



Department of Public Safety

COUNCIL ON DOMESTIC VIOLENCE
& SEXUAL ASSAULT
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On February 17-19, 2016 CDVSA staff members MaryBeth Gagnon and Ann Rausch traveled to Ketchikan to assess progress made by WISH Board members and staff. During the course of this visit, CDVSA spoke with community partners, staff, the executive director, and the WISH Board of Directors. The following update was given to the Board of Directors in regards to the nine recommendations and results of speaking with those in the community.

- 1. The Board of Directors shall conduct a planning process for the shelter as outlined in regulation 13 AAC 90.030. The planning process will include an assessment of the service needs of the populations to be served to determine how differing populations can be served without the use of exclusionary practices. This planning process will identify how the agency will seek appropriate resources and services for participants. The planning process will include evaluation steps to be taken by the Board of Directors to ensure the resulting plan is being implemented.**

This recommendation is currently in-progress. Once recommendation (1) has been completed all documents (related to recommendation 1) will be submitted to CDVSA for review.

Progress on associated recommendation (1) tasks:

The WISH Board confirms that a community survey to identify needs has been conducted, and that conversations are occurring within the community to identify other needed resources for when WISH is unable to provide services to individuals. After the November 2015 meeting with the WISH Board and the Council Executive Committee, the WISH Executive Director submitted a recap of discussed protocols; amongst these were an updated intake process which mirrors a "screening-in" philosophy rather than the previous blanket exclusionary practices. This topic area was discussed with the Board during the February 19th meeting with the Board and WISH's Executive Director. Ms. Gagnon and Ms. Rausch clarified that it is not the expectation of CDVSA that every single person who comes to the door is admitted for shelter services but rather that appropriate referrals and safety is found for those who may not be appropriate for shelter at the time they are presenting (such as in the case of extreme inebriation, acute mental health crisis, etc.), and alternately that blanket exclusion is not used to screen out participants (i.e. refusing to accept any person under the influence).

Access to shelter services is covered under state and federal regulation including the Family Violence Prevention and Services Act (FVPSA). Recipients of FVPSA funds must cover service provisions outlined under the Americans with Disabilities Act, the Fair Housing Act, and section 504 of the Rehabilitation Act. All three of these federal statutes have the implications for how domestic violence shelters provide services including requirements for access to shelter and requirements for standards of practice. These service provision parameters are complicated and require ongoing training. CDVSA will continue to work with the Board and the Executive Director to deepen their understanding and provide technical assistance on the development of policies and practices that fall under these three federal statutes. Trauma Informed Care, which is also a practice requirement under FVPSA, supports these required practices and is intended to provide leadership and staff with the skills necessary to implement these practices, which is the intent of Recommendation #8.

- 2. Immediately, all employees, including shelter management, without the full 40 hours of training as required by regulations shall not work independently until the training requirements are met. Training can be met through the online ANDVSA advocacy program or be taught through a formal in-house training with CDVSA approved trainers. Training topics completed must be logged appropriately in personnel files along with supporting documentation of training completion.**

This recommendation is completed. Upon review of the training logs and personnel files, systematic tracking and logging of training is occurring with all trainings being recorded in a timely manner. Trainings are verifiable and a tracking spreadsheet now reflects the total number of hours each employee has achieved (beyond the minimum 40 hours for working independently). Additionally, the Executive Director has identified how each new employee will receive the required 40 hours of training upon hire in the case the ANDVSA online course is not active at the time of hire for employees to attend.

- 3. The Board of Directors and Executive Director will review all signed CDVSA Assurances and Grant Award Conditions. The review must include a detailed examination of all cited federal and state statutory requirements contained within the Assurances and Conditions. After the review, a report to CDVSA must be generated to demonstrate understanding of all cited statutes. An attorney, approved by CDVSA, may be hired with CDVSA funds to assist WISH with this task.**

It was reported to the Board and Executive Director that CDVSA has secured an attorney (Lael Harrison of Faulkner-Banfield) who has begun work on translating the Assurances and Award conditions into common-speak language. It is projected the project will be completed by the attorney by April 1, 2016 in which the document will then be provided to the WISH Board for review. Upon receipt of the document, WISH will be responsible for fulfilling the conditions of the recommendation by generating their understanding of the all cited statutes. It was confirmed that CDVSA is paying for the cost of the attorney.

4. The Board of Directors shall receive training on their roles and responsibilities to include their fiduciary responsibilities, by a trainer approved by CDVSA.

It was discussed with the Executive Director that the trainer for this recommendation be approved by the CDVSA, as CDVSA requires this training to be conducted by a trainer versed in shelter practices. CDVSA will provide a list of approved trainers to the Executive Director.

5. The Board of Directors, Executive Director and Human Resources Director shall receive training on employment law and practices with a trainer approved by CDVSA, and will make this same training available to all employees.

The Alaska Department of Labor provided training on November 3, 2015 which was attended by the Board Chair, Executive Director, and HR Director and Board member Stephanie Lively. The remaining members of the Board also need to attend this training.

It was requested by the WISH Board that this recommendation be allowed to be fulfilled via a web-based training (if one is available) due to the challenges of schedules and conflicts arising due to full time employment. A web-based training from the Alaska Department of Labor will be accepted by CDVSA in order to fulfill this requirement if it exists. Alternate methods of training will also be considered by CDVSA as long as they reference State of Alaska specific employment law. The Executive Director is expected to research such trainings and contact CDVSA for approval prior to scheduling to ensure the training meets the intent of the recommendation.

6. The Executive Director, Shelter Manager, and Assistant Shelter Manager shall shadow management staff equal to their positions with another Alaska shelter program identified by CDVSA.

This recommendation has been met. In January 2016, both the Shelter Manager and Assistant Shelter Manager shadowed the AWARE staff and program for 2.5 days in Juneau, Alaska. In February, the Executive Director and Assistant Shelter Manager shadowed the LeeShore Center (LSC) staff and program Kenai. Both the E.D. and the Asst. Shelter Manager report the LSC experience to be of great value; shelter practices and forms are reported to be shifting to more closely mirror those practiced at LSC. LSC has offered to send their shelter manager to WISH to continue training staff members, which is **strongly** encouraged by CDVSA in order to empower advocates and assist leadership in the development of trauma informed practices.

7. WISH shall cooperatively enter into partner agreements with service providers in Ketchikan as well as providers within WISH's service area. Agreements must at a minimum include referral practices; procedures for obtaining program participant release of information authorization; and contingencies for partners to interact with program participants at the WISH facility. These agreements must be approved by CDVSA.

This recommendation is in-progress. CDVSA staff worked with the Executive Director during this visit to clarify the content MOA's should contain as well as the intent behind this recommendation. While the resounding commentary from community partners indicate that they would like to be involved with WISH and that they stand by them as a community partner, each stated the partnership was not strong as it once was. While the partner agencies stated

they would like to work with WISH again, they were unsure how to re-establish the relationship. The Executive Director will contact community partners and work with them to establish business practices that are agreeable to both parties, as well as establish criteria for Releases of Information so that both parties and agency staff know the protocols for exchange of information.

- 8. All staff must participate in trauma informed care training on a regular basis with a trainer approved by CDVSA. While some records indicate trauma informed care trainings have been attended by some staff, it is recommended staff is consistently trained on trauma informed philosophy and practices and ways to implement these into current shelter operations.**

This recommendation is currently in-progress. Trauma informed care is a national practice standard required by FVPSA. Trauma informed trainings under this recommendation are intended to provide advocates and administrators of shelter programs with the knowledge and skill building practice necessary to implement trauma informed services. While a training topic schedule has been outlined, CDVSA was not consulted as to whether the trainers were approved. CDVSA will provide the Executive Director with a list of approved trainers, and work with the Executive Director to identify training needs.

CDVSA strongly encourages and supports the offer of LeeShore Center (LSC) sending their shelter manager to WISH to assist staff members in learning trauma-informed practices and philosophy, and encourages the Executive Director to continue consulting and utilizing the LSC Executive Director as a resource.

Identification and approval of regional trainers was also discussed with the Executive Director as an option of meeting training needs. The Executive Director will consult CDVSA when a regional trainer is identified and will provide information on this persons' knowledge and expertise on the subject matter so that CDVSA can make an informed decision regarding approval.

- 9. Ensure the grievance procedure is being followed properly, with access allowed to the Board of Directors in the case of an appeal. This recommendation corresponds with regulation 13 AAC 90.020 [5] which requires the governing body to approve all documents of the grantee that establish policy, including personnel policies. By approving policies the Board is obligated to review policies on an annual basis and ensure program compliance.**

This recommendation is in progress and one CDVSA was asked for clarification on. The WISH Board of Directors updated CDVSA on the revision of their grievance process and indicated they were under the impression CDVSA required language stating that all grievances would be heard by the Board. Concerns were raised that this would allow persons to circumnavigate the established process and go straight to the Board of Directors with all complaints. This was not the intent of this recommendation.

The recommendation is targeted to ensure that employees, if dissatisfied with the results after following the established grievance process, are then eligible to grieve to the Board of Directors

and are allowed access to do so. According to the current WISH grievance policy, a Grievance Committee exists amongst the Board of Directors. If employees feel the grievance has not been resolved once it has reached the Executive Director level (or the grievance is being filed against the Executive Director), a process must be in place for the Board (or Grievance Committee of the Board) to hear the grievance.

Employees must be made aware that this option is open to them, and that the Executive Director cannot prohibit the Board from hearing the grievance by claiming the issue has been resolved if the employee does not feel it has been. In essence, staff should not have to go through the Executive Director in order to reach the Board; there should be a way for them to reach the board if dissatisfied with the resolution or lack thereof. The Board of Directors, in revising the policy, should decide how to ensure grievances are being handled according to policy and that access to the Board is not being denied. They do not need to state that “all grievances will be heard by the Board”.

As an example, a protocol could exist that the Grievance Committee reviews all grievances and the accompanying documented resolutions to those grievances monthly, or quarterly, to make sure the process is being followed. Again, the process for ensuring staff have an option to speak to the Board (and not stop at the Executive Director level) is up to the organization.

At the February 19 meeting, the WISH Board submitted their proposed changes to the grievance policy. CDVSA approves the additional process of mailing out the grievance policy, grievance form, and exit interview to employees upon their termination and verified this new practice was being followed. CDVSA made additional suggestions regarding updating the grievance policy, such as eliminating (or extending) timelines on grievances, and allowing all employees to grieve regardless of whether or not they are a permanent employee or on probationary status. This was suggested as a topic for discussion and consideration.

Community Partners

During the visit, CDVSA met with community partners to discuss the role of WISH in the community and their partnership with WISH. CDVSA spoke with the Office of Children’s Services, KIC, Gateway-Akeela, the Wellness Coalition, SART nurses, and the School District. Community partners identified the desire to work with WISH and help them succeed; however each felt that the once established communication and working relationship had been severed and partners were unsure of how to access WISH again. This was an area relayed to the Executive Director and WISH Board, and strategies for re-establishing these partnerships were discussed with the Executive Director during this visit. It is believed these partnerships can be re-established through outreach from the Executive Director, and that the process of updating MOA’s with each agency will foster communication and establish each agencies’ role in service provision.

It should be highlighted that the SART nurses expressed gratitude to WISH advocates and felt the team was doing well. They requested quarterly meetings of the SART Team to resume, which was relayed to the Board, Executive Director, and Shelter Managers. Additionally, the Ketchikan School District gave high praise for the Prevention Program and the work of Matt Tibbles in making prevention efforts succeed.

Personnel/Shelter

Whether real or perceived, fear of reprisal still strongly exists amongst staff members; staff does not feel they have a voice without consequences. This was brought to the attention of the Board as well as discussed at length with the HR Manager and Executive Director. Strategies to build trust amongst staff was discussed with the Executive Director, including empowering advocates to know their roles and be confident in shelter practices and protocol, giving them the ability to make decisions independently without the need for supervisor approval, and fostering an environment in which it is okay to disagree, feel heard and feel safe in doing so.

Another area of focus discussed with the Executive Director was the need to empower and train the Shelter Manager to know her role, have a voice directly to the Executive Director, and be trusted to run the shelter and make decisions independently. Another need identified was to determine and delineate the roles of the Shelter Manager and Assistant Shelter Manager so that a clear chain of command is established and advocates know who to go to for clarification and conflict resolution assistance. Both the Shelter Manager and Assistant Shelter Manager could benefit from more shadowing/training on shelter management and trauma informed practices in order to foster this and help give them the tools they need (and desire) to feel confident in their positions.

Establishing sound referral practices and partner-agency networking was also discussed as ways to support staff. Staff members reported a very recent improvement in working with KIC, and commented on how service provision was easier when working together with an agency to determine options for participants rather than delineating whose agency this participant fell under.

Additionally, strategies as to how to build trust and respect amongst staff so they can have respectful and constructive disagreements was discussed with the Executive Director. Rebuilding trust amongst staff members and between management and staff is a key factor in healthy workplaces as well as effective service delivery, though one that is achievable with time and consistency.

Conclusion

Recommendations #2 and #6 have been met, with progress being made on the remaining recommendations per feedback above.