

NCA SATELLITE APPLICATION ATTACHMENTS

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The following documents must be included in your application package. Please scan the documents in the order

below. The name of each document must start with the number listed below in the “Related Narrative Question” column. If there are multiple files per question, name the consecutive files 1A photo FI room, 1B chapter site visit letter, etc. If you feel that an item is not applicable to your center, please note the reason in the appropriate space.

Note: All documents must specifically pertain to the Satellite location.

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| --- | --- | --- | --- | --- |
| Attachment\* | Related Narrative Question | Enclosed  (Please “X”) | Title of Document and Page Reference (where appropriate) | Not Applicable: Note Reason |
| 1. Child Focused Setting/Facility- Photos of all Satellite work and interview spaces and written policies and procedures for separation of victims and offenders. | 1 |  | Click here to enter text. | Click here to enter text. |
| 2.1 Forensic Interviewing policies and procedures including;   * + - criteria for choosing an appropriately trained interviewer,     - which personnel are to attend/observe the interview,     - preparation/information sharing with the forensic interviewer,     - use of interview aids,     - use of interpreters, communication between the MDT and the interviewer,     - recording and/or documentation of the interview, and interview process/methodology. | 2 |  | Click here to enter text. | Click here to enter text. |
| 2.2 Proof of meeting forensic interviewer training standards:   * + - Documentation of satisfactory completion of competency-based child abuse forensic interview training that includes child development; OR   Documentation of 40 hours of nationally or state recognized forensic interview training that includes child development. | 2 |  | Click here to enter text. | Click here to enter text. |
| 2.3 Documentation of opportunities for forensic interviewers to participate in ongoing training and peer review, including:   * + - Ongoing education in the field of child maltreatment and/or forensic interviewing consisting of a minimum of 3 hours per every 2 years of CEU/CME credits;   Participation in a formalized peer review process. | 2 |  | Click here to enter text. | Click here to enter text. |
| 3. Victim advocacy/support/case management policies and procedures including the availability of victim support and advocacy services for all CAC clients. | 3 |  | Click here to enter text. | Click here to enter text. |
| 4. If medical services are provided onsite at the Satellite location please provide medical service provision policies and procedures. If medical services provided off-site, please provide a copy of your signed linkage agreements. | 4 |  | Click here to enter text. | Click here to enter text. |
| 5. If mental health service provision occurs at the Satellite location please provide policies and procedures. If these services are provided off-site please provide a copy of your signed linkage agreement. | 5 |  | Click here to enter text. | Click here to enter text. |
| 8. Please provide an organizational chart of staff specifically assigned to Satellite location. | 8 |  | Click here to enter text. | Click here to enter text. |
| 9. Documents and data demonstrating the community need for establishing a center and the community support for it, such as needs assessment, feasibility surveys, community letters of support, etc. | 9 |  | Click here to enter text. | Click here to enter text. |
| 10. Current MOUs with partner agency representatives from the Satellite service area. | 10 |  | Click here to enter text. | Click here to enter text. |
| 12. Host CAC Strategic and Sustainability Plan. | 12 |  | Click here to enter text. | Click here to enter text. |
| 14.1 Letter of support from state Chapter organization containing:   * + - Assurances that the Satellite does not duplicate the service coverage of any existing Accredited or Associate/Developing CAC.     - Description of the technical assistance that the Chapter provided to the Host CAC during the planning process. | 14 |  | Click here to enter text. | Click here to enter text. |
| 15. Other attachments.   * (If you would like to include any additional attachments other than those required above, please include and describe them here) |  |  | Click here to enter text. | Click here to enter text. |