



Treatment Program Certification Manual

IN NEVADA

Table of Contents

1.1 Violence can never be condoned	1
1.2 Respect the plight, rights, and individual differences of the victim	2
1.3 Respect the individual differences and rights of the perpetrator	4
1.4 Design and implement appropriate treatment programs.....	6
1.5 Cooperate and communicate with interrelated agencies.....	10
1.6 Contribute to public awareness.....	15
1.7 Maintain professional standards	17
1.8 Demonstrate ongoing evaluation of the program incorporating new information.....	22
1.9 Staff composition to reflect community cultural/linguistic diversity	27
4.1 Meet the ethical standards of a professional organization.....	29
4.2.1 Violence-free	34
4.2.2 Free of convictions demonstrating unfitness to provide services.....	36
4.2.3 Do not perpetuate sexism, racism, or victim blaming	38
4.2.4 Do not abuse alcohol or drugs.....	42
4.2.5 Immediately report threats or acts of violence	44
4.2.6 Immediately report any suspected child abuse or neglect	48
4.2.7 Maintain open communication with appropriate agencies	50
4.2.8 Warn victims if belief exists that they are at risk	54
4.4 Disclosure only pursuant to confidentiality laws	56
4.5 Participate in coordinated community response	57
4.6 Consider information on the victim's counseling progress.....	58
4.7 Provide a response plan for clients in crisis	59
4.8 Provide admission to therapy within 2 weeks	60
4.9 Report noncompliance or nonattendance.....	61
4.10 Determine indigence referrals & sliding fee scale	63
4.11 Procedures for emergency calls and walk-ins	65
5.1 Master's or Ph.D. and license	69
5.2 Unlicensed person meets supervision and training standards	70
5.3 Sixty hours of formal training	75
5.4 Sixty hours of in-service training	76
6.1 Individual/ Group therapy and group size	77
6.2 Address alcohol or drug abuse at the onset of treatment.....	79
6.3 Inappropriate treatment blames/endangers victim	80
6.4 Define when to use couples sessions	85
7.1 Complete intake evaluation on each perpetrator	86
7.1.1 Obtain profile of violent behavior	88

7.1.2 Mental status examination	91
7.1.3 Assess the client's potential for harm to self and others	92
7.1.4 Medical history	93
7.1.5 Substance abuse and its impact	94
7.1.6 Social/psychological and cultural history	95
7.1.7 Write a 'Treatment Plan'	98
7.1.8 Write a 'Client Contract'	99
7.1.9 Written agreement not to violate shelter safety	101
7.2 Length of treatment is six (6) months	103
7.3.1 Provide a safety plan, if necessary	104
7.3.2 Implement 'Treatment Plan'	105
7.3.4 Follow ethical treatment standards	106
7.4.1 Agreement for nonviolent behavior	111
7.4.2 Addresses patterns and cycles of violence	112
7.4.3 Addresses intergenerational patterns/models of violence	113
7.4.4 Presents/instructs on time-out behavior	114
7.4.5 Addresses myths regarding provocation	115
7.4.6 Addresses development & use of 'Control Plan'	116
7.4.7 Identify and address tactics of power and control	117
7.4.8 Instructs in methods of controlling aggression	118
7.4.9 Instructs in methods of stress management	119
7.4.10 Addresses sex role socialization	120
7.4.11 Instructs in methods of conflict resolution	121
7.4.12 Instructs on effective communication skills	122
7.4.13 Addresses responsibility for one's acts of violence	123
7.4.14 Addresses attitudes	124
7.4.15 Addresses cultural, societal, and patriarchal basis for violence	125
7.4.16 Defines substance abuse and its impact on the abuse and family	126
7.4.17 Addresses parenting issues and skills as related to domestic violence	127
7.4.18 Presents skills for gaining intimacy	128
7.4.19 Addresses clients' guilt and shame issues	129
7.4.20 Addresses power sharing and decision-making in relationships	130
7.4.21 Presents nonviolence & equality models for relationships	131
7.4.22 Identify danger signs of relapse	132
8.1 Therapists' judgments for discharges & description of successful treatment	133
8.2 Describes an administrative discharge	135
8.3 Describes termination requirements	137
8.4 Describes readmission criteria	139
8.5 At termination, the client still exhibits behavioral signs of violence	140

8.5.1 Contact victim	141
8.5.2 Contact court official	142
8.5.3 Ask the client to continue in therapy.....	143
8.6.1 Contact victim at discharge	144
8.6.2 Discharge packet	145

Copyright — The Write Direction Inc.

1.1 Violence can never be condoned

228.175(1)(b)

position paper

At [ORGANIZATION], we are committed to creating a safe and supportive environment for individuals seeking domestic violence treatment. Our position ensures our unwavering stance against violence in all its forms, [REDACTED]

We do not condone violence

Violence is a destructive force that inflicts physical, emotional, and psychological harm on victims. It breeds fear, destroys trust, and perpetuates a cycle of abuse. Domestic violence, in particular, targets a person's most intimate space, making the impact even more devastating.

At [ORGANIZATION], we work with individuals who have violent tendencies and teach them [REDACTED]

[ORGANIZATION]'s commitment to non-violence

In our domestic violence treatment program, we prioritize non-violence as a core principle. It creates a safe space where participants are able to explore the triggers and motivations behind their behavior without fear of retaliation or judgment.

Our curriculum focuses on:

[REDACTED]

Domestic violence is a complex issue, but by not condoning violence, we stand firmly against all forms of abuse. Through education, support, and accountability, we provide participants with information and resources to build healthy relationships and break the cycle of violence.

By not condoning violence, we comply with the requirement set forth by the Nevada Revised Statute, NRS 228.175(1)(b), which states that domestic violence treatment programs do detail the conditions for the offenders to commit to be free of all forms of violence. By emphasizing that we reject violence and provide tools for non-violent communication, we ensure our program aligns with the Nevada Legislature's mandate.

1.2 Respect the plight, rights, and individual differences of the victim

228.180(1-3)

[position paper](#)

At [ORGANIZATION], we prioritize the safety and well-being of victims in all aspects of our domestic violence treatment program. We recognize the unique experiences and challenges faced by each victim, and our approach reflects a deep respect for their plight, rights, and individual differences.

Our commitment aligns with NRS 228.180 (1-3), which emphasizes the importance of upholding the rights of domestic violence victims.

At [ORGANIZATION], we are committed to ensuring that all program participants understand and respect these rights, including but not limited to:

Respecting the plight of victims

Victims of domestic violence have endured trauma and emotional distress. At [ORGANIZATION], we acknowledge the [REDACTED]

Upholding victim rights

1. The right to safety and freedom from abuse

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

2. The right to confidentiality

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

3. The right to legal representation

[REDACTED]

[REDACTED]

4. The right to access support services

We empower victims by providing them

By upholding these rights, [ORGANIZATION] domestic violence treatment program provides victims with tools to make informed choices about their safety and well-being.

Acknowledging and respecting individual differences

Domestic violence affects individuals from all walks of life,

Our program caters to individual needs and provides culturally sensitive support. We avoid judgment and strive to create an inclusive environment where all victims feel safe and supported.

The healing process from domestic violence is unique to each individual.

At [ORGANIZATION], we respect the pace and path chosen by each participant.

We are committed to fostering a safe and supportive environment where

1.3 Respect the individual differences and rights of the perpetrator

228.170(1-4)

position paper

At [ORGANIZATION], we acknowledge the complexity of domestic violence. While our primary focus is on victim safety, NRS 228.170 (1-4) emphasizes the importance of respecting the individual differences and rights of perpetrators within the treatment program framework by providing a structured path towards non-violence and accountability. This paper outlines [ORGANIZATION]'s approach to achieving this balance.

Individual differences

In the context of domestic violence perpetrator treatment programs, individual differences refer to the various factors that contribute to a person's abusive behavior. These factors can be complex and multifaceted, and our program acknowledges that a one-size-fits-all approach wouldn't be effective.

People come from diverse backgrounds [REDACTED]
[REDACTED]
[REDACTED]

The reasons behind someone's abusive behavior can vary. [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Perpetrators may hold distorted beliefs about [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

People learn and process information in different ways. Our domestic violence treatment program uses [REDACTED]
[REDACTED]

The importance of addressing individual differences

Each perpetrator has a unique background and motivations for their actions. We conduct [REDACTED]
[REDACTED]

The program holds perpetrators accountable for their actions. [REDACTED]
[REDACTED]
[REDACTED]

Perpetrators, like all individuals, have basic rights. At [ORGANIZATION], we ensure due process is followed throughout the program, including fair treatment and upholding their legal rights.

Perpetrators have the right to participate in a program that prioritizes non-violence. [REDACTED]
[REDACTED]
[REDACTED]
violence.

Our program respects the individual differences of perpetrators while prioritizing victim safety by:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

While respecting perpetrator rights is important, victim safety remains paramount. At [ORGANIZATION], we prioritize the following:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

We respect the individual needs and rights of all participants while holding an unwavering commitment to the safety of victims. This core principle guides our approach and is the reason why our program works with perpetrators.

We believe in the potential for change. [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

1.4 Design and implement appropriate treatment programs

228.170(1-4), 228.175(1-3), 228.185(1-21)

position paper

At [ORGANIZATION], we are committed to designing and implementing effective treatment programs for domestic violence offenders. [REDACTED]

With our programs, we aim to break the cycle of abuse by promoting accountability, fostering non-violent behavior, and equipping individuals with the skills and resources needed to build healthy relationships.

Our approach is to apply evidence-based treatment models that have demonstrated effectiveness in reducing recidivism. [REDACTED]

Our programs incorporate ongoing assessments to track participant progress and identify areas where interventions may need to be adjusted. [REDACTED]

NRS compliance

This position paper outlines our approach to designing and implementing treatment programs that comply with statutes [REDACTED]

In compliance [REDACTED], we employ qualified professionals with expertise in domestic violence intervention and treatment. [REDACTED]

In compliance [REDACTED] all of the terms of our treatment programs are noted in the contract/ agreement, terms & conditions, where we outline our commitment to designing and implementing effective treatment programs that extend beyond simply adhering to legal mandates.

In compliance [REDACTED], we follow clear and comprehensive curriculum and instructional materials on all aspects of program operations. [REDACTED]

Designing treatment programs

Our programs are designed to address the devastating impact of domestic violence on children witnessing abuse in the home. This involves exploring the emotional and

psychological consequences for children and the importance of creating a safe and nurturing environment.

Our programs also explore how offenders use power and control tactics to manipulate and dominate their partners. [REDACTED]

Program participants are taught about the cyclical nature of domestic violence, including the stages of tension building, violence, reconciliation, and the potential for re-escalation. Understanding this cycle allows them to identify triggers and break free from the pattern.

We also address the impact of substance abuse on domestic violence and offer referrals for appropriate treatment programs as needed.

Our programs are designed to explore the characteristics of healthy relationships, including mutual respect, trust, open communication, and emotional intimacy. [REDACTED]

Our programs incorporate strategies to help participants develop healthy self-esteem, which is often a contributing factor in abusive behavior. [REDACTED]

Recognizing the potential for mental health issues contributing to abusive behavior, we offer referrals for mental health assessments and treatment.

Implementing treatment programs

At [ORGANIZATION], we prioritize victim safety by maintaining rigorous confidentiality protocols for all victim information. [REDACTED]

We work closely with victim service providers to ensure victims have access to safety planning resources, emergency shelters, and legal advocacy.

Our intake process includes screening for factors that may elevate the risk of violence towards the victim. [REDACTED]

Our programs maintain a strong system of supervision and quality assurance to ensure staff are adhering to best practices and ethical guidelines.

At [ORGANIZATION], we prioritize the safety and well-being of victims throughout the program. [REDACTED]

Our programs are staffed by qualified professionals with expertise in domestic violence intervention and treatment. [REDACTED]

We foster a professional and ethical environment that promotes respect for both staff and participants. We maintain clear policies and procedures to address any potential conflicts or ethical dilemmas.

When implementing programs, we emphasize active listening skills, assertive communication techniques, and expressing needs constructively. [REDACTED]

Our programs are implemented to address the devastating consequences of domestic violence on victims, both immediate and long-term. [REDACTED]

Participants receive information about the legal consequences of domestic violence, including restraining orders, criminal charges, and potential custody implications.

We provide participants with alternative, non-violent strategies for conflict resolution and anger management. [REDACTED]

[ORGANIZATION] program design principles

1. Individualized treatment

At [ORGANIZATION], we put specific emphasis on treatment components to the individual needs of each participant. We equip program participants with tools to resolve conflict peacefully. [REDACTED]

We recognize the importance of tailoring treatment plans to the specific needs and circumstances of each participant.

2. Trauma-informed care

Our program acknowledges the potential for trauma experienced by both offenders and victims. We apply trauma-informed approaches that promote safety and support healing.

We foster empathy in participants by helping them understand the victim's perspective and the emotional pain they have inflicted. [REDACTED]

At [ORGANIZATION], we acknowledge that mental health issues can sometimes contribute to domestic violence. [REDACTED]

Our programs also explore the link between substance abuse and domestic violence. Participants who struggle with substance abuse may be referred for additional treatment programs.

3. Strength-based approach

[ORGANIZATION] focuses on identifying and building upon the strengths of each participant to foster positive change using evidence-based models that have demonstrated effectiveness in reducing recidivism and promoting positive behavior change. [REDACTED]

Our programs incorporate anger management techniques such as identifying triggers, healthy coping mechanisms for dealing with anger, and de-escalation strategies. [REDACTED]

4. Multicultural competence

We strive to deliver culturally sensitive services that consider the diverse backgrounds and experiences of program participants.

We strive to deliver culturally sensitive services that consider the diverse backgrounds and experiences of program participants. [REDACTED]

At [ORGANIZATION], we maintain strong partnerships with victim service providers, law enforcement agencies, and mental health professionals to ensure a comprehensive and coordinated approach to domestic violence intervention.

5. Zero-tolerance for abusive/ violent behavior or words

Our programs emphasize the violence-free position. [REDACTED]

Our staff members are trained in ethical decision-making and are expected to uphold the highest ethical standards in all interactions with participants and colleagues.

1.5 Cooperate and communicate with interrelated agencies

228.160(1)(e,f,g), 228.170(2)(e,f)

policy & documents

Policy

This policy establishes guidelines for the [ORGANIZATION] staff regarding cooperation and communication with interrelated agencies serving both offenders and victims of domestic violence. [REDACTED]

[ORGANIZATION] maintains open communication channels with law enforcement to facilitate referrals, ensure victim safety in cases of ongoing abuse, and collaborate on investigations.

Scope

Interrelated agencies include law enforcement agencies, victim service providers, mental health professionals, child protective services, and other agencies providing services relevant to domestic violence cases. [REDACTED]

This policy applies to all [ORGANIZATION] staff, including program directors, counselors, therapists, case managers, and administrative personnel.

Policy requirements

1. Cooperation

[REDACTED]

2. Information sharing

[REDACTED]

3. Referral process

[REDACTED]

4. Monitoring and evaluation

[REDACTED]
[REDACTED]

5. Non-compliance

[REDACTED]
[REDACTED]

NRS compliance framework

In compliance [REDACTED] regarding cooperation and communication with interrelated agencies providing domestic violence programs and support, [ORGANIZATION] will:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

In compliance [REDACTED] [ORGANIZATION] staff will:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

This policy document is approved by:

[Name], [ORGANIZATION] Director/CEO

[Date]

DOCUMENT

Communication Protocol

Staff will build and maintain strong relationships, and follow this communication protocol when communicating with interrelated agencies. [REDACTED]

The communication protocol is in place to allow for better case coordination and information sharing, leading to more effective interventions.

General guidelines

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Communication procedures

Information Sharing

1. [ORGANIZATION] staff can initiate information sharing to:

[REDACTED]

[REDACTED]

[REDACTED]

2. Information that will be shared (on the basis of relevance to the treatment program)

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Client referral

1. [ORGANIZATION] staff can refer clients to interrelated agencies for specialized services, including:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

2. Referral procedures:

[REDACTED]

[REDACTED]

[ORGANIZATION] staff can initiate joint service planning when a client requires services from multiple agencies, or there are high-risk factors that necessitate a coordinated safety plan.

As such, collaboration with interrelated agencies may involve:

Consultation

1. [ORGANIZATION] staff can consult with interrelated agencies for expert advice in situations such as:

2. Consultation methods

Some interrelated agencies may use secure online platforms for case management and communication. [ORGANIZATION]

*This protocol can serve as a **guide** to all staff but should be adjusted if necessary based on specific situations.*

[ORGANIZATION] will periodically review and update this protocol to reflect best practices and legal requirements.

This document will be distributed to [ORGANIZATION] staff members.

LDEA's commitment to cooperation and communication with interrelated agencies is central to its mission of ending domestic violence. By working together, [REDACTED]

COMMUNICATION FORM

Date _____
 Client Name _____
 Interrelated Agency _____
 Contact Person _____

Type of communication (check all that apply):

- ☐ Information Sharing (Specify details shared):

- ☐ Client Referral (Specify service referred for):

- ☐ Case Consultation (Summarize discussion points):

- ☐ Joint Service Planning (Describe collaborative efforts):

- ☐ Other (Specify):

Next steps

Completed by

Name: _____

Title: _____

Additional notes

Only authorized personnel will have access to this information.

1.6 Contribute to public awareness

228.110(12)(b)(4)

policy & documents

This policy outlines [ORGANIZATION]'s commitment to contributing to public awareness of domestic violence by adhering to [REDACTED].

Policy

Raising awareness about domestic violence is crucial for promoting prevention, encouraging help-seeking behavior by victims, and fostering community understanding of this critical social issue.

[ORGANIZATION] engages in public awareness activities in order to increase public understanding of domestic violence dynamics, warning signs, and available resources for victims and offenders, promote healthy relationship dynamics, and challenge societal attitudes that may condone or minimize domestic violence.

[ORGANIZATION] will regularly evaluate the effectiveness of its public awareness activities and make adjustments as needed. [REDACTED]

This policy and procedure document is approved by:

[Name], [ORGANIZATION] Director/CEO

[Date]

FORM

[ORGANIZATION] is dedicated to raising public awareness about domestic violence and promoting healthy relationships.

Campaign goal

- ☐ Increase community awareness of domestic violence and its signs.
- ☐ Promote healthy relationship behaviors and communication skills.
- ☐ Encourage help-seeking behaviors for victims and bystanders.
- ☐ Other (Specify): _____

Target audience

- ☐ _____
- ☐ _____
- ☐ _____

Campaign message

Campaign activities (check all that apply)

- ☐ Social media campaign (developing and sharing content on relevant platforms)
- ☐ Public events (workshops, presentations, or awareness walks)
- ☐ Media relations (issuing press releases or pitching stories to local media outlets)
- ☐ Public Service Announcements (for radio, television, or online platforms)
- ☐ Educational materials (creating brochures, posters, or online resources)
- ☐ Partnerships (collaborating with other organizations serving the community)
- ☐ Other (Specify): _____

Timeline and Budget

Key milestones _____

Resources needed _____

Evaluation

Website traffic _____

Social media engagement _____

Attendance _____

Next Steps

Completed By _____

Date _____

1.7 Maintain professional standards

228.110(1-12)

policy & documents

Policy

[ORGANIZATION] expects all staff members, volunteers, and board members to uphold the highest standards of professional conduct.

This policy outlines [ORGANIZATION]'s commitment to maintaining the highest professional standards in all aspects of our operations.

This policy applies to all staff members, volunteers, and board members.

Policy requirements

Staff

Staff members are expected to maintain their professional competence

Strict adherence to [ORGANIZATION]'s confidentiality protocols is mandatory.

Staff are expected to treat all clients, colleagues, and community partners with respect and courtesy.

Staff members must remain impartial and objective when working with clients.

Staff is obligated to report any suspected violations of [ORGANIZATION] policies, ethical codes, or legal requirements to their supervisor or the appropriate authorities.

Staff must avoid dual relationships with clients that could compromise objectivity or professional boundaries.

Volunteers

Volunteers are required to complete an orientation program and relevant training to understand LDEA's mission, policies, and procedures for interacting with clients.

Volunteers must adhere to LDEA's confidentiality protocols and maintain the privacy of all client information.

Volunteers will treat all clients and colleagues with respect and courtesy, avoiding discriminatory or offensive language.

Volunteers must follow instructions and guidance provided by [ORGANIZATION] staff and supervisors.

Volunteers are expected to maintain professional boundaries with clients and avoid any interactions that could be construed as personal relationships.

Board members

Board members have a responsibility to act in the organization's best interests, and commit to ensuring financial stability and ethical operations.

Board members must maintain the confidentiality of sensitive information discussed during board meetings or regarding LDEA's operations.

Board members are expected to actively support LDEA's mission by attending meetings, participating in fundraising efforts, and advocating for resources to support the organization's work.

Board members also have a responsibility to ensure that [ORGANIZATION] operates in compliance with all applicable laws and regulations governing non-profit organizations and domestic violence programs.

At [ORGANIZATION], we believe in upholding the highest ethical principles in our interactions with clients, colleagues, and the community. We apply these core ethical principles in our daily operations, as follows:

This policy document is approved by:

[Name], [ORGANIZATION] Director/CEO

[Date]

DOCUMENT

Professional Standards

At [ORGANIZATION], we are dedicated to providing high-quality services to victims of domestic violence and promoting healthy relationships in the community.

This document can serve as a **guide** outlining ethical principles and professional conduct expected of all [ORGANIZATION] staff members, [REDACTED]

Core values

Our core values guide our professional conduct and align with the requirements [REDACTED]

[REDACTED]:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Professional conduct

1. Client services

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

2. Qualifications

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

3. Program director duties

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

4. Professional development

[REDACTED]

5. Workplace conduct

[REDACTED]

6. Reporting concerns

[REDACTED]

Violations of professional standards may result in disciplinary action, up to and including termination of employment.

[REDACTED]

Upholding professional standards is not just an individual responsibility; it reflects on the reputation and service quality of our organization as a whole. Following these communication protocols exemplifies our collective commitment to ethical conduct within the broader domestic violence service network.

Staff adherence ensures clear and timely communication that benefits clients and strengthens our collective efforts to address domestic violence.

[REDACTED]

This document will be distributed to [ORGANIZATION] staff, displayed in the workplace, and included in staff handbooks.

CHECKLIST

This checklist is designed to help you self-assess your adherence to professional standards outlined in the professional standards document, and aligned [REDACTED]

Qualifications and training

[illegible]

Client services

[REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]

Professional conduct

[illegible]

Personal conduct

[REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]
 [REDACTED]

This checklist is a self-assessment tool and does not replace regular performance reviews and supervision.

This document will be distributed to staff.

1.8 Demonstrate ongoing evaluation of the program incorporating new information

228.170(1-3), 228.175(1-3), 228.185(1-21)

position paper

At [ORGANIZATION], we recognize the importance of continuous program evaluation to ensure we deliver the most effective services possible. This position paper outlines our approach to demonstrating ongoing evaluation, incorporating new information from research and best practices.

Depending on the program, our goals are to foster positive behavior change in offenders, to improve client and community safety, to reduce recidivism rates, to promote healthy relationship skills, and to shift the cultural, societal, and patriarchal norms that contribute to abusive or violent behaviors and leave them unaddressed.

By incorporating new information from diverse sources, we ensure our programs remain relevant, effective, and responsive to the evolving needs for the treatment of domestic violence.

Compliance with regulatory requirements

[REDACTED] we conduct regular program evaluations to assess effectiveness in achieving program goals and meeting client needs.

Our program evaluation considers whether the program is adequately addressing the diverse needs of our client population. This requires analyzing data on client demographics, presenting issues, and desired outcomes.

The evaluation assesses the effectiveness of the specific services offered by our domestic violence treatment program at [ORGANIZATION]. This involves examining the impact of individual or group therapy sessions, educational and cultural workshops, or behavior management interventions.

At [ORGANIZATION], we use a multi-method approach to gather comprehensive data by collecting quantitative data through client intake forms, progress assessments, and recidivism tracking.

Standardized assessment tools are also used to measure progress in areas like anger management, self-esteem, and healthy relationship skills. This data allows for statistical analysis to identify trends and program impact.

We also gather qualitative data through client exit surveys, focus groups, and staff feedback. This type of data provides valuable insights into client experiences, program strengths and weaknesses, and areas for improvement.

[REDACTED] we affirm the importance of reporting on evaluation results for program improvement. [REDACTED]

Evaluation data demonstrates program effectiveness and helps us secure funding to continue providing vital services. Evaluation findings may also identify areas where staff training is needed to ensure they possess the latest skills and knowledge for effective intervention. [REDACTED]

Furthermore, to [REDACTED] we evaluate the effectiveness of treatment components [REDACTED], assessing their impact on reducing recidivism, improving client safety, and promoting healthy relationship dynamics.

To [REDACTED], we educate clients on how offenders use power and control tactics to maintain dominance over victims. We provide educational groups, individual therapy sessions, and educational materials to raise awareness about power and control dynamics in abusive relationships. [REDACTED]

Our programs explore the physical, emotional, and psychological effects of domestic violence on victims, children, and offenders. We incorporate new and emerging practices into group discussions, individual counseling, and trauma-informed interventions to help clients explore the impact of domestic violence. [REDACTED]

Incorporating new information into our program services

At [ORGANIZATION], we are dedicated to providing victims and offenders of domestic violence with the tools they need to build healthier lives, and always researching new tools and innovative practices from other fields that we can effectively incorporate into our programs, as necessary. [REDACTED]

Individual and group therapy sessions, anger management workshops, and educational modules as part of our program services address critical areas. [REDACTED]

If new information or practice is applicable in their case, we further encourage clients to incorporate them into their practices and habits, for example, to rebuild healthy

relationships through workshops and individual counseling on communication skills, conflict resolution, boundaries, trust-building, and respectful partner interactions. Effective communication is a cornerstone of healthy relationships, and new knowledge and best practices are always emerging regarding active listening, assertive communication techniques, and de-escalation strategies to resolve conflict peacefully that we find useful in our programs. [REDACTED]

As new research and knowledge become available, we apply it to specialized groups or individual therapy sessions to ensure our interventions are constantly evolving. [REDACTED]

being.

Similarly, for victims of domestic violence grappling with the emotional, psychological, and physical consequences of their experiences, we draw from the latest advancements in trauma therapy. Our individual therapy and support groups are continuously updated to reflect these advancements. Our therapists incorporate evidence-based techniques specifically designed to address the complex trauma often associated with domestic violence. [REDACTED]

As new research and knowledge emerge on the causes and treatment of domestic violence, we integrate these advancements into our work with offenders. [REDACTED]

[REDACTED]. For example, therapists may incorporate new understandings of risk factors and use evidence-based techniques to develop a sense of accountability with offenders, exploring the underlying causes of violence in a way that promotes lasting change. [REDACTED]

[ORGANIZATION] recognizes that legal issues and safety concerns are paramount for victims. We stay informed about current legislation and best practices to ensure our support remains effective. [REDACTED]

Our safety planning procedures incorporate best practices in risk assessment. We work with clients to develop personalized safety plans that may include escape routes, emergency contact information, and legal advocacy referrals. [REDACTED]

The connection between substance abuse and domestic violence is well-established. At [ORGANIZATION], we stay informed about current research on this connection to ensure a holistic approach to recovery. [REDACTED]

We also work with clients to find specialized treatment programs that address both domestic violence and substance abuse concerns, fostering a comprehensive approach to healing. [REDACTED]

Our staff undergoes ongoing training focused on cultural competency. This training keeps us informed about emerging social norms, religious beliefs, and cultural practices that may impact a client's experience of domestic violence. [REDACTED]

We stay informed about the latest research on domestic violence within different cultural contexts. [REDACTED]

LDEA's ongoing evaluation framework

At [ORGANIZATION], we use a multi-faceted approach to ongoing program evaluation, incorporating both internal data and external research findings to evaluate the effectiveness of our programs and ensure we are updated on best practices and the latest research.

1. [REDACTED]

We collect data through various methods, including client intake forms, progress assessments, program completion surveys, and recidivism tracking.

We also use standardized assessment tools to measure client progress in areas like anger management, self-esteem, and healthy relationship skills.

Our staff analyzes data to identify trends, assess program effectiveness, and determine if program adjustments are needed.

We may use statistical analysis to evaluate the impact of specific interventions on client outcomes.

We stay current with research on domestic violence intervention and treatment.

We incorporate evidence-based practices into our programs and continuously review and update our curriculum based on new findings.

We solicit feedback from clients, staff, and community partners through regular surveys and focus

The field of domestic violence intervention is constantly evolving.

By continuously evaluating our programs, we are able to identify areas of strength and weakness, allowing us to refine our interventions and maximize their impact on client outcomes.

Ongoing program evaluation also allows us to demonstrate accountability to funders, stakeholders, and the community, ensuring our services are high quality and delivering on our mission.

Our commitment to ongoing evaluation is central to our mission of ending domestic violence. By continuously monitoring our programs, incorporating new information,

1.9 Staff composition to reflect community cultural/linguistic diversity

plan

At [ORGANIZATION], we recognize the importance of having a staff team that reflects the cultural and linguistic diversity of the community we serve.

Moreover, when clients see themselves reflected in the staff, it fosters trust and builds stronger relationships with the organization. A diverse staff enhances communication and allows us to better understand the needs of our clients.

This plan outlines key strategies that we will implement to achieve a more culturally and linguistically diverse staff composition.

Action Plan

1. As part of our recruitment strategies, we plan to:

[REDACTED]

2. To build a welcoming workplace, we plan to:

[REDACTED]

3. To boost language accessibility, we plan to:

[REDACTED]

4. To ensure constructive evaluation and continuous improvement, we plan to

5. We will work on allocating necessary resources to support diversity and inclusion initiatives, including funding for training, translation services, and employee resource groups.

6. We will work on fostering commitment from leadership to ensure diversity and inclusion are prioritized at all levels of the organization.

7. We will work on developing partnerships with community organizations to expand our reach and attract potential staff members from diverse backgrounds.

Challenges and considerations

Building a staff team that reflects the diversity of the community we serve is an ongoing process.

Depending on the location, finding qualified staff with specific cultural and linguistic backgrounds may be challenging.

We will work on creating a welcoming and inclusive work environment to retain diverse staff members.

Ongoing training opportunities will also be routinely offered to ensure all staff possess the necessary skills and knowledge to work effectively with a diverse clientele.

By implementing these strategies, we will work to foster a more inclusive work environment and enhance our service delivery, allowing us to better support a wider range of clients experiencing domestic violence.

4.1 Meet the ethical standards of a professional organization

228.170(1-4), 228.115(1-5), 228.125(1-5)

documents

At [ORGANIZATION], we are committed to upholding the highest ethical standards in our work. To ensure compliance with NRS 228.170(1-4), 228.115(1-5), and 228.125(1-5), as well as the ethical standards of our professional organization, we will maintain a comprehensive documentation system. The regulation lays the foundation for ethical practice by emphasizing program effectiveness, staff qualifications, and client-centered services.

Regulatory compliance

In compliance [REDACTED] the program's ethical standards are evaluated according to goals achieved that promote client safety and well-being. [REDACTED]

Ethical practice requires using reliable data to guide program decisions. [REDACTED]

Documentation of the evaluation process fosters transparency and allows stakeholders to see how the program is working. [REDACTED]

[REDACTED] ensuring staff qualifications and ongoing training upholds the ethical principle of competence. [REDACTED]

Training on ethical considerations in domestic violence intervention equips staff to navigate complex situations and make ethical decisions that respect client confidentiality, autonomy, and safety. [REDACTED]

[REDACTED] documentation of services ensures interventions are tailored to individual client needs and goals. At the same time, maintaining client confidentiality is an essential ethical principle. [REDACTED]

Staff will follow a Code of Ethics, according to which staff will conduct and further strengthen [ORGANIZATION]'s commitment to ethical service delivery. [REDACTED]

Ethical standards regarding finding offenders accountable for violence

Holding offenders accountable is crucial for promoting safety, preventing future violence, and achieving justice. However, this pursuit of accountability must fit within our framework of ethical conduct at [ORGANIZATION].

This document can serve as a **guide** that explores key ethical principles we follow when it comes to holding domestic violence offenders accountable.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Ethical considerations in practice

When collaborating with law enforcement or the legal system, we adhere to strict confidentiality guidelines and only share information with the client's consent or when legally mandated.

Our staff receive ongoing training on ethical decision-making in the context of domestic violence intervention, including legal requirements, confidentiality considerations, and trauma-informed practices.

As we remain committed to pursuing accountability while adhering to the highest ethical standards, we are working to create a more just and safe environment for those impacted by domestic violence.

DOCUMENT

At [ORGANIZATION], we are dedicated to providing a safe and supportive environment for victims, offenders, and their families impacted by domestic violence.

Code of Ethics

This document outlines LDEA's core ethical principles, expected staff conduct, and potential consequences for non-compliance. All staff members, volunteers, and interns working with [ORGANIZATION] are required to adhere to this code.

Core ethical principles

The primary focus of all services provided by [ORGANIZATION] is the safety, well-being, and providing services for treatment for domestic violence.

[ORGANIZATION] protects the confidentiality of all client information except in situations where disclosure is mandated by law or necessary to prevent imminent harm to the client or others.

[ORGANIZATION] provides services without discrimination [REDACTED]

All [ORGANIZATION] staff are expected to maintain a high level of professionalism in their interactions with clients, colleagues, and the community. [REDACTED]

Expected staff conduct

Staff members will maintain professional boundaries with clients and avoid any interactions that could be construed as personal or romantic.

Staff will avoid exploiting clients for personal gain or benefit.

Staff will respect the right of clients to make their own choices and will not coerce them into participating in any services.

Service delivery

Staff will provide services in a competent and ethical manner, [REDACTED]

Staff will complete all required training programs and maintain their professional licenses or certifications.

Staff will document client services accurately and completely.

Professional development

Staff will actively participate in ongoing professional development opportunities to enhance their skills and knowledge in domestic violence intervention.

Staff will stay informed about changes in legal requirements and best practices related to domestic violence.

Reporting

Staff will report any suspected abuse or neglect of a child or vulnerable adult to the appropriate authorities.

Staff will report any violations of this code of ethics to their supervisor or the appropriate [ORGANIZATION] leadership team member.

Consequences for non-compliance

Violation of this code of ethics may result in disciplinary action, up to and including termination of employment or volunteer status.

At [ORGANIZATION], we are committed to fostering a work environment that is respectful and free from discrimination or harassment. All staff members have the right to work in a safe and supportive environment.

This code of ethics will be reviewed and updated periodically to reflect evolving best practices and legal requirements.

*This document will be distributed to staff, displayed in the workplace,
and included in staff handbooks.*

CHECKLIST

The following checklist can help you assess adherence to ethical standards

Client confidentiality

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Competence

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Professional conduct

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Record Keeping

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Professional development

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

By following these ethical standards at [ORGANIZATION], we can ensure that we are providing high-quality services and upholding the integrity of our organization.

This document will be distributed to staff.

4.2.1 Violence free

228.175(1), 228.110(1)

documents

AGREEMENT 1

This is a written agreement between the offender and the provider of treatment for participation in a domestic violence treatment program.

This agreement is made and entered into as of [Date] by and between:

[Provider Name], a domestic violence treatment program located at [Provider Address] ("Provider")

and

[Offender Name], residing at [Offender Address] ("Offender").

Provider operates a program to assist offenders in ending domestic violence.

In consideration of the foregoing premises and the mutual covenants contained herein:

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]
4. [REDACTED]
5. [REDACTED]

Provider: _____
 Signature: _____
 Date: _____

Offender: _____
 Signature: _____
 Date: _____

The agreement complies with all applicable laws and regulations.

AGREEMENT 2

This is a written agreement for the supervisor/ provider of treatment at a domestic violence treatment program.

This agreement is made and entered into as of [Date] by and between:

[Provider Name], a domestic violence treatment program located at [Provider Address] ("Provider"),

and

[Employee Name], residing at [Employee Address] ("Employee").

In consideration of the foregoing premises and the mutual covenants contained herein:

1. [REDACTED]
2. [REDACTED]
3. [REDACTED]
4. [REDACTED]
5. [REDACTED]

Provider: _____
 Signature: _____
 Date: _____

Employee: _____
 Signature: _____
 Date: _____

The agreement complies with all applicable laws and regulations.

4.2.2 Free of convictions demonstrating unfitness to provide services

228.110(1)(f), 228.110(7)(e)

documents

As a condition of employment, all staff providing domestic violence treatment program services will be required to disclose any criminal convictions during the application process.

FORM 1

In accordance [REDACTED], I hereby attest that:

I have never been convicted of a crime which demonstrates my unfitness to act as a supervisor of treatment in a domestic violence program.

This statement is true to the best of my knowledge as of today's date.

Convictions that may call into question my fitness as a supervisor of treatment can include, but are not limited to:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Signature: _____ Date: _____

This is a self-disclosure statement. Employees will be required to undergo a background check to verify their criminal history.

If you have any questions or concerns about your criminal history, please consult with an attorney.

This document will be used in the absence of disqualifying convictions.

As a condition of employment, all staff providing domestic violence treatment program services will be required to disclose any criminal convictions during the application process.

FORM 2

In accordance [REDACTED] I hereby attest that:

I have never been convicted of a crime which demonstrates my unfitness to act as a provider of treatment in a domestic violence program.

This statement is true to the best of my knowledge as of today's date.

Convictions that may call into question my fitness as a supervisor of treatment can include, but are not limited to:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Signature: _____

Date: _____

This is a self-disclosure statement. Employees will be required to undergo a background check to verify their criminal history.

If you have any questions or concerns about your criminal history, please consult with an attorney.

This document will be used in the absence of disqualifying convictions.

4.2.3 Do not perpetuate sexism, racism, or victim blaming

228.110(1-10)

position paper

At [ORGANIZATION], we are dedicated to providing safe and supportive treatment options to domestic violence offenders, including working towards minimizing and eventually eliminating sexism and racism.

Defining sexism, racism, and victim blaming

Sexism is defined as stereotypes or discriminatory attitudes based on gender roles. In domestic violence, sexism may manifest as minimizing abuse experienced by men, blaming female victims for 'provoking' their partners, and perpetuating the myth that domestic violence is a 'family matter'.

Racism is defined as prejudice based on race or ethnicity. Racism in domestic violence services can occur when cultural sensitivities are ignored or minimized, assumptions are made about victim needs based on race or ethnicity, and services lack accessibility for diverse communities due to language barriers or cultural mistrust.

Regulatory compliance

Our commitment to providing effective treatment programs for domestic violence offenders necessitates strict adherence [REDACTED] This statute outlines the qualifications

To ensure compliance, we will verify that all treatment supervisors and providers possess an academic degree from an accredited institution relevant to the field and formal training in domestic violence. This training must be reflected in their understanding of and importance of their role as treatment providers in not perpetuating sexism, racism, or victim bullying, and teaching program participants how they might be unknowingly perpetuating racism, sexism, or victim blaming.

By adhering to these regulations, we will ensure we have a team of qualified professionals equipped to deliver evidence-based interventions. This workforce is essential for creating an environment that affirms its position on not perpetuating sexism, racism, or victim blaming.

Unknowingly perpetuating racism, sexism, or victim-blaming

Many people may unknowingly perpetuate racism, sexism, or victim blaming through ingrained societal biases. These biases usually come from subtle cultural messages, stereotypes encountered in media, or seemingly harmless jokes. [REDACTED]

Unconscious biases can also manifest in the language used. Offhand remarks about a victim seeming 'difficult to deal with' or 'provocative' can perpetuate the myth that victims somehow bring the abuse upon themselves. Similarly, racial stereotypes can influence perceptions of domestic violence within different communities. For instance, someone might be more likely to view a Black male abuser as inherently dangerous, while overlooking potential control tactics used by a white male abuser. [REDACTED]

By being mindful of these subtle ways biases can manifest, our staff and program participants can work towards creating a more inclusive and efficient treatment environment.

Sexism, racism, and victim blaming are a societal issue

Our commitment to providing rehabilitation for domestic violence offenders is essential in dismantling this pervasive societal issue. However, the success of our programs hinges on fostering genuine understanding, awareness, accountability, and behavior change. [REDACTED]

Traditional narratives surrounding domestic violence often paint a skewed picture. Victim behavior is scrutinized, unintentionally excusing the abuser and perpetuating the myth that victims 'cause' violence. This narrative is deeply rooted in sexism. It reinforces traditional gender roles, where men hold power and control, and women are expected to be submissive. [REDACTED]

Offenders need a clear understanding of the cycle of violence, where controlling behaviors escalate into abuse. Our programs delve into the dynamics of power and control within relationships, deconstructing the harmful stereotypes and norms that are contributing to sexism, racism, and victim blaming. [REDACTED]

Domestic violence transcends racial and ethnic boundaries. However, the presence of racism within communities can amplify its impact. Racial stereotypes can affect perceptions of both the victim and the offender. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED] strong foundation for qualified personnel within our programs. However, at [ORGANIZATION] we recognize the need to go beyond simply adhering to these regulations. We understand that dismantling domestic violence requires a proactive stance against sexism, racism, and victim blaming.

Furthermore, creating a safe space for open dialogue about biases within offender groups is crucial for our clients in treatment programs. This is addressed through group discussions where offenders can explore their behavior patterns and explore the root causes of their aggression. The facilitators guide them to recognize their own sexist or racist assumptions that contributed to their abusive actions. [REDACTED]

By dismantling sexism, racism, and victim blaming within its program design, we can create a treatment environment conducive to genuine accountability and positive growth for offenders. [REDACTED]

We hope that our program can serve as a model for others in the field, demonstrating how a comprehensive and culturally sensitive approach can truly transform lives and communities. As [ORGANIZATION] invests in this critical approach, it can move closer to achieving its mission: a future free from domestic violence for all.

We are committed to non-discrimination, and providing effective treatment to all domestic violence offenders. If they are discriminated against or refused service, they may perpetuate the cycle of sexism, racism, victim blaming, and domestic violence. Our staff receive ongoing training on cultural competency, implicit bias recognition, and anti-racism practices, and are qualified to provide treatment that does not perpetuate biases and stereotypes. [REDACTED]

4.2.4 Do not abuse alcohol or drugs

228.110(1)(h), 228.110(7)(g)

documents

[ORGANIZATION] maintains a zero-tolerance policy for the use, possession, or distribution of illegal drugs or alcohol on program premises or while working for [ORGANIZATION].

[REDACTED]

The program's administrative body ensures staff are free of any condition that would interfere with the ability to perform their duties in a competent, ethical, and professional manner.

FORM 1

In accordance [REDACTED] I hereby certify that:

I am not currently struggling with an addictive disorder related to prescription drugs or alcohol.

I am not a user of illegal drugs.

I understand that maintaining a substance-free lifestyle is essential for my effectiveness as a [Supervisor/Provider] in a domestic violence treatment program.

I am committed to upholding the highest standards of professional conduct and ethical behavior.

I acknowledge that any violation of this policy may lead to disciplinary action, including termination of employment.

Name: _____

Signature: _____

Date: _____

If you have a history of substance abuse but are currently in recovery, you may want to disclose this information to your employer directly. It is important to be transparent and demonstrate your commitment to sobriety.

[ORGANIZATION] maintains a zero-tolerance policy for the use, possession, or distribution of illegal drugs or alcohol on program premises or while working for [ORGANIZATION]. This requirement applies to all staff members, regardless of position or employment status. This requirement will be clearly outlined in the staff manual and distributed to all staff members for review and acknowledgment.

FORM 2

In accordance [REDACTED], I hereby certify that:

I am not currently struggling with an addictive disorder related to prescription drugs or alcohol.

I am not a user of illegal drugs.

I understand that maintaining a substance-free lifestyle is essential for my effectiveness as a provider of treatment in a domestic violence program, and I am committed to providing high-quality care and support to clients facing complex challenges.

I acknowledge that any violation of this policy may lead to disciplinary action, including termination of employment.

Name: _____
Signature: _____
Date: _____

If you are in recovery from substance abuse, consider disclosing this directly to your employer. Transparency and a demonstrably stable recovery program are important.

4.2.5 Immediately report threats or acts of violence

228.160(1&3)(e,f,g), 228.170(2)(e&f), 228.195(3)

documents

At [ORGANIZATION], we prioritize the safety of all staff, clients, and visitors. Staff are required to immediately report any threats or acts of violence they witness, regardless of the context. Whether it occurs within the program setting, online, in a personal setting, or if they become aware of it, they will immediately report it to the appropriate supervisor/treatment provider or law enforcement. By taking such responsibility seriously, staff can help prevent further harm and ensure a safe environment for everyone involved.

Staff will document all reports of threats involving potential abuse or neglect, acts related to domestic violence, stalking, or other criminal acts of abuse. These reports will include:

[REDACTED]

[REDACTED] requires domestic violence programs to report suspected abuse or neglect of a vulnerable person (including clients or staff) to Adult Protective Services or law enforcement. Threats of violence can be precursors to abuse and must be reported.

[REDACTED] mandates reporting of domestic violence or stalking involving staff or clients to law enforcement. Threats can escalate to domestic violence or stalking, necessitating immediate reporting.

To comply with the regulation and to uphold our commitment to breaking the cycle of violence, we will report any and all criminal activity discovered on program premises, including threats of violence if they are deemed to constitute criminal conduct.

Comprehensive records can provide valuable information for law enforcement investigations into threats or acts of violence. Documentation also serves as a record of actions taken to ensure staff and client safety.

DOCUMENT

Protocol on Reporting

This protocol outlines the steps staff must take when they witness or become aware of threats or acts of violence.

All staff have a legal and ethical responsibility to report any observed or suspected threats or acts of violence. This includes threats made verbally, in writing, or electronically, and acts of violence witnessed in person or online.

All staff will report incidents immediately, regardless of the perceived severity or whether they directly involve program participants.

Reporting procedure

If a threat or act of violence is unfolding, prioritize your safety and the safety of others. If necessary, call 911 or proceed to the nearest safe location.

Once the immediate danger has passed, report the incident to your supervisor or designated security personnel as soon as possible.

Be prepared to provide details such as:

[REDACTED]

At [ORGANIZATION], we understand that reporting violence can be uncomfortable. We are committed to protecting the confidentiality of those who report incidents. Staff who report threats or acts of violence will not face retaliation. Support services are available to staff who experience emotional distress due to a reported incident.

Note to Readers:

Thank you for exploring this sample of our work. In order to maintain the brevity of our online showcase, we've provided only a selection from this piece.

Should you be interested in viewing the complete work or wish to delve deeper into our portfolio, please don't hesitate to reach out. We're more than happy to provide extended samples upon request.

Thank you,
The Write Direction Team