



FAQs Related to Domestic Violence Services and Covid Precautions

What are the current requirements for domestic violence programs as it relates to FVPSA?

- Survivor confidentiality requirements in federal law, including the Violence Against Women Act, Family Violence Prevention and Services Act (FVPSA), Victims of Crime Act (VOCA), and [state law](#) remain in place. Click [here for NNEDV's Confidentiality Toolkit](#), and [here for their resources about confidentiality considerations specific to the pandemic](#).
- Advocates must complete the 40-hour DV counselor training ([CA evidence code §1037.1](#)) and documentation of completion is required for every advocate, including both staff and volunteers. Services must be [voluntary](#) per FVPSA with no conditions to receive services as per the link below to the Regulations
- ADA/Accessibility/Reasonable Accommodations:
ADA background: https://www.ada.gov/ada_intro.htm
HHS Civil Rights Office link on disability: <https://www.hhs.gov/civil-rights/for-individuals/disability/index.html>
- Here are the links to the FVPSA guidelines on non-discrimination:
[§ 1370.3 What Government-wide and HHS-wide regulations apply to these programs?](#)
[§ 1370.5 What additional non-discrimination requirements apply to these programs?](#)
[42 U.S.C. § 10406 \(c\)\(2\)](#)
From the Vera Institute, in terms of viable resources:
<https://www.vera.org/publications/measuring-capacity-to-serve-survivors-with-disabilities>
- Language access must be provided for non-English speaking survivors, deaf and hard of hearing survivors, and programs must have a language access plan in place.

What does it mean to provide voluntary services?

- According to the FVPSA Regulations, [45 CFR § 1370.10 \(b\)\(10\)](#), “program guidance will include that no requirement for participating in supportive services offered by FVPSA-funded programs may be imposed by grantees or subgrantees for the receipt of emergency shelter and receipt of all supportive services shall be voluntary. Similarly, the receipt of shelter cannot be conditioned on participation in other services, such as, but not limited to counseling, parenting classes, mental health or substance use disorders treatment, pursuit of specific legal remedies, or life skill classes. Additionally, programs cannot impose conditions for admission to shelter by applying inappropriate screening mechanisms, such as criminal background checks, sobriety requirements, requirements to obtain specific legal remedies, or mental health or substance use disorder screenings. An individual's or family's stay in shelter cannot be conditioned upon accepting or participating in services. Based upon the capacity of a FVPSA-funded service

provider, victims and their dependents do not need to reside in shelter to receive supportive services.”

- In short, all services must be voluntary and programs cannot impose requirements for testing, mask wearing, or vaccines as a condition for receiving services.
- As part of our trauma-informed, survivor-centered approaches for survivors, programs can encourage and educate their clients about testing, masks, and vaccinations, but it cannot be a condition in order to receive any shelter or supportive services.
- Programs can also provide alternative sheltering options and comparable services – see more information below.

What about state and county mandates in regards to federal laws?

- In most cases, Federal Law still applies.
- ACF would have to make a determination on a case by case basis per FVPSA Regulations at [45 CFR § 1370.10 \(b\)\(10\)](#), -- “In the case of an apparent conflict with State, Federal, or Tribal laws, case-by-case determinations will be made by ACF if they are not resolved at the State or Tribal level. In general, when two or more laws apply, a grantee/subgrantee must meet the highest standard for providing programmatic accessibility to victims and their dependents. These provisions are not intended to deny a shelter the ability to manage its services and secure the safety of all shelter residents should, for example, a client become violent or abusive to other clients.”

How can I keep my staff, volunteers and clients safe without mandating masks and/or vaccines?

- Masking can be required for staff and volunteers.
- Encourage individuals to wear masks when near others whether that is within the office, or shelter. You can also offer masks and face shields for children and survivors. Consider offering [masks with clear panels](#) for survivors who request it for accessibility needs.
- Provide education, information and resources to survivors about COVID public health guidance for their safety and others in the program.
 - One organization has added a “COVID Orientation” where a staff member does some basic information and education around COVID to really ground the survivor in why we are encouraging mask wearing and other precautions.
 - Some organizations have brought in a healthcare provider to provide resources and information about masking, testing and vaccinations.
- Social distancing should be maintained in shelters and DV program offices
- Ventilation is critical for the entire shelter and office. Air purifiers with HEPA filters or minimum MERV-13 filters are recommended by the CDC.
- Another option is opening windows and utilizing outdoor spaces when possible for services.
- Utilize and place clear acrylic barriers in providing face to face services with survivors to reduce spread of droplets.
- Offer survivors a testing kit for them to do
- One organization offered a \$25 Starbucks gift card if the survivor got vaccinated
- One program had a public health professional come to the program to share information and answer questions from clients

- Sign-ups for scheduling shared dining (or other common living spaces) so that only 1 family is using that space during a specific time frame.
- Nice day can offer to eat outside
- Explore alternative stays aside from hotels, like vacation rentals who have off season discounts
- FVPSA, ARP, Cares Act and FEMA funds for hotel stay

[SEE THE FULL Power Point from NNEDV](#) with an entire section devoted to What Are Our Options

What are some options to provide comparable services for survivors to reduce COVID risks if a survivor does not wish to wear a mask, or has a possible COVID exposure or has tested positive?

- Using hotels or other shelter alternatives , see definitions in regs [FVPSA 45 CFR Part 1370.2](#), as another way to ensure clients are getting services. State and federal funding, including DVAP, FVPSA, FEMA, and HUD resources can all be used for hotel stays or alternate forms of shelter.
- If clients do not wish to wear a mask, you can offer them services through Zoom. How do I retain staff and volunteers during this time?
- Employee turnover has been at a high during this time. Organizations have done various things to encourage employee retention.
- One organization has reduced its full-time work week to 36 hours with no reduction in pay.
- Hybrid and flexible work schedules are being reconsidered for staff.
- Pay differentials for staff providing in-person services have been utilized by programs at various times during the pandemic. Premium (or incentive) pay is still allowable under your federal grants as long as you have a board-approved policy to allow for it.
 - An organization provided differential pay based on “close contact” for advocates. For example, if anyone had contact with a member of the public (i.e. clients) while indoors for 15-60 minutes within an hour would receive a hazard pay differential for that hour.
 - Other programs provided a pay differential for their in-person staff for all hours worked
 - Examples of policies can be found on the Partnership’s website [here](#).

If you have any questions, you can email Michell Franklin, Capacity Building Program Manager at the Partnership at Michell@cpedv.org