INTRODUCTION

The Texas Council on Family Violence (TCFV) produced this checklist to assist programs and providers in assessing compliance with Texas Department of Criminal Justice-Criminal Justice Assistance Division (TDCJ-CJAD) BIPP guidelines and developing required policies, procedures and forms.

This is an optional tool and does not need to be submitted to TDCJ-CJAD.

TCFV also compiled sample forms from programs who have integrated Best Practices to their policies and procedures.

This tool is only to be used as a guide. Following this tool does not ensure compliance with TDCJ-CJAD BIPP Accreditation Guidelines. TDCJ-CJAD BIPP Accreditation Guidelines are posted electronically on the TDCJ-CJAD website. Programs and providers should be familiar with the TDCJ-CJAD BIPP Accreditation Guidelines and reference the guidelines directly.

It is recommended that programs and providers have an attorney review their organization’s policies and procedures for compliance with all applicable federal and state laws.

THE TEXAS COUNCIL ON FAMILY VIOLENCE

The mission of the Texas Council on Family Violence (TCFV) is to promote safe and healthy relationships by supporting providers, facilitating strategic prevention efforts, and creating opportunities for freedom from domestic violence.

Since 1978, the TCFV has been a nationally recognized leader in the efforts to end family violence through partnerships, advocacy and direct services for women, children and men.

As one of the largest domestic violence coalitions in the nation, TCFV’s membership is comprised of family violence service providers, supportive organizations, survivors for domestic violence, business and professional, communities of faith and other concerned citizens. As a membership-focused organization, TCFV is firmly committed to serving its members, communities in Texas and thousands of victims of domestic violence and their families.

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GENERAL ACCREDITATION REQUIREMENTS

We have completed the TDCJ-CJAD Application which includes:

- Application
- BIPP Accreditation Statement of Understanding
- Cooperative Working Agreement
- Documentation of training hour requirements (per Guideline 2)
- We have submitted our payment for accreditation
- BIPP Accreditation Policy and Procedure Manual

We have developed a Policies and Procedure Manual: It has been prepared in the following format:

- Arranged in a binder
- Submitted on 8 ½ X 11 paper
- Used font size: 12pt.
- Numbered pages
- Arranged by guideline number
- Each guideline MUST begin at the top of a new page followed by all supporting documents (i.e. sample forms)

SUPPLEMENTAL MATERIALS REQUIREMENTS

- Documentation of Staff Training
- Curriculum Tracking Form
SECTION ONE: CRIMINAL BACKGROUND CHECKS

GUIDELINE 1

_______ We have developed a policy on completing background checks on all of our staff who provide battering intervention services to family violence offenders, including both paid and unpaid positions.

_______ We have developed a policy that must include an annual Texas Crime Information Center/National Crime Information Center (TCIC-NCIC) background check.

_______ We have developed a policy that also includes criteria regarding the eligibility of persons with criminal backgrounds to be able to provide battering intervention services to family violence offenders.

SECTION TWO: TRAINING REQUIREMENTS

GUIDELINE 2 (Please check all applicable.)

_______ We are a current program or provider.

_______ We are new program or provider.

_______ We are licensed professionals in good standing with our licensing boards.

_______ All of our agency licensed professionals who work with batterers and/or supervise staff who work directly with batterers are in good standing with their licensing boards.

_______ We have licensed professionals who have been licensed for four years and worked in the field of family violence for four or more years.

_______ We have non-licensed professionals working with batterers and/or supervising staff who work directly with batterers.

_______ All of our staff Incensed and non-licensed professional have received the minimum TDCJ-CJAD required training and we are prepared to provide the documentation of required training for each staff.

For best practice, we require full-time, part-time, or contract staff who work directly with batterers and/or supervise staff who work directly with batterers

_______ To have at a minimum a degree in a related discipline.
For best practice, we require full-time, part-time, or contract staff who work directly with *batterers* and/or *supervise staff* who work directly with *batterers* to receive training that includes but is not limited to:

- Observing groups and individual sessions and pairing new *staff* with experienced *staff*;
- Reviewing books, videotapes, and articles on *family violence*; and
- Communicating with various agencies with which the program interacts.

For best practice, we also include training from

- The local *family violence shelter center*
- OR
- *Family violence non-residential center,*

By observing their hotline, and viewing videos with survivors of *family violence* as the primary subject as part of our BIPP staff training.

For best practice, our paid or volunteer administrative support staff has at a minimum, knowledge of

- The program’s mission, policies, and TDCJ-CJAD BIPP Guidelines.

**SECTION THREE: STAFF DEVELOPMENT**

**GUIDELINE 3**

- We are a current program or provider and have documentation ensuring the required staff development will be completed in two-year intervals from the date we have become accredited.
- OR
- We are a new program or provider and have documentation ensuring the required staff development is completed in two-year intervals a year after we have become accredited.

For best practice, we include the following *Staff development* topics:

- Ethics preferably related to *family violence* (at least six of the required hours);
- *Violence* as a form of oppression, including racism, sexism, and homophobia;
- Basic defense mechanisms of *batterers* that promote deception, distortion, and misrepresentation of the facts of the abuse and the experience of the *victim*;
- Relevant legal issues;
Substance abuse, psychopathology, and family of origin issues and their relationship to *family violence*;

Victim safety;

*BIPP* skill enhancement;

*Collusion*;

*Male privilege* and the gendered nature of family violence;

Methods of *collaboration* with *family violence shelter centers, family violence non-residential centers* and *family violence* advocates and the program’s *accountability* to them;

New trends in battering intervention programming; and

Current *family violence research* available from subscriptions and circulation of newsletters and bulletins, and information from technical assistance conferences.

For best practice, *we also offer*

*Family violence* trainings

and specialized *batterers* intervention training,

access local and state resources,

and attend other training opportunities within and outside of their community.

**SECTION THREE: STAFF SUPERVISION**

**GUIDELINE 4**

We have created a policy that requires supervision to include at minimum:

Documentation of one hour of face-to-face supervision of the direct service provider’s adherence to the TDCJ-CJAD *BIPP Accreditation* Guidelines one every four weeks.

Documentation of direct supervision to be kept in a personnel or administrative file.

Internal face-to-face supervision of direct service providers who work directly with batterers should include but is not limited to:

Peer supervision group debriefing;
Discussion of ethical dilemmas;

Victim safety planning;

Batterer’s goal revisions; and

Group observation and/or feedback shall not account for more than 50% of the supervision requirement.

We have created a policy that requires supervision to include at minimum:

Supervision for individual providers and program supervisors shall include documentation of face to face supervision or phone contact once every four weeks that includes but is not limited to items 1-5 listed above and:

Debriefing with BIPP supervisors from other accreditation BIPP service providers;

Peer to peer staff debriefing; and/or

Receiving feedback from family violence professionals with experience working with victims and/or batterers.

We have created a form to document staff supervision.

**SECTION FIVE: CASE RECORDS**

**GUIDELINE 5**

We have documentation ensuring we will maintain a centralized case record management system on batterers receiving BIPP services and demonstrate how the organization will comply with each requirement.

We have created a case record management system which includes, but it not limited to:

Assessments (Intake)

Signed written agreements, including termination policy, program obligations and participant’s obligations, and consequences for non-compliance;

Confidentiality and limits of confidentiality;

Signed group rules;

Compliance/attendance reports to referral sources monthly after assessment (intake) is completed. Copies of the compliance/attendance reports shall be kept in batterers’ files.
We have included a policy of reporting within five (5) working days to court mandated referral sources of any known:

- law violations,
- incidents of physical violence disclosed by batterers,
- and/or termination from the BIPP.

The case records management system includes a policy of reporting within five (5) working days to other referral sources incidents of

- physical violence disclosed by batterers,
- and/or termination from the BIPP.
- The only victim information that can be included in batterers’ files is the victim’s/partner’s name, address, and phone numbers, if provided by a batterer. If a batterer does not know the victim information, the program or provider shall have the batterer sign a statement that they do not know this information;

- Attendance records;
- Referrals to other services and agencies;
- Individualized plan; and
- Payment schedule.

For best practice, we have included a policy that ensures that:

- Licensed professionals on staff that provide direct services to batterers should retain files for the number of years required by those licensing agencies.

**SECTION SIX: CONFIDENTIALITY**

**GUIDELINE 6**

- We have developed a policy that ensures victim safety and confidentiality.
- We have developed a policy that requires separate files be maintained for batterers and for victims.
- We have only included victim information (the victim’s/partner’s name, address, and phone numbers) if provided by a batterer.
GUIDELENE 7

We have developed a policy and procedures for all participating batterers that includes a signed written agreement of confidentiality, and keep a copy on file.

We have developed an agreement of confidentiality form.

The policy informs batterers of the following limits to confidentiality:

Batterers are required to sign a “Consent for Release of Information,” which permits information to be released to the victim relating to when batterers enter and exit the program and information on program length and program requirements.

Batterers are required to sign a “Consent for Release of Information” to the referral source and/or other designated entities indicated by a batterer.

Batterers are required to sign a statement that they have been informed that personal data and possibly additional information will be submitted to TDCJ-CJAD by the program or provider for the purposes of performing program assessments and other research.

Batterers are required to sign a “Consent for Release of Information” that informs batterers that when it is determined that there is probability of imminent physical injury to oneself or to others, staff will take safety initiatives and may, if appropriate, notify medical or law enforcement personnel and/or the victim and referral source.

Case records are subject to subpoena.

If the assessment (intake) or subsequent contact reveals the possibility of incidents of child abuse or neglect, or abuse of the elderly or disabled, it must be reported to the Texas Department of Family and Protective Services (TDFPS). (Refer to Appendices D and E)

Information disclosed by batterers during an assessment (intake), group sessions, and exit is confidential and shall not be shared with victims/partners.

GUIDELENE 8

We have created a policy and procedures that ensures:

All observers of direct services and those with access to batterers’ and victims’ records will maintain all information confidential;

We have written confidentiality agreement for all observers of direct service and those with access to batterer’s and partner’s records.

We have also created a confidentiality form and procedures on where to maintain documentation.
SECTION SEVEN: CONFIDENTIALITY PERTAINING TO COMMUNITY EDUCATION AND MEDIA CONTACT

GUIDELINE 9

We have developed a policy that protects the confidentiality and safety of victims when a batterer is in contact with the media or participating in community education activities arranged by the program or provider.

We have created a form to document this requirement.

GUIDELINE 10

We have created a policy and procedure to obtain written consent from batterers and victims before batterers participate in any activity arranged by the program or provider which could result in public disclosure of the victim’s/partner’s identity.

We have created a policy and procedure that ensures that a BIPP employee will be present to protect a victim’s confidentiality and safety for any media contact arranged by our program.

We have created a consent form.

SECTION EIGHT: FEE PAYMENT SCALES AND PROCEDURES

GUIDELINE 11

We have created a policy that ensures the payment policy and fee schedule that establishes that payment is due at the time services are rendered and clearly communicates to batterers that financial consequences are one method of being held accountable for their behavior.

For best practice, we have included a policy to establish sliding scale fee to reflect batterers’ differing income levels. The sliding scale fee should accommodate indigent populations.

SECTION NINE: PROGRAM DURATION

GUIDELINE 12

We have created a policy that ensures our program includes:

Assessment (Intake) and Orientation

A minimum of 36 hours of group sessions
A minimum of 18 weekly sessions.

A provision that participants are not allowed to exceed one session per week.

We have documentation that ensures session breaks, assessment (intake), and orientation are not to be included towards the 36 hours.

**SECTION TEN: PROGRAM FORMAT**

**GUIDELINE 13**

We created a policy that will not allow women mandated by court orders to join a men’s group.

For best practice, we have created a policy which states:

- Female same-sex batterers should not be placed in female heterosexual BIPP groups
- Male same-sex batterers should not be placed in male heterosexual BIPP groups
- Female *victim* voluntarily requesting to receive BIPP intervention services from a program or provider should not be placed in a female mandated group.
- *We* will screen victims voluntarily requesting to receive BIPP intervention services to assure that coercion is not taking place.
- We will provide victims with appropriate referral information for victim services.

**GUIDELINE 14**

We have developed a policy to adopt our primary approach used with batterers be in a group format that holds batterers accountable for their abusive behavior.

We have included a policy that explains how the batterers are held accountable for their abusive behavior.

For best practice, we have included a policy that ensures:

- Groups led by one facilitator should have no more than 15 participants.
- Groups led by co-facilitators should have no more than 20 participants.
- Group sessions should have a consistent facilitator, unless the facilitator is on leave, to build rapport with participating batterers.
GUIDELINE 15

We have a policy and procedure that ensures BIPP components (Assessment, Intake Orientation, group sessions, and curriculum) focus on ending violence and holding batterers accountable for their violence.

We have a policy and procedure that ensures program’s facilitators hold batterers accountable for instances of victim blaming.

We have a policy and procedure that ensures programs or providers hold batterers accountable for their abusive behaviors, avoid colluding with the batterers, and facilitate batterers in working towards positive behavioral changes.

GUIDELINE 16

We have a policy ensuring that during group sessions facilitators confront and hold batterers accountable for instances of denying or denial, blaming, minimizing, justifying, and rationalizing their behavior, regardless of batterers’ relationships, current stress factors, or previous trauma.

Facilitators shall inform batterers that battering involves choices.

For best practice, we have developed a policy that ensures BIPP group sessions should include:

A “check-in” at the beginning of each session in which participants report on recent behavior, homework assignments, and problem areas;

Role-plays, groups exercises, or written work promoting the participation of batterers and the application of program guidelines;

A wrap-up concluding each session to provide closure and to de-escalate heightened emotions and affirm the focal points and/or program guidelines; and

Assigned homework extending the application and practice of the session’s focal points.

For best practice, we have included a policy that ensures BIPP group sessions are:

Co-facilitated.

For best practice, we have created a policy that ensures that:

Follow-up programs promoting violence prevention, self-help and social support should be encouraged beyond the BIPP duration.

Our program encourages batterers that are ready for change to engage in elements of community service or community restitution designed to expand batterers’
understanding of *family violence* and involvement in its prevention beyond the content of their weekly sessions

**SECTION ELEVEN: PROGRAM CURRICULUM**

**GUIDELINE 17**

We have adopted a curriculum for our group sessions that meets that following criteria:

- We will use a written curriculum that has been approved by TDCJ-CJAD and is designed to end *violence* and abuse.
- The program curriculum is based on an intervention model that recognizes *family violence* as the result of one person in an intimate relationship systematically using tactics of emotional and physical abuse in order to maintain power and control over the other.
- An approach that assigns responsibility for *violence* solely to *batterers*, clarifies that *family violence* is not provoked, and provides a strategy for assisting *batterers* in taking responsibility for the *violence* and abuse;
- Content that encourages the *batterers* to develop critical thinking skills that will allow them to rethink their behavior and identify behavior choices other than *violence*.
- Content that supports the belief that *family violence* and abuse is primarily a learned and/or chosen behavior and that *non-violence* can be chosen instead.
- Content that includes information on the relationship between substance abuse and *family violence* and explains that *family violence* is not the result of substance abuse.
- Content that teaches *non-violent* discipline of children.
- Content that promotes *batterers’* empathy for *victims’* experience and the negative effects their abuse has caused the *victims* and their families.
- Content that identifies sexual abuse as a form of *violence*.
- Content that includes the effects of *family violence* on children, including discussions and exercises designed to make *batterers* aware of the impact of their *violence* towards their *partners* or children.
- Content designed to identify feelings that increase the *batterers’* ability to use personal choice so they can stop using *violence* and abuse towards others.
- Content that teaches effective communication skills and listening with empathy.
- Content designed to explain negotiation and conflict resolution skills.
Content that challenges stereotypical gender role expectations and supports an egalitarian relationship.

Development of a non-violence plan, including for example, strategies for helping batterers develop a non-violent support system.

Content that identifies the effects of distorted thinking on emotions and abusive behaviors.

Content that includes sexual respect.

We have also completed the form included in the TDCJ-CJAD Supplemental Curriculum Tracking Form.

For best practice, the program curriculum and/or group sessions DO NOT include the following:

Anger management techniques that identify anger as the cause of family violence;

Theories or techniques that identify poor impulse control as the primary cause of family violence or identify psychopathology on the part of the either party as the primary cause of family violence;

Marriage or couples counseling.

For best practice, we have included a policy that ensures that:

Referrals to parenting classes and other resources that demonstrate knowledge, understanding, and sensitivity to family violence issues are available to batterers.

For best practice, our program curriculum and/or group sessions pertaining to the effect of family violence on children include the following:

Discussion and exercises designed to help batterers develop empathy for children affected by their violence.

Basic information on child development and realistic and unrealistic expectations of children at various ages.

For best practice, we have created a policy that ensures that:

if we do not possess the expertise to present this information ourselves we shall seek partnerships with local experts in parent education, child abuse, and child development.
We will coordinate thoroughly or co-present on the above topics with local experts so that deficits in our knowledge about family violence will not leave batterers with an inaccurate impression about the effects of family violence on children.

SECTION TWELVE: INTAKE PROCEDURES

GUIDELINE 18

We have created a procedure about intake and assessment sessions and information gathered from participants.

We have created intake and assessment forms and use other tools that obtain information from the batterers about:

- Their current and past use of violence towards victims/partners,
- Abuse and/or neglect towards children,
- Substance abuse,
- and other abusive behaviors.

For best practice, we have included questions and a form for the intake and assessment that will collect the following information about the participant:

- History of threats, assaults, ideation of homicide or suicide, homicidal or suicidal attempts;
- Possession of, access to, or a history of using weapons;
- Degree of persistent focus on partner actions, whereabouts, friends;
- History of head trauma injuries;
- History of episodes of blackouts;
- History of mental health conditions, and current mental health status;
- History of drug or alcohol abuse, and/or other substance;
- History of sexual abuse of the victim and others;
- Nature of current relationship with the victim;
- Accurate and detailed description of the most recent violent incident; and
History of abuse and/or trauma as a child.

GUIDELINE 19

We have created a policy that established criteria for satisfactory completion.

We have created a program completion that includes, but is not limited to:

- Completion of orientation and intake/assessment
- Completion of the required number of sessions as directed by the program. Service providers must comply with the requirements in Guideline # 12
- Full payment of fees; and
- Compliance with program rules.

GUIDELINE 20

We have created a policy that shall notify the referral source when a batterer is deemed inappropriate for our program.

For best practice, we have created a policy that will take the following inappropriate characteristics into consideration for referral back to the referral source:

- Severe mental health problems (chronic depression, personality disorders, or suicidal or homicidal ideation),
- Disruptive behavior,
- Substance abuse problems
- And/or generalized violence

GUIDELINE 21

We have created a policy and procedure to conduct and document an individualized plan for batterers accepted into the program should be completed within four (4) weeks of assessment (intake).

We have created a form for individualized plan.

For best practice, our individualized plan includes:
Recommendations to the *referral source* for additional interventions in response to *assessment (intake)* information or observed participation in groups.

**GUIDELINE 22**

We have created a policy that prohibits our program to make a fee-based, self-referral. For best practice, our policy includes:

We have developed and offer services to *batterers* who attend on voluntary basis in addition to completing the program requirements.

**SECTION THIRTEEN: WRITTEN PARTICIPANT AGREEMENTS**

**GUIDELINE 23**

We have created a policy and a form that clearly delineates *participants’* obligations to the program and consequences for *non-compliance* with the agreement;

We have created a procedure to review the written agreement signed by the *participants* that clearly delineates participants’ obligations to the program and consequences for *non-compliance* with the agreement.

We have included the following obligations to the written agreement:

Cooperation with group rules;

*Compliance* with the written attendance policy;

Cessation of violent, abusive, threatening, and controlling behaviors, including stalking and violation of a protective order;

Non-abusive, non-controlling, and non-intimidating behavior toward other group participants and group facilitators;

Agreement to be drug and alcohol free while participating in intervention services; and

*Compliance* with financial agreements made with the program.

**GUIDELINE 24**

We have created a policy that establishes a written agreement that clearly delineates the obligations of the program to *batterers*.
We have created a procedure that will include providing a copy of the written agreement to *batterers*.

We have created a written agreement that includes the program’s obligation to:

1. Provide services in a manner that *batterers* can understand;
2. Provide a copy of all written agreements;
3. Notify *batterers* of changes in group time and schedules;
4. Comply with anti-discrimination laws and all applicable state and federal laws;
5. Report every four (4) weeks after *assessment (intake)* is completed to the Community Supervision and Corrections Department (CSCD) or other *referral source* regarding the *batterers’ compliance* or lack of *compliance*;
6. Report immediately (within 5 working days) to the CSCD or other *referral source* any known law violation, incidents of physical *violence*, and/or *termination* from the *BIPP*;
7. Report to *batterers* regarding their status and participation; and

For best practice, we will have an obligation to:

9. Make a reasonable attempt to provide services in the *participant’s* primary language.

**SECTION FOURTEEN: VICTIM CONTACT AND NOTIFICATION**

**GUIDELINE 25**

We have developed and implemented written procedures for *victim contact* if we initiate *victim contact*.

We have developed and implemented written procedures for cases when the *victim* initiates the contact.

The written procedures should address the following:

10. Not disclosing to *batterers* any information reported by *victims/partners*, including *victims* verifying *batterers’ compliance* or continued abuse;
11. Access to information regarding a *safety plan*.
Safety issues and potential consequences for the victim that may arise from program contact or continued communication with the program;

Options available to the victim, such as protective orders, referrals to a family violence shelter center, family violence non-residential center, legal advocacy, and other services;

The victim’s/partner’s choice to initiate or terminate contact with the program or provider at will; and

Disclosure that batterers’ completion of the program is not a guarantee of the absence of future violence.

GUIDEline 26

We have developed a policy that establishes that the program shall neither persuade nor coerce victims to waive confidentiality. Victims shall be informed of the limits to confidentiality (in accordance with Guideline # 7). We shall keep victim safety in mind at all times.

GUIDEline 27

We have developed a policy and procedures for written notification to be mailed to victims within five (5) working days of batterers entering and exiting (completion or exit for any reason) from the program. Both the entrance and exit report shall include notification that participation in or completion of the program does not guarantee the absence of future violence.

We have created a print notification letter, flyer or the correspondence to be mailed to the victims/partners.

We have created a method to document that notification letter (s) were sent.

GUIDEline 28

We have created a policy and procedure to ensure that Victims seeking services shall be referred to appropriate family violence resources.

We have created a policy that shall not require victims to participate in any BIPP intervention services (individual, couples, and/or group counseling) provided to batterers.
For best practice, we have created a policy and procedure that ensures that:

_______ If a victim reports a new violent incident, the we should advise the victim of resources available from the appropriate law enforcement agency and the local family violence shelter center or family violence non-residential center.

_______ We will not recommend to victims to participate in marriage and couples counseling during the time their batterer is receiving battering intervention services.

SECTION FIFTEEN: EXITS

GUIDELINE 29

_______ We have created a policy and procedure that documents and implements a policy that outlines the circumstances under which batterers may be terminated before completing the program. This ensures that termination decisions are consistent and objective. We shall provide batterers at the time of assessment (intake) with a copy of the program’s circumstances under which they can be terminated before completion.

_______ We have created a form that outlines the program’s circumstances under which participants can be terminated before completion

_______ We have created a method of documenting that the participant received notification of the circumstances under with participants can be terminated before completing.

This can include but is not limited to:

_______ Continued abuse, particularly physical violence;

_______ Non-attendance;

_______ Non-compliance with other intervention conditions (in accordance with Guideline # 23) or provisions that are part of the batterers’ written agreement;

_______ Non-compliance with fee payment;

_______ Violation of program and/or group rules, and

_______ Frequent and/or continued use of manipulation or disruptive behavior during group sessions.

GUIDELINE 30

_______ We have created a policy and procedures that ensure an exit report shall be provided to the referral source within five (5) working days.

_______ We have created an exit report that only includes factual information that can be verified, and shall state that the participation in or completion of the program does not
guarantee the absence of future violence. An evaluation of the success of a batterer’s participation in the program should be made.

SECTION SIXTEEN: PROGRAM ASSESSMENT

GUIDELINE 31

We have created a policy and procedures that ensure that monthly activity reports (MAR) are submitted to TDCJ-CJAD by the 10th of each month with data from the prior month and we shall submit actual program output (APO) reports to TDCJ-CJAD annually.

We have created a policy and procedure to ensure that Monthly activity reports (MAR) and actual program output (APO) reports submitted to TDCJ-CJAD shall be kept on file for a period of seven (7) years after they are submitted.

For the best practice, we have developed a policy that will ensure:

That the program should conduct and document annual external program assessments regarding our services from all referral sources.

SECTION SEVENTEEN: COMMUNITY EDUCATION

GUIDELINE 32

We have developed a policy and procedure that includes a provision to offer training to law enforcement, prosecutors, judges, probation officers, and others on the dynamics of family violence, program options, and program activities.

We have developed a method to document trainings provided and efforts to provide training on an annual basis.

For best practice, we will ensure that the following topics are covered within the training offered:

family violence,
battering,
its effects on victims,
and appropriate intervention strategies to eliminate violence against women and children.

Information regarding program length, fees, client eligibility, program employees’ role in the hearings, how the justice agencies can access services, and BIPP program discharge criteria; and
Written information and reporting procedures regarding BIPP processes, including:

The BIPP program’s right to accept, reject, or discharge batterers mandated or referred to the program;

The reporting of violations of protective orders, bail bond conditions, and community supervision and parole conditions to the supervising agency or court;

Procedures for reporting any known violations of any provision of a court order mandating battering intervention services to the appropriate agency or court;

Procedures for reporting of further incidents of violence, including dates, brief descriptions, and outcomes; and

Procedure for submitting participant reports to the court.

SECTION EIGHTEEN: REFERRAL SYSTEM

GUIDELINE 33

We have developed and keep a documented system for receiving referrals from the courts and for reporting to the court regarding batterers’ compliance with the program.
APPENDIX: SAMPLE FORMS

PARTICIPANT AGREEMENT
INTAKE AND ASSESSMENT TOOLS
RELEASE OF INFORMATION
VICTIM NOTIFICATION LETTER
DISMISSAL NOTICE
COMPLETION NOTICE
PROGRESS REPORT
ATTENDANCE LOG
PERSONNEL TRAINING LOG
STAFF DEVELOPMENT LOG

NOTE:
Please feel free to recreate the forms for your program's use. Your program may want to modify these forms to reflect specific conditions affecting your community or for consistency within your files.

All of the following forms are samples of forms that BIP Programs may use to document services provided. You may also use these forms as a starting point for creating your own customized tools reflecting your own needs.

While these forms were chosen because they are the most accurate reflection of the 1999 BIPP Guidelines standards, they DO NOT reflect the new 2009 BIPP Accreditation Guidelines. Revisions may be necessary. Programs have voluntarily, as courtesy, allowed TCFV to distribute their forms for use.
Working Agreement for Group Members

The purpose of the Resolution Counseling program is to build healthy relationships by ending abuse and violence. The program consists of a minimum of 21- or 30 weekly, 2-hour group sessions, as determined by the referral source and/or by LifeWorks. If the client is court-ordered or on probation, he or she understands that completion of this program is a part of his or her sentence.

A. FEES

- The fee for Orientation and Intake is $30. To reschedule an intake appointment, client must call 24 hours in advance or pay a $20 no-show fee.
- The fee per group session is $75 until proof of income is provided. Upon proof of income, we may reduce the session fee. If applicable, the adjusted fee will be $_______ or TBD.
- For security reasons, remit all fees by MONEY ORDER or CREDIT CARD payable to LifeWorks.
- Group session fees are due at the start of each session. LifeWorks may refuse admittance without payment, which could result in client being counted absent. Fees will not be refunded when the service is delivered.

B. ATTENDANCE

- Client agrees to attend and complete _______ sessions to receive a Certificate of Completion.
- We expect clients to arrive on time. Tardiness may mean the client is not admitted and is counted absent.
- We will charge $20 for absences that are not excused by the counselor (e.g., no-show/no-call).
- Two (2) absences in a row, client will be dismissed from the program.
- Three (3) absences in a 30-day period result in dismissal from the program.
- Four (4) absences result in dismissal from the program. At dismissal, LifeWorks notifies the referring agency.
- Restarting the program means no credit for sessions attended; the count starts from zero.
- Call 735-2123 to restart. Client will be required to pay a $30 restart fee, plus any balance due.

C. PARTICIPATION - GROUP

- Clients are responsible for their participation. LifeWorks expects clients to discuss their attitudes, feelings, beliefs and behavior in their relationships. We expect clients to take part in discussions and exercises.
- LifeWorks expects clients to refer to all persons, present or not, in respectful terms.
- We expect written assignments to show thought and effort.
- Counselors sometimes assign homework. It is due at the start of the next session. Failure to turn in homework may result in no credit for the session.
- Program staff determines completion from the program. Successful completion criteria include, but are not limited to, cooperation with the group leader, compliance with Working Agreement and all LifeWork’s policies, active involvement in discussions, and personal progress toward accountability and nonviolence.
- Noncompliance may result in dismissal from the program or additional requirements to graduate, as determined by LifeWorks Resolution Counseling staff.
D. PROGRAM EVALUATION
♦ For purposes of program evaluation we may contact partners and/or ex-partners three (3) and twelve (12) months following client’s completion of the program. We will ask clients to sign a consent form for this.

E. CONFIDENTIALITY
♦ In order to provide the best conditions for therapeutic work, clients are entitled to confidentiality about their identity and other information shared in group. Any information LifeWorks releases to a third party will be limited to that which is required by referral and funding sources. Each client is also required to keep the identity and personal information shared by other group members confidential.

♦ There are limits to confidentiality, which include:
  - When a client is believed to be in imminent danger to him/herself or others;
  - When a client reveals information that suggests child or elder abuse or abuse of a person with a handicap, staff are obligated by law to inform the Texas Department of Family and Protective Services;
  - When a judge through a court-ordered subpoena requires records and/or testimony;
  - When a client provides written consent.

F. OBSERVERS
♦ Observers may occasionally sit in on a group. LifeWorks requires them to sign a confidentiality statement.
♦ Observers may include student interns, trainees, other professionals, or community members.

G. COMMUNICATION
♦ Clients are responsible for providing their group leader any changes in address or phone number(s).
♦ Call your counselor if you have to miss group for a legitimate reason; you may need to provide documentation.
♦ In emergency situations, call 911, the 24-hour MHMR Hotline (472-4357 or 472-HELP), or Psychiatric Emergency Services, PES, (454-3521).
♦ For a family violence crisis, call 911. Clients may call a Resolution Counselor (9-6, Mon-Fri).
♦ If you are a battered person in need of help, call the 24-hour confidential hotline, 1-800-799-SAFE (7233).

H. PARTICIPATION - PERSONAL
♦ I agree to the program goals of safety, ending all violence, healthy relationships based on equality and accountability.
♦ I agree to be non-violent and non-abusive while participating in the Resolution Counseling program.
♦ I will comply with all conditions of my court order, probation, personal bond or other referral source.
♦ I will not bring weapons on the premises.
♦ If I demonstrate threatening, disruptive, or inappropriate behavior, or come to group under the influence of alcohol or drugs, I understand I will be asked to leave and counted absent. If I do not leave the premises when asked by any LifeWorks staff, I will be subject to termination from
the program.

- I agree to inform my group leader of any violent incident or police call to my home resulting from a family disturbance and to discuss this in group or individually.

**Resolution Counseling** reserves the right to change program policies and procedures at any time, for those changes to become effective immediately upon adoption, and for them to apply to all current and future participants.

**I understand that LifeWorks makes no guarantee as to the results of their efforts.**

By my signature I understand and agree to the conditions of the Resolution Counseling program as outlined above, and acknowledge that I have received a copy of this agreement. Failure to comply with these agreements and rules may result in my suspension or dismissal from the program and, if court ordered, legal consequences.

______________________________
Client signature

______________________________
Resolution Counselor

______________________________
Date

______________________________
Date
# VIOLENCE INTERVENTION PROGRAM

## Registration Information

**Tell us about yourself**

**Please print and complete all items**

<table>
<thead>
<tr>
<th>Name:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td>Home Phone:</td>
<td>Work Phone:</td>
</tr>
<tr>
<td>Alternate Phone:</td>
<td>Date of Birth:</td>
</tr>
<tr>
<td>How old are you?</td>
<td>Social Security Number:</td>
</tr>
</tbody>
</table>

- Are you still in a relationship with the person you assaulted?  □ Yes □ No
- Have you ever thought of hurting or killing yourself? □ Yes □ No
  If so, when? ____________________
- Have you ever thought of hurting or killing someone else? □ Yes □ No
  If so, when? ____________________

**How do you describe your ethnic background?**

- □ White (non-Hispanic)
- □ Black
- □ Hispanic
- □ American Indian, Alaskan Native
- □ Asian, Pacific Islander
- □ Other: ___________________________

**What was the last grade of school you completed?**

- □ Less than high school (0 – 8 years)
- □ Some high school (9 – 12, but did not complete 12th grade)
- □ High school graduate or GED
  - □ Attended a vocational, trade, or business school after high school
  - □ College less than 2 years
  - □ College Associates degree
  - □ College two years or more, no degree
  - □ College Bachelor degree
  - □ College post graduate classes with no degree
  - □ Graduate or professional school: MA, MS, PhD, EdD, PsyD, MD, JD
What is your annual household income?

This question is for statistical purposes and your response will not change the price you pay for the program.

- $5,000 or less
- $5,001 - $9,999
- $10,000 - $14,999
- $15,000 - $24,999
- $25,000 - $34,999
- $35,000 - $44,999
- $50,000 +

How long have you been married or in an intimate relationship? __________________________

Do you have children?  □ Yes  □ No
If yes, tell us about them:

<table>
<thead>
<tr>
<th>Child’s Name</th>
<th>Age</th>
<th>Does this child live with you?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Yes □ No</td>
</tr>
</tbody>
</table>

Are you taking any medication?  □ Yes  □ No
If yes, what are you taking? ________

For what medical condition(s) are you taking the medication? _________________

Do you have any significant health, drug, alcohol, or psychiatric concerns about yourself?  □ Yes  □ No
If yes, please explain:

________________________________________________________________________
________________________________________________________________________

Was there alcohol and/or drug abuse in the home while you were growing up?  □ Yes □ No

What is the word that best describes you? __________________________

Personal Violence History

Part 1: The following questions are about your life as an adult

Have you ever been to counseling or psychotherapy before now?  □ No □ Yes
If yes, please answer the following:
When? __________________________
Where? __________________________
How long? __________________________
Reason? __________________________
□ Voluntary □ Court Mandated

What is the relationship between you and the person involved in the incident? Check only one.

□ Spouse □ Ex-spouse □ Girlfriend (not live in) □ Father □ Other relative

□ Live-in partner □ Common-law partner □ Mother □ Child

How soon after you met did the physical violence begin? ________________________________

How do you define violence?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Have you ever been arrested in the past for assaults? □ No □ Yes

If yes, when and what kind of assault?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Have you ever been found guilty in a court of law? □ No □ Yes

If yes, what were the convictions for and what happened to you?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Part 2: The following questions refer to all of your relationships.

When was the first time you used physical force (for example, push, punch, kick, slap, restrain, pull hair, and so on) against a woman? ________________

Who was she? ________________________________________

How did you feel afterwards?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

When was the worst incidence of violence (physical, sexual, and/or verbal) you used against a woman? ________________

Who was she? ________________________________________

What did you do?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
How did you feel afterwards?
________________________________________________________________________
________________________________________________________________________
_______________________________________

Have you ever tried to control your violence in the past? □ No □ Yes
If yes, please explain:
________________________________________________________________________
________________________________________________________________________
_______________________________________

What do you think you can do to stop being violent towards your partner or the children?
________________________________________________________________________
________________________________________________________________________
_______________________________________

Have any of your partners sustained any of the following as a result of your acts of violence?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knocked out</td>
<td>☐</td>
<td>☐</td>
<td>Scratches</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Choked unconscious</td>
<td>☐</td>
<td>☐</td>
<td>Bruises</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Bleeding</td>
<td>☐</td>
<td>☐</td>
<td>Swelling</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Wounds from firearms</td>
<td>☐</td>
<td>☐</td>
<td>Black eye</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Broken nose</td>
<td>☐</td>
<td>☐</td>
<td>Needed medical attention</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Broken bones</td>
<td>☐</td>
<td>☐</td>
<td>Needed surgery</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Other</td>
<td>☐</td>
<td>☐</td>
<td></td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Have you ever done any of the following in your relationships? (check one for each item)

<table>
<thead>
<tr>
<th></th>
<th>Threatened to do it</th>
<th>Did it at least once</th>
<th>Neither</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slap</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Grab</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Punch</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Kick</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Push</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Choke</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Bite</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Pull hair</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Twist arm</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Pin to ground or wall</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Hold against her will</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Hit with an object</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Beat up</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Use gun</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------------</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Use knife</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use other weapon, which?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Break things</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Throw things</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Break down door</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Throw food</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harm or neglect pet</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be verbally abusive</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexually abuse</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Show intense jealousy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Force to have sexual intercourse</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Force to have sex with other people</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hurt her children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harm or neglect pet</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Control what she does</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Were any of the women pregnant when you did any of the above acts? □ No □ Yes

Part 3: To the best of your ability, we want you to recall the incident (when any abusive or violent acts took place) that resulted in your coming to see us.
What was happening that lead up to the situation? (describe the situation)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
When did this occur (how long ago)? ________________________________
Why do you think your anger escalated?
________________________________________________________________________
________________________________________________________________________
____________________________________

Were there any weapons involved? (household objects would apply) □ No □ Yes
If yes, please explain:
________________________________________________________________________
________________________________________________________________________

Were there any injuries? □ No □ Yes
If yes, please explain:
________________________________________________________________________
________________________________________________________________________

Did you or your partner use alcohol or other drugs prior to or during this incident?
☐ No ☐ Yes
If yes, who was using, what was used, how much was used, and how long was it used?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Was there any outside intervention during this episode? Did someone try to stop it (children, friends, neighbors, and so on)? ☐ No ☐ Yes
If yes, please explain:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Were there children involved or did they observe this incident? ☐ No ☐ Yes
Where were they and what did they do?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Were the police called? ☐ No ☐ Yes
If yes, what happened when they arrived?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
The Attitudes Toward Males in Society Scale

The statements below describe attitudes toward the role of men in society which different people have. There are no right or wrong answers, only opinions. You are to express your feelings about each statement, circling your response.

Men are naturally better drivers than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

Men are naturally better able to control their feelings than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

Men are naturally more mechanical than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

Men generally are more knowledgeable about current events and therefore have “more important things to say” at social gatherings than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

Because men are strong and women are weak, it is only right that this is a man’s world.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

Men can handle pressure situations better than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

It’s common sense that men are naturally more worldly wise than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

Men are more likely than women to be skilled in occupations that call for competitive and logical abilities.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

It’s a fact that most men are more interesting to listen to than most women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

Men are naturally more skillful in athletics than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

On the average men should be considered as more capable of contributing to the country’s economic stability than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

Men are inclined by nature to be more truthful and direct than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

It’s only natural that men are more interested in sports than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

Men are more decisive in crisis situations than women.
1 - agree strongly  2 - agree mildly  3 - disagree mildly  4 - disagree strongly

The Family Place Battering Intervention and Prevention Program

Conflict Skills Survey

Please use the following scale to rate how you functioned during conflicts before you started BIPP and how you function now that you have completed the program:

1= Never        2=Rarely        3=Sometimes        4=Often

<table>
<thead>
<tr>
<th>DURING A CONFLICT, how often did/do you...</th>
<th>Before BIPP</th>
<th>Now</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Discuss the issue calmly?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>2. Talk through a disagreement?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>3. Identify and express your feelings in a constructive manner?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>4. Pay attention to your self-talk?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>5. Think about the consequences of your actions?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>6. Think about the impact of your behavior on your partner?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>7. Think before you speak or act?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>8. Make non-abusive choices?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
</tbody>
</table>

Using the same scale, please rate how you function in general before you started the program and how you function now that you have completed the program:

<table>
<thead>
<tr>
<th>IN GENERAL, how often did/do you...</th>
<th>Before BIPP</th>
<th>Now</th>
</tr>
</thead>
<tbody>
<tr>
<td>9. Feel safe, secure and emotionally stable?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>10. Feel able to take care of your own needs?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>11. Feel good about yourself?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>12. Think that you have options and resources?</td>
<td>1 2 3 4</td>
<td>1 2 3 4</td>
</tr>
</tbody>
</table>

Additional comments about the program and/or how we could improve:

______________________________________________________________________________
### INTAKE ABI

**Name:** _______________________________  **Date:** ______________________

Here is a list of behaviors that many women report have been used by their partners or former partners. We would like you to estimate how often these behaviors occurred during the 6 months before you began this program.

Circle a letter from the list below for each item to show your closest estimate of how often the behavior happened in your relationship with your partner or former partner during the 6 months before you began the program.

<table>
<thead>
<tr>
<th>Partner’s Name: ____________________________________________</th>
<th>Never</th>
<th>Rarely</th>
<th>Occasionally</th>
<th>Frequently</th>
<th>Very Frequently</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Called her a name and/or criticized her.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>2. Tried to keep her from doing something she wanted to do (example: going out with friends, going to meetings).</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>3. Gave her angry stares or looks.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>4. Prevented her from having money for her own use.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>5. Ended a discussion with her and made the decision yourself.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>6. Threatened to hit or throw something at her.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>7. Pushed, grabbed or shoved her.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>8. Put down her family and friends.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>9. Accused her of paying too much attention to someone or something else.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>10. Put her on an allowance.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>11. Used the children to threaten her (example: told her that she would lose custody or said you would leave town with the children).</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>12. Became very upset with her because dinner, housework, or laundry was not ready when you wanted it or done the way you thought it should be.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>13. Said things to scare her (example: told her something “bad” would happen or threatened to commit suicide).</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>14. Slapped, hit, or punched her.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>15. Made her do something humiliating or degrading (example: made her beg for forgiveness or ask your permission to use the car or do something).</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>16. Checked up on her (example: listened to her phone calls, checked the mileage on her car, called her repeatedly at work).</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>17. Drove recklessly when she was in the car.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>18. Pressured her to have sex in a way that she didn’t like or want.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>19. Refused to housework or child care.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>20. Threatened her with a knife, gun, or other weapon.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>21. Told her she was a bad parent.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>22. Stopped her, or tried to stop her from going to work or school.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>23. Threw, hit, kicked, or smashed something.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>24. Kicked her.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>25. Physically forced her to have sex.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>26. Threw her around.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>27. Physically attacked the sexual parts of her body.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>28. Choked or strangled her.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
<tr>
<td>29. Used a knife, gun, or other weapon against her.</td>
<td>N</td>
<td>R</td>
<td>O</td>
<td>F</td>
<td>V</td>
</tr>
</tbody>
</table>
Have you ever done any of the following in your relationships? (check one for each item)

<table>
<thead>
<tr>
<th></th>
<th>Threatened to do it</th>
<th>Did it at least once</th>
<th>Neither</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slap</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Grab</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Punch</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Kick</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Push</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Choke</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Bite</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Pull hair</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Twist arm</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Pin to ground or wall</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Hold against her will</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Hit with an object</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Beat up</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Use gun</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Use knife</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Use other weapon, which?</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Break things</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Throw things</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Break down door</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Throw food</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Harm or neglect pet</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Be verbally abusive</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Sexually abuse</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Show intense jealousy</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Force to have sexual intercourse</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Force to have sex with other people</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Hurt her children</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Harm or neglect pet</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Control what she does</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

Were any of the women pregnant when you did any of the above acts? □ No □ Yes
### VIP Registration Checklist

**Date:**

**Client #:**

**Name:**

**SUBSTANCE ABUSE SCREENING:**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you ever felt you should cut down on your drinking?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have people annoyed you by criticizing your drinking?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever felt bad or guilty about your drinking?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover (i.e., as an eye-opener)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**RAPS**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you sometimes take a drink in the morning when you first get up?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>During the past year, has a friend or family member ever told you about things you said or did while you were drinking that you could not remember?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>During the past year, have you had a feeling of guilt or remorse after drinking?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>During the past year, have you failed to do what was normally expected of you because of drinking?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>During the past year, have you lost friends or girlfriends or boyfriends because of drinking?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**INDIVIDUALIZED PLAN:**

- **Attend 20 week VIP**
  
  Alcohol/drug referral: If at least two positive responses are made to the CAGE and at least one positive response is made to the RAPS make referral to SAIP and send letter to referral source. Place a copy of the referral letter in the participant’s file. Inform the participant that his participation in SAIP is encouraged but is not required to continue in VIP.

- **Mental health referral.** If a mental health referral is needed please make a referral to at least three different providers. List the names of the referrals here and place copies of the referral form in the participant’s file.
  1. 
  2. 
  3. 

- **Individual meetings prior to starting group meetings?**

- **Other:**
HILL COUNTRY CARES  
Battering Intervention & Prevention Program (BIPP)  

PARENT/CHILD RELATIONSHIP ASSESSMENT

Client Name: _______________________________ Date: ____________

1. Are your children living in your home with you? □ Yes □ No
2. If yes, what is the age and your relationship to each child?
   Age: ______ Relationship: ______________
   Age: ______ Relationship: ______________
   Age: ______ Relationship: ______________
   Age: ______ Relationship: ______________
   Age: ______ Relationship: ______________

3. Describe your relationship with the child(ren).

4. How do you discipline your child(ren)?

5. Has anyone ever told you that you discipline the child(ren) too harshly? □ Yes □ No  If yes, explain:
   ______________________________________________________________________________________

6. Have you ever lost control of yourself while discipling or punishing your child(ren) even if you didn't mean to? □ Yes □ No  If yes, explain:
   ______________________________________________________________________________________

7. Have you ever been reported to CPS (Child Protective Services) for child abuse? □ Yes □ No  If yes, describe the circumstance surrounding the report of abuse:
   ______________________________________________________________________________________

8. Were you ever abused or punished severely by your parents or other family members? □ Yes □ No  If yes, explain:
   ______________________________________________________________________________________

BIPP Accreditation Guideline Compliance Checklist  39
Anger Styles Quiz

Circle One

1. I try never to get angry. Yes No
2. I get really nervous when others are angry. Yes No
3. I feel I’m doing something bad when I get angry. Yes No
4. I tell people I’ll do what they want, but then I often forget. Yes No
5. I say things like, “Yeah, but...” and “I’ll do it later.” Yes No
6. People tell me I must be angry but I’m not sure why. Yes No
7. I get jealous a lot, even when there is no reason. Yes No
8. I don’t trust people very much. Yes No
9. Sometimes it feels like people are out to get me. Yes No
10. My anger comes on really fast. Yes No
11. I act before I think when I get angry Yes No
12. My anger goes away very quickly after I explode. Yes No
13. I get very angry when people criticize me. Yes No
14. People say I am easily hurt and oversensitive. Yes No
15. I get angry when I feel bad about myself. Yes No
16. I get mad in order to get what I want. Yes No
17. I try to scare others with my anger. Yes No
18. I can pretend to be very mad when I’m really okay. Yes No
19. Sometimes I get angry just for the excitement or action. Yes No
20. I like the strong feelings that come with my anger. Yes No
21. My anger takes over and I go out of control. Yes No
22. I seem to get angry all the time. Yes No
23. I just can’t break the habit of getting angry a lot. Yes No
24. I get mad without thinking – it just happens. Yes No
25. I become very angry when I defend my beliefs and opinions. Yes No
26. I feel outraged about what others try to get away with. Yes No
27. I always know I’m right in an argument. Yes No
28. I hang onto my anger for a long time. Yes No
29. I have a hard time forgiving people. Yes No
30. I hate people for what they’ve done to me. Yes No
Ways You May Have Hurt Your Partner

Name: _____________________________ Date: ___________
Partner’s Name: ____________________ Years Together: ______

Have you ever:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Called her a name or made fun of her</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ignored her</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lied to her</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Told her that she was a bad parent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refused to do housework or child care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Made her ask permission to use personal property</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accused her of paying too much attention to someone or something else</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Made her beg for forgiveness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demanded to be waited upon by her</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intimidated her through your tone of voice, looks, or stares</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Put down her family or friends</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Put down her physical appearance or tried to change her appearance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discounted and devalued her strengths, accomplishments, or goals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Told her that no one else would want her</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threatened often to leave her or divorce her</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harassed her about past relationships or accused her of cheating</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Told her to shut up</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Put down or yelled at her in front of children</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Punished her children when you were angry at her</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threatened to take her children or that she would lose custody</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Said abuse did not happen or said she deserved it</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Became very upset because dinner, housework, or laundry was not done</td>
<td></td>
<td></td>
</tr>
<tr>
<td>when you wanted it done or to your satisfaction</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Humiliated her</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prevented her from leaving a room or her home</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discouraged her from going to school, work, or other places</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prevented her from seeing family and/or friends</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Listened to her phone calls, disabled her phone, or opened her mail</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Followed her or had her followed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Checked mileage on her car or prevented her from driving</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phoned her repeatedly at work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Put her on a monetary allowance or made her ask or beg for money</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Made her explain her whereabouts at all times</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insisted on final say (ignoring her opinion) in all decisions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Threatened to hit her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Threatened to throw objects at her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Threatened to kill her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Destroyed things (including personal property) in her presence or abused family pets</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Hit walls or pounded your fist when angry at her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Driven recklessly with her in the car</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Threatened to harm or kill her family or friends</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Threatened to harm or kill yourself</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Hurt or mutilated yourself to scare her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Bodily restrained or held her against her will</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Pushed, shoved, or thrown her around (into walls, furniture, floor, etc)</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Slapped her or hit her with an open hand</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Hit her with a fist</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Scratched her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Pinched her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Pulled her hair</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Grabbed her or injured her by holding or squeezing too tightly</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Spit on her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Bit her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Kicked her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Burned her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Choked or tried to strangle her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Hit her with an object or used a weapon against her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Chased her with a car or tried to run her off the road, or hit her with a car</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Tried to poison her</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Physically hurt her while she was pregnant</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Made her use drugs or alcohol against her will</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Denied her the right to receive health care or take medication</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Controlled her food intake</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Told her about your sexual affairs with others</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Expected her to view pornography with you</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Called her negative sexual names (“frigid,” “whore,” etc.)</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Forced or pressured her to participate in sex against her will</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Made her feel guilty or pouted when she did not want to have sex</td>
<td></td>
<td>No</td>
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<tr>
<td>Pressured her into sexual activity that hurt her or made her feel ashamed</td>
<td></td>
<td>No</td>
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<tr>
<td>Forced her to have sex in the presence of others</td>
<td></td>
<td>No</td>
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<tr>
<td>Used threatening objects or weapons during sex</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Prevented her from using birth control or lied about your use of birth control</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Withheld information about being exposed to a sexually transmitted disease</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Physically attacked sexual parts of her body (breasts or genitals)</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Is she afraid of you?</td>
<td></td>
<td>No</td>
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</tbody>
</table>
REQUEST FOR A RELEASE OF INFORMATION

I understand that information may be exchanged with the counseling/education/crisis/legal teams working with the Batterer’s Intervention and Prevention Program at Family Support Services:

1. Attendance, progress, and completion of program.
2. Any past or present use of violence or threats.
3. Reasons for termination of services.
4. Recommendations regarding mental health counseling or chemical dependency treatment and/or referrals.

And, hereby, give written consent for the request for and release of information concerning the above to the following individuals and agencies:

Potter/Randall County Probation Department
Amarillo Police Department
Potter County Attorney’s Office
47th District Attorney’s Office
Randall County Criminal District Attorney’s Office
Police Department and Referring Legal Entity in City and County of Arrest

Victim (current or former Wife/Partner)  Agency/Individual (other than listed above)

Name

Name

Address

Address

City, State     ZIP Code

City, State     ZIP Code

Phones:  work/home
Partner contact is for the purpose of providing her information on services available to her and her children.

Further, I give permission to Family Support Services to obtain information concerning new assault charges from any law enforcement or legal entity for a period of three years after completion or termination from this program. I understand this information will be used only for compiling statistics for measuring success of the program.

Executed this _______ day of _____________________, ______

________________________________________
Participant (PRINT)

________________________________________
Participant (SIGNATURE)

________________________________________
BIPP Facilitator (SIGNATURE)
July 7, 2009

This is to inform you that _____ has enrolled in the Adult Violence Intervention Program (AVIP) at the Family Crisis Center. This group is a state approved battering intervention and prevention program. On his intake, he has listed your name as his partner and/or victim at the time of his domestic violence incident. We are required as part of the guidelines of the program to let you know that he has started this program. His group meets every Saturday@11:30am for 1½ hours. The goals of this program are for him to stop physical violence, to end all verbal and emotional abuse, and to gain information and skills to improve the quality of his relationships. Other guidelines for him to follow are listed below:

1) No physical violence during the duration of the program. Report any emotional violence.
2) Take responsibility for past actions; participate fully in the program and complete any assigned homework.
3) Participate in-group in a respectful, non-hostile manner.
4) Not be under the influence of drugs or alcohol when attending group.
5) Be in class on time and bring the workbook issued to them.
6) Attend 24 classes and he may not have more than 5 absences.
7) Submit payment of fees each week.
8) No couples or individual counseling until 24 weeks are completed.

Enrollment in these classes does not signify change in attitude or behavior. Change can only occur when he decides to take responsibility for his own thoughts, feelings, and behavior. Knowing that he is now getting intervention may bring up a lot of mixed feelings for you. Some of these feelings may include the hope that he will change, anger about past violence, or anger that he didn’t do this earlier. Attendance in or completion of these classes does not guarantee future non-violence.

He has been informed that you will be contacted that he has enrolled in the program and periodically while he is in the program. You also have the option to contact the AVIP program to give a history of his abuse as well assist in monitoring his progress. Our staff can be reached at the Bastrop office (512) 321-7760 at extension 217 or toll free at 888-311-7755 during business hours. Any information you disclose will not be shared with him for safety reasons.

The Family Crisis Center offers a wide variety of services. Most of these services are free to you. Please feel free to call the office number, toll free at 888-311-7755 or come by any of our offices if we can provide support or other assistance. You have the right to either arrange for services or not to contact us at all. This is completely up to you. OUR MAIN PRIORITY IS YOUR SAFETY.

Sincerely,
To:__________________________________

___________________________________

___________________________________

When a participant enters the Violence Intervention and Prevention Program at Friends of the Family, he/she must give consent for us to contact his/her partner/spouse. I am contacting you to offer information about the program as well as other services and support available for you at Friends of the Family.

(Name of participant)_____________________________________________ recently came into our office for an intake session.

He/she has been referred to:

_______Individual sessions beginning (date)______________________

_______the 27 week group program with one exit session beginning (date) _____.
meetings are held on _____________ from _____to _____.
_______other:_____________________________________________________

The agency phone is (940)387-5131 or Metro (972)219-2829. We may also be reached at P.O. Box 640, Denton, Texas 76202.

I am enclosing a brochure describing the services available for you at this agency and would be willing to discuss these with you at any time. Feel free to call the agency if you have any questions about these services.

Sincerely,

Representative, Violence Intervention and Prevention Program       Date:
Tuesday, July 07, 2009

RE: Adult Violence Intervention Program

Dear,

This is to notify you that________ has decided not to attend the 24-week Adult Violence Intervention Program for men. He has missed the 1st class, which is a violation of the group agreement. Please let us know if we can be of support to you or if you have any questions for us. Please call our office in Bastrop at 512-321-7760 or 888-311-7755 if we can be of help to you or your family.

Sincerely,

AVIP Counselor
BATTERING INTERVENTION AND PREVENTION PROGRAM
“RELATIONSHIPS OF PROMISE”

PROGRESS REPORT

DATE: October 3, 2008

TO: Victoria CSCD

Client’s Name:  
Group Day:  Tues   Wed   Thurs                  Time: 6pm  
BIPP Coordinator and group facilitator:  

Attendance:  
Has missed___ times.   Dates absent:__  
Has been late ________times.  

Participation in Group:  
Turns in completed homework: Yes___  No_ sometimes ___  
Refuses to follow homework instruction: Yes___ No____  
Attentive in group:  Most of the time___ Sometimes____ Never_____  
Speaks significantly in group:  Most of the time_______ Sometimes___  Never_____  
Shows respect toward group members:  Yes___ No _____  
Takes responsibility for his/her past behaviors:  Yes____ No_____  
Disruptive and Argumentative:  Yes _____ No ____  
Uses humor inappropriately in group: Yes ___ No__  
Blames partner for his/her past and current behaviors: Yes ___ No ____  
Minimizes his/her abusive behavior: Yes_____ No _____  
Angry affect/body posture: Yes____ No___

Significant Concerns:  
Reports of continuous use/abuse of alcohol/drugs ___  
Appeared to be under the influence of alcohol/drugs while in the program ___  
Inappropriate behavior toward staff ___  
Other concerns:  

Fees:  
Fee arrangements made with MCFS.____  
Amount paid: ________  
Amount due: _________

BIPP Coordinator Signature: ________________________________
# Group Attendance Log

(27 weeks, $25/wk)

<table>
<thead>
<tr>
<th>Name:</th>
<th>Client ID #:</th>
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<tbody>
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<table>
<thead>
<tr>
<th>Start date (M/D/Y):</th>
<th>Location: DOR LOR</th>
<th>Group: Day/time</th>
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<tr>
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<thead>
<tr>
<th>Referral source (circle one)</th>
<th>Name of contact:</th>
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<tbody>
<tr>
<td>Probation</td>
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<tr>
<td>Parole</td>
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<tr>
<td>P.O.</td>
<td>Other</td>
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<tr>
<td>Address to send MTR (if other than Denton probation):</td>
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<table>
<thead>
<tr>
<th>Payment amount</th>
<th>Referral from probation:</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Client Ref.</td>
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<tr>
<th>Comments:</th>
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<table>
<thead>
<tr>
<th>Age:</th>
<th>Race:</th>
<th>City:</th>
<th>Zip code:</th>
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<thead>
<tr>
<th>Grp. No.</th>
<th>Date</th>
<th>Topic</th>
<th>Fees Paid</th>
<th>Receipt No.</th>
<th>Balance Due</th>
<th>Comments:</th>
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BIPP Accreditation Guideline Compliance Checklist 48
# BIPP Staff Development

Employee Name: ___________________________  Date of Hire: _____/_____/____
License: ________________  Expiration Date: ____/____/____  Today's Date: ____/____/____

<table>
<thead>
<tr>
<th>Topics</th>
<th>Date Due</th>
<th>Date Done</th>
<th>Documentation/Verification # of Hours/etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Violence as a form of oppression, including racism, sexism, and homophobia</td>
<td>Within 1 year of hire</td>
<td></td>
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<tr>
<td>Basic defense mechanisms of batterers that promote deception, distortion, and misrepresentation of the facts of the abuse and the experience of the victim</td>
<td>Within 1 year of hire</td>
<td></td>
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<tr>
<td>Relevant Legal Issues</td>
<td>Within 1 year of hire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Substance abuse, psychopathology, and family of origin issues and their relationship to domestic violence</td>
<td>Within 1 year of hire</td>
<td></td>
<td></td>
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<tr>
<td>Women’s Safety</td>
<td>Within 1 year of hire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BIPP Program Skill Enhancement</td>
<td>Within 1 year of hire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male Privilege</td>
<td>Within 1 year of hire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Method of collaboration with shelters and battered women’s advocates and the BIPP program’s accountability to them</td>
<td>Within 1 year of hire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>New trends in battering intervention programming</td>
<td>Within 1 year of hire</td>
<td></td>
<td></td>
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<tr>
<td>Current domestic violence research available from subscriptions and circulation of newsletters and bulletins, and information from technical assistance conferences.</td>
<td>Within 1 year of hire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other: (20 hours required per calendar year)</td>
<td></td>
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