



Llywodraeth Cymru
Welsh Government

Violence Against Women, Domestic
Abuse and Sexual Violence
(VAWDASV)

Perpetrator Service Standards

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.
This document is also available in Welsh.

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These Standards have been developed in collaboration with colleagues from statutory, non-statutory, non-government organisations and third sector service providers, researchers, policy makers, commissioners and funders. We are extremely grateful for the contributions and the time dedicated, for attending the consultations and then working on this document and finally for sharing such a wealth of expertise. Thanks to all involved.

If you are using these Standards then we would like to know. Please email the Welsh Government: VAWDASV.LlywodraethCymru-WelshGovernment@gov.wales using the subject heading 'Perpetrator Services'.

1. Minister's Foreword

The Welsh Government's National Strategy and Delivery Framework sets out our plans for implementing the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) 2015 Act. These include the importance of increasing the focus on holding perpetrators to account and providing opportunities to change their behaviour based on victim safety.

The requirement to ensure victims and survivors are central to the achievement of the six aims of the Strategy remains paramount. Nevertheless, the need to also work safely and effectively with perpetrators of Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV) in Wales is clear. If we do not provide meaningful opportunities for perpetrators to positively engage with services to effectively address their abusive behaviours, then we risk the continuation of their abuse.

The Welsh Government is committed to working in partnership with stakeholders to further develop services for perpetrators of Violence Against Women, Domestic Abuse and Sexual Violence in Wales. We are taking this forward as part of our work on the 'framework to support positive change in those at risk of offending in Wales' 2018-2023. We have worked closely with partners to contribute to our understanding of 'what works' with perpetrators and develop a shared appreciation of the importance of evidence-based practice. We continue to engage with stakeholders to develop a clear picture of the risks and needs of VAWDASV perpetrators across Wales in order to inform the commissioning and delivery of services that reflect these risks and needs in a responsive way.

Consistently safe and effective services for all VAWDASV perpetrators in Wales across the 'perpetrator journey' is vital. Early intervention approaches to working with perpetrators contribute positively to protecting the public and minimising harm to potential victims. Repeat perpetrators, who have been convicted and are subject to statutory supervision and management, however, also require services. The Standards are intended to support all of this work whilst acknowledging the value of existing accreditation by specialist providers.

The expertise of those stakeholders who have worked with us has been invaluable in creating Standards to meet the needs of VAWDASV perpetrator commissioners and services across Wales. While the Standards will be of direct use to those commissioners and services, the ultimate aim is to inform the delivery of safe and effective perpetrator services, giving individuals the best opportunity to achieve meaningful and sustainable change. This in turn will support and protect victims and survivors, contributing to a society where everyone in Wales is able to live fear free.

A handwritten signature in blue ink that reads "Julie James". The signature is written in a cursive, flowing style.

Julie James

Leader of the House and Chief Whip

2. Background

In 2015 the Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV) (Wales) Act 2015¹ came into force. The Act addresses domestic abuse and sexual violence perpetrated against all people in Wales, irrespective of gender or sexual orientation. It also addresses violence perpetrated against a woman or a man arising directly or indirectly from values, beliefs or customs relating to gender or sexual orientation.

The VAWDASV (Wales) Act 2015 has set out requirements for the Welsh Public Sector to work collaboratively and consistently to improve the outcomes for victims of VAWDASV. The National VAWDASV Strategy² gives specific consideration to working effectively with perpetrators, with Objective 3 setting out to ‘increase focus on holding perpetrators to account and provide opportunities to change their behaviour based around victim safety’.

The Welsh Government recognises that in Wales, women are disproportionately impacted by all forms of VAWDASV. The Act acknowledges that anyone can be affected by such violence and abuse. Victims can be from across the whole spectrum of society, including older people, all ethnicities, religions and beliefs, people with disabilities and people from the LGBT+ community. It describes gender-based violence as:

- Violence, threats of violence or harassment arising directly or indirectly from values, beliefs or customs relating to gender or sexual orientation
- Female genital mutilation
- Forcing a person (whether by force or coercion by threats or other psychological means) to enter into a religious or civil ceremony of marriage (whether or not legally binding)

¹ <http://www.legislation.gov.uk/anaw/2015/3/contents/enacted>

² <https://gov.wales/docs/dsjlg/publications/commsafety/181716-vawdasv-delivery-framework-en.pdf>

Official figures published by The Office for National Statistics³ in March 2017 illustrate the extent of domestic abuse in England and Wales. They estimate 1.9 million adults aged 16 to 59 years experienced domestic abuse in the year ending March 2017 (1.2 million women, 713,000 men). Seventy percent of victims of domestic homicides recorded between April 2013 and March 2016 were female. In the same period, 83,136 high-risk cases were discussed at multi-agency risk assessment conferences; 36 cases per 10,000 adult females. It was identified that most adults referred for safeguarding in the same period needed support because they were experiencing domestic abuse. According to official figures, in 2017, 66,704 domestic abuse related incidents and offences happened in Wales. Of all the violence-related offending in the same year 34% were determined to be domestic abuse related offences⁴. The Crown Prosecution Service recorded 6,366 domestic abuse related prosecutions and 4,832 domestic abuse related convictions in Wales in 2017.

Given issues of under-reporting and detection (as well as other limitations in associated data), these figures are likely to reflect only part of the domestic abuse problem in Wales. Furthermore, they do not reflect the broader offences associated with violence against women, domestic abuse and sexual violence. The significant impact of VAWDASV offences on society has been the driving force behind a number of policy and legislative changes in Wales. Indeed, we have witnessed an unprecedented amount of work in recent years carried out by both the UK and Welsh Governments, along with organisations delivering VAWDASV services.

³<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwales/yearendingmarch2017#main-points>

⁴<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/domesticabuseinenglandandwalesdatatool>

The Act defines violence against women and girls as:

‘Gender-based violence, domestic abuse and sexual violence where the victim is female.’

It defines sexual violence as:

‘Sexual exploitation, sexual harassment, or threats of violence of a sexual nature.’

The Well-being of Future Generations (Wales) Act⁵ was introduced in 2015 to improve the social, economic, environmental and cultural well-being of Wales. The Act placed a duty on all public services to carry out sustainable development by ensuring the following five principles were taken into account:

1. Ensuring the needs of the present are met without compromising future generations
2. Focusing on prevention work
3. Taking an integrated approach by considering how current well-being objectives impact on each well-being goal and those of other agencies
4. Collaborating with other agencies to align objectives
5. Involving others with an interest in well-being to ensure the needs of each diverse area are met

This agenda is further supported by the Social Services and Well-being (Wales) Act 2014⁶. This Act focuses on the way people’s needs are assessed and the way services are delivered, so that people have more of a say in the care and support they receive. It also promotes a range of help available within the community to reduce the need for formal, planned support.

⁵ <https://www.legislation.gov.uk/anaw/2015/2/contents/enacted>

⁶ http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw_20140004_en.pdf

The Welsh Government's programme for Government 'Taking Wales Forward 2016-2021'⁷ is focused on driving forward economic and public services improvements. The 'Prosperity for All'⁸ mission is committed to the improvement of procurement policies to bring economic, social and community benefits to Wales. It outlines priorities for delivering these improvements to ensure that people enjoy a good quality of life, live in strong, safe communities and share in the prosperity of Wales.

The 'Framework to support positive change in those at risk of offending in Wales 2018-2023' (formally launched on 19 April 2018)⁹ clearly reflects this legislation and related policy. The VAWDASV work stream of the framework will pursue five key areas of multi-agency work to establish safer communities by developing and sustaining an effective approach to preventing and addressing violence against women, domestic abuse and sexual violence across Wales, protecting the public and rehabilitating those at risk of offending and/or committing further abuse:

1. Establish an understanding of 'what works' with VAWDASV perpetrators
2. Inform the commissioning of effective and sustainable VAWDASV perpetrator services
3. Develop prevention and early intervention approaches to VAWDASV perpetration
4. Improve VAWDASV perpetrator service links, communication and sharing of effective practice
5. Develop a skilled and resilient VAWDASV perpetrator service workforce

These Standards will contribute towards the achievement of these aims.

⁷ <https://gov.wales/about/programme-for-government/?lang=en>

⁸ <https://gov.wales/docs/strategies/170919-prosperity-for-all-en.pdf>

⁹ <https://gov.wales/docs/dsilg/publications/180301-framework-support-positive-change-risk-of-offending-wales-en-v1.pdf>

Regional mapping has demonstrated the complexity of VAWDASV perpetrator services in Wales, with both court-mandated and voluntary or community sanctioned VAWDASV perpetrator services being provided by a range of both statutory and non-statutory organisations (with devolved and non-devolved governance). Her Majesty's Prison and Probation Service in Wales (including public sector prisons, the National Probation Service and the Community Rehabilitation Company), for example, delivers VAWDASV perpetrator services, including offending behaviour programmes. More broadly, VAWDASV perpetrator services cover community and custodial settings and address violence against women, domestic abuse and sexual violence with an apparent dearth of specific services for female genital mutilation, so-called honour-based violence and forced marriage perpetrators (although the extent of need for such services is unclear).

Currently services include individual, group-work and family-focused specific interventions, as well as broader approaches to addressing and managing VAWDASV perpetrator risk. Some perpetrator services are accredited (by Respect or the Correctional Services Accreditation & Advice Panel), some are non-accredited and others are working towards accreditation. It is of note that not all services meet the criteria for available accreditation in terms of their targeted perpetrator 'type' or nature of approach. What is clear, is that currently the demand for perpetrator services exceeds the quantity and variety of available service.

There are further inconsistencies in approach to assessing risk, need and responsivity and, in turn providing services that address these effectively. There is a lack of consistency in the robustness of approach to assessing and communicating perpetrator progress on interventions, as well as in evaluating the overall effectiveness of services delivered. It has been recommended that a broader more holistic view is applied to the commissioning process, and that it should be led by risk, need and responsivity profiling, as well as considering the nature and scale of local need. To achieve this, commissioners are dependent on the collation of intelligence and data about local services targeting violence against women, domestic abuse and sexual violence, being offered in their locality.

By looking at the wider picture of service provision offered locally, regionally and nationally, commissioners can compare existing services and/or planned services with the local, regional and national needs data, as well as benefitting from best practice/‘what works’ information. This approach will allow commissioners to identify gaps and understand requirements in terms of what is needed and where, which in turn will inform future service planning.

3. Purpose of Standards

Who and what are the Standards for?

These Standards are intended to be used by both **commissioners** and **services** when making decisions regarding the development, delivery, evaluation and commissioning (or decommissioning) of VAWDASV perpetrator services in Wales. They provide the minimum requirements for all services (including but not limited to individual and group-based programmes) delivered to perpetrators of the full range of VAWDASV in Wales that aim to address the attitudes/thinking/feelings/behaviours underlying VAWDASV perpetration. They are not intended to apply to services aiming to address the broader needs of VAWDASV perpetrators (such as substance misuse, housing, education and training, mental health issues, etc).

These Standards are intended to support commissioners across statutory and non-statutory sectors in commissioning perpetrator services of high quality that are most likely to be effective and minimise risk of further harm to participants, victims/survivors and potential victims/survivors of VAWDASV, staff and other relevant individuals. They seek to support the development and delivery of effective evidence-based services, offering options for perpetrators to address the factors underlying their offending/abusive behaviour and work towards an abuse-free life with positive, healthy relationships. They also contribute to the third of the six objectives contained in the National Strategy on Violence Against Women, Domestic Abuse and Sexual Violence 2016 – 2021: “Increased focus on holding perpetrators to account and provide opportunities to change their behaviour based around victim safety”.

It is recognised that given the complexity of VAWDASV, the wide range of perpetrator sub-groups, the variation in risk (i.e. likelihood of future offending/abusive behaviour and likely level and nature of harm), need and responsivity factors (i.e. intervention targets to be addressed and features that impact on engagement with a service), and the range of offences covered by the VAWDASV (Wales) 2015 Act, that a suite of services is likely to be required to address the risks and needs of VAWDASV perpetrators in Wales. These should reflect the various stages of the ‘perpetrator journey’ at which services may become involved. **Commissioners and services should be mindful that no single programme will be suitable for all VAWDASV perpetrators.**

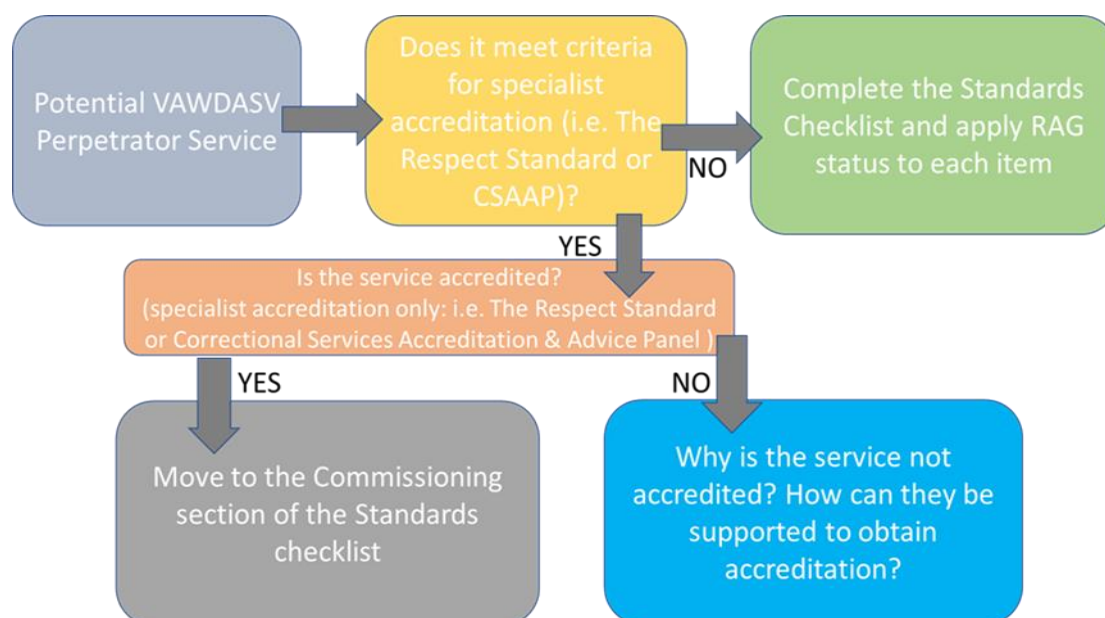
As well as being specifically applicable to commissioners and services, these Standards may be referred to by wider stakeholders, including users of VAWDASV perpetrator services. They may be used, for example, by a perpetrator to set expectations of the quality of services they should receive and/or by victims and survivors with questions or concerns regarding the Standards that VAWDASV perpetrator services should be adhering to. Commissioners should ensure that clear processes of accountability are included for perpetrators, victims and survivors, partners and ex-partners, as well as commissioned partner organisations, and where only these Standards and checklist are used, accountability mechanisms should be additionally resourced.

4. How do the Standards relate to existing accreditation?

These Standards are designed to provide a benchmark for VAWDASV perpetrator services in Wales and as such provide a comprehensive set of criteria that all VAWDASV perpetrator services in Wales should adhere to. The Standards do not seek to offer an alternative to existing specialist accreditation for VAWDASV perpetrator services that fall into their remit (such as that provided by the Correctional Services Accreditation and Advice Panel and The Respect Standard), and where possible services should be supported to attain such accreditation, as it is recognised that these provide particularly comprehensive and robust means of ensuring safe and effective delivery.

Evidence that services are accredited by these bodies should be accepted as evidence that they would also meet the Standards outlined in this document, and services may then not be obligated to duplicate work to demonstrate compliance. It is of note, however, that other sources of 'accreditation' may be offered by organisations outside the specialist VAWDASV sector (e.g. by Education providers), but these will not consider the specific safety and effectiveness issues inherent in VAWDASV perpetrator services. Services with non-specialist accreditation should therefore demonstrate adherence to the Standards provided in this document.

Figure 1. This diagram illustrates the decision-making process when commissioning perpetrator services



The following services/programmes in Wales are currently accredited by Respect (please refer to the Respect website for the up to date list: <http://respect.uk.net/>):

- Choose to Change Cymru
- Phoenix Domestic Abuse Services
- Threshold Domestic Abuse Service

The following programmes are accredited by the Correctional Services Accreditation and Advice Panel (CSAAP):

- Building Better Relationships
- Kaizen
- Healthy Relationships Programme
- Becoming New Me
- Living as New Me
- New Me Strengths
- Becoming New Me +
- Horizon
- i-Horizon
- Healthy Sex Programme

5. The Standards

The following Standards are presented under relevant sub-headings for ease of reference. However, they are not necessarily presented in the order in which a service may operate and they are certainly not in order of importance. They should all be adhered to at a minimum. While they are intended to be clear, they are not so prescriptive that they dictate the way in which each Standard should be met or evidenced, providing flexibility for the range of VAWDASV perpetrator services.

1. Referrals

- i. There should be a clear and accessible pathway for relevant individuals/agencies to refer cases to perpetrator services
- ii. Both referring services and those receiving the referral should have clear processes for recording and acting on referrals within stated timeframes and according to a prioritisation strategy
- iii. Where appropriate, there should be a clear and accessible pathway for self-referral for perpetrators to access a service
- iv. Services receiving referrals should have clear processes for responding to the individual/referring agencies within General Data Protection Regulation (GDPR)¹⁰ requirements
- v. Communication with a victim/survivor/partner/ex-partner needs to be explicitly pursued by the perpetrator service at the earliest opportunity, which is most likely at the stage of receiving a referral

2. Eligibility Criteria

- i. There should be clear, accessible criteria for who is eligible and who is ineligible for consideration for allocation to the perpetrator service
- ii. Eligibility should include consideration of both 'suitability' and 'readiness'

¹⁰ <https://eugdpr.org>

- iii. There should be a time bound process for responding to referrals and re-referrals
- iv. Where cases are ineligible for the perpetrator service, this should be clearly explained to the referrer, and where appropriate alternatives suggested

3. Consent

- i. Services should always seek to secure informed consent for involvement in a VAWDASV perpetrator service (statutory and non-statutory) from a perpetrator at the earliest opportunity
- ii. Consent should be sought even from those VAWDASV perpetrators engaging in court-mandated services. This should include a clear discussion regarding:
 - a. What they are consenting to
 - b. Possible consequences of consenting
 - c. Possible consequences of not consenting
 - d. How their information will be used and shared
- iii. Instances where it is not possible to gain consent need to be recorded and clearly justified

4. Assessment

- i. Perpetrators being considered for perpetrator services should be subject to assessment processes employing standardised tools that have been shown to be valid and reliable in published research. Where no standardised tool exists, services should be able to demonstrate an objective and comprehensive approach to assessment
- ii. Assessment of perpetrators for perpetrator services should only be carried out by staff who have undertaken specific training in the tools to be applied

- iii. Assessors who have direct contact with perpetrator service participants should be trained in:
 - a. Motivational interviewing/positively engaging perpetrators
 - b. VAWDASV awareness (covering at least the VAWDASV perpetrator behaviours relevant to the service being delivered)
 - c. Safeguarding
 - d. Lone working

- iv. Assessments for perpetrator services should be based on the RNR (Risk, Need and Responsivity) principles:

Risk: should be assessed using an empirically supported and validated tool and be used to inform the 'dosage' of treatment, with higher risk perpetrators receiving more intervention.

Need: should be assessed using an empirically supported and validated tool. Assessment should identify the presence and relevance of the changeable factors associated with VAWDASV and should inform the focus of treatment for the individual.

Responsivity: assessment should consider the range of factors that may act as a barrier to engagement and in turn account for 'how' treatment should be delivered in order to maximise effectiveness. These may include issues such as mental health, substance misuse, learning difficulties/disabilities, trauma/post-traumatic stress disorder etc.

- v. Assessment should triangulate evidence from a range of sources, including:
 - a. Official records
 - b. Victim/survivor/partner reports
 - c. Perpetrator interviews

- vi. The assessment must clearly inform the service plan, and as far as possible an individualised approach to addressing specific needs (even in a group setting) should be taken

5. Links to Partner Work

- i. Prior to any engagement with a perpetrator service, clear links should be established between perpetrator service staff and any services engaged with victims/survivors/partners/ex-partners
- ii. All services working with perpetrators will need to ensure that clear information describing the intervention and the expected outcomes are accessible to partner services
- iii. Where such contact is not possible or appropriate (e.g. in relation to a perpetrator of historic sexual offences, where the identity/whereabouts of the victim(s) is unknown) this must be clearly justified. Consideration must be given (and appropriate action taken) to the possibility of such perpetrators having multiple victims (former and/or current)

6. Intervention

- i. Services delivered in groups should be carried out by two facilitators. Consideration should be given to whether facilitators should be different genders (e.g. if the intervention is targeting gender stereotypes), in order to demonstrate positive role-modelling. Because of the nature of this work posts may be advertised as only open to female or male applicants, using exemptions under Schedule 9 Part 1 of the Equality Act, 2010¹¹
- ii. Services should be based on a clear model of change which is supported by the current, clearly referenced empirical VAWDASV literature

¹¹ <http://www.legislation.gov.uk/ukpga/2010/15/contents>

7. Re-Assessment

- i. Processes should be in place to ensure that the risk assessment and intervention plan is re-visited (and if necessary amended) in light of new information
- ii. This should include processes for sharing new information to inform the broader Risk Management Plan with relevant authorities involved with the victim/survivor/partner/child(ren), and the perpetrator

8. De-selection

- i. There should be a clear process with associated criteria for deselecting individuals from a perpetrator service, covering:
 - a. Further incidents of abuse (further abuse could be self-disclosed, disclosed by a victim, survivor, partner, ex-partner or come from service information or intelligence from the Police, Social Services or other relevant agencies)
 - b. Minimal attendance requirement
 - c. Meaningful engagement and participation
 - d. Behavioural expectations
- ii. Where appropriate and safe to do so, there should be processes for attempting to re-engage the perpetrator before de-selection takes place
- iii. Consideration needs to be given to the possible impact of de-selection on risk and this should be communicated with relevant agencies, including those working with the partner/ex-partner/victim/survivor/any children, as well as with the perpetrator in any other capacity
- iv. Risk Management Plans need to be revised in light of de-selection

9. Drop-out

- i. There should be a clear process for dealing with participants who fail to attend the perpetrator service and/or drop-out at any point prior to the formal end of the service delivery
- ii. There should be processes for attempting to re-engage the perpetrator before drop-out/de-selection is inevitable

10. Progress Assessment

- i. There should be valid and reliable processes in place for evaluating and reporting individual participants' progress in a perpetrator service
- ii. Evaluation of progress should include (but should not solely rely on) self-report of the participant as well as their partner/victim(s)/survivor along with facilitator records (and those of wider professionals where relevant)
- iii. Progress should be measured against the intended outcomes of the intervention, along with the initial risk, need and responsivity based assessment

11. Service Evaluation

- i. There should be valid and reliable processes in place for regularly (e.g. annually) evaluating the overall effectiveness of the perpetrator service (i.e. whether it is achieving its stated aims and objectives)
- ii. Evaluation should include the impact of service/intervention on the perpetrators, the victims, survivors, partners and ex-partners and their families
- iii. Limitations to evaluation processes (such as small sample sizes, lack of long-term follow up of participants, etc) should be acknowledged
- iv. Where possible independent evaluators (e.g. academic partners) who are not involved in service delivery should conduct the service evaluation

- v. Services should have a clear time bound plan to review the outcome and recommendations of any service evaluation, modifying their practice accordingly

12. Staff Selection

- i. There should be a clear process in place for selecting staff to deliver VAWDASV perpetrator services
- ii. Criteria should consider relevant competencies, values and personal resilience
- iii. All potential staff should be subject to a Data Barring Service (DBS) check
- iv. Checks should be carried out to ensure the management of the potential involvement in perpetrator service delivery of individuals who may be current or former perpetrators of VAWDASV. This should be carried out in compliance with the Rehabilitation of Offenders Act (1974)¹² Staff who have a disclosed background of being a victim/survivor/perpetrator should be supported in ensuring they have addressed their own experiences prior to working directly with VAWDASV perpetrators

13. Staff Training and Continuous Professional Development (CPD)

- i. Staff should be provided with training of a high standard (i.e. evidence-based in terms of its content and mode of presentation, as well as trainer expertise), delivered by individuals/organisations with a clear background in a relevant VAWDASV perpetrator service delivery, training and safeguarding
- ii. Training should include clear processes for identifying those staff who are insufficiently skilled to deliver the service to a good standard, and either providing them with additional support to improve their practice, or deselecting them from the role

¹² <https://www.legislation.gov.uk/sdsj/2018/9780111037744>

- iii. Services should hold training budgets and facilitate regular training (including induction) and supervision for all staff

14. Clinical Supervision

- i. All staff delivering VAWDASV perpetrator services should have access to regular clinical supervision in addition to professional support, from an experienced supervisor with a relevant supervision qualification. Supervision should be minuted and involve discussion of:
 - a. Individual and/or group intervention planning and progress
 - b. Facilitator skills development
 - c. Diversity and equality
 - d. Co-working relationships
 - e. Interpersonal/group dynamics
 - f. Personal resilience and well-being
 - g. Developmental feedback for facilitators

15. Professional Support

- i. While clinical supervision should include discussion of factors influencing personal resilience, facilitators should also have access to a separate confidential professional support/counselling service if required. Professional support should be provided separately from and in addition to clinical supervision

16. Health and Safety

- i. All perpetrator services should have published Health and Safety policies in place
- ii. Consideration needs to be given to the specific risks associated with perpetrator services, addressed through a risk assessment covering:

- a. Building access (staff and service users)
- b. Potential for perpetrator access to other service users (especially VAWDASV victims)
- c. Risk of harm to staff
- d. Risk of harm to partners, ex-partners and potential partners
- e. Risk of harm to participants
- f. Maximum number of hours of delivery per week of perpetrator services by staff
- g. Scheduling of programme delivery breaks for staff
- h. Safeguarding (reflecting current UK and Welsh specific guidance)

17. Equality and Diversity

- i. All organisations providing perpetrator services should have published equality and diversity policies in place
- ii. These policies should be applied to both the staff and participants involved in perpetrator services, as well as other involved stakeholders
- iii. All perpetrator services should be subject to an Equalities and Diversity impact assessment

18. Complaints

- i. All VAWDASV perpetrator services should have a clearly communicated complaints process for service users and wider stakeholders
- ii. The complaints process should include timeframes, objective investigation, and clear communication of outcomes to complainants

19. Environment and Culture

- i. Direct services should seek to provide an environment conducive to positive engagement on perpetrator services, taking into consideration the suitability of group rooms, toilet facilities, waiting areas, etc

- ii. Services which fall into the remit of these Standards, but which do not have direct contact with VAWDASV perpetrators (e.g. because their service is delivered online or via telephone) should demonstrate how they compensate for the lack of direct contact to promote positive engagement with their service users

20. Record Keeping

- i. All records should be taken, transported, maintained, stored and destroyed in line with relevant Data Protection legislation¹³
- ii. All contact with the perpetrators should be clearly recorded via a case note system

21. Information Sharing

- i. There should be a clear Information Sharing Protocol in place for all perpetrator services which complies with relevant legislation

22. Links to Children's Services

- i. Prior to engagement with a perpetrator service, clear links should be established between perpetrator service staff and any services engaged with children or step-children of the perpetrator as well as those children residing at the same address who may not fall into these categories
- ii. Links to services concerned with child and adult safeguarding should be prioritised

23. New Services and Innovation

- i. If a perpetrator service is being piloted and/or is a 'new' intervention, there should be evidence of:

¹³ <http://gdpr-legislation.co.uk/>

- a. The perpetrator service being underpinned by current published relevant theory, i.e. while the effectiveness of the service itself cannot yet be evidenced, there is a sound theoretical rationale for why it could meet its stated aims and objectives
- b. A clear model of change
- c. How the intervention is being evaluated to establish effectiveness
- d. A plan for developing towards accreditation (if they fall within the remit of available specialist accreditation)

6. Commissioning, Accountability and Audit

Commissioning comprises a range of activities, including:

- assessing needs
- planning services/planning for review
- procuring services
- reviewing/monitoring quality and outcomes

Figure 2. This diagram illustrates the commissioning cycle



The principles to commissioning VAWDASV perpetrator services in Wales, if applied, will ensure the development and maintenance of high quality, perpetrator service provision across Wales. As a commissioner or service provider these steps will be critical to ensuring compliance to the Standards is maintained and should always be considered when planning for the review/audit of services. These include:

- Commissioning only where there is a clear evidence base
- Ensuring outcomes based commissioning where there are clear and regular measurements of the effectiveness of the service/programme being provided
- Ensuring review and audit is a requirement to funding
- Commissioners should report on, and/or monitor adherence to the Welsh Government Standards using the checklist below

- Commissioners and services should refer to the Welsh Government's forthcoming VAWDASV Commissioning Guidance

It is good practice for service providers to review and reflect on all aspects of service provision and commissioners should put in place systems for **frequently reviewing** the VAWDASV perpetrator services commissioned in their locality/region (or across Wales, where applicable), including:

- Implement robust auditing processes
- Apply a consistent approach to commissioning that focuses on addressing risk and meeting need in a responsive way
- Develop common commissioning approaches by applying the Standards checklist
- Commissioning activity should be planned and coordinated to avoid duplication and to ensure sustainability
- There must be clear outcomes and valid and reliable methods to measure and report on the outcomes
- Hold providers to account

Existing VAWDASV perpetrator services should be reviewed according to their compliance with these Standards, using the checklist and (where appropriate) time-bound plans put in place to work towards compliance where this is not evident. Where compliance is unlikely to be achieved, commissioners should consider decommissioning such services and commissioning alternative high-quality options for meeting perpetrator risk and needs.

It should also be recognised that adherence to Standards can fluctuate and commissioners should put in place systems for frequently reviewing the VAWDASV perpetrator services commissioned in their locality/region (or across Wales, where applicable) through robust support and auditing processes using the checklist in Appendix 1. It is essential that commissioners are mindful of services claiming to address VAWDASV perpetrator behaviours through inappropriate (and potentially harmful) means

without the required specialist perpetrator expertise, such as via parenting programmes and/or couples therapy.

Commissioners should consider the costs associated with services demonstrating adherence to the Standards outlined in this document. It should not be assumed that services themselves can absorb such costs into existing budgets as this may have a detrimental impact on front-line service delivery. Costs of developing and sustaining services in line with these Standards should therefore be embedded into contractual agreements. Due diligence should be applied in all commissioning activity to confirm all facts, review financial records, etc.

Appendix 1

Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV) Perpetrator Standards Checklist

This Checklist has been designed to be used in conjunction with the Welsh Government Perpetrator Service Standards and is an aid to compliance assessment of any VAWDASV perpetrator service by commissioners, service providers and service users

Is the service already accredited (specialist accreditation only e.g. Respect or CSAAP)?

If no move to the 'commissioning' section of the Checklist

Each item should be RAG rated – Red (does not meet criteria), Amber (partially meets criteria), Green (meets criteria completely). Any Red items will indicate that the service has not met the standards and will need to address area and be re-assessed. Any Amber areas should be reviewed within an agreed timeframe that gives the service opportunity to improve the item and move to Green status.

No	Standard	Evidence	RAG Status
1.	Referrals		
	What is the referral pathway?		
	Can you self-refer? How do you?		
2.	Eligibility criteria		
	What is the criteria?		
3.	Consent		
	How is consent sought?		
4.	Assessment		
	What is the assessment tool being used?		
	What research is behind this tool?		

	What training is available and implemented for assessors to use the tool?		
	How does it cover motivational interviewing/engagement?		
	How does the Assessment consider risk?		
	How does the Assessment consider need?		
	How does the Assessment consider responsivity?		
	How does the assessment reference official records?		
	How does it reference victim reports?		
	How does it reference survivor reports?		
	How does it reference partner reports?		
	How does it reference perpetrator Interviews?		
5.	Links to Partner work		
	How are links to other services made?		
	How can you access information about the intervention?		
6	Intervention		
	How are the groups staffed?		
	What is the evidence base/ model of change?		
7.	Re-Assessment		
	When does re-assessment take place and does it include views of relevant authorities?		
8.	De-selection		
	What is the de-selection process and how does it consider:		
	Minimum attendance?		

	Engagement? Re-engagement?		
	Behaviour?		
	Re-offending?		
	Risk Management?		
9.	Drop out		
	What is the process?		
10.	Progress Assessment		
	What is the process?		
11.	Service Evaluation		
	Who is evaluating?		
	Are they independent?		
	Why were they chosen?		
	What is the timeframe?		
	How often etc?		
12.	Staff Selection		
	What criteria are applied to recruitment? (competencies, values, experience)		
	How are DBS and vetting check applied?		
13.	Staff Training and Continuous Professional Development		
	What type of training is provided?		
	How is training funded?		
14.	Clinical Supervision		
	How do staff access to clinical supervision?		
15.	Professional Support		
	How do staff access separate confidential support?		

16.	Health and Safety		
	What is the policy?		
17.	Equality and Diversity		
	What is the policy?		
18.	Complaints		
	What is the process?		
19.	Environment and Culture		
	How does the environment suit workers and service users?		
20.	Record Keeping		
	What is the process?		
21.	Information sharing		
	What is the protocol?		
22.	Links to Child Services		
	How do they link with relevant services?		
23.	New Services and Innovation		
	What is the evidence base/theory?		
	What is the model of change?		
	Who will evaluate? What will they evaluate?		
	What do they need to do to achieve specialist accreditation?		
Commissioning, Accountability and Audit			
	What is the need this service will meet?		
	What is the evidence base?		
	Who does the service target?		
	What is the gap in service for this target cohort?		

Is there another service offering this locally? Consider		
What are the outcomes? Are they clearly defined? For service users: For the service:		
How will outcomes be measured? For service users? For the service?		
Is the approach trauma informed? How is this approach applied?		
How does the service demonstrate value for money?		
How will you audit/review this service?		
How will the service achieve evaluation? Is the evaluation independent?		
How is this service funded? When does the funding end? What is the sustainability plan?		
What is the model of change? How will the service demonstrate integrity to the model?		