

**BEST PRACTICES FOR
TENNESSEE SEXUAL ASSAULT AGENCIES
JULY 2010**

I. Introduction

National attention continues to focus on the issue of sexual violence. Sexual violence permeates our culture and devastates our nation. Anyone can experience sexual violence, but most victims are female. Statistics indicate that one in four girls and one in six boys will be sexually assaulted by age 18 (Finkelhor, et al., 1990). The person responsible for the violence is typically male and is usually someone known to the victim. The person can be, but is not limited to, a friend, coworker, neighbor, or family member.

Sexual violence occurs in many forms. Not all include physical contact between the victim and the perpetrator. Examples include sexual harassment, threats, intimidation, peeping, and taking nude photos. Other sexual violence, including unwanted touching and rape, does include physical contact and sometimes results in severe physical and psychological harm.

Beginning in the 1980's, Tennessee sexual assault programs began to organize and formed the Tennessee Coalition Against Sexual Assault (TCASA). Similarly, domestic violence programs formed the Tennessee Task Force Against Domestic Violence (TTFADV). In 2000, TCASA and TTFADV merged and formed the Tennessee Coalition Against Domestic and Sexual Violence (Coalition). The mission of the Coalition is to end domestic and sexual violence in the lives of Tennesseans and to change societal attitudes and institutions that promote and condone violence, through public policy advocacy, education and activities that increase the capacity of programs and communities to address such violence. The Tennessee Sexual Assault Advisory committee was formed in 2009 to create a Best Practices for Sexual Assault Agencies in Tennessee.

II. Purpose

A. Purpose Defined

The purpose of Best Practices is to ensure access to consistent and quality services for victims. Victims deserve justice, and in order to receive justice, staff and volunteers must understand the issue of sexual assault, they must believe the victim and they must empower victims to make their own choices.

B. Purpose of the Tennessee State Sexual Assault Best Practices

1. Provide a framework by which sexual assault agencies can develop a safe and secure environment for victims of sexual assault and by which quality sexual assault services can be organized, delivered and evaluated;
2. Define and describe the components of the services; and
3. Delineate requirements which must be met during the service delivery process.

III. Definition of Sexual Assault Agency and Eligibility for Sexual Assault Services

A. Sexual Assault Agency Defined

A tax-exempt public or non-profit agency that provides free, 24-hour sexual assault crisis services including hotline, information and referral services, counseling, advocacy, follow-up and community education.

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B. Eligibility for Services

1. Any adult or minor who identifies as a victim of sexual assault and requests services. An agency will provide appropriate referrals if there is a conflict of interest or an agency policy that prevents the agency from providing services to a victim of sexual assault.
2. Any other adult or minor who requests services to address their own crisis/feelings as a result of the sexual assault of a loved one.
3. Individuals are eligible for services regardless of age, sex, gender identity, sexual orientation, culture, race and ethnic background, religious and spiritual beliefs, citizenship or immigration status, spoken language or means of communication, physical and psychological disabilities and medical condition.

IV. Agency Components

A. Basic Components of Sexual Assault Agencies

1. The agency provides the six core agency services including hotline, information and referral services, counseling, advocacy, follow-up and community education. The core services are defined in Section VI.
2. The agency provides services to victims of sexual assault 24 hours a day, 7 days a week, and 365 days per year. Agency services may be provided at an agency's facility, and/or outside of an agency's facility, such as a hospital, court, or faith-based institution.
3. The agency adheres to the program and confidentiality requirements defined in Sections V and VI.
4. The agency adheres to federal and state laws that prohibit discrimination on the basis of race, color, national origin, religion, sex, disability or age.
5. The agency provides all clients with an orientation to the program and services offered. This orientation also includes an explanation of program rules, rights and responsibilities of the clients and the operating policies and procedures of the program.
6. The agency has a written policy that establishes immediate access to staff or trained volunteers 24 hours a day.
7. The agency has a written confidentiality policy regarding client information. This policy includes procedures regarding communication with other service providers, including but not limited to, contact with law enforcement and the criminal justice system, and the sharing of medical information. Programs providing medical services would include procedures concerning HIPPA.
8. The agency has a written policy and procedure for the emergency medical needs of clients.
9. The agency has written policies and procedures regarding reporting of abuse to the Department of Children's Services for child abuse and the Department of Human Services for vulnerable, disabled and/or elderly adults.
10. The agency provides reasonable access to clients through public transportation and/or supported transportation to off-site services.
11. The agency provides access to supplies for personal hygiene and clothing for any clients in need.
12. The agency prohibits possession and use of weapons, alcohol or illegal drugs on its premises.
13. The agency designates a private space specifically for counseling that is non-threatening and ensures confidentiality.

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14. The agency provides counseling space that is accessible to people with disabilities and that is compliant with Section 504 of the Rehabilitation Act of 1973 when counseling is conducted on property that is owned or rented by the program.
15. The agency complies with all applicable fire and safety codes on property that is owned or rented by the program.
16. If the agency provides medical services then the agency must also provide a private waiting area, a private exam area and bathing facilities.

B. Specific Components for Agencies Serving Minors

1. Staff or volunteers trained to meet the needs of minors.
2. Written policies regarding the rights and responsibilities of minors receiving services.
3. Written policies concerning non-violent behavior to be practiced by staff and volunteers.
4. Provision of counseling and/or advocacy for minors and offering appropriate furniture and equipment that would help to put a minor at ease.
5. Provision of an age appropriate orientation for minor clients, including but not limited to, their rights and responsibilities, role of agency staff, reporting requirements, and confidentiality.

V. Confidentiality of Victim Information

A. Confidentiality Requirement

Sexual Assault Agencies are required to maintain the confidentiality of each victim's identity and personal information. This not only ensures that the organization is in compliance with ethical and legal standards, but it also creates a safe and trusting environment for each client.

B. Legal Requirements of Confidentiality

All agencies will maintain confidential records in accordance with **Tennessee Code Section 36-3-623** which states: The records of domestic violence shelters and rape crisis centers shall be treated as confidential by the records custodian of such shelters or centers unless: (1) The individual to whom the records pertain authorizes their release; or (2) A court approves a subpoena for the records, subject to such restrictions as the court may impose, including in camera review.

C. Ethical Requirements of Confidentiality per Federal Funding Guidelines

Non-profit agencies that receive Office of Violence Against Women funding (including STOP) must adhere to the following **Violence Against Women Act 2005 and 2006 Updated Confidentiality and Privacy Requirements** paraphrased below:

1. To ensure the safety of victims, agencies must not disclose any personally identifying information or individual information collected in connection with services requested, utilized, or denied through agency programs or reveal individual client information without the informed, written, reasonably time-limited consent of the person.
2. Personally identifying information or personal information means (1) a first and last name; (2) a home or other physical address; (3) contact information of any sort, including postal, email or Internet protocol address, or telephone or facsimile number; (4) a social security number and (5) any other information including date of birth, racial or ethnic background, or religious affiliation, that in combination with any other non-personally identifying information would serve to identify an individual.
3. Written consent authorized by a Release of Information shall be compelled by statutory or court mandate, or by informed consent of the victim.

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D. Written Policies Addressing Confidentiality

All Sexual Assault Agencies shall have written policies for the following:

1. Confidentiality
2. Maintenance of Confidential Records
3. Release of Information
4. Duty to Inform

E. All Sexual Assault Agencies Shall Incorporate the Following Procedures in Their Written Policies

1. Confidentiality Policy/Procedure

- a. Agencies are prohibited from sharing personally identifying information about victims without reasonably time limited, written and informed consent. This provision allows a survivor to choose to temporarily waive her/his confidentiality for a meeting or conversation or other limited period of time, through informed, written consent and a specific short-term release.
- b. The term **personally identifying information** or personal information means individually identifying information for or about an individual including information likely to disclose the location of a victim of sexual assault and includes: (1) a first and last name; (2) a home or other physical address; (3) contact information of any sort, including postal, email or Internet protocol address, or telephone or facsimile number; (4) a social security number and (5) any other information including date of birth, racial or ethnic background, or religious affiliation, that in combination with any other non-personally identifying information would serve to identify any individual.
- c. Agencies are prohibited from disclosing personally identifying victim information to any third party database such as the Homeless Management Information System (HMIS).
- d. Agencies will adhere to State and Federal guidelines requiring confidentiality of client information. Statistical information shared with funders pertaining to clients will be in aggregate form.
- e. For monitoring purposes, programs will remove identifying information from case files prior to monitoring in order to ensure confidentiality.

2. Maintenance of Confidential Records Policy/Procedure

- a. Clients' paper files will be stored in a locked container or room. All computers with client's personally identifying information will be password protected.
- b. Clients should be fully informed of the agency's data collection process (computerized files, client databases, paper files, etc.) and of the risks and the uses of each of these processes.
- c. All staff, volunteers, contract staff, IT staff, etc. who will have access to a client's personally identifying information whether in paper or computerized client files, must sign a Confidentiality Agreement which will be kept on file.

3. Release of Information Policy/Procedure

- a. The program will not release any personally identifying information without the client's full understanding, cooperation and a signed release of information.
- b. When records, staff, and/or volunteers are subpoenaed, the agency will make every effort, within the limits of the law, to carry out the client's desired response to the subpoena. Every effort will be made by the program staff to seek permission from the client to

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release the information. If permission is granted, a written release of information will be signed by the client. The release of information will include what will be released, to whom it will be released and why it is being released.

4. Duty to Inform Policy/Procedure

Clients will be made aware that the agency will report to authorities or medical staff if the client threatens to harm oneself or another.

VI. Provision of Core Services

A. Sexual Assault Agencies Provide Six Core Services to Eligible Victims of Sexual Assault

(An advocate or volunteer providing any of the services detailed in the following section should receive the training detailed in section XII.)

1. 24-Hour Hotline

The agency has a 24-hour advertised hotline for victims, significant others and other individuals needing assistance.

- a. A hotline caller has 24-hour access to a trained sexual assault worker who can provide crisis intervention and information/referral. Immediate access is defined as no more than ten minutes.
- b. Answering services are kept to a minimum. If an answering service is utilized, the agency ensures that the crisis caller is patched through to a sexual assault worker immediately or receives a return call from the sexual assault worker in no more than ten minutes.
- c. The agency has a policy regarding 24 hour coverage for the hotline. This policy addresses how crisis calls are to be addressed and how information and referral calls are to be addressed, both by staff and answering service workers.
- d. Answering service workers are equipped to transfer calls to the sexual assault worker. Minimally, the agency provides annual information to the answering service on the protocols for gathering and relaying information, as well as the confidentiality of information.
- e. Written policies and procedures are in place detailing how the agency will handle the needs of non-English speaking, disabled, hearing impaired, elderly, and minor clients. Policies shall be in compliance with Titles VI and VII of the Civil Rights Act of 1964, as amended, the Age Discrimination Act of 1975, and Section 504 of the Rehabilitation Act of 1973, and the Pro-Children's Act of 1994 (Public Law 103-227, Part C. Environmental Tobacco Smoke).
- f. The agency documents all hotline calls, indicating information required for reporting purposes, such as the date, time, length of call, caller demographic information and the hotline worker who took the call.

2. Information and Referral

The agency is a source for information and referral for victims, significant others and the community on sexual assault.

- a. The agency has an updated resource system that is available for staff and volunteers answering the hotline. Staff and volunteers are trained to use the resource system.
- b. The agency has printed materials that provide information on sexual assault and their services available for distribution.
- c. The agency provides appropriate service referrals. If clients or callers need referrals for counselors or other services not related to sexual assault.

3. Counseling

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This service is provided by telephone, a one-on-one meeting or through a group meeting. This service is available to the victim, the victim's children, dependents, and significant family or support individuals.

The following types of counseling are available:

- a. **Crisis Intervention** – crisis intervention services are provided to the victim during an acute reaction to sexual assault. The crisis is self defined by the victim.
- b. **Supportive Counseling** – supportive counseling services are provided to the victim to provide stabilization and to assist in the recovery from sexual assault.
- c. **Education on Sexual Assault and other Related Issues** – the victim, the family and/or support individuals receive information and education on sexual assault issues in order to further their understanding of sexual assault and to assist in the recovery process.
- d. **Individual Planning**- the advocate/program, in conjunction with the victim, assesses and evaluates the victim's needs in order to develop a service plan designed specifically for the individual victim.
- e. **Safety Assessment** – the advocate/program, in conjunction with the victim, assesses and evaluates the immediate safety needs of the victim.

Therapy is provided by a licensed therapist. Therapy is not a core service. If the agency does not offer therapeutic services then individuals who require therapy are referred to a mental health service provider.

4. Advocacy

The agency provides quality advocacy services:

a. Individual Advocacy

A trained advocate provides empathic, non-judgmental support for client's decisions regarding what kind of assistance and support she/he wants.

- (i) Comprehensive training for staff and volunteers providing advocacy services.
- (ii) In-person support during medical exams.
- (iii) In-person support during legal procedures.
- (iv) Follow-up services.
- (v) Referrals to outside service providers.

b. Medical Advocacy

- (i) An advocate is available 24 hours per day to respond to sexual assault victims.
- (ii) An advocate responds to a victim at a designated examination facility, when requested.
- (iii) An advocate remains with the victim during a forensic medical exam with the consent of the victim and hospital personnel.
- (iv) An advocate provides information to victims, including the following:
 - (a) The forensic examination and evidence collection process.
 - (b) Sexually transmitted diseases and HIV antibody testing and prophylaxis.
 - (c) Emergency contraception.
 - (d) Common emotional and physical responses to sexual assault.
- (v) If applicable, the advocate refers the victim to other medical providers to obtain emergency contraception if the facility does not provide it.
- (vi) An advocate provides information, referral, and support to the client and significant others.
- (vii) An advocate initiates follow-up services with the client after the initial contact or forensic examination. Follow-up with a client is initiated only with the survivor's prior written permission for continued contact.

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(viii) An advocate maintains confidentiality and follows appropriate reporting guidelines.

c. Legal Advocacy

- (i) An advocate provides legal advocacy services.
- (ii) An advocate provides information and answers questions regarding victim's rights, the criminal justice system and assists with victim compensation.
- (iii) An advocate provides information regarding victim's options, including reporting to law enforcement agencies.
- (iv) An advocate explains court procedures.
- (v) An advocate initiates follow-up services with the client after the initial contact. Follow-up with a client is initiated only with the survivor's prior written permission for continued contact.
- (vi) An advocate makes referrals as needed.
- (vii) An advocate documents all interactions made on behalf of the victim.
- (viii) An advocate maintains confidentiality and follows appropriate reporting guidelines.

d. Transportation and Advocacy

Advocates work with victims to assist with their transportation needs. Transportation may be provided by the most appropriate means for the area. Transportation arrangements may be provided by staff or volunteers in personal vehicles, commercial vehicles such as bus or cab, by local law enforcement officials, or by human service agency representatives. The client is encouraged to provide or arrange for transportation service when possible.

5. Follow-up

Follow-up is an agency initiated service that is conducted only with the survivor's prior written approval. Follow-up may include any core services that are provided after the initial crisis has occurred. The goal of follow-up is to provide continued support to the survivor, with her/his defined needs. Follow-up does not have a defined length of time, as the need for continued services after the initial crisis varies with each client. The agency will ensure that the client's confidentiality and wishes are respected. Agencies, whose follow-up is formalized for research or data purposes, must respect the victim's safety and confidentiality.

6. Community Education

The agency provides age and culturally appropriate presentations to community groups and allied professionals on the subjects of sexual violence, myths associated with its origin and perpetuation, the impact of sexual assault on the victim, mandated reporting and the characteristics of offenders. Public awareness programs are designed primarily to inform an audience in contrast to training programs which are designed to impart skills and evaluate their use.

a. Public Awareness

- (i) The agency provides brochures, handouts and/or fact sheets for audience participants.
- (ii) Public awareness activities include: health fairs, presentations to community groups (churches, students etc.), media contacts, and billboards.
- (iii) The agency evaluates public awareness events based on specific funding requirements and program needs.

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b. Professional Training

- (i) The agency provides training to allied professionals who may come in contact with sexual assault survivors. The agency has written training objectives for each type training program.
- (ii) The agency provides trainees with written training materials related to the training content, when appropriate.
- (iii) The agency evaluates professional trainings based on specific funding requirements and program needs.

VII. Non-Core Services

A. Therapeutic Services

Sexual Assault Agencies may offer therapeutic services, in addition to the six core services, to assist the client in identifying longer term life patterns and coping mechanisms, as well as to assist in establishing survival skills. Therapeutic services are individualized to meet the client's goals. To provide therapeutic services, the program utilizes a licensed therapist.

- 1. An agency cannot require a client who seeks any of the six core services to participate in therapeutic services.
- 2. Therapeutic files are kept separate from advocacy files.
- 3. Therapists adhere to all confidentiality requirements specified in section V and any confidentiality requirements that are required by the professional credentials of their field.
- 4. Therapists adhere to the certifying or licensing board requirements by which they are governed.
 - a. The agency has a written policy and procedure that details how the therapeutic process is structured.
 - b. The agency has an intake process and an orientation that explains the therapeutic process, length of sessions, number of sessions, the role of the therapist, and the termination process.
 - c. The agency has written policies and procedures regarding when a client may be terminated from therapy services and how termination will occur.

B. Forensic Medical Examinations

Sexual Assault Agencies may offer forensic medical examinations, in addition to the six core services. The goal of the forensic medical exam is to ensure that survivors of sexual assault receive a competent, uniform and sensitive forensic medical examination that maximizes the potential of a successful prosecution. A victim will choose if he/she wishes to have a forensic medical exam. A victim will also choose whether or not to prosecute his/her case. A victim can not be refused an exam if she/he chooses not to contact law enforcement and/or cooperate in the prosecution.

Forensic medical exams should be facilitated by a sexual assault nurse examiner (SANE) who has successfully completed the required training to perform these examinations. However, if a SANE nurse is not available, a licensed physician is the next preferred choice to perform the examination.

- 1. The agency cannot require a victim who seeks a forensic medical examination to participate in any of the six core services.
- 2. Medical files are to be kept separate from advocacy files.
- 3. Forensic medical examiners adhere to the certifying or licensing board requirements by which they are governed.

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- a. Forensic medical examiners adhere to all confidentiality requirements specified in section V and any confidentiality requirements as defined by the professional credentials of their field and HIPPA.
 - b. The agency has a policy and procedure that details the structure of the forensic medical exam.
 - c. A forensic medical examiner provides the victims with medical information.
4. The forensic examination and evidence collection process.
 5. Sexually transmitted diseases and HIV antibody testing and prophylaxis.
 - a. Emergency contraception.
 - b. The SANE program has policies and procedures which ensure that the preservation of evidence integrity and chain of custody among the forensic examiner, hospital, and law enforcement.
 - c. The SANE program provides a private waiting area and exam area.
 6. As available, agencies use the standard forensic evidence collection kit provided by the Tennessee Bureau of Investigation.
 7. Survivors receive information regarding recommended medical follow-up, contact persons, questions or medical concerns that arise following the forensic examination, and available community resources.

VIII. Service Delivery Process

A. Goal of All Service Delivery

To provide for crisis intervention and continued safety for the client, children and significant others and to empower the survivor to meet self-determined goals.

B. Service Delivery Process involves five areas. Trained staff and volunteers will provide services.

1. Intake

The agency has a written policy regarding intake procedures.

- a. Procedures to assist immediate needs, including safety, and to determine appropriate services or referrals.
- b. Clarifications on limitations of confidentiality, including mandatory reporting.
- c. Explanation of agency services and access to those services.

2. Assessment

The agency conducts an assessment of each client and their situation. An initial assessment occurs at intake to assess the immediate needs. For clients that request additional services, the program provides ongoing assessment based on each individual's case. The assessment constitutes the basis upon which the service plan and safety assessment are developed with each client.

3. Planning

- a. The client has a service plan. This plan identifies goals and outlines the services and resources necessary to meet the goals and facilitate the safety of the individual.
- b. The client has a safety assessment. If needed, a safety plan is developed by the client with assistance from staff.

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4. Case Record

- a. A case record is maintained for each client. The case record includes the range of services provided to the client.
- b. Documentation of counseling and advocacy services is recorded in the client record.
- c. Each case record contains as appropriate:
 - (i) Intake information
 - (ii) Assessment notes, including safety assessment
 - (iii) Service plan
 - (iv) Follow-up notes
 - (v) Each release of information form that was signed by the client

5. Evaluation

The agency collects data from clients, such as a survey, to evaluate program services.

IX. Governance Components

A. Purpose of Governance – Accountability to Clients and the Community

B. Two Types of Sexual Assault Programs

1. Non-Profit Sexual Assault Agencies:

- a. Non-profit sexual assault agencies are tax exempt pursuant to Internal Revenue Code Section 501(c)3.
- b. A sexual assault program may be part of a non-profit agency which also serves domestic violence victims, and is referred to as a non-profit dual domestic violence and sexual assault agency.
- c. Non-profit agencies which provide an array of services, including but not limited to sexual assault services, would be referred to as a non-profit umbrella agency.
- d. ***Non-Profit Sexual Assault Agency's Governing Components:***
 - (i) A non-profit agency is governed by a volunteer board of directors. Members of the board should not be employed by the agency.
 - (ii) An umbrella non-profit agency should have a sexual assault advisory body in addition to the Board of Directors. At least one of the designated members of the sexual assault advisory body should serve on the Board of Directors.
 - (iii) If the non-profit umbrella agency has both a domestic violence program and a sexual assault program, the agency may have one advisory board to address both domestic violence and sexual assault.
 - (iv) Membership on the Board of Directors or the sexual assault advisory body, in the case of a non-profit umbrella agency, should consist of individuals who reside in the community served by the program, who have an understanding of the problem of sexual assault, and who have an interest in the provision of services to victims of sexual assault.
 - (v) Membership on the governing board or sexual assault advisory body should be broad based, and should reflect the racial and ethnic composition of the community served and, whenever possible, should include representative survivors of sexual assault.
 - (vi) Board members should not be related by blood or marriage to other board members or staff, and must use good judgment to avoid even the appearance of a conflict of interest.

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2. Government Sexual Assault Agencies

Government sexual assault agencies are tax exempt pursuant to Internal Revenue Code Section 115 and may be incorporated into other public entities such as county hospitals or local governments.

a. *Government Based Sexual Assault Agencies Governing Components:*

- (i) Government based sexual assault agencies should have a sexual assault advisory body. At least one of the designated members of the sexual assault advisory body should serve in a decision making position within the public corporation.
- (ii) Membership on the sexual assault advisory body should consist of individuals who reside in the community served by the government based sexual assault program, who have an understanding of the problem of sexual assault, and who have an interest in the provision of services to victims of sexual assault.
- (iii) Membership on the sexual assault advisory body should be broad-based and reflect the racial and ethnic composition of the community served and, whenever possible, should include representative survivors of sexual assault.

X. Grievance Procedures

A. Definition

A grievance is a complaint from a client about the services received.

B. Policies and Procedures Regarding Grievances

1. Written procedures must clearly describe the lines of decision-making for the resolution of grievances.
2. Agency must clearly state the procedures for documenting the grievance and the resolution process.

XI. Agency Requirements

A. Administration

1. The agency administration shall ensure, to the extent feasible, that any funds allocated for sexual assault services shall be used to provide services in addition to those already provided by the Office of Criminal Justice Programs in the Department of Finance and Administration.
2. The agency administration shall be a tax-exempt public or not-for-profit corporation.
3. The agency administration complies with Tennessee Code Annotated, Section 37-1-403 and 37-1-605 by reporting cases of suspected child abuse to the Department of Children's Services and Tennessee Code Annotated, Section 71-6-103 by reporting cases of suspected adult abuse to the Department of Human Services.
4. The agency administration complies with Titles VI and VII of the Civil Rights Act of 1964, as amended, the Age Discrimination Act of 1975, and Section 504 of the Rehabilitation Act of 1973, and the Pro-Children's Act of 1994 (Public Law 103-227, Part C. Environmental Tobacco Smoke).

B. Personnel

1. The governing body has written personnel policies that are reviewed annually and address the following:

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- a. Adhere to federal and state laws that prohibit discrimination on the basis of race, color, national origin, religion, sex, or disability
 - b. Work hours
 - c. Written Work Performance Evaluation
 - d. Sexual harassment
 - e. Screening of staff through background checks to ensure that children and vulnerable adults are protected
 - f. Verification of references
 - g. Recruitment, selection, promotion, and termination
 - h. Overtime pay and compensatory time
 - i. Benefits
 - j. Supervision of staff
 - k. Holidays, vacation, sick leave and other leave time
 - l. Rules of conduct
 - m. Disciplinary actions
2. Written job description for all agency positions shall be available. These written descriptions include:
- a. Job title
 - b. Tasks and responsibilities of the position
 - c. Required education, skills, knowledge and experience
 - d. Lines of authority
3. Staff Requirements
- All staff employed with a program should possess an understanding of the issue of sexual assault and have completed training as detailed in section XII.
4. Wage and Hour Requirements
- The agencies' positions should be compensated in compliance with applicable federal and state laws which include the Fair Labor Standards Act.
5. Staff Orientation
- a. Ensuring overall familiarization with the agency and program purpose, objectives, structure and policy.
 - b. Specific exposure to and training in the duties of the position, as detailed in section XII.
6. Staff Development
- a. Initial training for new staff
 - b. Ongoing training for personnel
 - c. Policy for leaves for conferences, classes or institutes
 - d. Regular staff meetings
7. Volunteers
- A written policy on the use of volunteers which includes:
- a. Screening of volunteers through background checks to ensure that children and vulnerable adults are protected
 - b. Verification of references

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- c. A written description of duties and rights, including confidentiality policy and practices to be given to the volunteer
- d. Provision for supervision
- e. Provision of role appropriate orientation, initial training and ongoing training
- f. Policies and procedures for recruiting and selecting volunteers
- g. Provision for termination
- h. Adhere to federal and state laws that prohibit discrimination on the basis of race, color, national origin, religion, sex, or disability

XII. Training Requirements:

A. Core Training

Training requirements on sexual assault services is the same for staff and direct service volunteers. The core services serve as a guide for this training. Training utilizes educational modules as well as shadowing of service provision, and should be performed by a qualified trainer/staff person. In addition to training necessary to perform the services described in the core requirements, staff and volunteers are trained in additional areas.

B. Additional Areas of Training

1. **The historical context of sexual violence, the role of society in perpetuating violence against women and the history of the sexual violence movement.**
2. A framework for **understanding the nature and dynamics of sexual violence includes:**
 - a. Sexual violence myths and facts
 - b. Drug facilitated sexual violence
 - c. Rape Trauma Syndrome
 - d. Post Traumatic Stress Disorder
 - e. Working with survivors of childhood sexual abuse
 - f. Working with child victims of sexual abuse
 - g. Diversity and the need for social change necessary to eliminate violence against women, including the elimination of discrimination with regard to age, sex, gender identity, sexual orientation, culture, race and ethnic background, religious and spiritual beliefs, citizenship or immigration status, spoken language or means of communication, physical and psychological disabilities and medical condition.
3. A framework for **sexual violence advocacy should include:**
 - a. The role of the advocate
 - b. The role of an attorney
 - c. The role of the forensic medical examiner
 - d. Hospital advocacy
 - e. Legal advocacy
 - f. Unauthorized practice of law
 - g. Hospital response/forensic exam
 - h. Sexual Assault Response Team (SART)
4. A framework **for advocacy and empowerment for survivors of sexual violence should include:**
 - a. Safety assessment that includes short- and long-term strategies
 - b. Confidentiality and ethical service provision

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- c. Working with women, men and children in crisis
 - d. Working with adult survivors of sexual assault
 - e. Victims Compensation
 - f. Documentation of services
5. A framework for **collaborations and expanding services with community partners that includes an emphasis on safety for survivors and accountability for perpetrators should include:**
- a. Working with sexual assault response teams
 - b. Working within a medical community, including hospital procedure for evidence
 - c. Working with the criminal justice system, including law enforcement procedures collection
 - d. Mandatory reporting laws
6. The program provides **agency information to staff and volunteers including:**
- a. The organization's history and mission statement
 - b. Program policies and procedures
 - c. Specific job functions
 - d. Appropriate resource and referral information
 - e. Vicarious Trauma
 - f. Maintaining appropriate boundaries