance with section [112.061](#), F.S.

b. Policies shall specify that travel expense reports will include, at a minimum:

(1) Expenses supported by original receipts.

(2) A clearly stated business purpose.

(3) Pre-authorized conference expenses, if applicable.

(4) A mileage sheet used to calculate and reimburse mileage expenses, which includes the purpose of travel and verification of distance traveled.

2-12. Fiscal Documentation. Fiscal documentation shall reflect that:

a. Check and invoice amounts reconcile.

b. Checks are accompanied by the original invoice(s)/receipt(s).

c. Appropriate coding on disbursements, which shall match coding in the accounting system.

d. Invoices are paid timely by the due date stipulated on the invoice, or within a documented grace period, and shall not include late fees.

e. Expenditures are reasonable, allowable, and necessary.

f. All invoices and supporting documentation (including receipts) are defaced upon payment.

g. All disbursements have documented approval by the appropriate level of management.

h. Dual signatures are on checks when required by agency policy, or when the check signer is also the payee.

i. Disbursements are allocated based on the approved cost allocation plan for all funds administered by the Department.

j. Purchasing policies were followed, if applicable.

k. Voided checks are clearly marked "VOID" and documented in the accounting system. The Provider can mark "VOID" over the signature block or remove the signature block. Voided checks shall be retained.

2-13. Lines of Credit. Centers shall have a board-approved written policy regarding obtaining lines of credit and approval and utilization of such.

2-14. Credit Cards. Centers must establish written policies and controls over credit card usage. Policies on credit card usage shall address, at a minimum:

a. The employees eligible to obtain a credit card and what circumstances may lead to card revocation.

- b. The procedures and approvals for distributing credit cards to employees, which establish credit and spending limits and a process for accurate tracking and reporting of expenses.
- c. Reviewing, tracking, and paying balances, which includes a monthly reconciliation of the credit card statements. Payments shall be made timely by the due date stipulated on the statement, or within a documented grace period, and shall not include late fees.
- d. A requirement for supporting documentation for credit card charges.
- e. Types of allowable credit card purchases.

2-15. Financial Condition and Activities.

a. Certified domestic violence centers shall have a written policy that addresses the financial condition and activities of the center. With respect to the actual, ongoing financial condition and activities, the policy shall prohibit the Executive Director (ED)/Chief Executive Officer (CEO) from causing or allowing the center to fall into fiscal jeopardy or causing or allowing the material deviation of actual expenditures from established board priorities.

b. The policy shall address, at a minimum, whether the ED/CEO can incur debt on behalf of the domestic violence center and, if so, identify the circumstances and dollar threshold under which the board has to approve debt accumulation; what type(s) of contracts the ED/CEO can sign and when board signatory is necessary; if the ED/CEO can open new bank accounts on behalf of the domestic violence center and when board approval is necessary; if the center maintains accounts with FDIC-insured banks; if the ED/CEO can spend agency reserves; and, whether the center has board-designated reserves.

2-16. Financial Planning and Budgeting. Certified domestic violence centers shall have a written policy that addresses the financial planning and budgeting of the center, including when budgetary changes require board approval.

2-17. Asset Protection. Certified domestic violence centers shall have a written policy to maintain asset protection.

Chapter 3

ADMINISTRATIVE CERTIFICATION STANDARDS

3-1. Safety, Legal and Regulatory.

a. Emergency Planning and Preparedness. Certified domestic violence centers shall have written policies and procedures to ensure the safety of staff and program participants in the event of an environmental hazard, natural disaster, or other type of disaster or emergency.

(1) Rule [65H-1.013\(5\)](#), F.A.C., requires that certified domestic violence centers develop an emergency management plan that is coordinated with the applicable local emergency management agency. The emergency management plan must outline a comprehensive plan to ensure the safety and well-being of employees, volunteers, and participants in the event of an emergency. The plan should take into consideration the unique safety needs of survivors and their children. Chapter [65H-1](#), F.A.C., outlines the minimum requirements to be included in the plan, and requires that the plan be reviewed annually and updated, if necessary.

(2) Procedures shall be specific to the site with designated safety areas and, at a minimum, cover disasters such as: fire, tornado, hurricane, and flood; contamination of the air, ground, or water; public health hazards such as outbreak of communicable, reportable diseases, significant events such as participant death or injury; and other crisis situations such as bomb threats, intruders or other security incidents, hostage situations, injury, or health-related emergencies.

(3) Procedures shall designate staff position(s) responsible for overseeing the planning, preparation, training, and implementation of disaster procedures and services while in disaster mode, and the transition from disaster mode to restoration of full services. Procedures shall also address specific conditions under which such procedures should be invoked and conditions under which threat of danger has ended.

(4) Procedures shall include how the center will coordinate with other certified domestic violence centers if/when evacuating shelter residents during an emergency.

b. Risk Management. Certified domestic violence centers shall have written policies and procedures regarding the maintenance of a safe workplace.

(1) Procedures shall be specific to the site and, at a minimum, address building security, maintenance of the property (including furnishings and appliances), vehicle safety, disease control, workplace violence, and regular inspections by health and fire inspectors.

(2) Procedures shall include guidelines regarding prevention of accidents, universal precautions, and training regarding safety principles and techniques. A staff position shall be designated to be responsible for ensuring the policy is implemented and corrective actions are taken.

c. Records Retention. Certified domestic violence centers shall have a written policy on maintaining and retaining all center records in compliance with the guidelines of the Department, and all applicable state and federal laws. Confidentiality of center program participants' files must be maintained.

(1) Certified domestic violence centers must have a policy to maintain and retain records in such a way as to prevent inappropriate destruction of, or unauthorized access to, documents including financial, personnel, and program participants' records. This policy shall address both paper and computer-generated records.

(2) Procedures shall be specific to the site and, at a minimum, address location of records, security, and confidentiality of records, how long they should be retained, and under what conditions and how they can be destroyed.

(3) Procedures shall include provisions for participants to review or receive copies of their records at their request.

d. Quality Assurance Evaluation. Certified domestic violence centers must have a written policy establishing a quality evaluation process. Policy must include the ongoing process to evaluate the quality of center services, including who participates, how input from staff and program participants is obtained, how action plans are developed and implemented, how follow-up is done, and who is responsible for ensuring the policy is implemented.

e. Confidentiality of Records- Information Technology. Certified domestic violence centers shall have a written policy regarding data security and information technology. In the event of the use of computer-generated service notes or survivor records, it is the responsibility of each domestic violence center to ensure confidentiality of information. Each center shall maintain a written policy and accompanying procedures that reflect security measures. These must contain, but not necessarily be limited to:

(1) A generalized policy stating the responsibility of all staff and volunteers to ensure victim confidentiality.

(2) A protocol for creating victim data by computer shall:

(a) State which data entries are allowable and those that are not.

(b) Outline the use and storage of any data storage device.

(c) Outline the use and protection of hard-drive storage (including protocols for use of passwords and encryption).

(d) Outline the use and methods of network systems backup and storage, including who is responsible.

(e) Require the use of passwords when computer network systems are used.

(f) Outline protocols for the creation, routing and storage of any materials generated from computer-based records.

(g) Ensure that access to computerized confidential records will be protected using appropriate software and passwords.

(h) Ensure the establishment of protocols for timely download or amendment/deletion of client-related information.

(3) A protocol for the security of stored information shall address:

(a) The disposal of hard drives and other memory devices.

(b) Use of other memory devices (disks, USB/flash/jump, external hard drives).

(c) How the data leaves the office (funders/reports).

(d) Retention of records in an electronic format.

(4) In the event a protocol includes use of a computer's recycle bin, staff will be required to delete the information from the recycle bin (or other appropriate mechanism) as a final step in the process of deleting confidential files.

(5) A protocol for ensuring all participants' personally identifying information or information identifying the location of the shelter is redacted from fiscal or other administrative records prior to release. The protocol shall address who is responsible, when, and how records are redacted of any personally identifying information prior to release, including when released in response to an open records request, or when submitted with invoices to funders.

3-2. Human Resources. Certified domestic violence centers shall have written personnel policies in accordance with their own method of operation, whether they are autonomous or fall under an umbrella organization. It is the responsibility of each domestic violence center to ensure that they adhere to all applicable state and federal labor laws and regulations.

a. Non-Discrimination. Certified domestic violence centers shall retain a policy of non-discrimination to include all required federal, state, and local protections. At a minimum, policies shall address race, religion, color, gender, sex, sexual orientation, disability, marital status, veteran status, national origin, age, and any other classes protected by law.

b. Employee Status. Certified domestic violence centers shall have a written policy that defines employee status, i.e., exempt, non-exempt, temporary, permanent, independent contractor, and contract labor. The definitions shall be consistent with state and federal labor laws and regulations.

c. Bonding or Employee Dishonesty Insurance. Certified domestic violence centers shall have written policies that address which employees must undergo additional screening or bonding. At a minimum, the center's policies must require a bond or employee dishonesty insurance for center fiscal staff or those responsible for major fiscal functions is included in the center's professional liability insurance policy.

d. Nepotism. Certified domestic violence centers shall have a written policy that prohibits nepotism (hiring of family or household members) between board and staff, between staff that directly answer to family or household members or are in the line of authority of a family or household member, and any nepotism with the potential to create fiscal or internal control issues. The policy shall also address the action to be taken when a relationship as defined above develops between existing staff or between staff and board. The policy shall use the definition of family and household members in section [741.28](#), F.S.

e. Recruiting and Hiring. Certified domestic violence centers shall have a written policy on recruitment and hiring. At a minimum, policies shall include:

(1) Persons with authority to hire.

(2) Advertising policies that comply with all state and federal laws and regulations.

(3) Orientation information including information about the center, personnel policies, pay and benefits, job description, security and safety procedures, and drug-free workplace requirements.

f. Background Screening. Centers must have a written policy on conducting background screening of employees and volunteers. The policy shall comply with federal, state, and local laws, as well as Department operating procedures and contract obligations.

g. Benefits. Certified domestic violence centers shall have written policies on the employee benefits they provide. At a minimum, the policies shall address all available leave, paid time off, worker's compensation, health insurance, and retirement benefits.

h. Vicarious Trauma (VT) and/or Critical Incident Debriefing. Certified centers shall have policies and procedures that address when and how assistance related to vicarious trauma or critical incident debriefing is provided to staff. Staff members who provide counseling, service management, and advocacy will be provided, if needed, opportunities to debrief in order to identify the symptoms and ease the potential effects of vicarious trauma.

i. Performance Evaluation and Salary Review. Certified domestic violence centers shall have written policies or procedures that require annual performance evaluations for all employees. The policies shall include guidelines for performance evaluation and salary review.

j. Disciplinary Guidelines. Certified domestic violence centers shall have written disciplinary guidelines and procedures for employees.

k. Termination of Employees. Certified domestic violence centers shall have written policies on employee termination that are in accordance with state and federal laws and regulations.

l. Employee Code of Conduct.

(1) Non-Fraternization. Centers shall have a written policy requiring non-fraternization between program participants and staff/volunteers. Non-fraternization policy(ies) must include a definition of "program participant."

(2) Gifts and Gratuities. Certified domestic violence centers shall have a written policy addressing circumstances in which staff/volunteers may accept gifts or gratuities from program participants, partnering agencies, donors, volunteers, community members, and Board members.

(3) Anti-Bullying and Anti-Harassment. Certified domestic violence centers shall have a written policy prohibiting harassment based on race, creed, religion, color, gender, gender identity, sexual orientation, disability, marital status, veteran status, national origin, age, and any other classes protected by law and will have a plan to monitor and address claims, and document associated corrective actions.

(4) Drug-free Workplace. Certified domestic violence centers shall have a written policy establishing a drug-free workplace. Center policies shall address employee and volunteer use of illegal drugs, as well as abuse of legal drugs, and disciplinary action taken for violations.

(5) Sexual Harassment. Certified domestic violence centers shall have a written policy prohibiting sexual harassment of/by staff, volunteers, and program participants that complies with state and federal laws and regulations. The policy shall include a complaint procedure and consequences for violations.

(6) Workplace/Domestic Violence. Certified domestic violence centers shall have written policies to address workplace violence and to establish procedures when notified that an employee or volunteer is a victim or perpetrator of domestic, dating, or sexual violence or stalking. The policy shall address services and safety of employee survivors as well as consequences to employee perpetrators. The policy shall apply regardless of whether the incident occurred during or away from work, or on or off-center property.

(7) Confidentiality. Certified domestic violence centers must have written policies establishing practices related to protecting confidentiality and privilege in compliance with

section [39.908](#) and section [90.5036](#), F.S., as well as section [90.5035](#), F.S. (if a dual center), and the federal Violence Against Women Act.

(a) Policies must include a protocol for responding to subpoenas, search and arrest warrants, court orders, and other requests for confidential information that designates a primary employee and a backup employee to handle such responses, including responses after regular business hours.

(b) Information on the restrictions relating to the disclosure of information about center participants and the location of the shelter (as provided in section [39.908](#), F.S.) shall be available to center staff/volunteers for immediate reference when confronted with confidentiality issues.

m. Training Requirements for Certified Domestic Violence Center Staff and/or Volunteers. Certified domestic violence centers shall have written policies that address providing training for all employees and direct service volunteers, including trainings required by the Florida Administrative Code and contracts, that enhance the proficiency of a staff member's job performance.

(1) Competency-Based Core Curriculum Training. All staff members and volunteers who supervise, coordinate, and/or provide direct advocate or counseling services to center participants shall successfully complete 30 hours of domestic violence competency-based core training. The successful completion of this training is required for an employee/volunteer and participant to assert the evidentiary privilege afforded by section [90.5036](#), F.S. Centers must use the Core Competency Training curriculum approved by the Department and may retain Certified Core Competency Trainers on staff to conduct internal trainings.

(2) In-Service Training. In accordance with Rule [65H-1.013\(11\)\(b\)](#), F.A.C., all personnel, paid or unpaid, who work with victims and their dependents must have documented in their personnel file 16 hours of training annually in topics pertinent to the requirements and responsibilities of domestic violence advocacy and counseling services.

(3) Emergency Management Plan Training. As prescribed by Rule [65H-1.013\(11\)\(c\)](#), F.A.C., all staff members shall receive, at a minimum, annual training on implementing the center's emergency management plan. This training cannot be included in the 16 hours of annual in-service training.

(4) Anti-Bullying and Anti-Harassment Training. All employees and direct service volunteers will receive training on how to prevent and respond to harassment or bullying in all forms.

(5) Universal Precautions Training. All employees shall receive training on Universal Precautions.

(6) Data Security Training.

(a) Certified domestic violence centers shall provide a customized, center-specific data security training to all staff and direct service volunteers who have access to any of the center's participant or administrative data.

(b) Certified domestic violence centers shall provide the latest Departmental security awareness training to all individuals who request or have access, through the center's access, to Department information systems or any confidential Department information.

(7) Conflict Resolution Training. All direct-service employees and volunteers shall receive training on techniques for conflict resolution and de-escalation.

(8) Training Documentation.

(a) Rule [65H-1.013](#), F.A.C., states that the training of each employee and volunteer shall be documented in the staff member's personnel file or training record and shall include activities or course titles, number of hours, names of instructors and title or position, and dates of completion. Sign-in sheets can be maintained in a center-wide training binder(s) or file for monitoring review.

(b) Centers can store training documentation electronically. Centers must be able to extract a list of the trainings completed by staff to be maintained in each employee's personnel/training file. Centers must provide the Department access to review certificates of completion, attestations, sign-in sheets, etc., either electronically or in hard copy.

n. Privilege Registration. As provided under section [90.5036](#), F.S., and Rule [65H-1.013\(9\)](#), F.A.C.:

(1) Registration applications for Core-trained advocates can be submitted by certified domestic violence centers under the following conditions:

(a) The ED/CEO of the applicant's domestic violence center, or the ED/CEO's designee, must certify that the advocates being registered have completed 30 hours of training to qualify for advocate-victim privilege.

(b) Records of advocates' Core Competency training and in-service hours must be maintained by the certified domestic violence center.

(2) Domestic violence centers will comply with the following requirements regarding privilege registration:

(a) All domestic violence center employees and volunteers who render direct service to survivors of domestic violence shall complete 30 hours of training (24 hours of classroom training and six hours of in-service training) in order to qualify for advocate-victim privilege. This includes those who supervise and oversee direct service advocates.

(b) Twenty-four of the 30 hours of training must be accomplished by completing the 24-hour Competency-Based Core Curriculum as presented by a certified Core Competency Trainer.

(c) The center will document a minimum of six hours of additional specialized training. This training may include on-the-job orientation, or training of skills related to performance of required duties.

(d) To assure advocate-victim privilege, newly employed advocates or direct service volunteers will complete training within 90 days of hire/appointment. No unsupervised survivor contact will be permitted prior to completion of training and registration with the Department.

(e) Advocates who are already in the registry but relocate to another certified domestic violence center must be registered at the new center of employment within 30 days of beginning employment.

(f) When an employee or volunteer is no longer employed by the center, the center shall notify the Department within 30 days of the date of termination.

3-3. Governance and Leadership. Certified domestic violence centers shall have written by-laws or policies governing the center's board of directors. A certified center that operates under the umbrella of

another agency shall have a separate center board or advisory committee, a separate budget, and separate policies for the center. To ensure contract compliance, there shall be a liaison to the umbrella board. It is understood that the umbrella board has the ultimate responsibility for decisions made by the advisory committee. All trust funds, designated donations, and designated grants to the certified center shall be used exclusively for the benefit of the center. The following policies are to apply to the board or the advisory committee as applicable.

a. Board Responsibilities. Certified domestic violence centers shall have written policies that establish and define board responsibilities.

(1) Board members act as a governing body. The policy shall include that individual board members shall not speak or act for the board without the approval of the board.

(2) It is the responsibility of the board to provide fiscal oversight and strategic leadership rather than administrative details. Clear distinctions shall be established between board and staff roles, with board focus on major involvement on the intended long-term impact of the organization; not the administrative or programmatic means of obtaining those effects.

(3) Fiscal policies will include approval of annual budget, audit, investment/endowment policies, protection of assets, signatory authority, and periodically reviewing financial statements. Financial statements for the board shall be produced directly from the accounting system. The Income/Expense Statement (Profit and Loss) shall display: 1) actual income and expense for the current period, and 2) year-to-date budget versus actual with variances to inform the board of any fluctuations between budgeted and actual revenues and expenses. The financial statements shall be reviewed by the board, minimally, at each regular meeting of the board as delineated in the by-laws or policies.

(4) To ensure the integrity of the board governance role, board members or their immediate family shall not serve in a volunteer staff capacity. Board members or their immediate family members shall not have access to participant files and shall not be permitted to engage in direct service work with center participants. This does not restrict board members or their family members from assisting with fundraising or special projects.

(5) Policies shall establish expectations and responsibilities/limitations of the board, including their responsibility to make financial donations to support the center.

b. Conflict of Interest/Ethics/Code of Conduct for Board Members. Certified domestic violence centers shall have a written policy that addresses board member conflict of interest, ethics, and conduct.

(1) The policy shall include a prohibition on board members engaging in activities that are, or result in the appearance of, a conflict of interest; a requirement for the immediate disclosure of a potential or actual conflict of interest; how the Board will investigate and address potential and actual conflicts of interest; and what actions the Board will take if a member does not comply with the conflict of interest/ethics/code of conduct policy.

(2) The policy shall address, at a minimum, how the Board will award contracts, honoraria, and other forms of compensation; Board members who may become a program participant or employee; and Board member interactions with program participants and employees and appropriate boundaries, including hiring, gifting, soliciting, socializing and nepotism.

(3) The policy must prohibit contracting under the following circumstances unless fully disclosed to the Board and subject to prior approval by the Department's contract manager: ownership interest by the certified domestic violence center in the proposed contractor; commonality of any Board

members or officers with the proposed contractor; ownership interest by the proposed contractor in the certified domestic violence center; ownership interests of a third entity or its board members or officers in both the proposed contractor and the certified domestic violence center; any employment relationship between the proposed contractor and Board members or officers; or commonality of Board members or officers between a third entity and both the certified domestic violence center and the proposed contractor.

c. Board Role with ED/CEO. Certified domestic violence centers shall have a written policy that clearly delineates the role of the board in relationship to the ED/CEO.

(1) Policies shall address performance evaluation, compensation, and benefits of the ED/CEO. It is the responsibility of the board to do an annual evaluation of the ED/CEO and to determine compensation and benefits, and that the ED/CEO cannot change the compensation/benefit package established by the board. The policy shall state that the board's role in employee supervision is limited to the ED/CEO and that the ED/CEO supervises all other employees.

(2) The policy shall address authority delegated to the ED/CEO and executive limitations.

d. Board Orientation/Training/Self-Assessment. Certified domestic violence centers shall have a written policy that establishes minimum required annual board training and orientation for new board members.

(1) Orientation shall be provided, and training shall be completed within the first six months. Members should not accept an office before completing training.

(2) Orientation and training shall include governance-based roles and responsibilities, by-laws and policy review, fiscal review, history of the center, including any compliance related issues, program services and service management, privilege and confidentiality, and basic domestic violence training. If centers choose to create their own curriculum for board trainings, the curriculum must be submitted for approval prior to conducting any new training.

(3) The board shall conduct an annual self-assessment for the purpose of ensuring its ongoing viability.

e. Board Composition. Certified domestic violence centers shall have a written policy that establishes guidelines on addressing the composition of the board, including representation from diverse racial, gender and disability groups as well as survivors of violence.

(1) The board shall be composed of at least three citizens who reside within the center's service area, one of whom must be a qualified employee of a local, municipal, or county law enforcement agency whose jurisdiction includes some or all of the center's service area. "Qualified employees" include those who are qualified in advocating against or investigating crimes defined by the Violence Against Women Act.

(2) The board of directors shall racially and ethnically reflect, to the extent possible, the participants served by the domestic violence center.

f. Officer Duties. Certified domestic violence centers shall have a written policy that establishes and defines officer duties.

(1) By-laws or policies shall define the categories of officers, the process for nomination and election, term of office, and duties and responsibilities of each office. Officers of the board are in service of the board. As such, they are bound by board policy and limits of board authority.

(2) The policies shall specify that officers may meet as a group for purposes of preparing agenda and other pre-board meeting work. But they may not act in place of the board except as the board specifically delegates.

(3) At a minimum, center boards shall have a President, a Treasurer, and a Secretary.

g. Meetings. Certified domestic violence centers shall have a written policy that establishes board meeting guidelines.

(1) Meeting policies shall address what constitutes a quorum.

(2) Meeting policies shall address when and where meetings are to be held, who gets notice, time frame for meeting notice, method of meeting notice (i.e., e-mail, fax, phone, etc.), emergency meetings, a process for changing meeting dates and times and how minutes of meetings are created and retained.

h. Vacancies/Terms. Certified domestic violence centers shall have a written policy that establishes standards covering board and officer vacancies and term of office of same. The policy shall include who nominates, when voting takes place, who votes, and length of term.

i. Removal of Board Members/Officers. Certified domestic violence centers shall have a written policy that establishes guidelines regarding removal of board members/officers for cause and for non-attendance.

j. Advisory Board/Committees/Guilds/Trustees. If certified domestic violence centers have advisory boards/committees, guilds, and/or trustees, then centers shall have a policy that establishes, at a minimum, duties, membership, term length, and removal.

k. Committee Responsibilities. Certified domestic violence centers shall have a written policy that establishes standing and other committees of the board, their responsibilities, membership, meetings, and other procedures, including documentation.

Chapter 4

PROGRAMMATIC CERTIFICATION STANDARDS

4-1. Provision of Services. Centers shall have a written policy that states they will provide services to eligible individuals as defined within this section, and in accordance with all required federal, state, and local discrimination protections.

a. Eligibility for Center Services. Centers shall have written policies indicating that individuals eligible for any center services include, but are not limited to, survivors of domestic and dating violence and their dependents who are currently in danger, who are fearful of being in danger, or who have been in danger of being emotionally, physically, or sexually abused.

b. Services to People Living with Disabilities.

(1) Centers shall have written policies stating that they provide services in compliance with all federal, state, and local mandates regarding services to persons with disabilities including, but not limited to:

(2) Centers shall post signage prominently in public areas of the residential shelter and outreach service facilities describing the process for requesting accommodations according to the Americans with Disabilities Act (ADA) and Fair Housing Act (FHA).

(3) The ADA prohibits the shelter from requiring the survivor to provide proof of disability or proof of training or certification of a service animal. In addition, the FHA requires the shelter to admit emotional support animals, which are defined differently than ADA service animals, and the shelter may ask for a letter from a reliable third party indicating the need for the emotional support animal. Shelters shall post signage prominently in public areas of the shelter describing the process for requesting accommodations. Center policies or procedures shall address accommodating service animals in compliance with the ADA and FHA, admitting into shelter service and emotional support animals, and admitting and accommodating caretakers in shelter with survivors who require special care.

c. Alcohol or Drug Abuse Disorders. In accordance with the Family Violence Prevention and Services Act (FVPSA), programs cannot impose conditions for admission to shelter by applying inappropriate screening mechanisms, such as criminal background checks, sobriety requirements, requirements to obtain specific legal remedies, or mental health or substance use disorder screenings. An individual's or family's stay in shelter cannot be conditioned upon accepting or participating in services. Centers may adopt reasonable policies and procedures reflecting field-based best practices, to ensure that persons receiving services are not currently engaging in illegal drug use, if that drug use presents a danger to the safety of others, creates an undue hardship for the shelter operator, or causes a fundamental alteration to the operator's services. These provisions are not intended to deny a shelter the ability to manage its services and secure the safety of all shelter residents should, for example, a participant become violent or abusive to other participants.

d. Background Checks on Participants. Centers are prohibited from conducting background checks on individuals who are seeking or receiving services. Centers shall have a written policy for conducting eligibility screening that includes the factors used for determining whether an individual is ineligible for services, and the factors used to screen out perpetrators claiming to be victims.

e. Sex-Specific Services. Centers shall provide comparable services, either onsite or through collaboration with other agencies, to individuals who cannot be provided with sex-segregated or sex-specific programming. The Department defines "comparable services" as the continued rendering of available services to those eligible to receive them. For example, if a center is unable to house a male victim in emergency shelter, accommodation must be made to provide all other available support services and aid in the placement of the survivor in an appropriate alternative shelter, such as a hotel or

in partnership with another local provider. Centers should ensure that their protocols address how advocates will engage with all survivors who are not attending a support group to ensure the services needed by each survivor are offered.

f. Out of Area Referrals. Centers shall not prohibit acceptance of out of area referrals and will make every effort to shelter individuals who are unsafe in their current or recent locations. Centers shall have a written policy outlining priorities, such as high-risk indicators and other safety considerations, as well as any restrictions to providing shelter to survivors whose former locations are outside the center's service area. For those who are not permitted access to shelter, centers shall, at a minimum, offer safety planning, risk assessment, supportive counseling, and referral. Centers making out of area referrals to other shelters shall assist the program participant to return to her/his original shelter once the precipitating conditions allow, such as additional space availability or the danger has been addressed.

g. Notification of Exceptions to Confidentiality. All participants must be informed of all exceptions to confidentiality that are set forth in sections [39.908\(2\)](#) and [\(3\)](#), F.S.

4-2. Shelter Services.

a. Eligibility for Shelter Services. Centers shall have a written policy that addresses eligibility for shelter services. At a minimum, the policy shall include:

(1) To be considered eligible for domestic violence shelter services, individuals shall be:

(a) Adults or legally emancipated minors; (under Florida law, emancipation is called "disability of non-age"); and,

(b) Abused, or in fear of being abused, by their current or former intimate partner.

(2) Centers should offer shelter services to individuals when such shelter may provide not only safety, but also when individuals may benefit from additional emotional support that the shelter may provide.

b. Emergency Shelter. Emergency shelter includes, but is not limited to:

(1) A structurally safe building, which includes doors, windows, and other external accesses that are intruder resistant.

(2) Healthy accommodations that are annually inspected by local health departments and fire inspectors.

(3) Provision of basic needs to include, but not be limited to, culturally and dietary relevant food (including a variety of fruits, vegetables, dairy, proteins, and starches), clothing, laundry supplies, hygiene items, and access to telephones and internet.

(4) These basic needs shall be provided regardless of the participant's financial status or availability of outside resources. For example, participants may not be required to utilize their own financial resources, such as paychecks, SNAP benefits (formerly known as food stamps), WIC, and other vouchers, for basic needs while residing in shelter.

(5) Access to these basic needs shall not be limited to specific times and shall be accessible without the assistance of staff.

(6) Assistance with obtaining medical services, when needed, including access/transportation to medical providers and financial assistance or access to clinicians within the program whenever possible.

c. Confidentiality of Shelter Stay.

(1) In accordance with section [39.908](#), F.S., centers must protect participant privacy by not disclosing the identity or location of persons in residence at a domestic violence shelter and by the restriction of visitors to the shelter. A copy of this statute shall be readily available to center staff/volunteers when confronted with confidentiality issues, for immediate reference, especially when attorneys, law enforcement, or process servers are attempting to locate a victim of domestic violence.

(2) However, the statute does not require program participants to maintain confidentiality of the shelter location. A participant's reasonable disclosure of the center location, such as to persons providing them transportation to and from the center, or to the Department or other federal, state, or local agencies when reporting a complaint or a crime is not considered a malicious disclosure punishable under section [39.9057](#), F.S.

d. Privacy Requirements.

(1) Domestic violence centers shall ensure working locks are installed in resident bathrooms/bedrooms to ensure resident privacy.

(2) Per Chapter [65H-1](#), F.A.C., to protect the privacy of shelter participants, electronic surveillance systems may not be installed in the participants' living quarters of the shelter facilities. Electronic surveillance systems may be installed at entrance and exit doors and parking areas. For monitoring purposes, the Department will interpret "participants' living quarters" to mean bedrooms, bathrooms, and any other area where participants have a reasonable expectation of privacy in a communal living arrangement.

e. Safe Travel. Domestic violence centers must maintain a written protocol for safe travel for all shelter residents. All protocols must contain a provision for travel to the domestic violence shelter for admission. The protocol must reflect the needs of shelter residents for local travel and specify whether the resident will provide their own transportation or whether the center or other public/private transportation providers will provide transportation.

f. Shelter Cleanliness.

(1) Centers are responsible for maintaining the health and safety of the shelter and may not rely on the labor of residents to maintain the cleanliness of the shelter facility.

(2) Centers shall not exit a participant from shelter or withhold other services because of lack of participation in cleaning activities or any other "chores."

(3) The center shall maintain written guidance on any voluntary cleaning assistance in which residents are requested to participate during their stay. Centers may inform residents that in the communal living arrangement, they are expected to clean up after themselves and their children.

g. Curfews. Domestic violence centers shall not have a curfew. Residents shall not be prohibited from exiting or entering the facility except when necessary because of an emergency or hazardous condition at the shelter.

h. Shelter Visitors.

(1) Centers must inform residents that visitors, including contracted persons who provide services to centers, are allowed in the residential area to deliver services.

(2) Participants shall be informed of the name of the visitor/contracted person and his/her business affiliation not less than 24 hours in advance of the visit, or as soon as is practicable.

(3) Individuals or groups providing specialized services (such as teachers, school crossing guards, beauticians, cosmetologists, etc.) will be exempt from training and privilege registration requirements if:

(a) Program participants and others seeking services at the center are informed that these individuals or groups do not have privilege.

(b) The domestic violence center and the provider have a written agreement that includes provisions for survivor and shelter confidentiality, orientation to the center's services, and any policies/procedures relevant to the service being provided.

i. Length of Shelter Stay. Centers shall have a written policy stating that the allowable stay available to eligible individuals shall be at least six weeks. Upon entering shelter, centers shall inform residents verbally and in writing of any conduct and/or conditions that may affect their eligibility status and reduce their length of stay.

j. Restrictions on Acceptance into Shelter. Centers shall have a written policy that does not limit the number of times an individual may re-enter the shelter, nor require a time limit before re-entry is allowed. Shelters shall not maintain a "no re-admit" list; however, files may be flagged for supervisory review and approval prior to participant intake. If a former resident who may have been involuntarily exited from shelter needs to return to shelter, the center will assess whether circumstances have changed that mitigate a previous circumstance.

k. Criteria for Non-Acceptance into Shelter or Discontinuation of Shelter.

(1) Centers shall have written policies addressing informing applicants who are ineligible for shelter services, and the criteria when survivors are eligible for but are denied shelter. For survivors who are denied shelter, the extent to which the following criteria may affect their future eligibility for services must be evaluated and determined on a case-by-case basis. Criteria for ineligibility includes the following considerations:

(a) An individual's use of violence or threats of violence.

(b) An individual previously asked to leave a shelter due to credible threats to harm others.

(c) An individual with a history of disruptive or abusive behaviors during the provision of services. The center shall evaluate where there is reason to believe that these behaviors may reoccur.

(d) An individual's continued presence compromises the safety of the shelter.

(e) An individual's behavior after intervention disrupts the ability of other survivors/children to receive safe and effective services. Behaviors include:

1. Possession of illegal substances.

2. Possession of firearm(s), stun-gun(s), or any other weapon(s) that may threaten or cause harm.

(f) An individual who is a danger to others.

(g) An individual who does not maintain confidentiality of other residents.

(h) Other illegal behaviors.

(2) Disclosure of the shelter location is not automatic cause to disqualify a person from re-admission.

(3) Centers shall make appropriate plans for safe alternate accommodations for any eligible survivors denied shelter or who are asked to leave.

I. Space Limitations. If a domestic violence shelter cannot admit new residents because it has reached its stated bed capacity, the center shall facilitate admission to safe, alternate accommodations. This placement may include, but not limited to, hotels/motels, other certified domestic violence shelters, homeless shelters, or other facilities that can provide safe refuge. Center facilitation to safe alternate accommodations shall include warm transfers, or telephonic advocacy with other certified domestic violence centers, local partners and/or the statewide hotline to assist the survivor with finding placement, as well as offering the local center outreach services and enhanced safety planning if they are unable to leave the area.

m. Unplanned Exiting.

(1) Except for conduct that compromises the safety of others, the shelter staff will develop with the survivor a plan designed to resolve the issue(s) leading to an unplanned exit. However, residents may be asked to leave due to credible threats to others, disruptive or abusive behavior, or compromised safety of the shelter.

(2) Shelters must not use a point-based demerit or similar system to determine exiting of a participant.

(3) Should an unplanned exit occur, centers shall assist in finding an alternative placement for the participant and continued services shall be offered through the outreach center location or through the hotline.

(4) Unplanned exiting may be appropriate if:

(a) The shelter has informed the resident of the problem/conduct; and,

(b) The resident is informed that if the problem/conduct is not corrected, it may result in unplanned exiting; and,

(c) The resident is provided with an opportunity to correct the problem/conduct; and,

(d) After being provided the opportunity to correct the problem/conduct, a resident continues to disrupt other survivors' ability to receive safe and effective services.

(5) Center staff should document unplanned exiting in the participant's service file only by stating that "Center staff engaged in steps a, b, c, and d as listed under paragraph 4-2(m)(4) in CFOP 170-25." Staff should not detail the nature of the steps taken.

n. Staffing to Assure Quality Shelter Services.

(1) Domestic violence centers must provide on-site shelter staff 24 hours a day, 7 days a week unless the shelter is uninhabitable due to an emergency.

(2) Regardless of the shift worked or additional assigned duties, advocates must be immediately responsive and accessible to a shelter resident or hotline caller.

(3) A supervisor or designee with decision-making authority shall be available for immediate response during emergencies. Each shelter must establish a protocol that defines criteria and steps to access supervisory support.

4-3. Residential and Non-Residential Supportive Services.

a. Parameters.

(1) Survivor participation in offered support services shall be voluntary, and no punitive action shall be taken against those who do not participate. The center may not require survivors to participate in services on behalf of other agencies.

(2) Counseling, service management, and advocacy services offered by certified domestic violence centers shall be empowerment-based and survivor-directed.

(3) Center participants shall not be charged for domestic violence center services. Centers may charge for ancillary support services such as batterer intervention programs, transitional housing, visitation centers, and licensed childcare in accordance with their own protocols and funding requirements. The center must review with the Department any programs for which it wishes to charge fees so as to ensure no conflict with state or federal funding requirements.

b. Assessing for Appropriate Services. During initial contact with survivors, staff shall assess for the following:

(1) Eligibility for support and intervention services.

(2) Immediate safety.

(3) Batterer's potential for lethality.

(4) Any needs accommodations for service access, including ADA and religious, cultural, ethnic, geographic factors, or other affiliation(s).

c. Availability of Services.

(1) Centers shall have written policies that address their hours of operation for all programs.

(2) The center shall maintain a process for informing program participants of when staff are available to provide immediate advocacy and assistance, how to access support for advocacy and assistance, and any requirements the center maintains for service management.

(3) Advocates, whether residential or outreach, will be available beyond normal business hours to meet the immediate safety and, when possible, the emotional support needs of survivors and their children. This may include the use of the center hotline for emergency needs.

(4) Advocates shall prioritize assisting survivors with the development of a safety plan for traveling to and from the center, as necessary.

d. Types of Support Services.

(1) Counseling/advocacy involves providing emotional support, crisis intervention, information on the dynamics of domestic violence, an assessment of risk, and/or engaging in other supportive activities as appropriate. Counseling (individual or group interaction) shall be facilitated by center staff for the purpose of addressing needs of adult or child participants. Counseling may include educational counseling, e.g., participant receives information on the dynamics of domestic violence; crisis counseling, e.g., participant discusses and assesses with an advocate the risk involved in their immediate circumstance; supportive counseling, e.g., participant participates in one-on-one, regular counseling sessions with an advocate/counselor; and/or, peer counseling, e.g., participant participates in a participant-facilitated support group meeting. Advocacy may include activities that act on the behalf of the participant at the participant's request, such as participation in law enforcement interviews and other system partners, housing and economic resource coordination, legal support (such as the Injunction for Protection Project) and other activities as determined with the participant.

(2) Advocacy is initiated with the permission of the participant and is defined as the direct and active support of the survivor's process of achieving their goals.

(a) Advocacy contacts addressed to individuals or groups not employed by the domestic violence center, including other certified domestic violence centers, shall not be initiated without the participant's signed consent on the Release of Confidential Information form incorporated in the center's contract with the Department.

(b) If it has been determined that the survivor has a safe method of signing, such as an uncompromised email account, advocates may complete the Release of Confidential Information form and send it to the survivor for either electronic signature or the survivor's written email approval of the written release. Advocates should complete technology safety planning with survivors prior to utilizing this option.

(c) Violence Against Women Act does not permit the use of verbal releases in emergency situations when advocates are required to provide services to survivors remotely. However, in an emergency, when there are no other options, such as electronically transmitting the release, requesting the needed services without releasing information, or having the client stay on the call to make the release of information directly, a program may need to use a verbal release. Verbal releases must uphold the same standards of informed consent. Advocates must complete a Release of Confidential Information form and review all fields verbally with the survivor prior to releasing information. When a signature is not immediately available, the advocate should acknowledge consent on the release, note the reason a signature was unavailable (such as immediate release needed when providing services remotely) and write the date and precise time of review of the release with the survivor. The advocate should obtain the survivor's written signature as soon as possible. Emergency situations are defined as circumstances beyond the center's reasonable control, including natural disasters, public health emergencies, etc.

(d) Center staff, through documentation on a Department-approved Release of Confidential Information form, will provide proof of permission.

(e) Advocates will release only information necessary to achieve the goal of each individual advocacy contact.

(3) Service management is defined as any individual or group interactions facilitated by center staff for the purpose of addressing needs, identifying resources, supporting decisions, and/or coordinating any activities pertaining to the accomplishment of their goals. Service management will be

based upon participant-identified goals. Adult residents must receive an individualized service plan within the first 72 hours of entering shelter. Service management meetings will reflect, at least, the following:

- (a) Participant-identified priorities according to their needs.
- (b) Identification of resources available to the individual.
- (c) Support given the participant in identifying goals setting priorities. Goals will be documented in a service plan.
- (d) Internal and external referrals to assist in goal/objective achievement.
- (e) Adaptation of individual's goals as other needs emerge.

e. Exit Survey/Interviews. All centers must document attempts to conduct an exit survey/interview with each participant prior to their departure from services.

(1) Centers shall use a Department-approved final exit survey/interview form which includes, but is not limited to, questions about equal access to services without discrimination; respectful treatment by staff; knowledge of domestic violence dynamics; assessment of programs and services; provision of children's services, safety planning, and goal planning; increased knowledge about community resources; and increased knowledge about strategies to enhance safety.

(2) Centers shall update the participant's existing safety plan in order to link the participant to outreach services upon exit from the shelter facility.

f. Supervision to Assure Quality Supportive Services. Centers shall establish a written policy to provide regular supervisory staffing to assess the progress of staff in assisting program participants in attaining their goals. Supervisory staffing may involve a group of advocates with the supervisor or as one-on-one with the supervisor. Supervisory staffing shall be conducted at least once every two weeks. Appropriate documentation that the supervisory staffing occurred shall include the date of the staffing and the name of the advocate/supervisor.

g. Restricted Services.

(1) Couples' counseling, in any form, will not be provided by domestic violence centers.

(2) Family counseling that includes the presence of an alleged batterer will not be provided by a domestic violence center.

(3) Mediation services will not be provided by domestic violence centers.

4-4. Child and Youth Services. Domestic violence centers shall provide ongoing support services for children and youth who accompany the parent or guardian survivor to shelter or who are referred to the center for outreach services.

a. Centers shall open a file for every child receiving center intervention services. The child's service management file will be kept separate from that of the accompanying adult.

b. Informed Consent.

(1) A consent form must be signed by the parent/guardian for all services provided to children.

(2) Consent forms must be completed for each child for each service, including, but not limited to, safety planning, assessments, or for any individual or group activity provided to a child.

(3) Both the consent form and the assessment(s) shall be kept in the child's file.

(4) In cases where the parent/guardian does not grant permission to provide any individual service, or all services and assessments to a child, the advocate must document this on the consent form. It shall be stated as "declined" only to respect the wishes of the parent/guardian and filed in the child's file.

c. Assessments.

(1) As prescribed in section [39.905\(1\)\(c\)](#), F.S., services must exist that address assessment and provide appropriate referral of resident children.

(2) As prescribed by Rule [65H-1.014\(6\)](#), F.A.C., entitled "Child assessment: evaluation of the basic needs of children served by the center and referral of children to services if needed," each child in emergency shelter for 72 hours or more shall be assessed for basic needs and given service recommendations by a domestic violence advocate with experience working with children. This provision does not preclude centers from providing an assessment of children housed less than 72 hours. Basic needs shall include, but not be limited to, immediate needs for food, clothing, shelter, and health.

(3) Additionally, for children residing in shelter, an assessment to assist in making appropriate referrals to meet the child's individual needs shall be conducted within 72 hours of admittance to the shelter if parental consent has been provided. The advocate will complete an assessment with the child and offer ongoing age-appropriate supportive services to the child.

(4) The center may develop its own approach to assessment. The assessment may be accomplished by talking with the parent/guardian survivor to explain the assessment process and confidentiality guidelines. If a child is under the age of 4, advocates may discuss with the parent/guardian any incidents of violence the child may have witnessed or overheard, as well as any developmental issues the child may be facing.

d. Safety Planning. Services provided to children shall also include age-appropriate safety planning if parental consent has been provided.

4-5. Hotline. Domestic violence centers shall have written policies that provide that hotline advocates are registered in the privilege registry prior to answering hotline calls and shall provide written protocols for responding to hotline calls which includes, but is not limited to, information on confidentiality and documentation.

a. Staffing.

(1) Hotlines will be answered by domestic violence center staff or volunteers 24 hours a day, 7 days a week.

(2) Sufficient staff will be maintained to assure expeditious answering of calls within the first three rings.

(3) Hotlines will be answered by trained and privileged staff and/or volunteers of domestic violence centers. The use of commercial or mechanical answering services is prohibited.

(4) The use of answering devices or commercial telephone answering services to cover the local domestic violence center crisis line is not permitted.

(5) Hold/Transferring Calls.

(a) All calls shall be assessed for safety prior to placing on hold or transferring to another advocate or program.

(b) No call shall be left on hold without follow-up contact.

(6) When answering multiple lines, advocates should prioritize calls based on their safety and lethality assessment with each caller. If the hotline advocate is managing multiple calls, the advocate is expected to assess and monitor safety as well as to notify the caller as to the status of the call.

(7) Administrative and Outreach Phone Lines.

(a) Anyone answering the telephone shall be trained to assess and assist hotline callers that may come in on an administrative line.

(b) After-business hours and on weekends and holidays, administrative and outreach phones shall maintain messaging that clearly direct callers to the hotline.

b. Hotline Procedures.

(1) Advocates shall utilize a crisis-intervention response model that includes the completion of a needs assessment, risk of future violence, and lethality assessment, followed by a safety plan appropriate to the caller's situation.

(2) Callers eligible for services will be offered information about available center services, local resources, and statewide resources as appropriate to each call. Whenever possible, advocates will provide connection to the partnering agency in place of providing a list of phone numbers.

(3) When requested services are unavailable, advocates will explain why the services are being denied.

(4) Centers shall provide technology safety planning on each call to ensure survivors are aware of any risks in communication via phone, chat line, or other technology.

4-6. Documentation of Services. All centers will provide core services and will maintain documentation on who, where, and how those services are delivered.

a. Safety Planning. Documentation for safety planning shall include:

(1) Safety planning was offered during hotline calls, with general information and topics discussed.

(2) Service notes shall indicate that safety planning was explained and discussed within 72 hours of a participant entering shelter, or within the first two individual counseling sessions with an outreach participant.

(3) Service notes shall indicate that safety planning was discussed, or an offer was made to discuss safety planning, when the participant's plan changes, or when an event occurred that indicated a need to modify the plan to address the event.

b. Service Management. Participant service file documentation for service management will occur within 72 hours of a participant entering shelter, or within the first two individual counseling sessions with an outreach participant, and will contain at least:

- (1) Demographic data.
- (2) Lethality assessment.
- (3) Description of the abuser.
- (4) Documentation that an individualized safety plan was conducted or offered.
- (5) Documentation that individualized service goals were discussed.
- (6) Basic needs assessment and child assessment, if applicable.

c. Counseling/Advocacy. Participant service file documentation for counseling/advocacy shall include:

- (1) Appropriate releases of information, as needed.
- (2) Dates of service.

d. Hotline. All hotline calls shall be documented, including calls from professionals and third parties, in a standard manner via call sheets or in the electronic service management system.

e. Service Notes. Service notes shall include only services provided by the center:

(1) Scheduled appointments shall not be entered into the participant file but may be kept on a separate calendar. If a calendar is used for scheduled appointment tracking and planning of advocates time, only the date, time, and non-participant identifiers may be used such as case file number or initials.

(2) Only after a service has been provided shall it be documented in the participant file. File may include documents that directly support service management, referrals, or advocacy services provided by the center and documented in the service notes. The center may determine that it is appropriate also to include in the file court orders or other legal documents relating to participant and/or her/his children including, but not limited to, injunctions for protection, final dissolution of marriage, and powers of attorney, even if such court orders or legal documents do not directly support service management, referral, or advocacy services provided by the center.

(3) Victims of Crime Act (VOCA) Relocation applications and supporting documents, including police reports, shall be kept in a separate confidential VOCA Relocation file.

(4) Participant files shall not include, and such documents should not be collected, held or retained by the center in a separate file:

(a) Medical treatment records, psychological assessments or reports, substance abuse treatment records, or any other information from a health care provider. However, the file may contain information disclosed by the participant relating to food or medication allergies.

(b) Applications and information related to the Address Confidentiality Program.

(5) Confidential survivor information may be subject to subpoena and a center may have to release such information by court order to the abuser or others, which may impact the participant's safety. Centers must document only necessary facts to record the services delivered.

(6) Service notes shall not contain any diagnosis, clinical assessments, advocates' personal opinions, commentary, or observations. Do not document statements such as: "missed 3 prior sessions," "participant not cooperative," "participant was referred to local mental health center," "participant reported concerns about their parenting skills," "participant expressed much anger towards their abuser," "participant refused to meet with their advocate today," "participant plans to relocate to their parents' house in Wisconsin," or "participant missed appointment."

(7) Notes on one survivor shall not include other participants' names.

4-7. Grievances. Domestic violence centers shall develop a written grievance procedure that is accessible to all program participants, as well as those denied access to services. The process should be posted and readily available for program participants. The grievance procedure must include, but not limited to, the following:

- a. Procedures to follow if an individual believes they have been wrongfully denied access to a domestic violence center's services.
- b. Procedures to follow if an individual chooses to express dissatisfaction about their experience with services received through the domestic violence center.
- c. Procedures to follow if an individual chooses to express dissatisfaction about an action(s) of domestic violence center staff.

4-8. Incident Reporting and Response.

- a. Domestic violence centers shall maintain a written policy to assure major incidents are properly addressed and recorded. Incident reports will be written when there are injuries, accidents, events, or circumstances affecting the health, safety, or well-being of staff, volunteers, visitors, vendors, facilities, or program participants.
- b. Domestic violence center staff shall be informed of the center's policies. Provisions will be made for evaluating the severity of the incident and any follow-up actions needed.
- c. Centers shall report certain incidents to the Department according to guidelines established by the State of Florida and listed in the center's contract with the Department.

4-9. Batterer Services. Domestic violence centers that offer Batterer Intervention Programs (BIP) or other services that require direct interaction with batterers shall comply with the following requirements:

- a. Center staff and volunteers who work with batterers shall not also provide services to survivors.
- b. Center staff and volunteers who work with batterers shall not attend survivor-related staffings.
- c. Center staff and volunteers who work with batterers shall not have access to survivor files.
- d. Center staff and volunteers working with survivors may not also work with batterers' intervention or other batterer services programs provided by other agencies located in the same service delivery area.

e. Center staff and volunteers will not share survivor information with center staff and volunteers providing services to batterers, including BIP facilitators. Center staff and volunteers working with batterers shall not have any direct contact with survivors.

f. Information sharing about a batterer's attendance at a center BIP or other batterer service is governed by section [39.908](#), F.S., and if the BIP is certified by the Department, any applicable Florida Administrative Code sections regulating certified BIPs.