

# ATTACHMENT A

## HISTORY

The 2001 regular legislative session passed Senate Bill 81 (Batterer Intervention Program Standards), which directed the Oregon Department of Justice to create statewide standards for batterer intervention programs. In 2002 an Advisory Board was formed to assist the Attorney General, Hardy Myers, in defining these standards. In response to the possible implementation of Senate Bill 81, Marion County Domestic Violence Council (MCDVC) formed a sub-committee to review the Marion County: Program Standards for the Intervention of Domestic Violence Participants in light of SB 81.

Senate Bill 81 designates the “Local Supervisory Authority” (LSA), in consultation with the Council, to periodically review the performance of Batterer Intervention Programs located within the jurisdiction of the LSA for compliance with these standards. The LSA requires that all programs used by the LSA comply with “Evidence based practice” as set forth in Senate Bill 267. Later the Marion County Program Standards for the Intervention of Domestic Violence Participants, the spirit of SB 81 and the requirements of Senate Bill 267 were pulled together to form the Marion County Standards for Batterer Intervention Programs.

When the initial standards were formed the Members of the Marion County Domestic Violence Council SB 81 Sub-committee were:

Jayne Downing, Director of Mid-Valley Women’s Crisis Service\*

Kim Larson, Director of Victim Assistance for Marion County District Attorney’s Office

Melissa Sommer, Family Violence Program Coordinator, Marion County District Attorney’s Office

Vivien Bliss, Director of Solutions Batterer Intervention Program\*

Honorable Susan M. Tripp, Marion County Circuit Court

Walt Beglau, District Attorney for Marion County

Jean Kunkle, Deputy District Attorney for Marion County

Steve Gorham, Marion County Association of Defense (MCAD)

Pat Schreiner, Commander, Marion County Sheriff’s Office

Elaine Clarke, Sergeant, Marion County Sheriff’s Office Parole & Probation Domestic Violence Unit

Marissa Foster, Parole & Probation Officer, Marion County Sheriff’s Office

Sue Blayre, Program Coordinator, Marion County Sheriff’s Office Parole & Probation

\*Please Note: At the time, Solutions Batterer Intervention Program and Mid-Valley Women’s Crisis Service supported the Attorney General’s recommended standards (SB 81) and did not support the revised Marion County Standards for Batterer Intervention Program or providers

unless the recommended changes were evaluated and approved by the SB 81 Program Advisory Committee.

In 2012, new OARs were promulgated for the regulation of Batterer Intervention Programs. OAR 137-087-0000 through 137-087-0100 established program standards for intervention services provided to male batterers who engage in battering against women.

In keeping with the new OARs, the Marion County Domestic Violence Council (MCDVC) Program Review Sub-committee met to review the following: a) evaluating the benefits and detriment of the previously implemented 12-24-48 session tiered intervention structure; the Court's decision to move from the 12-24-48 tiered session structure to implementation of the newly implemented OAR 36 session intervention structure; Local Supervisory Authority required adherence to Senate Bill 267; the current referral and assessment process, and to revise the Marion County Standards for Domestic Violence Batterer Intervention Programs.

This final product, set forth below, will be presented to the MCDVC for input and approval. These standards would replace the current Marion County Standards for Domestic Violence Intervention Programs. These Standards shall apply to all programs and providers providing services to the LSA's formal probation participants, as well as, all Court bench probation participants. The "Local Supervisory Authority" (LSA), in consultation with the Council, shall periodically review the performance of all programs located within the jurisdiction of the LSA for compliance with these Standards.

Current members of the Marion County Domestic Violence Council: Program Review Sub-committee:

Honorable Audrey Broyles, Marion County Circuit Court

Honorable Vance D. Day, Marion County Circuit Court

Honorable Susan M. Tripp, Marion County Circuit Court

Walt Beglau, Marion County District Attorney

Jean Kunkle, Deputy District Attorney for Marion County

Kim Larson, Director of Victim Assistance for Marion County

Doug Cox, Lieutenant: Marion County Sheriff's Office

Jayne Downing, Director of Mid-Valley Women's Crisis Service

Steve Gorham, Marion County Association of Defenders (MCAD)

Brook Holstedt, Marion County Association of Defenders (MCAD)

Vada Salinas, Marion County Association of Defenders (MCAD)

Mary Blankenship, Community Member

Sue Blayre-White, Community Member

## **ATTACHMENT- B REFERRAL PROCESS**

**Referral Processes:** There will be two intake and referral processes: Part I: for participants on Court probation and Part II: for participants on supervised probation, both set forth below:

(a) Part I: Court Probation Participant Process

(A) The Court at sentencing may:

- (i) Refer a defendant to a batterer intervention provider of the Court's choosing;
- (ii) Refer a defendant to a batterer intervention provider of the defendant's choosing; or
- (iii) Send the defendant for evaluation by an Approved Assessment Agency to determine if the defendant is in need of batterer intervention.

\*\* It is important to note that there may be occasions where the Court may not follow this process, as the terms of probation and implementation of the terms of probation are always left to the sound discretion of the sentencing judge. At times, a judge may choose to order a different type of intervention, and not order a defendant to attend a batterer intervention program.

\*\* If a defendant is referred to an Approved Assessment Agency for evaluation, the assessment must utilize the tools approved by the LSA.

\*\* A batterer intervention provider may not refer a participant to any other program: parenting program, drug and alcohol evaluation, drug and alcohol treatment, or any other program without A SPECIFIC ORDER OF THE COURT.

(b) PART II: Supervised Probation Participant Process

\*\* It is important to note that these requirements are consistent with legislative dictates of ORS 182.515-525, which mandates Evidence-Based Practices.

(A) The Parole & Probation Officer will conduct an ODARA and LS/CMI on each potential participant referred to the Domestic Violence Unit. This may result in one of the following actions:

- (i) If the ODARA score is medium percentile risk and/or high percentile risk a potential participant may be referred directly to a provider;

(ii) If the ODARA score is medium percentile risk and/or high percentile risk, and the LS/CMI and/or personal interview causes concern of other issues, the potential participant may be referred to an Approved Assessment Agency for a Domestic Violence specific Pre-Service Assessment;

(iii) If substance abuse was part of the precipitating event leading to the potential participant's arrest during a domestic violence dispute or identified in LS/CMI, the PPO may conduct an evaluation to determine if a referral for a substance abuse assessment is recommended. If the evaluation does not reflect need for substance abuse assessment the potential participant may be referred to a batterer intervention provider;

(iv) If these tools reflect the need for substance abuse assessment the participant should be referred directly to a substance abuse provider. Once the client has completed substance abuse treatment they should be re-evaluated to determine the appropriateness of referral to a provider;

(v) If the ODARA is low percentile risk, the potential participant may be sent to an Approved Assessment Agency for a general assessment.

The ODARA has been validated for male and female offenders in heterosexual relationships. In Marion County, the ODARA shall be used as an evaluation tool in all cases, regardless of the nature of the relationship between the batterer and the victim. The ODARA will be used on all partners, intimate and former; regardless of sexual orientation.

(B) When a participant is referred to a batterer intervention program, the PPO will provide the agency with a copy of the ODARA, LS/CMI, and the MAST-DAST-UNCOPE and URICA (if these were conducted). The provider may not charge for further assessment without the written approval of the PPO.

## **ATTACHMENT- C ADMISSION PROCESS**

### **Admissions Process:**

- (a) No part of the admission process will require a participant to attend groups that do not count as part of the 36 session requirement.
- (b) A provider shall provide, at no cost, the provider's written criteria for accepting or refusing admission requests or referrals. An applicant or referral shall be referred to as a potential participant until this provider admits the person to their program. The admission criteria shall be available to potential participants, staff, victims, partners and the community.
- (c) A provider may reject any potential participant the provider deems to be inappropriate. Inappropriate potential participants may include but are not limited to the following:
  - (A) A potential participant who has not engaged in battering as defined in these standards and OAR's 137-087-0005(2); and
  - (B) A potential participant whose behavior would be disruptive to the meaningful participation of others.
- (d) If a provider determines a potential participant does not meet the program's admission criteria, the provider shall within seven working days notify the referral source of the reason for rejection or termination of participation and, when appropriate, make recommendations for other treatment services or criminal justice action.

**\*\* A batterer intervention provider may not refer a participant to any other program: parenting program, drug and alcohol evaluation, drug and alcohol treatment, or any other program without A SPECIFIC ORDER OF THE COURT.**

- (e) A provider's admission criteria and practices shall not discriminate against any potential participant based on national origin, race, culture, age, disability, religion, educational attainment or sexual orientation. Where there is a substantial barrier to a potential participant's participation in a program because of cultural background, language, literacy level, or disability, this provider shall make reasonable modifications in policies, practices, and procedures to provide services and in consultation with the referring LSA or MA. The provider shall not increase participant cost for such modifications.
- (f) A provider shall make reasonable access accommodations for disabled participants as set forth in the American with Disabilities Act (ADA).

**Intake Procedures.** Any contact to obtain information from a victim or partner shall comply with the victim and partner interface requirements set forth within these standards.

- (a) A provider shall use an intake procedure that includes an interview with the potential participant. Information obtained during this interview will be documented in writing.

(b) The provider shall request information from the potential participant and other relevant sources that the provider shall use initially to determine whether the potential participant is appropriate and otherwise meets the program's admission criteria. That information includes, but is not limited to, a history of battering or violent criminal conduct; history of participation in Batterer Intervention Programs; existence of protection orders; police reports; court orders; involvement with DHS child welfare services; and the terms and conditions of the potential participant's probation.

(c) In addition to the information requested under subsection (b) of this standard, a provider may request information from the potential participant and other relevant sources related to the following:

(A) Factors that may indicate a risk of future violence against the victim or other intimate partner, including but not limited to: safety concerns expressed by the victim; prior assaults against intimate partner(s), children and pets; criminal history; prior violation of conditional release or restraining order(s), protection orders, post-prison supervision/parole orders or other court orders; history of stalking; extreme isolation or dependence on the victim or partner; attitudes that condone or support domestic violence; history of weapon possession or use; access to firearms; credible threats of injury, death or suicide; lack of personal accountability; minimization or denial of domestic violence history; and association with peers who condone domestic violence;

(B) Factors that may make participation in the program difficult or impossible, including but not limited to: lifestyle instability (e.g., unemployment or lack of housing); substance use, abuse or addiction; mental health issues; negative response to prior services (dropping out, lack of motivation and resistance to change); and persistent disruptive behavior;

(C) Factors that may indicate risk of future violence toward the provider, facilitator or other participants, including but not limited to a history of weapon use and violent criminal behavior; and

(D) Demographic factors that may be used for statistical reasons or programmatic planning, including but not limited to age at time of offense and length of relationship with current or victim(s) or former partner(s).

### **Participant Orientation to the Batterer Intervention Program.**

(a) A provider shall use an orientation procedure to inform the participant about provider's requirements and expectations. A provider may combine orientation with intake.

(b) The orientation shall provide the participant with the following materials verbally and in writing:

(A) Statement of the provider's philosophy consistent with these standards;

(B) Length of program, provider attendance policies, and consequences for failure to comply with attendance policies;

(C) Statement of fees, methods of payment, and consequences of failure to comply with payment agreements. **Participants shall receive, at no charge, a copy of their individualized fee-for-service agreement;**

(D) Statement of active participation requirements, including personal disclosure and completion of group or class activities and assignments;

(E) Standards for group or class participation and statement of requirement to cooperate with those standards;

(F) Statement of requirement to develop and present an Accountability Plan;

(G) Statement of the provider's drug and alcohol policy, including but not limited to a prohibition against attending any sessions while under the influence of drugs or alcohol;

(H) Statement of procedure for asserting grievances against the provider or facilitator; a grievance policy in itself is not sufficient;

(I) Prohibition of weapons possession while on provider premises or when participating in a provider function;

(J) Statement of any other provider standards and conditions for participation in this program;

(K) Statement of the provider's mandatory reporting obligations under federal or state laws and regulations, including the required disclosures of imminent danger to self, victim, current partner or others; child abuse, elder abuse, abuse of vulnerable adults, or any other circumstances requiring reporting;

(L) Statement of provider's confidentiality policy as to participant records, identity of other program participants, and information disclosed by other participants in the groups or classes;

(M) Notification that the provider will not provide the participant with any information about the victim or partner, either directly or indirectly through a judicial or administrative proceeding;

(N) Statement of a requirement that the participant execute all necessary documents to obtain information from, or release of information to, law enforcement, the courts, prior intervention or treatment services, social services, victim(s), partner(s), and others as appropriate. **Participants shall receive, at no charge, a copy of all signed documents ;**

(O) Statement of criteria for program completion. This includes but is not limited to the following:

(i) Attendance requirements,

- Completion of a letter of clarification and accountability;

- Demonstrated use of alternatives to violent and aggressive behavior;
- Completion of all homework assignments;
- Payment of all fees and tuition costs.

(P) An agreement to be signed by participants to stop violent and threatening behaviors and to be non-abusive and non-controlling in relationships; and

(Q) An agreement to be signed by participants to not injure or destroy pets or property as a means to hurt or control others.



## **ATTACHMENT- D RECORD KEEPING**

### **Participant Record.**

- (a) A provider shall keep the following information in each participant's record:
- (A) Participant's name, address and telephone number;
  - (B) Name and telephone number of contact in case of emergency;
  - (C) Fee agreement; Participants shall receive, at no charge, a copy of their individualized fee for service agreement;
  - (D) Intake information obtained under section (2) of these standards, name of personnel member completing intake, and participant's signed acknowledgment of receiving orientation materials;
  - (E) Copy of any signed releases of information; Participants shall receive, at no charge, a cop of all signed releases of information;
  - (F) Records of participant's attendance and other participation;
  - (G) Information received by the provider after intake, including court orders, police reports, and protection orders, post-prison supervision or parole orders; and information as to any violations, offenses, new arrests or criminal charges during participation;
  - (H) Except for victim or partner contact information addressed in subsection (b) of this section, documentation of provider disclosures, including name(s) of person(s) notified due to imminent danger or mandatory reporting consistent with these standards;
  - (I) Documentation of the participant's status as to completion of requirements of the program, and any current obstacles to completion;
  - (J) Exit summary; ***Participants shall receive an exit summary at no charge;***
  - (K) Documentation of any refusal to provide requested information or to sign authorization forms;
  - (L) Assessment/documents related to risk, needs and responsivity.
- (b) The following information is not part of participant record and shall not be documented:

(A) Contact or other information about the whereabouts of a victim or partner and any information about a victim or partner received from a victim or partner or an outside source;

(B) Any disclosures to a victim or partner, including any indication that the victim or partner was contacted by the provider.

(c) Any record of information described in section **(4)(b)** of these standards shall comply with OAR 137- 087-0015.

**Participant Access to Records.** Subject to denial of access pursuant to subsection (a) of this section, a provider shall provide the participant an opportunity to review information in the participant's record within a reasonable time of receiving a review request, and shall provide a copy of the records upon payment of the cost of duplication.

(a) A provider may deny or limit a participant's access to the provider's participant records:

(A) When the provider determines that disclosure of the record is reasonably likely to endanger the life or safety of the participant or another person;

(B) When the provider determines that the information was provided on the condition that the information not be re-disclosed; or

(C) When the provider determines that the information was compiled by the provider in reasonable anticipation of, or for use in, a civil, criminal, or administrative action or proceeding against the provider.

(b) If a document in the provider's records contains any information obtained from a source other than the participant, about a person other than the participant, the provider shall redact that information.

(c) Except as expressly provided in these standards, nothing in these standards is intended to create any expectation or right of privacy or confidentiality for any records, files or communications relating to potential participants or participants in a program. This provider may use and disclose information unless and to the extent prohibited or restricted by these standards, federal or state law, or other regulation. Use or disclosure of otherwise confidential medical, mental health and treatment records shall comply with applicable federal and state laws and regulations.

(d) The provider shall adopt policies that provide for the confidentiality of a participant's record, to the greatest extent practicable consistent with these standards.

# **ATTACHMENT- E**

## **BIP**

The Local Supervisory Authority (LSA) is responsible for maintaining a list of approved batterer intervention providers (“BIP” or “program”). In Marion County, the Marion County Sheriff is the Supervisory Authority and BIPs are overseen by the Sheriff’s Office – Parole and Probation Division. The list of approved providers will be supplied to all mandating authorities (MA) in Marion County, who may determine which provider(s) the batterers may use. For the purposes of this attachment, and Attachment F, the terms “BIP” and “program” include any providers and facilitators associated with that individual program. The LSA may coordinate and cooperate with the Marion County Domestic Violence Council’s (MCDVC) Program Review Subcommittee at any time for any purpose relating to the LSA’s functions described in this attachment.

### **A. Initial**

Any BIP seeking inclusion on the list as an approved provider shall direct its inquiry to the LSA. The applicant must submit a letter of intent, formally requesting an application packet. The LSA will provide the potential applicant with the following:

- (1) the Marion County Domestic Violence Protocols;
- (2) the Marion County Standards for Domestic Violence Programs,
- (3) SB 81 requirements;
- (4) SB 267 requirements; and
- (5) Any other relevant information.

The LSA will also provide the potential applicant with consultation and assistance in the initial application process. It is expected that the application process will take no more than three to four months.

### **B. Applying for initial approval:**

- (1) The interested program must submit an application to the LSA which must include the following:
  - a. Program overview
  - b. Business plan
  - c. Intake procedure
  - d. Assessment tools
  - e. Staff qualifications
  - f. Personnel policies
  - g. Confidentiality policy
  - h. Grievance policy
  - i. Attendance policy
  - j. Any other information requested by the LSA

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### **BIP**

- (2) The applicant must establish compliance with and the ability to maintain compliance with:
  - a. The Oregon Department of Justice administrative rules for batterer intervention programs;
  - b. the Marion County Domestic Violence Protocols;
  - c. the Marion County Standards for Domestic Violence Programs;
  - d. SB 81 requirements;
  - e. SB 267 requirements; and
  - f. Any other standards or requirements established by the LSA.
- (3) The compliance standards identified in Section B(2) above are hereinafter referred to as “the Standards.”
- (4) The applicant will be provided a specific date and time to meet with LSA representatives;
- (5) At this meeting, the applicant will present an overview of the program, elaborate on application details, and respond to questions.
- (6) The LSA may consider any recommendation made by the MCDVC Program Review Subcommittee when considering an application.
- (7) After review of all applicant information, the LSA shall determine whether to approve, deny, or conditionally approve the application to be placed on the LSA’s list of approved providers. LSA has complete discretion in making its determination.
- (8) If an application is conditionally approved, the applicant will be provided with an initial period of time, not to exceed six months, to obtain compliance with the Standards and achieve approval. The granting of any conditional approval will include timelines for compliance. An applicant may be allowed a second six-month period to achieve compliance if sufficient progress has been made in the initial period. There is no guarantee, however, that a second period for compliance will be provided. If at the end of a second provisional approval period an applicant has not achieved compliance with the standards, then the application shall be denied.
- (9) The application decision shall be communicated to the MCDVC and its Program Review Subcommittee.
- (10) An updated list of approved providers shall be provided to MAs whenever there is a change to the list.

# **ATTACHMENT- E**

## **BIP**

### **C. Program Performance**

- (1) Every approved BIP must maintain compliance with the standards identified in Section B(2) above and must also comply with the Supplemental Compliance Review Standards in Attachment F.
- (2) The LSA shall periodically review the performance of any approved BIP for compliance with the Standards and Attachment F. The LSA may consult with the MCDVC when performing its review. The MCDVC, its Program Review Subcommittee, and any MA may also conduct their own review of BIP performance and compliance.
- (3) The LSA is responsible for monitoring providers, addressing compliance issues, recommending periodic revisions to the standards, regularly communicating with the Council and for conducting reviews of programs, providers and facilitators.
- (4) The LSA may also conduct an evaluation of a BIP utilizing the Correctional Programs Checklist (CPC) as described in Attachment F. The CPC is an assessment tool that has been validated through meta-analysis and determines whether a corrections client program is compliant with principles of evidence based practices (EBP).
- (5) Every BIP shall cooperate with any program review and shall require its staff to cooperate with any program review. Every BIP shall respond to all inquiries in a timely manner and shall make records available to the LSA.
- (6) Each BIP shall maintain a collaborative working relationship with the LSA, MA and MCDVC. Every BIP shall comply with every program review or records request by the LSA, MCDVC or any MA.
- (7) The standards for BIPs are not static and each BIP is responsible for growing to meet the standards as they evolve over time. The Standards (including those in Exhibit F) will be updated as more effective program expectations are identified.
- (8) Each BIP shall communicate any self-initiated changes that the BIP pursues to the LSA.
- (9) A mandating authority is strongly encouraged to only refer batterers to providers that are on the LSA's list of approved providers (which may include programs provisionally working to achieve compliance).

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### **BIP**

- (10) The MCDVC Program Review Subcommittee shall include members from LSA and MA. Providers and facilitators shall not be a part of the MCDVC Program Review Subcommittee.
- (11) Failure of a BIP to comply with any of the requirements in this attachment may result in removal from the LSA's list of approved providers.
- (12) The LSA is responsible for:
  - a. Conducting a six-month review after a program's initial approval. The six-month review shall evaluate the program's adherence to these Standards.
  - b. Periodically review the performance of BIPs for compliance with the Standards.
  - c. Conducting a special review when issues arise about a program's or provider's adherence to these Standards. See Section D below.
  - d. Conducting formal review pursuant to 180.710.
  - e. Periodically updating and revising the provisions of Attachment F and communicating the changes to approved providers, the MCDVC, and MA's.
  - f. Communicating all review decisions in writing to programs, the MCDVC, and MA's.

#### **D. Periodic and Special Reviews**

The LSA may make any inquiry relating to program performance. The LSA intends to maintain an open dialogue and a collaborative relationship with programs in order to maintain effective program delivery. Towards that end, the LSA will make regular inquiries and engage in a dialogue with programs about all aspects of their services. The mere fact that an inquiry, verbal or otherwise, is made does not constitute a periodic or a special review.

##### Periodic Review.

The LSA shall conduct periodic reviews of Provider compliance with these Standards, including those in Attachment F. The LSA shall determine when it is appropriate to conduct a periodic review. When a periodic review is initiated, the LSA shall inform the program. The LSA may direct that the program provide any information and documentation to facilitate this review. The LSA may also conduct interviews of program personnel or others.

##### Special Review

When concerns arise about a Provider's compliance with these Standards, including those in Attachment F, the LSA may conduct a special review. Additionally, if a

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program makes a change in the manner that services are provided, (includes new providers, new management, curriculum changes, significant policy changes), the LSA may conduct a special review.

If the LSA initiates a special review, the LSA shall provide the program with a written description of the basis for the review and explain that the LSA has initiated a special review. The LSA may direct that the program provide any information and documentation to facilitate this review. The LSA may also conduct interviews of program personnel or others.

When the review is sufficiently advanced, the LSA shall provide the program with an initial review report and allow the program with an opportunity to respond in writing. In the LSA's discretion, the program may be asked to meet to discuss the initial review report.

### Periodic and Special

After receiving the program's response to the initial report, the LSA may seek additional information and may conduct any additional review. After considering the response, and after any additional review, the LSA shall make its decision and shall communicate its decision in writing to the program. The LSA has discretion to make any decision appropriate in order to maintain community safety and the most effective delivery of services to clients.

### LSA Decision:

The decision shall state the outcome of the review and shall include one of the following:

- (1) The concern is not substantiated;
- (2) The concern is substantiated, but does not have significant bearing on compliance. .
- (3) The concern is substantiated and one of the following is required:
  - Program must make corrective action as detailed in the LSA's written corrective action plan which will include timelines for completion.
  - Program is suspended for a period of time and compliance with corrective action plan is required (allowed to continue providing services to current clients but no new referrals during suspension).
  - Program is removed from LSA's list upon identified effective date (LSA discontinues referrals to the

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BIP). Current clients must be referred to other approved programs prior to effective date.

(4) Any other outcome the LSA deems appropriate.

(5) Within 90 days of receipt of the written copy of the LSA's decision, the BIP shall respond in writing to the LSA. The BIP shall either inform the LSA that is taking the corrective actions required by the LSA or that the BIP does not intend to take the corrective actions. The BIP shall provide a copy of its written response to the Council. Nothing stated in this section prevents the LSA from discontinuing referrals to the BIP during the 90-day response time outlined herein, or thereafter, if the program fails to take corrective action.

**Distribution of Review.** When a review is completed under this Attachment E, a copy of the review shall be distributed in compliance with OAR 137-087-0095.

### **E. Program, Provider and facilitator Changes**

Any changes made to a program are to be made in the following manner:

- (1) The program will provide the LSA with a description of the need and the basis for the change;
- (2) Clearly outline what the program change entails;
- (3) Conduct a formal pilot period of at least one month with a focused caseload utilizing the proposed change; this is intended to sort out program content and logistics relating to the changed component;
- (4) Compile and provide pilot data to the LSA;
- (5) Allow evaluation by LSA at end of the pilot period; and
- (6) Make any modifications as directed by LSA following its evaluation.

**Grievance Policies and Procedures.** Each program, provider and facilitator shall develop, implement, and fully inform Participants of grievance policies and procedures that provide for receipt of written grievances from Participants. The program, provider and facilitator shall document the receipt, investigation, and any action taken as to the written grievance.

- (1) Program or providers must have a formal written participant grievance policy and procedure, which will be provided to each Participant in writing at time of intake. A



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grievance may be filed with either the program, provider and facilitator or the LSA (or both) and Participant must be informed of this fact;

(2) All grievances filed with a program, provider and facilitator shall be provided to LSA within 14 days of filing. This documentation shall also include all program, provider and facilitator responses to grievant. Providing copies of grievances to LSA is a mandatory program requirement.

(3) **Complaint Procedure.** Any person, other than a participant, with a concern about a program's service delivery may file a written complaint with the program. The program shall respond to the complaint in writing within 14 days. In its written response, the program shall inform the person that if he or she is not satisfied with the program's response or believes that they are receiving negative repercussions based on the complaint the person may direct his or her complaint to the LSA or the appropriate MA.

## **ATTACHMENT- F**

### **Program Review and CPC**

Correctional Program Checklist (CPC) Review: The LSA shall perform an initial review using the CPC. The CPC review encompasses the program, provider and facilitator. Following the LSA's initial review, the program or provider may be required to participate in additional CPC assessments in conjunction with these standards as tools for evaluation. The LSA will then conduct a CPC compliance review of each endorsed program or provider 18 months after the initial endorsement (one year from the initial CPC) and periodically thereafter.

The LSA will provide an information packet to the program that includes, at a minimum, a self-assessment checklist detailing the areas that will be covered during the review process and material that the LSA will collect prior to the evaluation. Information and materials that the program must provide to the LSA include:

- (a) A description of how the program meets each numbered subsection of the standards;
- (b) An explanation for any standard not met and a plan for meeting the standard;
- (c) Statistics, including demographics, such as age, gender, race/ethnicity, the number of referrals, charges against the defendant, relationship of offender to the victim, the number of offenders who met the minimum requirements, the number of offenders who failed to report, the number of repeat participants;
- (d) Samples of materials and forms used by the program; and
- (e) Supplemental material, including research, presentations, special projects, proposals that would assist the LSA in evaluating the Program or provider's compliance with the Marion County Standards.

Following completion of the review, the LSA is responsible for compiling the program or provider report. This initial report will be provided to the assessed program for their review. Once the assessed provider has reviewed the initial report, they will provide a response to the LSA within 30-day of receiving the report. The LSA will issue a final report after receiving the assessed Program or provider's response.

A summary of the program review will be provided to the Program Review Subcommittee.

**Follow-up Meetings:** Follow-up meetings are regularly scheduled structured meetings between the LSA and an approved program, which occur between CPC reviews. The purpose of Follow-up Meetings is to identify areas of concern in regard to specific CPC Domains that have scores below Satisfactory. The goal of the Follow-up Meeting is for setting **program, provider and facilitator** goals, with action steps accompanied by designated time frames, to increase the effectiveness of a **program, provider and facilitator** as measured by the CPC scoring criteria.

Follow-up meetings are not mandatory for Program or providers. They may be utilized by the LSA to provide a **program** with an extra avenue for obtaining consultation and technical assistance for increasing CPC scores. It is suggested that Follow-up Meetings, whether for residential or outpatient settings, be scheduled as follows.

# ATTACHMENT- F

## Program Review and CPC

### FREQUENCY OF CPC Program Review CHECKLIST

<u>CPC Overall Scoring</u>	<u>Follow-up Meetings</u>	<u>Program CPC</u>
1. Very Satisfactory	None	Biennial
<p><b>*If score in either domain of Offender Assessment (OA) or Treatment/Intervention (T/I) is “Satisfactory Needs Improvement” or lower, a CPC review of only these two domains is to occur within six months of latest CPC, with a full CPC to occur biennially. If score for OA or T/I is Unsatisfactory, referrals to program may be suspended, at a minimum, until program attains no less than Satisfactory Needs Improvement in both areas.</b></p>		
2. Satisfactory	Every 2-3 months	Biennial*
<p><b>*If score in either domain of OA or T/I is “Satisfactory Needs Improvement” or lower, a CPC review of only these two domains is to occur within six months of latest CPC, with a full CPC to occur biennially. If score for OA or T/I is “Unsatisfactory,” referrals to program may be suspended, at a minimum, until program attains no less than “Satisfactory Needs Improvement” in both areas.</b></p>		
3. Satisfactory Needs Improvement	Every 4-6 weeks	Annually*
<p><b>*If score in either domain of OA or T/I is “Satisfactory Needs Improvement” or below a CPC review of only these two domains is to occur within six months of latest CPC, with a full CPC to occur once yearly. However, if score for OA or T/I is Unsatisfactory, referrals to program will be suspended, at a minimum, until program attains no less than “Satisfactory Needs Improvement” in both areas.</b></p>		
4. Unsatisfactory	Once each month	
<p><b><i>*If a program, provider and facilitator has an overall score of ‘Unsatisfactory’ referrals will be suspended for a minimum of six months and until a program, provider and facilitator attains an overall CPC score of Satisfactory.</i></b></p>		

The final CPC score and report will reflect areas of strength and areas that need improvement. **The two areas of significant importance are the domains of Offender Assessment and Treatment/Intervention. Thus, more weight in regard to program expectations will be placed on the CPC scores in these two domains.**