

Ministry of the Attorney General

Victim and Vulnerable Persons Division Ontario Victim Services

Ministère du Procureur général

Division des services aux victimes et aux personnes vulnérables Services aux victimes Ontario

Victim Crisis Assistance Ontario (VCAO)

Program Standards

September 1, 2017

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Murdered Indigenous Women and Girls					
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Victim Crisis Assistance Ontario (VCAO) Program Standards

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1 Introduction

1.1 Preface

The Victim Crisis Assistance Ontario (VCAO) Program Standards (the Standards) apply to all VCAO service providers that receive funding from the Ministry of the Attorney General's Ontario Victim Services.

The purpose of the Standards is to outline the ministry's expectations of VCAO service providers on the ministry's expectations and promote consistency of service delivery across the province.

The Program Standards reflect the philosophy that each individual responds differently to a potentially traumatic event. Early assistance and support, whether in-person or by telephone, may assist individuals to cope with the aftermath of crime or tragic circumstance in the longer-term by relieving distress, supporting personal autonomy, and restoring self-reliance.

VCAO Program Standards may be revised at any time during a funding year and revisions will be provided to service providers. The ministry will monitor service provider compliance with these Standards along with the contractual agreement providers have signed with the ministry. Compliance with the Standards is required by the contractual agreement and failure to comply with the Standards may result in a loss of funding. In the case of a conflict between these Standards and a provider's contract with the ministry for delivery of the Program, the contract shall prevail.

1.2 Program Overview

The Victim Crisis Assistance Ontario Program provides support for individuals affected by crime and tragic circumstance that is client-centered and culturally-competent. The menu of services offered by the Program includes:

- 24/7 Assistance when requested by police or an agency with which the program has a protocol;
- practical assistance;
- needs assessment;
- referrals to relevant community and government support services;
- support to assess eligibility and apply to the Victim Quick Response Program (VQRP);
- safety planning;
- provision of information;
- enhanced support;
- community support sessions; and
- client follow-up.

Which services each individual receives will depend on their individual needs. Service providers will respect the right of every client to make his/her own decisions.

Since the majority of the funding for the VCAO Program comes from the Victims' Justice Fund, victims of crime shall take priority in the provision of services, and a service provider shall implement a triage system to manage workload.

1.3 Program Objectives

The Program objectives are:

- To provide early assistance and support, information and referrals to individuals affected by crime and tragic circumstances, both in-person or remotely;
- To reduce the likelihood of further harm by helping a client identify and address safety issues; and
- To help clients identify their needs and concerns, and develop strategies to address them.

1.4 Program Eligibility

The Program serves individuals affected by crime and tragic circumstances. Children under 16 years of age require consent/permission from a parent or guardian.

1.5 Program Principles

The provision of services under the Program is guided by the following principles:

- In accordance with the Victims' Bill of Rights, 1995, victims of crime should be treated with courtesy, compassion, and respect for their personal dignity and privacy.
- The Program is committed to empowering clients to help themselves. It recognizes that the client is the decision-maker and will be supported to make informed decisions.

1.6 Program Definitions

- a) Attempt to commit murder: attempting, by any means, to cause death or bodily harm that is likely to cause death.
- b) Child abuse: inflicting or threatening to inflict physical or sexual harm on a child.
- c) Client: A victim of crime or tragic circumstance who has received at least one of the following services: information about common reactions, victimization and its impacts; a needs assessment resulting in referrals, or safety planning.

- d) Crime: An offence under the Criminal Code of Canada.
- e) **Criminal harassment**: engaging in conduct that causes another person to fear for their safety or the safety of others. This includes a) repeatedly following the person or anyone known to them from place to place; (b) repeatedly communicating with, either directly or indirectly, the person or anyone known to them; (c) besetting or watching the dwelling-house, or place where the other person, or anyone known to them, resides, works, carries on business or happens to be; or (d) engaging in threatening conduct directed at the other person or any member of their family.
- f) **Crisis**: An individual's perception or experience of an event or situation as a difficulty that exceeds the person's current resources and coping mechanisms.
 - Crisis intervention includes: de-escalating a situation, establishing physical and emotional safety, reinforcing a victim's ability to make choices regarding possible course of action, empathy, information about common reactions, victimization and its impact, identifying and addressing the client's needs, linking clients with community resources and referrals. It can be provided in person or over the phone.
- g) Domestic violence: Domestic violence is any use of physical or sexual force, actual or threatened, in an intimate relationship. Intimate relationships include those between opposite-sex and same-sex partners. These relationships vary in duration and in legal formality, and include current and former dating, common-law and married couples.
 - These crimes are often committed in a context where there is a pattern of assaultive and controlling behaviour. This violence may include physical assault, and emotional, psychological and sexual abuse. It can include threats to harm children, other family members, pets and property. The violence may be used to intimidate, humiliate or frighten victims, or to make them powerless. Domestic violence may include a single act of abuse. It may also include a number of acts which may appear minor or trivial when viewed in isolation, but collectively form a pattern that amounts to abuse. Definition is adapted from the Domestic Violence Court Program Guidelines.
- h) **Elder abuse**: A single or repeated act, or lack of appropriate action, occurring in any relationship where there is an expectation of trust that causes harm or distress to an older person. Elder abuse can include, but is not limited to, physical abuse, psychological abuse, sexual abuse, financial abuse and neglect.

- i) **Hate crime**: a criminal offence committed against a person or property which is motivated or perceived to be motivated, in whole or in part, by hate/bias or prejudice based on race, national or ethnic origin, language, colour, religion, sex, age, mental or physical disability, sexual orientation, or any other similar factor.
- j) Homicide: causing the death of a human being, either directly or indirectly, a) by means of an unlawful act; b) by criminal negligence (not including motor vehicle accidents); c) by causing that human being, by threats or fear of violence or by deception, to do anything that causes his death; or d) by wilfully frightening that human being, in the case of a child or sick person. Culpable homicide includes murder, manslaughter and infanticide.
- k) Human trafficking: recruiting, transporting, transferring, receiving, holding, concealing or harbouring a person, or exercising control, direction or influence over the movements of a person, for the purpose of exploiting them or facilitating their exploitation. Exploitation includes forced labour and sexual exploitation.
- I) Immediate family member: A biological, adoptive, foster or step-parent; grandparent; biological, adoptive, foster or step-child; grandchild; biological, adoptive, foster or step-sibling; legal guardian; or married or common-law spouse.
- m) Ministry: The Ministry of the Attorney General (MAG).
- n) **Serious assault**: includes the following criminal offences: assault/threaten with a weapon, assault causing bodily harm, aggravated assault, criminal negligence causing bodily harm, kidnapping/abduction, forcible confinement, discharge of a firearm (where the individual is at substantial risk of harm), and failure to provide the necessities of life.
- o) **Sexual assault**: Any sexual contact not agreed to, including: unwanted sexual touch or sex; the use of force, threats or intimidation to make an individual do something sexual that they do not want to do; and/or sexual activity that an individual is unable to agree to because they are, for example, unconscious or intoxicated.
- p) **Service plan**: Written list of referrals to relevant community and government support services provided to clients based on the result of a needs assessment, including a name and contact information for each referral.
- q) **Staff**: A paid employee of a VCAO service provider who supports the delivery of the VCAO Program.

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- r) **Tragic circumstances**: An occurrence that is not caused or has not yet been determined to be caused by a crime. Examples include suicides, fires and motor vehicle collisions.
- s) **VCAO Program**: The provision of services to individuals affected by crime and tragic circumstance funded by the Ministry of the Attorney General in accordance with these Standards and the contractual agreement (The Program).
- t) **VCAO service provider**: An entity that is delivering the VCAO Program under a contractual agreement with the ministry.
- u) **Victim**: For the purposes of the VCAO Program, means person directly or indirectly affected by a crime or tragic circumstance.
- v) **Volunteer**: An unpaid person who has received the training required by these Standards and who donates time to provide VCAO services to victims of crime and tragic circumstances.
- w) **VQRP**: The Victim Quick Response Program of the Ministry of the Attorney General which provides timely financial assistance to eligible victims of violent crime who have no other financial means for emergency expenses, counselling, transportation and funeral expenses for homicide victims.
- x) **Vulnerable client**: An individual who, based on an assessment, may face challenges in accessing services to which he/she was referred. See section 3.3 for a list of vulnerability factors.

2 Requests for Assistance and Support

2.1 Requests from Police

The VCAO service provider must have a system in place (e.g. dedicated phone line, answering service) to receive referrals from police 24 hours a day, seven days a week.

The service provider also has the discretion to establish local protocols to receive requests for assistance and support from other service providers such as hospitals, the Red Cross, emergency medical services, Sexual Assault Centres, the Victim/Witness Assistance Program or another VCAO service provider.

Staff and/or volunteers will make contact with the referral source within 30 minutes of a request for assistance and support being made.

2.2 Requests from the Public

The service provider must have a publicly advertised telephone line to receive requests for services from individuals affected by crime or a tragic circumstance (self-referrals) or other service providers.

The service provider will have policies and procedures in place to support clients in crisis who contact the service provider during office hours. Services to self-referred clients will be provided by telephone or by appointment only. Appointments will ideally take place at a service provider's office; however an alternate, safe location may be used when the client would not otherwise be able to access services. The service provider will call 911 if the client is suicidal or in immediate danger.

Calls to the VCAO service provider's publicly-advertised phone line must be returned within one business day. A recording shall direct victims to call 911 if they are in immediate danger, or to a Distress Centre/crisis line, where available, if they are in crisis.

Provided all requirements in 2.1 and 2.2 are met, the same method of contact can be used to receive requests for early intervention and all other requests for service.

2.3 Consent

Service providers are to contact clients only when there is a request for service from police, another victim service provider or the client.

3 Program Activities

3.1 24/7 Assistance

Service provider staff and volunteers will provide assistance in-person at the request of the police or at the request of another agency with which the service provider has a protocol. It may include but is not limited to the following: de-escalating a situation, establishing physical and emotional safety, reinforcing a victim's ability to make choices regarding possible courses of action, empathy, information about common reactions, victimization and its impact, identifying and addressing the victim's needs, linking victims with community resources and referrals. Service providers also have the discretion to receive requests for in-person assistance from other service providers as per local protocols.

Service providers must have policies in place to address any safety concerns when support is provided at a client's home.

As a best practice, the service provider should dispatch a team of two persons trained to provide crisis intervention (i.e. staff and/or volunteers) to each incident.

Ideally, in cases of homicide, sudden death, death notification, sexual assault or human trafficking where a child is the direct victim, the response team should include a staff person.

In situations where a child is, or is suspected to be at risk, staff/volunteers must notify the Children's Aid Society as per the duty to report a child in need of protection in accordance with the *Child and Family Services Act*.

3.2 Practical Assistance

Service provider staff/volunteers shall provide practical assistance which may include but is not limited to:

- Addressing immediate safety concerns;
- Making phone calls;
- Assisting with obtaining documentation;
- Obtaining essentials (e.g.: personal care items, clothing, food, etc.);
- Providing transportation to a safe location or to other services;
- Arranging for emergency accommodation;
- Assisting with securing their dwelling;
- Providing accompaniment to other emergency services;
- Assisting with the identification of a body; and
- Assisting clients in securing a crime-scene cleanup service.

3.3 Needs Assessment

Service provider staff/volunteers will help individuals identify their needs, through an iterative process that may take place over multiple conversations.

Needs assessments may include the following dimensions:

- Safety;
- Housing;
- Income supports and other financial assistance;
- Counselling:
- Medical care:
- Peer support;
- Mental health and addiction services;
- Legal services (family law, immigration, criminal, etc.);
- Child care; and
- Employment supports.

Needs will be client driven, and prioritized based on the individual's emotional state. For example, an initial assessment may focus on safety and helping an individual process the impact of the crime, and helping them identify sources of support around them.

Service providers will also screen for vulnerability. Vulnerability factors help identify which clients *may* require enhanced support.

Vulnerability factors demonstrated to be linked to long-term difficulties such as depression, and alcohol/substance abuse and dependence include but are not limited to:

- Demographic factors (e.g. lower income, disability, unemployment, etc.);
- Suicidality (e.g. likelihood of committing suicide and/or self-harm);
- Trauma characteristics (e.g. the victim's perception of trauma severity, trauma intensity, trauma duration, etc.);
- Past trauma exposure (e.g. history of childhood trauma, previous exposure to similar trauma, etc.);
- Immediate reactions (e.g. high degree of physical stress reaction, dissociative symptoms, etc.);
- Social factors (e.g. lack of social support, history of family instability, language barriers, cultural barriers, etc.);
- Mental health history and history of drug or alcohol abuse;
- Environmental factors (e.g. legal difficulties, financial strain, negative media response to the event, etc.); and
- Other individual differences (e.g. personality traits, feelings of insecurity, etc.).

The above is a general overview of the range of vulnerability factors that a client may mention or that a service provider may observe. Balanced judgement informed by experience that considers the specific factors involved, the importance of each indicator and the uniqueness of each client is required to assess vulnerability, and determine the level of enhanced support that is required. A service plan will be provided be provided to vulnerable clients.

3.4 Referrals to Community and Government Support Services

Based on the needs assessment, clients will be provided with referrals to relevant community and government support services, including a name and contact information for each referral, in writing.

In order to refer clients to appropriate services, the staff/volunteers must:

- have extensive knowledge of the services available in each community served;
- maintain an up to date list of resources for each community served;
- be aware of the eligibility criteria for the services;
- have knowledge of the accessibility capabilities of these services and supports;
 and

Since the VCAO program is designed to assist individuals affected by crime or tragic circumstances to function independently by helping them identify strategies for addressing their concerns and needs, the referral process for most clients will involve service provider staff/volunteers providing the client with the service contact information. In a small proportion of cases, where the client requires enhanced support (vulnerable clients), service provider staff and volunteers shall assist the client in accessing services to which he/she was referred through the provision of enhanced support (e.g. by booking appointments on the client's behalf), with the client's consent.

3.5 Support to Assess Eligibility and Apply to VQRP

The Victim Quick Response Program (VQRP) provides assistance to eligible victims (including immediate family members and witnesses) of attempted murder, child abuse, criminal harassment, domestic violence, hate crimes, homicide, human trafficking, serious assault and sexual assault who have no other means to cover the cost of expenses, and where no publicly funded services exist, for counselling, safety, practical assistance, travel, restoration, and funeral.

In accordance with the current version of the VQRP Standards, the service provider will perform the following functions in respect of all VQRP applications:

Application

- Meet with and assess the victim's need and eligibility for funding and confirm that all eligibility criteria have been met;
- Canvass whether the applicant can safely receive mail at her/his current address.
 If the applicant is unable to safely receive mail at her/his current address, the SDO must indicate this on the application, and also ensure that the applicant is notified of Program approvals;
- Complete all sections of the application on the VQRP portal;
- Ensure that the Applicant Agreement is signed by the applicant, if over the age of 16, or by a person authorized to sign on the recipient's behalf. If the applicant is under the age of 16, proof of authority to sign must be provided by the person so authorized. If there is no authorized person available to sign on behalf of an applicant, the Program should be consulted. Note that if an applicant is applying for multiple recipients, the applicant must sign a unique form for each recipient;
- Retain the original signed application and accompanying documentation on file for a period of 7 years;

Emergency Expenses

- Obtain a minimum of three quotes at least once per year from service providers (unless there are fewer than three service providers in the jurisdiction) who provide emergency and funeral services in order to ensure that the Program is receiving good value for money;
- Ensure that conflict of interest guidelines are in place that govern the relationships between the SDO and service providers;

Submission of Receipts

Submit itemized receipts that list each item for which funding is being sought.
 Invoices for completed work do not have to accompany applications and can be provided to the Program as soon as they become available. Pre-paid cards are permitted for gas and food.

The service provider will consult the current VQRP Standards for additional information. In the case of conflict between these Standards and the current VQRP Standards, the current VQRP Standards shall prevail.

3.6 Safety Planning

3.6.1 Eligibility

All victims of crime are eligible for assistance with a safety plan.

The purpose of safety planning is to empower individuals affected by crime to become aware of and, take measures to, enhance their level of safety.

This Program activity is comprised of:

- The creation of a personal safety plan, where required; and
- Follow-up.

Safety planning services are to be provided by service provider staff. Volunteers that respond to a call from police for assistance may, in collaboration with the police or service provider staff, provide practical assistance to prevent immediate re-victimization as per section 3.2.

3.6.2 Coordination

In communities where there are dedicated services to assist individuals affected by crime in the completion of a safety plan (such as a shelter), service provider staff will develop a protocol with the purpose of clarifying the roles and responsibilities of each organization in order to reduce the duplication of resources in the community and the likelihood of an eligible client falling through the cracks. The protocol will include the process to be followed for determining which organization will take the lead on safety planning in various circumstances. Additional issues to be addressed in the protocol are outlined in section 4.6.

Before beginning the creation of a safety plan, service provider staff must ask the client if he/she has recently created a safety plan, and if so whether it still meets his/her needs.

3.6.3 Development of a Safety Plan

Where required, the service provider staff will support the victim in the creation or revision of a personal safety plan which will involve the client considering all aspects of his/her environment and daily activity. The plan will include strategies to reduce the risk of further harm.

Because all situations are unique, there is no one safety plan that can meet the needs of all clients (for example a victim of domestic violence versus a victim of elder abuse). There are, however, some core characteristics that all good safety plans share. A safety plan should:

- Seek to reduce or eliminate the range of risks the client faces, including but not limited to physical violence;
- Include strategies for staying in and/or leaving the relationship (if applicable);
- Have short- and/or long-term time frames;
- Be modified as a result of changed circumstances.

The particulars of the plan will vary depending on the client's unique situation – whether he/she is living with or separated from the abuser, whether there are court orders in place, whether or not he/she has children, financial resources, transportation, housing options and so on. They also include strategies to maintain basic human needs such as income, housing, health care, food, child care, and education for any children. The plan will be affected by resources that are available to the individual.

What should be included in a safety plan?

- How to get away if there is an emergency;
- How to get help if leaving is not an option;
- Where to go if the client leaves;
- How to be safe at a new place;
- How to keep in touch with people who will help;
- How to keep the children safe (if applicable);
- How to keep personal property (e.g. important documents, clothes, jewellery, family keepsakes, etc.) safe;
- How to stay safe in public and at work;
- How to be safe in using social media;
- Anything else that the client (and children if applicable) need to feel they have a viable safety plan.

As part of the safety planning conversation, service provider staff will convey to the client that the safety plan is not static but is intended to evolve as the circumstances change. Staff will also provide an orientation to the client on the dynamic risk factors that may require him or her to revise the safety plan.

The client is the owner of the plan, and once it is created, the onus is on the client (not service provider staff) to update it as his/her circumstances change. If a vulnerable client requires assistance in updating the safety plan, service provider staff shall provide follow-up and assistance.

3.6.4 Risk Screening and Role of Service Provider Staff

The role of service provider staff is to assist a client to reduce the likelihood of being revictimized through the development of a safety plan and to help a client understand her/his level of risk.

Staff (and volunteers) are not responsible for a client's safety; public safety is the responsibility of the police.

3.7 Provision of Information

Service providers will provide clients with basic information relevant to their needs and circumstances. Subjects include but are not limited to the following:

- victims' rights;
- general information on the criminal justice system (where the individual is not receiving support from V/WAP);
- general information on the family court system (where the individual is not receiving support from the Family Court Support Worker Program);
- transitional and long-term housing;
- income supports;
- compensation programs;
- obtaining health care coverage; and
- immigration and settlement services.

The client's needs (i.e. language barrier, literacy level) will be taken into account when considering the best format for conveying the information i.e. verbally or through printed material such as brochures.

3.8 Enhanced Support

Service provider staff/volunteers will occasionally be required to provide enhanced support to clients to assist them in accessing available services and resources, as outlined in their Service Plan. Enhanced support will only be provided to vulnerable clients and only with consent.

Vulnerable clients will receive enhanced support to access services to which they were referred, which may consist of making telephone calls, assisting the victim to fill out forms (such as applications to the Criminal Injuries Compensation Board), sending emails or providing letters to assist a client in accessing services. In order to ensure access to services where it would not otherwise be possible, i.e. where there is no other service or support person available to do so, the service provider may provide accompaniment to the client's appointments or meetings for health care, housing, police or other services. As a best practice, accompaniment is to be provided by service provider volunteers.

3.9 Community Support Sessions

At the request of a community organization, school, police service, or religious institution, service provider staff/volunteers shall deliver a community support session following an incident for the purpose of raising awareness about common reactions to victimization, coping strategies and available support services for individuals affected by crime or a large-scale disaster. The session shall not take the form of a "debrief" or "talking through" the event.

3.10 Client Follow-up

Service provider staff/volunteers will provide at least one follow-up contact with a victim of crime or a potentially vulnerable victim of a tragic circumstance following the first interaction.

The purpose of the conversation is to reassess the client's wellbeing. If the client indicates that his or her needs have been met, service provider staff/volunteer shall initiate close-out directing the individual to contact the service provider if he or she requires additional assistance at any time.

For safety planning clients, the conversation is also intended to verify that the safety plan is meeting the individual's needs and address any concerns the individual may have.

For clients with unmet needs, a further assessment may be required resulting in changes or additions to referrals provided, or enhanced support to access services to which they were referred (vulnerable clients). Case close-out will occur once the individual has indicated that his or her needs have been addressed or service provider staff/volunteers have exhausted all options within the mandate of the VCAO Program.

4 Operational Information

4.1 Requirement for a Vulnerable Sector Check

All individuals who are offered employment or a volunteer position with the VCAO service provider will be required to undergo a Vulnerable Sector Check before the offer of a position can be confirmed. If the check reveals prior conviction(s), the person must meet with the employer to discuss the conviction(s). The type of offence, in relation to the job, will be a significant factor in determining whether or not the person will be offered the position. Other factors to consider include the length of time since the offence, any efforts undertaken towards rehabilitation and references obtained from past employers.

The service provider will have a written policy that outlines the service provider's position should the check reveal prior conviction(s).

Vulnerable Sector Checks are to be done at a minimum every three years.

4.2 Complaints Process

The service provider must also have a documented complaints process in place for clients and members of the public to provide feedback regarding the quality of service received including complaints related to alleged breaches of confidentiality. The process shall be publicized on a service provider's website or brochure.

4.3 Safety

The service provider must take reasonable measures to ensure the physical and psychological safety of its staff and volunteers while delivering the VCAO Program.

Given the stresses involved in carrying out the work of the VCAO Program, service providers must provide support to staff and volunteers to assist them in developing positive coping and self-care techniques/strategies for addressing vicarious trauma, burnout and compassion fatigue. Service providers will also provide debriefing with staff and/or volunteers after serious incidents as needed.

4.4 Documenting Service Provision

Service provider staff/volunteers are required to document service provision and communication to clients through the use of a case management database. The records must be client-specific, secure, and current.

4.5 Ministry Reporting Requirements

The service provider must comply with the ministry's reporting requirements as set out in the contract.

4.6 Coordination and Collaboration with Other Service Providers

The service provider shall work collaboratively with the police and other service providers to allow for a coordinated, community-specific response to clients. At a minimum, the service provider will have protocols in place with the following service providers in each community served:

- Children's Aid Society;
- Victim/Witness Assistance Program; and
- Domestic violence shelters.

The protocols will address how the service providers will work together including:

- · Definition of roles and responsibilities;
- · Referral procedures;
- · Communication contacts and processes; and
- Confidentiality policies.

4.7 Staff Qualifications

VCAO service providers will have written documentation outlining the education and experience required for employment in support of the VCAO Program. While recognizing that each employer will have its own individual hiring criteria and staff training and development plans, it is expected that the following will be either conditions of employment or be addressed as a part of a new employee's orientation and training. At the time of hire, or at the end of any probationary period, the employee will normally have:

- A university degree or college diploma in a relevant human services field, e.g., social work, criminology, psychology, social services, or an equivalent combination of experience and education, and
- Knowledge regarding, but not limited to: domestic violence, childhood physical and sexual abuse and sexual assault.

4.8 Volunteer Management

The service provider will have a written policy in place governing the management of volunteers. The policy will outline the processes for volunteer recruitment and placement, initial and ongoing training and supervision (including opportunities for advancement, debriefing and disciplinary measures).

The policy will also include information on the reimbursement of volunteer expenses.

4.9 Training

At a minimum, all staff and volunteers must complete knowledge and skill-based training in the following foundational areas:

- 1. Trauma and Crisis (including trauma-informed care and signs of acute trauma);
- 2. Crisis Intervention (including common reactions to victimization, culturally competent and inclusive service, as well as active listening, verbal and non-verbal communication);
- Needs and Vulnerability Factors (including vulnerability factors and their impact on an individual's recovery, as well as goals, principles and components of service plans);
- 4. Safety Planning (including risk factors and the dynamic nature of risks);
- 5. Confidentiality (including importance, principles and components of privacy and confidentiality);
- 6. Self-care (including vicarious trauma); and
- 7. Professionalism (including professional conduct, and ethical services).

The skill-based training must be completed in-person, in a classroom setting.

In addition, staff and volunteer team leads are required to complete suicide prevention training.

Staff and volunteers must complete a minimum of two professional development sessions per year to strengthen and expand their knowledge and skills.

4.10 Confidentiality

The service provider must have its own policy and clear procedures in place in order to ensure its contractual obligations with respect to confidentiality are met.

4.11 Code of Conduct

The service provider will have a code of conduct in place that must be followed by all staff and volunteers as required by the contract.

4.11.1 Anti-harassment and Anti-discrimination Policy

In order to promote service and a work environment that is free from discrimination and harassment, the service provider will have an anti-harassment and anti-discrimination policy in place that must be followed by staff and volunteers.

4.12 Accessibility

The service provider must have an accessibility policy in place and ensure that services provided are barrier-free and that accommodations are made to suit the needs of individuals requiring accessible customer service accommodations, in order to meet contractual obligations.

4.13 Diversity

The service provider must have a policy in place to meet the needs of diverse communities and clients. It will endeavor to ensure the organization, including the Board of Directors, staff and volunteers, reflects the diversity of the communities served and works towards identifying and reducing barriers to improve access to services. The service provider must maintain a list of culturally specific services in the communities served in order to provide appropriate referrals to members of diverse communities including Francophone and Indigenous clients.

As a best practice, when language is a barrier the service provider will dispatch volunteers who speak the mother tongue of the client or use qualified interpreters.

4.14 French Language Services

Service providers must provide an active offer of French Language Services where required by the Agreement.