



## THE ADVOCATE PROGRAM

Thank you for your interest in becoming an intern with the Advocate Program at Crisis Services. We are the Designated Rape Crisis Center for Erie County as well as an Approved Non-Residential Domestic Violence Program. We offer many services to any individual in the county who is affected by the trauma of family violence, elder abuse, rape and sexual assault. The most valuable service we provide is 24 hour crisis intervention to assault victims, significant others and their family in 11 emergency departments in Erie County. We could not offer this vital service if it were not for the hard work and devotion of our volunteers and interns! We thank you for your interest and hope you will agree to join our Advocate team.

Our extensive training program provides information on the dynamics of domestic violence, elder abuse, rape and sexual assault, the medical and legal aspects a survivor encounters, and the emotional impact a survivor may experience after a sexual assault or domestic violence incident. Our training consists of 40 hours, broken into **mandatory** sessions, which are held in the evenings and possible weekends over the course of 2-3 weeks. Once you complete the training and other requirements you will become certified as a Rape Crisis Counselor by the NYS Department of Health.

In addition to the 40 hour training, the requirements of an Advocate Intern are as follows:

- **Work a minimum of two 12 hour shifts per month**
- **Attend quarterly group supervisions**
- **Attend monthly advanced trainings**
- **Other duties as determined by your internship**

We are very excited that you have expressed interest in interning with our program. Enclosed is an internship application. Please complete and return to:

Crisis Services  
Advocate Program  
Training Specialist  
2969 Main Street  
Buffalo, NY 14214

Upon receipt, we will contact you to set up an interview. We look forward to meeting you.

Sincerely,  
The Advocate Program

## Advocate Program Internship Policy

The Advocate Program offers opportunities for students to participate in hands on experience working with victims of family violence, sexual assault and elder abuse. Internships are for individuals who have to complete **over 100 hours** of direct service work. Anything fewer than 100 hours will be determined on a case-by-case basis. In order to be accepted as an intern with the Advocate Program the following steps need to take place:

- Student is to complete and submit Hospital Advocate Application
- Student is to arrange an appointment with the Training Specialist for an interview to determine if the student is acceptable for the work of the Advocate Program.

### Opportunities Available for Students:

- **Hospital Advocacy (1<sup>st</sup> Semester Internship):** The Advocate Program responds to at least 1000 emergency room calls a year. In the role of Hospital Advocate you will be a supportive presence to provide crisis intervention and counseling at Erie County Emergency Departments to individuals seeking treatment for family violence, sexual assault and/or elder abuse. Your role will have you working with survivors, law enforcement and survivors' friends and family members. You are required to complete 40 hours of initial training. After training, you will sign up for two (or more) 12 hour on call shifts where you will be responsible for responding to any hospital calls that come in during your shift.
- **Case Management and Follow Up (2<sup>nd</sup> Semester Internship):** After successful Hospital Advocacy, students may seek approval to work in the agency and provide follow supportive case management. This would give you the experience of following up with a client after the initial crisis intervention is provided at the hospital or via our hotline. You are able to work with victims of Family Violence, Rape/Sexual Assault or Elder Abuse. The type of client you work with will depend on availability of staff to assist you as well as your preference.

Students will participate in a 40-hour training, spread over 2-3 weeks. This intensive training will prepare you to engage with patients in crisis as well as advocate on behalf of such patients with medical and law enforcement personnel. The training covers topics such as:

- Role of a Crisis Advocate
- Confidentiality
- Sexual Assault
- Domestic Violence
- Elder Abuse
- Crisis Intervention Model
- Law Enforcement
- Orders of Protection
- Legal system – courts
- Services to Children
- Lethality Assessments, Suicide
- Date Rape Drugs
- Special Populations
- Sexual Assault Nurse Examiners & Forensic Evidence Collection
- HIV & STI medications
- Emergency Contraception
- Child Abuse
- Parent Abuse
- Teen Dating Violence

Each training session includes experiential learning through role plays. Students practice their skills in the role of the Advocate and are also challenged to play the role of the victim. We use role plays as a tool to enhance skills, experiment with style and presentation and to provide interactive feedback.

The role of the Advocate is to provide immediate crisis intervention in Erie County Emergency Departments. Once a patient discloses sexual assault, domestic/family violence or elder abuse, the hospital staff page for an Advocate. The Advocate is to respond within 30 minutes. Interventions can last anywhere from a half hour to upwards of five hours, given the individual patient's needs. The Advocate's primary role is to assist the patient in creating a customized safety plan. This often includes linking patients with local shelters. The Advocate provides supportive counseling, while informing the patient of his or her rights and options both medically and legally. Advocates also work with family members present as well as secondary survivors. The Advocate records key information on agency paperwork and links each patient with 24-hour follow up case management services.

Students are expected to complete a *minimum* of 2 12-hour on-call shifts per month, for a *minimum* of 6 months. Let it be noted that this does *not* mean the student will spend all 12 hours per shift doing face-to-face client work; simply that they are responsible for responding if necessary for that 12-hour period of time.

Students are required to fill out statistical paperwork and demographic contact information on each patient. The student's write-up will describe what the survivor stated took place during the assault and at the hospital.

Students will gain valuable insight through exposure to a diverse range of populations.

A quarterly supervision is required for all students, including evaluation and any additional supervision can be provided based on the requirements of your program.

Advanced training will be provided once every month, with topics varying depending on the issues needing to be addressed in the field at that time. Each student is required to complete a minimum of 10 hours of advanced training.



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### Hospital Advocate Application

Date: \_\_\_/\_\_\_/\_\_\_

The following application is designed to help us determine you qualifications for training as a volunteer hospital advocate for Crisis Services. An evaluation will take place at the completion of training.

1. Name \_\_\_\_\_  
                    -Last-                                    -First-                                    -Middle Initial-
2. Date of Birth \_\_\_/\_\_\_/\_\_\_
3. Address- Home \_\_\_\_\_  
                    -Street-                                    -City-                    -State-                    -Zip-  
  
                    Business \_\_\_\_\_  
                    -Street-                                    -City-                    -State-                    -Zip-
4. Telephone- Home \_\_\_\_\_  
                    Permission to Call? YES NO  
                    If Yes, Hours to Call \_\_\_\_\_  
  
                    Business \_\_\_\_\_  
                    Permission to Call? YES NO  
                    If Yes, Hours to Call \_\_\_\_\_  
  
                    Cell Phone \_\_\_\_\_  
                    Permission to Call? YES NO  
                    If Yes, Hours to Call \_\_\_\_\_
5. E-mail address \_\_\_\_\_  
                    Do you use this email regularly? YES NO  
  
E-mail address \_\_\_\_\_  
                    Do you use this email regularly? YES NO
6. Specialized Courses/Training in Counseling \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Special Work Experience Related to Counseling \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

8. Education- High School \_\_\_\_\_

College \_\_\_\_\_ Degree \_\_\_\_\_

Year Received/Expected \_\_\_\_\_

Additional Education \_\_\_\_\_

**For Internship Applicants Only:**

College/University \_\_\_\_\_

Type of Program \_\_\_\_\_

\_\_\_\_ Undergraduate

\_\_\_\_ Graduate

Name of Internship Advisor \_\_\_\_\_

Contact Information of Internship Advisor \_\_\_\_\_

\_\_\_\_\_

Requirements for Internship Supervisor \_\_\_\_\_

\_\_\_\_\_

Intended Length of Internship:

\_\_\_\_ 1 Semester

\_\_\_\_ 2 Semesters

Internship Start Date (mm/yy) \_\_\_\_\_

Internship Completion Date (mm/yy) \_\_\_\_\_

Number of Required Internship Hours \_\_\_\_\_

Do you have any experience working with victims of Domestic/Family  
Violence, Rape, Sexual Assault or Elder Abuse?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What would you like to get out of your internship experience?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Volunteer Work Experience and/or Community Service:  
-Organization-                      -Year-                      -How Long-                      -Position-  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. How did you learn about the Advocate Program? \_\_\_\_\_  
\_\_\_\_\_

11. Have you ever been convicted of a crime with the exception of minor traffic offenses?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, please provide explanation- \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. References:  
**Business** and/or **Professional** References:

1. Name: \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_  
Please include Street, City, State, and zip code  
Day Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_  
Please include Street, City, State, and zip code  
Day Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_  
Please include Street, City, State, and zip code  
Day Phone: \_\_\_\_\_

13. I recognize that the duties of an Advocate are limited and I agree to remain within those boundaries and refer clients for additional assistance if necessary.

I hereby understand that all records or communications with clients are privileged information and therefore are to be kept strictly confidential. I understand that this information cannot be disclosed to any person except staff consultants, supervisors or team co-workers.

I realize that the possibility exists that I may be subpoenaed to appear in court.

I recognize that knowingly making false statements or providing false information on this application may result in immediate dismissal from the program.

Signed \_\_\_\_\_

**Please write a statement telling us something about you. Please answer the following questions as well: Why do you want to be an Advocate for people who have been involved in abusive situations? What do you feel you have to offer this program? Use additional pages if necessary.**

**Requirements for acceptance into training include:**

1. Advocates must be 18 years of age or older.
2. Advocates must provide own transportation to and from Advocate assignments.
3. Advocates must attend all 40 training hours.
4. Advocates must commit to a minimum of 6 months active service.
5. Advocates must be on-call a minimum of 2-12 hour shifts per month.
6. Advocates must attend 10 hours of advanced training.
7. Advocates must attend quarterly supervisions.

In compliance with the Fair Credit Reporting Act (Public law 91-508), you are notified that in connection with and in order to better evaluate this application for employment/volunteer work, a report may be obtained which will provide applicable information concerning character, general reputation and person characteristics including, but not limited to, verification of prior employment, verification with department of Motor Vehicles, and a character check, including verification and review of any criminal convictions. You have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of the nature and scope of the report requested.

**I have read and understand the requirements for acceptance into training.**

Signed \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please return completed application to:**  
**The Advocate Program**

**Crisis Services**

**2969 Main Street  
Buffalo, NY 14214  
(716) 834-3131**