



# SAFE HOUSE

## P R O J E C T

SAFE HOUSE CERTIFICATION POLICIES & PROCEDURES MANUAL

August 2021

# Table of Contents

<b>Table of Contents</b>	2
<b>Preface</b>	5
<b>Introduction</b>	5
Eligibility for Certification	5
Role and Value of Certification	5
Benefits of Certification	5
Safe House Certification Goal	6
Safe House Certification Team Values	6
Safe House Certification Strategic Goals	6
<b>Organization of Safe House Certification</b>	7
Safe House Certification Organizational Structure	7
Safe House Certification Review Board Overview	8
Composition & Qualifications:	8
Vetting Process	9
Nominations	9
Term Lengths	9
Meetings	9
Transacting Business:	10
Time Commitment:	10
Evaluation of Review Board Members:	10
<b>Responsibilities and Functions of Safe House Certification Teams</b>	11
Functions of the Safe House Project Executive Staff	11
Functions of the Safe House Certification Review Team	11
Function of the Safe House Certification Specialists:	11
Functions of the Site Visit Review Team	12
Functions & Responsibilities of the SHC Review Board Members	13
Ethics, Confidentiality and Conflict of Interest	14
Training of Site Visit Reviewers and Review Board Members	16
Safe House Certification Funding and Budget	16
Records	16
Organization Files:	16
Working Documents	17
Communication with Reviewers	17
Telephone Conversation Records	17
Records of Complaints	18
Amendments to the Safe House Certification Policies and Procedures	18

<b>Certification Process</b>	19
Readiness and Eligibility Determination:	19
Readiness	19
Eligibility	19
Application and Documentation Submission	20
Application	20
Application Requirements	20
Application Completeness Review & Fees Paid	20
Review & Site Fee	21
Documentation Selection	21
Review, Site Visit and Report	22
Application Review	22
Site Visit Review	22
Virtual Site Visit	23
Conflict of Interest	24
Confidentiality	24
Request for Additional Information	25
Final Certification Report & Site Visit Report	25
Certification Decision	26
SHC Review Board Decision	26
Gold & Silver Certified Organizations	26
Bronze Certified Organizations	27
Not Certified - Action Plan	27
Action Plan Report	28
Appeals & Complaints	29
Appeals	29
Complaints	29
<b>Appendix</b>	29
Glossary of Terms	30
SAFE HOUSE PROJECT - CODE OF ETHICS AND CONDUCT POLICY	31
Statement of Our Core Values	31
Mission	31
Organization Vision	<b>Error! Bookmark not defined.</b>
Build Trust and Credibility	31
Respect and Dignity for all People	31
Human Trafficking	32
Create a Culture of Open and Honest Communication	32
Leadership Sets the Tone	32
Uphold the Law	32
Selective Disclosure	33
Avoid Conflicts of Interest	33

Conflicts of Interest	33
Gifts, Gratuities and Business Courtesies	<b>Error! Bookmark not defined.</b>
Meals, Refreshments and Entertainment	33
Accurate Public Disclosures	34
Corporate Recordkeeping	34
Promote Substance Over Form	34
Accountability	35
Confidential and Proprietary Information	35
Do the Right Thing	35

## Preface

The Safe House Certification (SHC) was created to serve trafficking survivors by establishing and enforcing standards for the operation of residential aftercare programs that meet these standards. SHC operates independently of any of the governing bodies of residential aftercare programs. The SHC Review Board makes independent decisions about the certification status of residential safe house programs and policies and procedures to be followed for certification. The purpose of the Safe House Certification Policies & Procedures Manual is to outline an effective and efficient certification process, including fair and uniform application of the certification standards. The SHC Review Board approved the 2021 Certification Standards and Guidelines, effective for all organizations submitting applications for candidacy and full certification as of August 12, 2021.

## Introduction

### Eligibility for Certification

Safe house organizations eligible for certification are non-profit organizations who operate full-time emergency, long-term, and/or transitional residential programs serving international, undocumented, and domestic survivors of trafficking in the United States. Organizations must be a registered 501c3 in good standing with the IRS and be able to provide documentation of all required licenses in their state. The organization has programming specific to trafficking survivors.

### Role and Value of Certification

Safe House certification is a voluntary process that recognizes the quality of an organization and assists in its improvement. As such, it provides value to organizations while protecting trafficking survivors' interest.

### Benefits of Certification

- **National Standardization:** Safe House Programs are evaluated on their ability to meet national standards developed by industry professionals, including survivor consultants, peers, mental health professionals, physicians, and financial managers.
- **Survivor Review:** Certification is reviewed by trafficking survivors who understand the need, value, and challenges of restorative care and desire to see the national landscape elevated to meet the needs of future survivors.
- **Continual Improvement:** Aftercare certification demonstrates an organization's commitment to self-assessment, improving quality of care, and adopting new methodologies to improve their program's efficacy.

- **Attract Donors and Investors:** Certification participation establishes confidence with potential donors, foundations, and government granting agencies seeking to invest in credible and reviewed programs.
- **Community Engagement:** Participation in the certification process affirms a commitment to quality and accountability to community members, thereby increasing local sustainability, community involvement, and volunteerism.

### Safe House Certification Goal

Safe House Certification drives industry standards to improve safe house programming for trafficking survivors. Safe house programs provide ethical, safe, therapeutic, well resourced, and sustainable residential programs to survivors to help them break the cycle of victimization.

### Safe House Certification Team Values

The Safe House Certification Team evaluates in a fair, unbiased manner and upholds the following values:

- **Quality:** The SHC Team represents a commitment to excellence in evaluation of programs who bring high-quality care to trafficking survivors who provide ethical, safe, therapeutic, well resourced, and sustainable residential programs to help survivors overcome their past.
- **Integrity:** The SHC Team demonstrates honest and ethical behavior in their evaluation of programs, looking to elevate top-tier programs who are maximizing the resources to effectively serve trafficking survivors and decrease rates of re-victimization.
- **Collaboration:** The SHC Team collaborates with industry experts, including lived experience experts and professionals, to elevate the standard of care. Through sharing best practices, innovative solutions, and continuing education on the matter of both trafficking *and* trauma, SHC partners with candidate organizations to help drive best practices within the trafficking industry.
- **Innovation:** The SHC Team consistently evaluates best practices across the industry and drives to improve programming through evidence-based research, innovative solutions, and survivor feedback that helps best serve trafficking survivors.

### Safe House Certification Strategic Goals

- SHC assures the quality of residential safe house programming through a Review Board made of survivors and other industry experts.
- SHC effectively communicates the certification process and expectations.
- SHC cultivates innovation in residential aftercare programming for trafficking survivors.

# Organization of Safe House Certification

SHC is decided upon by the Review Board and overseen by the Safe House Project. The Safe House Certification Review Board grants final certification decisions.

The Safe House Project staff and Board of Directors carry out the daily operational functions of Safe House Project, including overseeing the Safe House Certification process.

## Safe House Certification Organizational Structure

1. *Safe House Certification Review Team* - The team that conducts review of all materials and provides a full report to the SHC Review Board to make a certification decision. This team consists of the following:
  - a. *Primary Application Review Team* - Team member(s) responsible for the first phase of the scoring process for SHC applications. Provides findings to the Secondary Application Review Team, Interviewers, and SHC Review Board.
  - b. *Secondary Application Review Team* - Team member(s) responsible for the second phase of the scoring process for SHC applications, including document and narrative scoring. Provides findings to the SHC Interview Team and SHC Review Board.
  - c. *Site Visit Review Team* - Coordinates and conducts the site visits. Provides all documentation surrounding the site visits to the SHC Review Board.
2. *Certification Specialist* - A SHP staff member that serves as a liaison between the candidate organization and the SHC Review Team, the primary point of contact for candidate organizations. In the absence of a Certification Specialist, the Aftercare Development Director will fulfill these roles and responsibilities.
3. *Lived Experience Expert* - A regionally based Lived Experience Expert that attends site visits with the Certification Specialist.
4. *Certification Coordinator* - A staff member from the candidate organization. The primary point of contact for the Certification Specialist. Ensures their organization is prepared for all steps of the certification process, including scheduling site visits, staff interviews, compiling relevant documents, and verifying the completeness of the application.
5. *Safe House Certification Oversight Team* - Executive SHP staff responsible for the oversight of all SHC processes, meetings, and decisions.
6. *Safe House Certification Review Board* - Grants final certification decision, made up of industry experts.
  - a. *Nominating Committee* - includes Safe House Project Executive Leadership, Director of Aftercare Development and existing review board members, reviews applications, interviews all qualified applicants, and contacts their references of the nominated individuals, and invites qualified individuals to be part of the SHC Review Board

## Safe House Certification Review Board Overview

### 1. Composition & Qualifications:

The SHC Review Board consists of 7-10 individuals who make independent decisions about the certification status of residential safe house programs and policies and procedures to be followed for certification. It is comprised of industry professionals, including survivor consultants, peers, mental health professionals, physicians, and financial managers, who meet the qualifications outlined.

#### a. Survivor Leader Qualifications:

- i. Survivors of domestic trafficking who have participated in restorative care services to address trauma;
- ii. Who have been out of their trafficking experience for more than 3 years;
- iii. Who have experience working in social work, mental health, law, criminal justice, ministry, non-profit leadership or other fields that support industry knowledge;
- iv. Who can provide references to support their industry experience or unique perspective on safe house programming.

#### b. Healthcare Professionals Qualifications:

##### i. Medical providers

1. Completed trauma-informed, survivor-led anti-trafficking training;
2. Have been practicing medicine for more than 5 years;
3. Demonstrated professional or volunteer experience working with anti-trafficking organizations.

##### ii. Mental health providers who have

1. Completed trauma-informed, survivor-led anti-trafficking training
2. Have been licensed and practicing for more than 7 years;
3. Specialize in trauma and have the most up to date continuing education and/or licensure for trauma treatment;
4. Demonstrated professional or volunteer experience working with anti-trafficking organizations.

#### c. Industry Experts

##### i. Financial Management Qualifications:

1. Individuals who have demonstrated professional or volunteer experience in the financial oversight of a non-profit or Organization.



2. Demonstrated experience working with an organization providing residential housing or therapeutic services.
- ii. Board Governance Qualifications:
  1. Those who have a demonstrated professional or volunteer experience in board development, governance, and nonprofit leadership.
  2. Demonstrated experience working with an organization providing residential housing or therapeutic services.

## 2. Vetting Process

The applicant will undergo a background check and must provide one personal and two professional references. The applicant will participate in interviews by the Nominating Committee.

## 3. Nominations

- a. Nominations are solicited as needed by the Safe House Project Executive Leadership Team.
- b. An application including a resume, personal statement, contact information, and references, including two professional and one personal, must be submitted as detailed by the Safe House Project in any solicitations for nominations.
- c. The Nominating Committee, which includes Safe House Project Executive Leadership, Director of Aftercare Development and existing review board members, reviews applications, interviews all qualified applicants, and contacts their references of the nominated individuals, and invites qualified individuals to be part of the SHC Review Board.
- d. The first step if the nominee accepts is to attend the certification review training. This ensures that the SHC Review Board is adequately staffed for projected yearly certification applications.

## 4. Term Lengths

- a. Reviewers serve 1-year terms and can be reappointed for subsequent years.
- b. Reasons to decline reappointment:
  - i. Two or more documented reports by eligible organizations.
  - ii. Unable to attend 75% of meetings.
  - iii. Reappointment may be denied based on disciplinary infractions.

## 5. Meetings

- a. The SHC Review Board holds six formal review meetings each year, with additional meetings added as needed.

- b. Special meetings of the SHC Review Board may be called by the Safe House Project CEO, which could include:
    - i. Approval of nominated Review Board members to fill a vacancy.
    - ii. Urgent complaint or conflict of interest report.
  - c. Meetings are scheduled by the Safe House Project Certification Specialist and meeting notices are sent to all board members.
  - d. Agendas for formal certification meetings, including Site Visit Review Team reports, are sent to SHC Review Board members two weeks before the meetings.
6. Transacting Business:
- a. A quorum to transact business for a regular or special meeting is at least a majority (more than 50%) of the SHC Review Board.
  - b. Parliamentary authority: the rules contained in Robert's Rules of Order Newly Revised govern SHC board meetings in all cases that they are applicable and in which they are not superseded by SHC policies and procedures.
  - c. The SHP CEO or designated staff members present the Final Certification Reports at the SHC review board meeting. A motion is made to certify or not certify the candidate organization. If the motion to not certify prevails, a detailed rationale statement shall be documented in the meeting minutes.
7. Time Commitment:
- i. Review Board members must attend training.
  - ii. Review Board members must be willing and able to devote the time required to prepare a thorough evaluation of candidate organization's certification application overview and to complete other responsibilities as assigned (i.e., program review, meetings, telephone calls, correspondence, etc.).
  - iii. Review Board members must be willing and able to attend 6 formal certification meetings to determine the status of candidate organizations.
8. Evaluation of Review Board Members:
- Review Board members will undergo a semi-annual review by the Safe House Project Executive Leadership to evaluate performance, address concerns, and determine eligibility for additional terms.

# Responsibilities and Functions of Safe House Certification Teams

## 1. Functions of the Safe House Project Executive Staff

- a. Serve as liaison with industry groups, government agencies, foundations, and other relevant groups.
- b. Provide administrative assistance to the SHC Review Board.
- c. Maintain official files on certified programs.
- d. Attend meetings that relate to Safe House Certification and industry developments that impact certification and safe housing for trafficking survivors.
- e. Draft decision letters for approval by the SHC Review Board.
- f. Communicate, as needed, with the SHC Review Board regarding any questions or concerns about certification.
- g. Sign decision letters and other formal correspondence as directed by the SHC Review Board (Proxy authorization given to SHP Chief Executive Officer).

## 2. Functions of the Safe House Certification Review Team

- a. Receives input and reviews eligibility data, standards, and procedures for certification annually from organizations under review.
- b. Performs an annual audit and any necessary updates of eligibility requirements and standards to reflect newly validated policies and procedures empirically proven effective in programming.
- c. Audits certification process in response to significant events that impact residential safe house programs organizations, like COVID-19.
- d. Provides a consistent experience for determining the quality of the different organizations being evaluated.
- e. Input is sought from safe house organization boards, management, staff, regulators, investors, and other appropriate stakeholders throughout the review process.
- f. Identifies, updates, and approves, as necessary, changes to standards, policies, and procedures related to the certification process, including written guidelines and guidance for certification documents.
- g. Publishes and disseminates revisions to the eligibility requirements and certification standards to organization boards, management, staff, and other stakeholders prior to adoption for a comment period of 30 days.

## 3. Function of the Safe House Certification Specialists:

- a. Schedule site visits and process documents related to certification.

- b. Assist eligible programs through the certification process.
  - c. Monitor certified programs through the review process, which includes self-assessments, narrative reports, interim reports, annual reports, and other documentation.
  - d. Review issues related to certification and take appropriate steps to resolve.
  - e. Investigate complaints or appeals.
  - f. Establish, review, and modify fee schedule when necessary and disseminate to stakeholders.
  - g. Direct the activities of the Site Visit Review Teams and SHC Review Board utilizing the SHP Executive Leadership for the oversight of the evaluation of safe house organizations.
  - h. Develop evaluation and review policies that assure efficient, consistent implementation by reviewers.
  - i. Provide opportunity for third-party references or concerns to be raised regarding organizations under consideration for certification.
  - j. Publish and communicate Safe House Certification results to the public and key stakeholders.
  - k. Conduct training for Certification Specialists and Site Visit Review Team.
  - l. Certification Specialist oversees the Site Visit Review Team.
  - m. Monitor performance of SHC Review Board.
  - n. Establish policies and procedures for the appeals process of certification decisions.
  - o. In cooperation with industry experts, survivors, and other agencies, foster excellence in operating residential safe house programs through mentoring programs to take steps to improve its operations.
  - p. Upon written notification, review certification status of an organization when an adverse action is taken against the organization by a regulating or legal authority body and determine appropriate action.
  - q. Advocate to achieve the highest standards for operating residential safe house programs.
4. Functions of the Site Visit Review Team
- a. Site Visit Review Team will coordinate with the candidate organization to arrange the site visit once their application has been submitted and Application Review Fee has been paid.
  - b. A member of the Site Visit Review Team must decline a site visit if it is a conflict of interest (e.g. the survivor reviewer was a resident of the program.)

- c. Only approved Site Visit Review Team members and SHP staff may be scheduled to conduct a site visit.
- d. All members of the Site Visit Review Team will sign a non-disclosure agreement and liability waiver for the organization they are reviewing prior to visiting the property to ensure confidentiality and privacy regarding the facility location is maintained.
- e. Evaluation of Site Visit:
  - i. Each Safe House Certification candidate organization's Chief Executive and Certification Coordinator are requested to submit an evaluation of the site visit and conduct of the Site Visit Review Team.
    - 1. Survey will be sent by the Certification Specialist after site visit.
  - ii. Results of the site visit evaluation are provided to the Certification Specialist after the site visit.
  - iii. Summary comments based on post site visit evaluations are provided to the Site Visit Review Team periodically, and possibly additional relevant information.
  - iv. The post site visit evaluations from the candidate organization are not reviewed until after the SHC Review Board acts on the certification status.
  - v. Complaints may include conduct, poor preparation, poor report quality, or non-compliance with procedures during the site visit.
  - vi. Complaints are brought to the Aftercare Development Director to investigate and decide next steps, including disciplinary action.
  - vii. The Site Visit Review Team may have to write a formal response to written complaints of candidate organizations.
  - viii. Permanent confidential files of site review team evaluations are maintained by Safe House Project.
  - ix. Termination may happen if:
    - 1. Two or more founded and documented reports by candidate organizations.
    - 2. Site Review Team member conducts a site visit knowingly having a conflict of interest with the organization

#### 5. Functions & Responsibilities of the SHC Review Board Members

- a. The SHC Review Board establishes, evaluates, and administers standards, policies, and procedures for certification, including eligibility for, granting of, periodic renewal of, and withdrawal of certification.
- b. Attend regularly scheduled meetings for the SHC Review Board.
- c. Review eligible organizations for certification and vote on their certification status.

- d. Communicate with the Certification Specialist and Safe House Project Executive Leadership on a regular basis as it pertains to certification.
- e. Advise on recommended changes to the certification.
- f. Take appropriate action to avoid conflict of interest in carrying out SHC responsibilities.
- g. Use personal and professional experience to advocate for trafficking survivors to achieve the highest standards for operating residential safe house programs.

### Ethics, Confidentiality and Conflict of Interest

1. SHC Review Board and the SHP staff abide by the SHP Code of Ethics in the Appendix of this Policies and Procedures Manual.
2. Conflict of interest exists when one's ability to make objective decisions to protect trafficking survivors is compromised by any relationship with an organization.
3. All actions of the SHC team are consistent with the SHC guidelines concerning confidentiality.
4. As a nationally recognized organization overseeing the certification, SHP has the responsibility to maintain confidentiality of privileged information.
5. Acceptance of an invitation to be a SHC reviewer constitutes as an agreement to safeguard the confidentiality of Safe House Project, candidate organizations, and certified organizations. Organization data is only available to SHP staff and the SHC Review Board for the organizations under review.
6. Disclosure of information to unauthorized individuals in connection with the review of any application for certification is prohibited and grounds for release.
7. Should SHP or the SHC Review Board have reasonable suspicion that a candidate organization or Safe House Certified organization is acting in an unethical manner or deliberately misrepresenting itself to residents, potential residents, funders, licensing bodies, or the public, SHP will conduct an internal investigation and take the necessary actions ethically and legally.
8. Conflict of interest must be avoided by SHP board members, staff, and the SHC Review Board in all situations that concern certification.
9. SHP staff does not participate directly in certification decisions; however, the organization oversees the review process, ensuring consistency across candidate organization reviews and the following of policies and procedures. Therefore, SHP staff adheres to the same Conflict of Interest guidelines as the SHC Team.
10. Should a reviewer have a Conflict of Interest with a candidate organization, said reviewer is excluded from the review process, including, but not limited to, SHC Review Board meetings, site visits, and application reviews. Board members absent from board

meetings due to a Conflict of Interest are noted in meeting minutes. The following are constituted as Conflicts of Interest:

- a. Past or present employment, paid consultancy, or appointment by the candidate organization.
  - b. Former resident of the candidate organization.
  - c. Family member of employee or other affiliate of the organization.
  - d. Has a personal relationship with any board member, executive, or employee of the candidate organization.
  - e. Employment by an organization of the same type within the same geographic region.
  - f. Has been identified by the candidate organization as having a Conflict of Interest.
11. SHC Review Board members may not provide consultative services, education, or training apart from their normal duties to organizations seeking certification that they are responsible for determining the certification status.
12. Prior written approval must be received before using SHP or SHC documents and materials as part of services, education, or training for the purpose of assisting others in maintaining or obtaining Safe House Certification.
13. Under the following conditions SHP/SHC staff may provide outside consultative services, education, or training to assist others in maintaining or obtaining certification:
- a. Review Board Members:
    - i. No. SHP board members are prohibited from providing consultation services, education, or training to organizations to assist others in maintaining or obtaining certification outside their roles as SHP board members whether they are free of charge, reimbursed, or remunerated.
  - b. Site Visit Reviewer:
    - i. Yes. Reviewers may provide consultation services, education, or training if they notify the SHP Executive Leadership and provide a written statement to parties receiving their services that they are not acting on behalf of SHP/SHC.
  - c. SHP Staff:
    - i. No. SHP staff are prohibited from providing consultation services, education, or training to organizations to assist others in maintaining or obtaining certification outside their roles as SHP staff whether they are free of charge, reimbursed, or remunerated.

## Training of Site Visit Reviewers and Review Board Members

1. An annual training is scheduled for new Site Visit Review Team and Review Board members. The training includes:
  - a. Discussion of the role and value of certification.
  - b. Review of certification and site visit process.
  - c. Review of current Safe House Certification Standards and Guidelines.
  - d. Responsibilities of Site Visit Review Team and Review Board members.
  - e. Review of safe house trends and impact on certification procedures.
  - f. Review of policies and procedures regarding safeguarding program information, including location.

## Safe House Certification Funding and Budget

1. The Safe House Project Executive Leadership works with the SHC staff to determine its annual program budget, including financial needs, and manages its expenditures.
2. SHP may supplement the certification fees by seeking grants to carry out the responsibilities of the SHC.
3. SHP may change fees to maintain fiscal responsibility.
4. SHP staff is responsible for the budget for all certification activities.

## Records

1. Organization Files:
  - a. Content:
    - i. Digital copies of final decision letters are kept indefinitely.
    - ii. Correspondence between programs and SHP are kept indefinitely.
    - iii. Summary finding reports, review reports, interim reports, annual reports, and the most recent application are kept in the organization's digital file for 3 years.
    - iv. Complaints and after-action reports are kept indefinitely.
    - v. Inactive organizations or those have had their certification withdrawn are kept in an inactive status for 5 years.
      1. Inactive status is a pause in the certification process due to an incomplete application and/or missing documentation.



b. Access

- i. All organizations files are confidential.
- ii. Materials generated by organizations are the property of the organization and cannot be used in any way by persons not involved in the certification process without written permission from the chief executive officer of the organization.
- iii. Access to files is restricted to the Safe House Certification Team unless written permission by the chief executive officer of the organization is obtained.

2. Working Documents

a. Content

- i. Working documents include notes and draft reports. Working documents maintained by SHC Review Board members, Site Visit Review Team members, and staff are destroyed immediately following the SHC meeting where the final certification decision is made.
- ii. Other materials are kept as designated for official organization certification files. Files of SHC Review Board members and Site Visit Review Team members are destroyed four years after the final decision for an organization has been communicated.
- iii. Organization files of SHC Review Board members and Site Visit Review Team members are transferred to other SHC Team Members as necessary.

b. Access to Working Documents

- i. Working documents are considered confidential, unofficial files.

3. Communication with Reviewers

- a. SHC Review Board and Site Visit Review Team members (hereafter called “reviewers”) correspondence is kept until the reviewer is no longer active.
- b. Documentation of reviewer performance is kept until the reviewer is no longer active.

4. Telephone Conversation Records

- a. All telephone conversations are confirmed with appropriate written correspondence.
- b. Telephone correspondence should be used only for the purpose of confirming site visits, interviews, and other meetings already documented in writing; emergency correspondence including last minute cancellation of meetings; and other issues that may arise that need immediate resolution.

- c. Candidate organization interviews do not take place via telephone, nor do virtual site visits.
- d. Certification decisions are not given by telephone, but by written notification of a decision.

#### 5. Records of Complaints

- a. Complaints sent directly to SHC are kept confidential amongst members of the Safe House Certification Review Team.
- b. Organizations are required to keep record of resident complaints and provide to the SHC Site Visit Review Team during interviews.
- c. Complaints received by or made available to SHC are reviewed and acted upon by the Certification Specialist with approval of the SHC Review Board. All responses to complaints, including action steps, are done in accordance with the Complaint Procedure.
- d. If a complaint does not relate to the SHC Certification Standards in effect at the time, the Certification Specialist may refer it to Federal, State, and other agencies as appropriate.
- e. Survivor or community complaints relating to the Safe House Certification Standards in effect at the time and action taken are included in the review of the program for re-certification, as well as considered as amendments to the current guidelines and indicators to drive continual improvement of aftercare programs.

#### 6. Amendments to the Safe House Certification Policies and Procedures

- a. Amendments to the Safe House Certification Policies and Procedures may be proposed by any member of the SHC review board. Amendments to procedures may also be proposed by the CEO or SHP Board of Directors.
- b. The policies and procedures may be amended at any regular or special meetings of the SHC Review Board. Changes require the affirmative vote of two-thirds of the voting members. Votes can be done in person or by written proxy, providing that written notice of the proposed amendment is sent to the voting members no less than two weeks prior to the meeting at which the vote will take place. Editorial changes that do not change the intent may be made at any time.
- c. Once a vote has passed the SHC Review Board, they will be elevated to the SHP Board of Directors for final approval before amending the Safe House Certification Policies and Procedures.
- d. If a vote passes the SHC review board but does not receive approval of the SHP Board of Directors, the CEO is responsible for resolving any concerns to come to a resolution on the proposed changes.
- e. The policies and procedures are reviewed and updated as necessary, at least annually, at a formal meeting of the SHC Review Board.

# Certification Process

The Safe House Certification has four steps for organizations to follow to achieve certification:

1. Readiness and Eligibility Determination
2. Application and Documentation Submission
3. Review, Site Visit, and Report
4. Certification Decision

## Readiness and Eligibility Determination:

An organization should prepare itself for the certification process to improve the outcomes. The organization will appoint a Certification Coordinator who can help guide the organization through the process, liaise with the Certification Specialist, and communicate back to the organization's stakeholders. Reviewing the Standards and Guidelines, as well as the common documentation will help the organization with identifying strengths and areas that need improvement before applying.

1. Readiness
  - a. Establish a Certification Coordinator to be the point of contact for the candidate organization throughout the certification process.
  - b. The Certification Coordinator is the centralized point of communication between the SHC/SHP and the candidate organization.
  - c. The Certification Coordinator should review the Standards and Guidelines, as well as the Certification Narrative & Documentation files to understand how to best prepare the organization for the application. This preparation will enable the organization to identify plans and processes that should be in place, necessary infrastructure of the organization, and documents and/or policies and procedures that need to be developed or updated.
  - d. The certification application is through an online tool that can be saved and returned to, but it is helpful to have the suggested documents compiled as you start the application.
2. Eligibility
  - a. The first step to become a Certification Candidate is determination of eligibility using the SHC eligibility determination form on the first page of the online application form.
  - b. Eligible organizations:

- i. Are non-profit organizations who operate full-time emergency, long-term, and/or transitional residential programs serving survivors of domestic trafficking in the United States.
- ii. Are a registered 501c3 in good standing with the IRS.
- iii. Can provide documentation of all required licensing for the state, showing you are certified and in good standing.
- iv. Has programming specific to trafficking survivors.

## Application and Documentation Submission

### 1. Application

The Application provides SHC with the detailed information needed to review the scored questions, narratives, documentation, and evidence to understand the candidate organization. This is the area of the process that is the most time consuming for the candidate organization.

### 2. Application Requirements

- a. The organization is minimally required to upload policies and procedures, licensing documentation, client handbook, operating budgets, and audited financial reports or 990's.
- b. The application is a combination of multiple-choice questions, tables, and narratives that reflect an organization's compliance with each Standard and Guideline and uses supporting documents to as evidence of complete adherence to the guideline or as progress toward the guideline.
- c. The application will include a mutual non-disclosure agreement and require an electronic signature from the chief executive and a representative of the governing body.
- d. The application is considered complete by the candidate housing organization, once submitted online. Following submission of the online application and payment of the Application Review Fee, the review process will begin.

### 3. Application Completeness Review & Fees Paid

- a. The Certification Specialist will review the submitted application and documentation to determine that the application is complete and that the required materials have been uploaded.
  - i. Documents that, for example, are not dated, do not provide evidence that they are authentic to the housing organization, or are examples of activities that are outside of SHC's focus on residential programming will not be accepted.
  - ii. The Certification Specialist's completeness review does not include the review of the documentation for adherence with the guidelines. The SHC Review Team will make the determination as to whether any given

guideline is demonstrated, based on the submitted documentation, narratives, and the site visit.

- b. The Certification Specialist will respond to the Certification Coordinator, indicating whether the application has been accepted as complete within 14 days.
- c. If the application is incomplete, the applicant will be advised on what is required to complete the application and must provide the information within 30 days.
  - i. If the candidate organization does not respond within the 30 days, the candidate organization is moved to an inactive state. After 60 days, it requires a new application for certification.
  - ii. The candidate organization may be asked to resubmit documentation that does not conform with requirements. This may require additional work for the candidate organization and delay the review process.

#### 4. Review & Site Fee

- a. Upon confirmation of the application's completion status by the Certification Specialist, the SHC will finalize the candidate organization's certification review and site visit fee per the current pricing schedule and send an invoice to the organization upon receipt.
- b. The Safe House Certification Pricing Schedule is published on the SHP website. The application and reviewer site visit fees are established to cover the costs of reviewing materials provided by the candidate organization.
- c. Electronic invoices will be provided by SHP to the candidate organization. Invoices are due upon receipt.
- d. The application fee and the site visit reviewer fee are required to be paid by the candidate organization prior to the start of the SHC review.

#### 5. Documentation Selection

- a. Selection of candidate documentation should be based on the Certification Guidelines with Indicators, as well as the Certification Narrative & Common Documentation documents. Candidate organizations should utilize the best document for their individualized needs. Narratives provide context if documentation is unique to the applicant or was specifically adapted for use by the organization.
- b. The documentation submitted by the candidate organization, along with the feedback from the site visit, will be used to assess the candidate organization's conformity with the Standards and Guidelines and to develop the Safe House Certification Final Report. The Safe House Certification Final Report is the basis for the SHC Review Board's certification decision.
- c. Documentation should be selected that best demonstrates conformity with the requirements of the guidelines. Documentation should represent the candidate

organization's residential programs and how it performs its functions or represent the overall governance of the organization.

- d. Selected policies, procedures, and plans must be current and in use by the candidate organization.
- e. All documentation submitted in the application should be labeled with the organization's name and a description of the document being uploaded (ex. SHP\_EmergencyInTakeForm).

## Review, Site Visit and Report

### 1. Application Review

After the housing organization has submitted its documentation and narratives for all guidelines, SHC has verified its completeness review, and the candidate organization has responded to the completeness review, the review of the application begins.

- a. Stage 1: The candidate organization's multiple-choice answers are graded against a rubric to determine which certification level the candidate organization is targeting through the rest of the certification process.
  - i. The purpose of this stage is to assess the candidate organization against the baseline guidelines and indicators using scored responses that have been normalized based on industry best practices.
- b. Stage 2: Review and score the narrative responses throughout the application.
  - i. The purpose of this stage is to assess the specific implementation of programmatic elements within the candidate organization's residential program and surface any questions that should be asked during the site visit interviews.
- c. Stage 3: Review all uploaded documentation and note additional information needed prior to the site visit or additional questions to be asked at the site visit.
  - i. The purpose of this stage is to evaluate all the documents that have been provided and identify questions for the site visit. The reviewers will also be noting any need for additional documentation or information that needs to be received during the site visit review to answer questions raised during the application review.

### 2. Site Visit Review

The purpose of the site visit is to acquire a more comprehensive evaluation of the candidate organization's residential program(s) through interviews, verifying narrative and documentation evidence, and visual observation of the program and its property. This is also an opportunity for the candidate organization to highlight its relationship to the community, the role of its organization within the community, and the beneficial or innovative aspects of their residential program(s).

- a. Site Visit Review Team is comprised of representatives of the SHC and one regionally based Lived Experience Expert.
- b. The length of the site visit will depend on the size of the candidate organization and complexity of the application, but generally should only take 1 day.
- c. The site visit will be scheduled at a time that works for everyone involved.
- d. The candidate organization's CEO/ED and Certification Coordinator must be on site and available for the entirety of the site visit.
- e. If the candidate organization has designated team leaders (ex. financial management) for parts of the application, they should be available to answer questions as well.
- f. Site Visit Review Team is there to evaluate the effectiveness of a program and follow up on questions raised during the application review.
- g. Site Visit Review Team will develop a site visit report that will be considered by the SHC Review Board in conjunction with the scores of the online application to arrive at a certification decision.
- h. The Site Visit Review Team will not decide or recommend the certification status of the candidate organization, they merely report objective findings to the Review Board.
- i. Site Visit Review Team will not give advice to the candidate organization or share information on how other organizations are fulfilling roles and responsibilities.
- j. Site Visit Review Team is not there to provide feedback, but the candidate organization will receive that information in the Final Certification Report, as well as recommendations on how to improve their program through recommended mentorship or training programs and/or industry/lived experience consultants.

### 3. Virtual Site Visit

- a. The SHC Team may authorize virtual site visits to take place for all certification candidates in lieu of in-person site visits due to natural disasters, national emergencies or other unforeseen or uncontrollable situations.
  - i. Virtual site visits will include the same elements outlined for onsite visits: meetings with an executive officer, the executive team, board members, program staff, and stakeholders.
  - ii. A virtual tour of facilities and safe house property will also be conducted. This enables the SHC Review Team to ensure compliance with Standards and Guidelines as outlined by the candidate organization's certification application. These tours will be conducted with the approval of the SHP CEO and documented for use by the SHC Review Board during the determination of final certification status for the candidate organization.
    1. SHC understands the critical nature of protecting the location and layout of all safe house properties. To maintain the undisclosed

nature of candidate organizations' safe house properties, only SHC staff and overseeing members of SHP will have access to this documentation.

- iii. In-person site visits will be conducted within 12 months of the virtual site visit authorization for organizations receiving a gold certification badge, provided that any unforeseen or uncontrollable situations have been resolved.

#### 4. Conflict of Interest

- a. SHC strives to ensure that an unbiased certification decision is made on behalf of candidate organizations.
- b. All SHC reviewers, at any stage of the process, must disclose actual, potential, or perceived conflicts of interest.
- c. A reviewer with a conflict of interest can be a reviewer for candidate organizations in which they do not have a conflict of interest but will not be privy to any information on candidate organizations that reflect conflict of interest.
- d. The goal is to uphold the integrity of the certification process.
- e. Conflict of interest can stem from:
  - i. Previous or current employee of the candidate organization;
  - ii. Previous or current contractor/consultant for the candidate organization;
  - iii. Previous resident of the candidate organization;
  - iv. Family or close relationship with any of the key leadership of the candidate organization or their Board of Directors.
  - v. Any other information that a reviewer may have regarding the candidate organization that is outside the scope of certification and could bias their decision.
- f. Candidate organizations can request changes to their review team if they identify a conflict of interest.

#### 5. Confidentiality

- a. Confidentiality is crucial to the efficacy and integrity of the certification process.
- b. The SHC Team will be privy to confidential information and will maintain confidentiality of any information disclosed by the candidate organization. Key confidential information includes:
  - i. Candidate organization's documentation
  - ii. Site Visit Conversations
  - iii. Contents of the Final Certification Report
  - iv. Opinions expressed during the interview process or in reference requests.



- v. Visual observations made during the site visit, including location of the residential homes.
- c. All SHC Team members are not to discuss candidate organizations or their documentation within anyone outside of the SHC certification process. They are also instructed not to comment on the potential outcome of certification for a candidate organization.
- d. Candidate organizations may provide information about their organization's final reports if they choose.

#### 6. Request for Additional Information

- a. If the SHC Review Team is unable to assess a residential program effectively based on other information provided or documentation appears incomplete or inconsistent, the Review Team may request additional documentation. This could include:
  - i. Additional information on other programs if the cross-section of programs is not adequately represented in the documentation.
  - ii. The documentation is outdated.
  - iii. The documentation did not provide sufficient evidence of compliance with the guidelines.
  - iv. The narratives or documentation reference other documents that were not uploaded during the application process.
- b. It is up to the candidate organization to ensure that documentation is clear, complete, and accurately reflects Standards and Guidelines that are actively used throughout the organization and its residential program(s).
- c. Additional information must be submitted within 30 days of request, or the application is moved to inactive status until the documentation is received.

#### 7. Final Certification Report & Site Visit Report

- a. The Site Visit Review Team member will put together the site visit report, which is the last part of the application review. Original scores from stages 1-3 may be revised based on information highlighted in the site visit report.
- b. The site visit report will be used to finalize the certification report, which will be provided to the SHC Review Board. The SHC Review Board will use the Final Certification Report to make a certification decision.
- c. The report is an assessment of each guideline and reflects the candidate organizations conformity with said guideline.
- d. The report is a collective effort of all the reviewers through every stage, and outcomes are not dictated by one reviewer or one stage of the process.

- e. The Final Certification Report will also be provided to the candidate organization to provide feedback on opportunities for continued improvement and areas where the organization is excelling.

## Certification Decision

### 1. SHC Review Board Decision

- a. The SHC Review Board reviews the Final Certification Report and has access to the original documentation submitted by the candidate organization to determine the certification status of the candidate organization. Certification status is determined in accordance with Standards and Guidelines as outlined in the Policies and Procedures and Guidelines with Indicators documents.
- b. The meeting is a closed meeting attended by the SHC Review Board to vote on certification status, the Certification Specialist to answer any questions, and a member of SHP Executive Leadership as a representative of the overseeing body of the certification process.
- c. If the SHC Review Board has questions regarding an application, the Certification Specialist will be available to answer any questions to the best of their ability.
  - i. If the SHC Review Board feels like there is insufficient information provided in the response to make a decision, the Certification Specialist will be required to note all additional question of the SHC Review Board, refer back to the candidate organization, and provide that information back to the Review Board ahead of the next formal certification meeting. The candidate's application will be tabled until the next meeting.
- d. There are 4 decision categories:
  - i. Gold - 3 years certification
  - ii. Silver - 2 years certification
  - iii. Bronze - 1 year certification
  - iv. Not Certified - Action Plan developed from the Final Certification Review

### 2. *Gold & Silver Certified Organizations*

- a. SHP will email a letter on behalf of the SHC Review Board stating the official certification decision to the CEO or Executive Director and the certification coordinator of the certified organization within 1 week of the SHC Review Board meeting at which the certification status was determined.
- b. The organization will also receive a certificate, a web badge, and access to promotional material to publicly communicate successful certification.

- c. No verbal feedback will be conveyed prior to the formal written decision email being sent to the organization.
- d. Organizations who receive a Gold or Silver certification will be required to submit an annual report using the Annual Report Template to the SHC Certification Specialist to maintain its certification for the subsequent year. This will reflect the organization's dedication to continuous improvement.

### 3. *Bronze Certified Organizations*

- a. SHP will email a letter on behalf of the SHC Review Board stating the official certification decision to the CEO or Executive Director and the certification coordinator of the certified organization within 1 week of the SHC review board meeting at which the certification status was determined.
- b. The organization will also receive a certificate, a web badge, and access to promotional material to publicly communicate successful certification.
- c. No verbal feedback will be conveyed prior to the formal written decision email being sent to the organization.
- d. Bronze certification recipients will be eligible to re-apply for certification and pursue higher levels of certification 11 months following receipt of their bronze certification level.

### 4. *Not Certified - Action Plan*

- a. If the organization does not receive a certification, it has an opportunity to submit a Certification Action Plan to SHC.
- b. The Action Plan must be submitted to SHC within 90 days of the receipt of notification that the organization was not certified.
- c. If the organization does not submit an Action Plan within 90 days, the organization will be designated as "Not Certified."
- d. To become certified after a "Not Certified" designation, the organization must begin the certification again by submitting a new application.
- e. The Action Plan option provides organizations the Review Board cannot certify the opportunity to address areas of critical concern that prevented them from receiving certification.
- f. A list of specific improvements will be provided by the Certification Specialist to the organization that must be addressed in the Action Plan. The issues to be addressed and content of an Action Plan are specific to each organization based on the Final Certification Report.
- g. The Action Plan must specify the steps, actions, and improvements that the organization will implement in order to adhere to the guidelines.
- h. The SHC will provide an Action Plan Template to the organization, which will be returned with other documentation as outlined in the Action Plan. The Action Plan will address:
  - i. Improvement opportunities or gaps that the organization needs to address.

- ii. Steps and actions the organization will take, including timelines and milestones.
- i. The Action Plan is part of the certification process and is designed to encourage improvement. Therefore, SHC maintains confidentiality concerning which organizations are going through or have gone through the Action Plan process.
- j. The Review Board will consider the Action Plan and may consult with the Review Team, Certification Specialist, and/or SHC staff to analyze the plan.
- k. The Review Board may accept the Action Plan or request revisions to the Action Plan.
- l. If the Review Board accepts the Action Plan, the organization must sign an acceptance agreement and implement the Plan. The candidate organization may reapply for certification six months following the acceptance of the Action Plan by the Review Board. From this point to twelve months following the acceptance of the Action Plan, the candidate organization's Application Review Fee will be waived. After twelve months, the Application Review Fee goes back into effect.
- m. If the Review Board requests a revision of the Plan, the Review Board will communicate to the organization revisions or amendments to the Action Plan in order to be accepted.
- n. The organization will be allowed 60 days from the time they are notified to amend and resubmit the Action Plan. If the organization does not submit a revision within 60 days, the organization will be designated as "Not Certified."
- o. If the Review Board accepts the Action Plan, the organization must sign an acceptance agreement and implement the Plan, If the Action Plan is declined, the organization will be "Not Certified."

#### 5. *Action Plan Report*

- a. If the Action Plan is approved, the organization must submit documentation for each of the improvements and corresponding metrics outlined in the Action Plan. This is due to SHC with the reapplication.
- b. If the organization fails to submit an Action Plan Report with the reapplication, the organization will be designated as "Not Certified."
  - i. To become certified after being designated as "Not Certified", the organization must begin the certification process again by submitting a new application and paying the associated fees.
- c. The Action Plan Report will be reviewed by the Certification Specialist.
- d. SHP staff, in conjunction with the Certification Specialist and SHC reviewers, will determine if an additional on-site review is required.
- e. If the Certification Specialist determines that a site visit is not required, the candidate organization will not be charged an additional fee. If the Certification Specialist determines that a site visit is required, the applicant will be charged for the site visit.
- f. The Certification Specialist will forward the final assessment of the Action Plan to the Review Board for their review and certification status decisions.

## Appeals & Complaints

### 1. Appeals

- a. An organization may appeal denial of initial certification status or revocation of certification status as a result of a decision by the Review Board.
  - i. Revocation of certification status based on failure to submit the required Annual Report.
  - ii. Revocation of certification status based on the review of the Annual Report by the Board.
- b. Grounds for appeal include:
  - i. A negative decision was arbitrary, capricious, or otherwise in disregard of SHC standards.
  - ii. A negative decision was arrived at in disregard of SHC policies & procedures.
  - iii. A negative decision was not supported by evidence in the record on which the decision of the Board was based.
- c. Fees associated with the appeals process are available upon request.

### 2. Complaints

- a. SHC can only receive written complaints about a certified organization that are specific to a possible lack of conformity with SHC's Standards and Guidelines under which the organization was certified.
- b. SHC cannot address complaints or disputes between residents, community organizations, or other individuals and the organization; complaints about supportive services; social services; environmental health issues; professional licensing or practice; or any state, local, or Tribal regulations.
- c. SHC will not mediate between the organization and any party.
- d. A written complaint against a certified or candidate organization must be submitted via the complaint form on the SHC website and follow all complaint guidelines. The complaint must include the specific way in which the organization violates the certification standard and include documentation of any additional complaints filed with other agencies or organizations. The complaint must specify the desired outcome of the complaint and any solutions to the complaint that have been attempted or implemented.
- e. All correspondence regarding complaints, their investigation, and their resolution will be kept on file with SHC for the organization's full SHC cycle. SHC will not publicly release any complaints received nor the outcomes of the internal investigations of complaints.

# Appendix

## A. Glossary of Terms

- **Application** - The formal submission of information and documentation to SHC for Safe House Certification.
- **Candidate Organization** - The eligible organization seeking certification who has paid its fees.
- **Certification Coordinator** - The staff person assigned by the candidate organization as the primary point of contact with SHC for the certification process, who ensures the organization is prepared with proper documentation, verifies completeness of application before submitting, coordinates the site visit, and is a central point of communication for both the SHC and the candidate organization throughout the process.
- **Certification Specialist** - The SHP staff person is the primary point of contact with the candidate organization and acts as liaison between the candidate organization and the SHC Review Board.
- **Chief Executive Officer or Executive Director** - The highest-ranking staff member of an organization with operational authority.
- **Compliance/Conformity** - Adherence to a standard or guideline.
- **Eligibility** - The determination that an organization meets the initial criteria for obtaining certification.
- **Evidence** - Documentation, including narratives and interviews demonstrating adherence with a standard or guideline.
- **Governing Board** - The group that has legal accountability for the organization to be in existence and act upon its mission.
- **Inactive Status** - A SHC status that is determined based on an organization requesting to pause for a short period of time during its certification process or who has not submitted additional information needed to continue the review.
- **Lived Experience Expert** - A regionally based trafficking survivor that supports the Certification Specialist in the site review.
- **Reviewer** - Industry experts, including survivor consultants and trafficking professionals who are trained in all aspects of running an effective quality residential safe house program to serve trafficking survivors. Trained by SHP on the process of certification and reviews all candidate organization documents for conformity with the standards and guidelines.
- **Review Team** - The team that reviews the application, conducts the site visit, and provides a full report to the SHC Review Board to make a certification decision.

## B. SAFE HOUSE PROJECT - CODE OF ETHICS AND CONDUCT POLICY

### Statement of Our Core Values

#### *Mission and Vision*

Safe House Project is uniting communities to end domestic sex trafficking and restore hope, freedom, and a future to every survivor.

Safe House Project's mission is to increase survivor identification beyond one percent through education, provide emergency services and placement to survivors, and ensure every survivor has access to safe housing and holistic care by accelerating safe house capacity and development across America.

Safe housing and restorative care are critical to ending the cycle of victimization. Education is key to spotting, reporting, and ultimately, preventing trafficking.

Our vision is to see communities across America unite to end domestic sex trafficking and restore hope, freedom, and a future to every survivor.

#### *Build Trust and Credibility*

The success of Safe House Project is dependent on the trust and confidence we earn from our community, employees, survivors, and business partners. We gain credibility by adhering to our commitments, displaying honesty and integrity, and reaching organization goals through honorable conduct. It is easy to say what we must do, but the proof is in our actions.

When considering any action, it is wise to ask: Will this build trust and credibility for Safe House Project? Will it help create a working environment in which Safe House Project can succeed long term? Is the commitment I am making one I can follow through with? The only way we will maximize trust and credibility is by answering "yes" to those questions and by working every day to build upon our values.

#### *Respect and Dignity for all People*

Safe House Project is committed to treating all people with dignity and respect. We understand that human dignity is our core purpose and the reason we exist.

Each employee, board member, business partner, and affiliated entity of Safe House Project is bound to this same commitment to each other, their communities, and all people.

### *Human Trafficking*

Safe House Project forbids any employee, board member, or otherwise affiliated person or entity of the Organization to hold any person in slavery or servitude, or use force, fraud, or coercion for labor or commercial sex exploitation. Any employee, board member, or otherwise affiliated person or entity of the Organization should also refrain from the participation in or viewing of materials that further the demand for sexual exploitation, including the selling or purchasing of sex, consumption of pornographic materials, and subscriptions to online commercial sex acts. (See Anti-Trafficking Policy)

### *Create a Culture of Open and Honest Communication*

At Safe House Project, everyone should feel comfortable to speak his or her mind, particularly with respect to ethics concerns. All Safe House Project team members have a responsibility to create an open and supportive environment where all employees feel comfortable raising such questions. We all benefit tremendously when everyone exercises their power to prevent mistakes or wrongdoing by asking the right questions at the right time.

Safe House Project will investigate all reported instances of questionable or unethical behavior. In every instance where improper behavior is found to have occurred, the Organization will take appropriate action. We will not tolerate retaliation against any person who raises genuine concerns in good faith. (See Safe House Project's whistleblower Policy)

### *Leadership Sets the Tone*

Management has the added responsibility of demonstrating, through their actions, the importance of this Code. In any business, ethical behavior does not simply happen; it is the product of clear and direct communication of behavioral expectations, modeled from organization leaders and demonstrated by example. Again, ultimately, our actions are what matters.

To make our Code work, leadership must be responsible for promptly addressing ethical questions or concerns raised by employees and for taking the appropriate steps to deal with such issues.

No one should consider ethics concerns as threats or challenges to their authority, but rather as another encouraged form of communication necessary for the organization to carry out its mission.

### *Uphold the Law*

Safe House Project's commitment to integrity begins with complying with laws, rules and regulations in our personal and professional lives. Furthermore, each of us must understand the organization's policies, laws, and rules and regulations that apply to our specific roles. If we are unsure whether a contemplated action is permitted by law or organization policy, ask your



supervisor. All employees are expected to speak up and report possible violations to their supervisor, or any member of management with whom they are comfortable.

### *Selective Disclosure*

We will not selectively disclose (whether one-on-one or during small discussions, meetings, presentations, proposals, or otherwise) any material nonpublic information with respect to Safe House Project, its securities, business operations, plans, financial condition, results of operations, or any development plan.

We should be particularly vigilant when making presentations or proposals to potential partners to ensure that our presentations do not contain material nonpublic information.

### *Avoid Conflicts of Interest*

#### *Conflicts of Interest*

We must avoid any relationship or activity that might impair, or even appear to impair our ability to make objective and fair decisions when performing work for or representing Safe House Project.

At times, we may be faced with situations where the business actions we take on behalf of Safe House Project may conflict with our own personal or family interests. We owe a duty to Safe House Project to advance its legitimate interests when the opportunity to do so arises. We must never use the organization's property or information for personal gain or personally take for ourselves any opportunity that is discovered through our position with Safe House Project.

#### *Meals, Refreshments, and Entertainment*

We may accept occasional meals, refreshments, entertainment, and similar business courtesies that are shared with the person who has offered to pay for the meal or entertainment, provided that:

- They are not inappropriately lavish or excessive.
- The courtesies are not frequent and do not reflect a pattern of frequent acceptance of courtesies from the same person or entity.
- The courtesy does not create the appearance of an attempt to influence business decisions, such as accepting courtesies or entertainment from a partner whose contract is expiring in the near future.
- The employee accepting the business courtesy would not feel uncomfortable discussing the courtesy with his or her manager or co-worker or having the courtesy known by the public.
- Employees may accept unsolicited gifts, other than money, that conform to the reasonable ethical practices of the marketplace, including:

- Flowers, fruit baskets, and other modest presents that commemorate a special occasion.
- Gifts of nominal value, such as calendars, pens, mugs, caps, and t-shirts (or other novelty, advertising, or promotional items).
- Employees with questions about accepting business courtesies should talk to their supervisor.

#### *Accurate Public Disclosures*

We will make certain that all disclosures made in financial reports and public documents are full, fair, accurate, timely, and understandable. This obligation applies to all employees, including all financial executives, with any responsibility for the preparation for such reports, including drafting, reviewing, and signing or certifying the information contained therein. No business goal of any kind is ever an excuse for misrepresenting facts or falsifying records.

Employees should inform Organization management if they learn that information in any filing or public communication was untrue or misleading at the time it was made or if subsequent information would affect a similar future filing or public communication.

#### *Corporate Recordkeeping*

We create, retain, and dispose of our Organization records as part of our normal course of business in compliance with all Safe House Project policies and guidelines, as well as all regulatory and legal requirements.

All corporate records must be true, accurate, and complete. Organization data must be promptly and accurately entered in our books in accordance with Safe House Project's and other applicable accounting principles.

We must not improperly influence, manipulate, or mislead any unauthorized audit, nor interfere with any auditor engaged to perform an internal independent audit of Safe House Project books, records, processes, or internal controls.

#### *Promote Substance Over Form*

At times, we are all faced with decisions we would rather not have to make and issues we would prefer to avoid. At Safe House Project, we must have the courage to tackle the tough decisions and make difficult choices, secure in the knowledge that the organization is committed to doing the right thing. At times this will mean doing more than simply what the law requires. Merely because we can pursue a course of action does not mean we should do so.

Although Safe House Project's guiding principles cannot address every issue or provide answers to every dilemma, we can define the spirit in which we intend to do business, and this should guide us in our daily conduct.

### *Accountability*

Each of us is responsible for knowing and adhering to the values and standards set forth in this Code and for raising questions if we are uncertain about organization policy. If we are concerned whether the standards are being met or are aware of violations of the Code, we must contact a supervisor.

Safe House Project takes seriously the standards set forth in the Code, and violations are cause for disciplinary action up to and including termination of employment.

### *Confidential and Proprietary Information*

Integral to Safe House Project's success is our protection of confidential organization information, as well as nonpublic information entrusted to us by employees, customers, and other business partners. Confidential and proprietary information includes such things as pricing and financial data, customer names and/or addresses, or nonpublic information about other companies, including current or potential suppliers and vendors. We will not disclose confidential and nonpublic information without a valid business purpose and proper authorization.

### *Do the Right Thing*

Several key questions can help identify situations that may be unethical, inappropriate, or illegal. Ask yourself:

- Does what I am doing comply with the Safe House Project guiding principles, Code of Conduct, and organization policies?
- Have I been asked to misrepresent information or deviate from normal procedure?
- Would I feel comfortable describing my decision at a staff meeting?
- How would it look if it made the headlines?
- Am I being loyal to my family, my organization, and myself?
- What would I tell my child to do?
- Is this the right thing to do?

Please contact your supervisor or organization leaders with any questions regarding this policy.