



The  
Respect **Safe Minimum Practice** Standard

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The Respect Service Standard was written by Neil Blacklock with additional input from Thangam Debbonaire.

Respect would like to thank all those who contributed to the second edition of the Service Standard and to acknowledge the support from Home Office and the Lankelly Chase Foundation in the development of the Standard.

## Organisations supporting the Respect Standard



Home Office



Scottish Government



Association of  
Directors of  
Children's Services



AVA Project



Coordinated Action  
Against Domestic  
Abuse



Lankelly Chase  
Foundation



Refuge



Relate



Scottish  
Women's Aid



Welsh Women's Aid



Women's Aid



Women's Aid  
Federation  
Northern Ireland

## Foreword

The Government has made it very clear that domestic violence is not acceptable in our society and our approach to ending domestic violence is set out in our Call to End Violence Against Women and Girls narrative and supporting action plan.

In order to increase the safety of those experiencing domestic violence it is essential to engage with the abusers to reduce the risk. Challenging and changing the attitudes and behaviour of those who feel that violence against another is acceptable is therefore a key part of our approach. Our action plans sets out our commitment to fund the Respect Phonenumber which provides information and advice to help domestic violence perpetrators stop their violence and change their abusive behaviours.

Services which address the behaviour of men who are violent against their partners should be an important element of every community's response to domestic violence. The Respect Service Standard requires services to effectively manage risk and work as part of a co-ordinated response to domestic violence to ensure that the men attending these services are given the best chance possible of ending their abusive behaviour.

Safety is critical. The Respect Service Standard provides a framework for the delivery of quality, safe and effective services to men using intimate partner violence as well as getting the best possible outcomes in increasing the safety of women and children at risk from domestic violence. I am therefore delighted to introduce the second version of the Respect Service Standard.



LYNNE FEATHERSTONE MP

Minister for Equalities and Criminal Information



# GUIDANCE FOR SERVICE PROVIDERS SEEKING RESPECT ACCREDITATION

*(taken from the full Service Standard)*

## Introduction

The Respect Accreditation Standard applies to all organisations providing domestic violence prevention programmes (DVPPs) working with men who use intimate partner violence (IPV), and also providing integrated safety services (ISS) for partners and ex-partners of these perpetrators. This document ('the Standard') sets out all the requirements for the management and operation of these services. It sets out the evidence that will be sought to demonstrate that an organisation meets these requirements. It also provides guidance on how the requirements can be met.

Accreditation has been developed so that members of the public, funders, commissioning agencies and other professionals can be assured of a high quality, safety-focused service from organisations accredited by Respect. The requirements have been developed from the lessons learnt from available research and practice. Practitioners, policy makers and researchers have been involved in developing and testing these requirements. The Standard and assessment methods will be reviewed every three years to ensure that they are updated as knowledge and experience expand.

This is the 2nd edition of the Standard. It is informed by the experience of the Respect accreditation assessors, the accreditation panel and Respect members. It has drawn on lessons from the first 24 assessments<sup>1</sup> and integrates the feedback from a consultation with Respect members and external stakeholders.

Organisations must meet **all** the requirements of the Standard in order to become accredited.

## Support for organisations seeking accreditation

Respect provides high quality support and information designed to meet the needs of our members to enable them to meet the requirements of the Standard. This support includes:

- the Respect resource manual, containing sample policies, procedures and other documents
- training, information and support for organisations seeking to provide services in line with the service standard
- the Redamos case and data management system
- pre-accreditation support from Respect accreditation staff, including on site service review

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<sup>1</sup> <http://www.respect.uk.net/pages/review-of-accreditation-assessments.html>

## **Services eligible for accreditation**

The minimum unit considered for accreditation is usually a combination of a Domestic Violence Prevention Programme (DVPP), working with male perpetrators of domestic violence and an Integrated Support Service (ISS), working with their female partners and ex-partners. Respect accreditation applies to services operating entirely in the voluntary, statutory or private sectors, or for those operating as a partnership or consortium across sectors. Currently, there are no national standards for work with other categories of people using IPV, such as women or any person in a same sex relationship. This is because there is insufficient evidence and practice experience on which to base such a standard. However, Respect staff are monitoring the development of such research and practice and will provide a Standard for these other categories of work in due course.

Organisations running a DVPP without an ISS cannot be considered for accreditation as they are unsafe and cannot achieve the standard. An ISS is an essential feature of a Respect accredited Domestic Violence Prevention Service, for many reasons. An ISS helps to ensure that women's expectations of the DVPP are based on realistic expectations and that they and others do not rely solely on the service to bring about an immediate cessation of violence and abuse. It helps to ensure that women's safety can be monitored and kept the highest priority. It also helps to ensure that work with the men attending the programme is informed by current understanding of the women's experiences. It is now widely accepted that working with perpetrators of domestic violence can only be undertaken safely if there is an ISS that contacts partners and ex-partners and provides them with a support service.

## **Accreditation of ISS linked to the probation service**

Organisations running the ISS element of a service where the DVPP is one of the services accredited by the Correctional Services Accreditation Panel and run by the probation service may also apply to become accredited by Respect. It is possible, for example, for the ISS element of an accredited probation-based programme to apply for accreditation under the Respect Standard, for that element of the service alone. In these cases, the organisation would be assessed only against the relevant elements of the Standard.

## **Accreditation of organisations providing only individual work with perpetrators of domestic violence**

Respect recognises that some organisations provide some or all of their work with domestic violence perpetrators in an individual work setting. Current and recent experience shows that group work is usually the most cost effective and appropriate setting for work with most domestic violence perpetrators. There are

circumstances when this is not possible or desirable. Individual work is an option - sometimes the only option.

Respect is exploring the challenges of delivering individual work interventions with perpetrators of domestic violence through interviews with practitioners and working with individual work programme providers.

Services that use a combination of individual and group work will find that there are a small number of additional requirements which now bring the individual work element under the scope of this Standard.

Organisations providing only individual work can also apply for accreditation under the 2nd edition of the Service Standard.

## **Terminology**

Throughout this document, 'the organisation' will be taken to mean the management and operation of both the DVPP and the ISS. Where these are supplied by two different organisations, the term includes all the relevant parts of the management and service delivery of both organisations, but not necessarily the whole of both organisations. If the service is situated within a larger organisation, the accreditation is only of the elements which come under the terms of this Standard.

Domestic violence is often taken to include violence against adult relatives as well as partners/ex-partners. Another commonly used term for violence against partners or ex-partners is intimate partner violence (IPV). This is useful for distinguishing between different categories of domestic violence. Most DVPPs in the UK are currently working mainly with people using IPV but some are expanding this or can adapt their materials. The Standard refers to domestic violence throughout, as this is probably the most familiar term. However, many DVPPs will want to interpret this as IPV only. The use of the term domestic violence in no way implies that DVPPs should be responding to all forms of domestic violence and in all settings.

Other terms are defined in the glossary in Appendix A.

## **Services working with other client groups**

The majority of domestic violence involves a male perpetrator and a female survivor. The body of knowledge used to develop this Standard applies to this client group only. Services that work with LGBT perpetrators of domestic violence and with women who are using violence towards male partners are developing. As practice, research and policy develop there will be more evidence upon which to extend the current scope of this Standard to fit the specific needs of working with other client groups.

## The model of work of a Respect accredited organisation

The Respect Standard requires that all organisations wishing to be accredited have a written model of work which includes the content and structure of the work with clients, the theory underlying this and the methods of delivery.

The organisation can choose any model of work that suits their own situation providing it includes adherence to the aims and principles set out below. This system of assessment and accreditation does not prescribe one specific model of provision, professional approach or philosophical understanding. Experience so far has demonstrated that in fact the Standard provides a strong framework in which different approaches and models can be and are used safely and effectively.

## The aims of a Respect accredited service

Any organisation seeking Respect accreditation must be able to demonstrate that they are providing a service that embodies the aims outlined below:

### *1. To increase the safety of victims*

- To increase the safety of women, children and others at risk of experiencing domestic violence
- To provide information and support to women in order to empower them, advocate for them and identify ways of helping them and their children to be safer

### *2. To assess and manage risk*

- To assess the risk of future domestic violence and escalation of severity
- To monitor and manage this risk jointly between DVPP and ISS
- To communicate this effectively with other professionals and contribute to the multi-agency management of the risk of domestic violence

### *3. To be part of a co-ordinated community response to domestic violence*

- To contribute to the development of co-ordinated community responses to domestic violence.

### *4. To provide services which recognise and respond to the needs of diverse communities*

- To respect, recognise and understand the diversity of the local communities they serve
- To apply anti-discriminatory practice in all aspects of work



- To ensure that services are as accessible and effective as possible for all local communities
- To ensure that potential clients are helped to use their services on an equitable basis

### *5. To promote respectful relationships*

- To provide interventions which challenge, support and encourage men who use intimate partner violence to engage in safe and respectful relationships
- To promote the principle that everyone has the right to be treated with respect and dignity

### *6. To work accountably*

- To work with other professionals to ensure that men who use intimate partner violence are treated as responsible and accountable for their own behaviour and for changing it
- To provide services which are open to scrutiny
- To work in ways which are accountable to the views and experiences of survivors of domestic violence

### *7. To support social change*

- To promote the wider social and community changes necessary to support a community-wide intolerance of intimate partner violence, domestic violence and other forms of violence against women
- To work in a way which recognises the nature, prevalence, incidence, dynamics and effects of domestic violence

### *8. To offer a competent response*

- To ensure that the organisation provides a highly competent, professional, informed response to members of the public and other professionals



## **Two stages of assessment for Respect accreditation**

Accreditation can now be done in two stages.

### **Safe Minimum Practice – safety and risk management**

This is an initial, safe minimum practice assessment. It involves assessment against 60 of the requirements in this Standard. This stage one assessment will reassure referrers and the public that the organisation is delivering a service that is capable of managing risk and safeguarding concerns. Unlike full accreditation, the quality of work and the effectiveness are not assessed, beyond the requirements about safety and risk management. Organisations with SMP status are safe to use but are not accredited.

All services wishing to continue take referrals from the Respect advice line services will need to pass the SMP within two years of registration with Respect, as of 1 October 2011.

The SMP has to be renewed annually to remain valid.

A copy of the SMP Standard is available on the Respect website.

### **Full accreditation – quality and effectiveness**

Full accreditation involves being assessed against every one of the 94 requirements in this Standard. This provides programmes, funders, commissioners, referring agencies, clients and members of the public with assurance that the accredited service is both safe and as effective as possible. This means that the organisation is as likely to achieve success as possible under current conditions and based on current knowledge.

Organisations can move from SMP to full accreditation without repeating those sections already assessed, providing this is done within one year.

Accreditation will have to be renewed every three years, or earlier if there are significant changes to the structure or operation of the organisation or services.

### **Further monitoring**

All organisations who have passed SMP or full accreditation are required to send Respect a copy of their annual report each year and to notify Respect if there are any significant changes in management or operations. All organisations who have passed full accreditation may be subject to spot checks, with notice, from Respect assessors.

# STRUCTURE OF THE STANDARD

The Standard consists of the following sections:

- **Section A – Management of the organisation**
  - A1. Policies and procedures
  - A2. Resources
  - A3. Management and accountability
  - A4. Recruitment and training
  - A5. Case management
  - A6. Practice management and clinical supervision
  - A7. Outcomes and outputs
- **Section B – Service structure and process**
  - B1. Service specification
  - B2. Service principles
  - B3. Joint working DVPP and ISS
  - B4. Eligibility and suitability criteria
  - B5. Domestic violence that is not men’s violence to female partner/ex
  - B6. Couples work
  - B7. Working with clients involved with social services
  - B8. Working with clients involved in child contact disputes
  - B9. Working with clients involved with the Criminal Justice System
- **Section C – Diversity**
- **Section D – Risk management**
- **Section E – Children**
- **Section F – Partnership working**

**Each section is divided up as follows:**

- An overall heading which describes what the section is about (A to F).
- A number of service standards (such as ‘A1’) that contain the basic requirements of each section.
- A statement of the purpose of that service standard.
- The evidence that will be sought by assessors to show that an organisation is meeting that service standard. This evidence must be demonstrated to achieve accreditation.
- The information in the right hand column shows which of the service aims (see page 4) the service standard is most closely related to.
- Guidance that contains advice about how to meet the service standard.

# THE RESPECT SAFE MINIMUM PRACTICE STANDARD

The standards that follow are taken from the full Service Standard and are the elements that need to be in place to manage the risk management and safeguarding aspects of a DVPS. They are numbered as they are in the full Standard and those wishing to read the guidance sections for each Standard will find these in the full Respect Service Standard.

- **Section A – Management of the organisation**

A1. Policies and procedures

A3. Management and accountability: A3.1 only

A4. Recruitment and training: A4.1; A4.3; A4.4; A4.5

A5. Case management: A5.1; A5.2

A6. Practice management and clinical supervision: A6.2 only

A7. Outcomes and outputs: A7.1 only

- **Section B – Service structure and process**

B1. Service specification

B2. Service principles: B2.1; B2.2; B2.4

B3. Joint working DVPP and ISS

B4. Eligibility and suitability criteria: B4.1-B4.6

B5. Domestic violence that is not men's violence to female partner/ex

B6. Couples work: B6.1 only

B7. Working with clients involved with social services: B7.1; B7.2; B7.3; B7.6; B7.8

B8. Working with clients involved in child contact disputes: B8.1; B8.4

B9. Working with clients involved with the Criminal Justice System

- **Section C – Diversity:** C1.2; C1.5

- **Section D – Risk management:** D1.1-D1.6

- **Section E – Children:** E1.1; E1.2; E1.3; E1.7

- **Section F – Partnership working:** F1.4; F1.5; F1.6; F1.9

# A

## Management of the organisation

The management framework, procedures and activities are sufficient to ensure the quality of the service provided, the development of staff and the role of the organisation in the wider community response to domestic violence.

### A1 Service Standard

The organisation has in place the necessary policies and procedures to provide a secure and clear framework within which effective management, employment and service provision can take place.

#### *Purpose*

To ensure that the organisation operates in a way that is consistent with its core objectives and values.

#### *Evidence*

**A1.1** The organisation has the written policies and procedures listed below; they are clear, workable, reviewed regularly and fully implemented. Policies and procedures cover operational, administrative and financial matters. The policies and procedures included below are those that have specific relevance for DVPSs. This list is not a comprehensive list of all the policies and procedures needed for the whole organisation.

a) Health and Safety policy (covering safety for staff and clients); lone working and home visits policy; a procedure for staff in responding to abuse from clients	<b>Safety</b>
b) Equal opportunities & diversity strategy; equal opportunities, diversity and anti-discrimination policies for service delivery and employment	<b>Diversity</b>

c) Confidentiality, data protection and information sharing policies; procedure and guidelines on information sharing internally and externally	<b>Safety</b>
d) Safeguarding children and vulnerable adults policy and procedure	<b>Safety</b>
e) Risk management policy and procedure	<b>Assess and manage risk</b>
f) Complaints policy and procedure	<b>Accountability</b>
j) Model of work covering main activities (see p4)	<b>Accountability</b>
o) Record keeping policy and procedure	<b>Accountability</b>

### A3 Service Standard

The organisation has a documented management structure with clear lines of accountability and defined responsibilities for all staff. The governing body of the organisation has ultimate responsibility for the service.

*Purpose*

To enable the governing body to ensure that the organisation is able to deliver services effectively.

<i>Evidence</i>	<i>Main aim</i>
<p><b>A3.1</b> The organisation has a documented management structure with clear lines of accountability. Responsibilities, reporting and accountability structures are clearly defined to enable the lead staff member, members of the governing body and other members of staff to fulfil their specific functions adequately.</p>	<p><b>Accountability</b></p>

## A4 Service Standard

The organisation takes the necessary steps to recruit staff appropriately and to support them in developing their skills and experience.

### *Purpose*

To ensure that the organisation has suitable staff who can perform effectively and are adequately trained for their role.

<i>Evidence</i>	<i>Main aim</i>
<b>A4.1</b> There are written job descriptions, person specifications and contracts for all staff and volunteers.	<b>Accountability</b>
<b>A4.3</b> All staff and volunteers are Criminal Records Bureau or Disclosure Scotland checked before starting work in any capacity within the organisation. These checks are then repeated every three years thereafter.	<b>Safety</b>
<b>A4.4</b> The organisation provides its staff and volunteers with the relevant training and support to equip them with the core competencies for their role, including a good knowledge of the other services relevant to their clients. Staff receive induction or training on these.	<b>Competence</b>
<b>A4.5</b> Staff who have completed their probationary period are subject to a regular line management review which includes review of their competency and training needs.	<b>Competence</b>



## A5 Service Standard

The organisation has an effective case management process.

### *Purpose*

To ensure that the organisation is monitoring and responding to changes in risk and the safety needs of its clients and their children.

<i>Evidence</i>	<i>Main aim</i>
<p><b>A5.1</b> The organisation undertakes regular (at least monthly) case management in which decisions are taken and previous decisions are reviewed on how best to manage risk and increase the safety of clients and their children. This is recorded and covers all clients and their children. Case management includes representation from both ISS and DVPP services. Within this process risk assessments are revisited and revised where necessary.</p>	<p><b>Assess and manage risk</b></p>
<p><b>A5.2</b> The manager with responsibility for case management has a minimum of three years' relevant experience and adequate specialist knowledge, including of risk factors and assessment.</p>	<p><b>Competence</b></p>

## A6 Service Standard

The organisation provides staff with Practice Management (sometimes referred to as Treatment Management) and clinical supervision.

### *Purpose*

To ensure that the content and quality of its service to clients is as described in the model of work and to support the development of the skills, knowledge and well being of its staff.

<i>Evidence</i>	<i>Main aim</i>
<p><b>A6.2</b> All staff attend practice management at least monthly which is provided by a suitably experienced senior practitioner. The Practice Manager keeps notes of practice management sessions.</p>	<p><b>Competence</b></p>

## A7 Service Standard

The organisation obtains, monitors and analyses data on the numbers of people who use the service and on the results of their use of the service.

### *Purpose*

To be able to demonstrate that its services are well used and that they have a positive impact on the lives of those who use them. To be able to analyse the use and results of services by demographic information so that the organisation can identify how effective it is at reaching all sections of the local community.

To encourage all accredited organisations to collect the same information in a similar manner in order to provide sound national evidence for service and practice development.

<i>Evidence</i>	<i>Main aim</i>
<b>A7.1</b> The staff maintain clear records of clients, which meet the requirements of the service, of this Standard and of the Data Protection Act.	<b>Accountability</b>

## Service structure and process

The organisation has a clear model of work and a structure to deliver this in a manner which is coherent and safe.

### B1 Service Standard

Organisations deliver a sufficiently comprehensive service to give clients a realistic opportunity of making lasting change and of producing safety.

#### *Purpose*

To ensure that programmes are used as far as possible to increase the safety of those at risk of domestic violence.

To ensure that the ISS and DVPP have adequate time to carry out core functions.

<i>Evidence</i>	<i>Main aims</i>
<p><b>B1.1</b> The ISS staff have time dedicated to:</p> <ul style="list-style-type: none"> <li>• Contact all partners of men referred to the service (see guidance for exceptions)</li> <li>• Undertake proactive contact with all partners or ex-partners of the men who have attended an assessment with the DVPP</li> <li>• Identify levels of risk for partners or ex-partners of men referred to the DVPP</li> <li>• Provide information about the nature, possible impact and limitations of the programme</li> <li>• Undertake risk assessments and safety planning</li> <li>• Have provision for up to six further contacts with one hour of contact time allowed for each of these. These will be spread over the anticipated time the perpetrator will be involved with the organisation and extend at least six months after he stops attending</li> </ul>	<p style="text-align: center;"><b>Competence and Safety</b></p>

<ul style="list-style-type: none"> <li>• participate in or contribute to case management with DVPP workers</li> <li>• communicate effectively with other professionals to manage risk within a multi-agency context</li> <li>• participate in all required training and supervision activities</li> <li>• plan, debrief and undertake the necessary follow-up work in relation to client contact</li> <li>• develop good joint working arrangements with other organisations providing frontline support to those at risk from domestic violence</li> <li>• participate in practice management and clinical supervision</li> <li>• make priority contact with women as the need arises, including when there are concerns about an increase in risk.</li> </ul>	<p><b>Competence and Safety</b></p>
<p><b>B1.2</b> The DVPP staff have time dedicated to:</p> <ul style="list-style-type: none"> <li>• Provide clients with sufficient hours of contact with staff and over a long enough time period to provide a reasonable opportunity for behaviour change and to sustain a reduction in risk (e.g. a minimum of 60 hours for group work and 24 hours for individual work over six months)</li> <li>• Undertake client assessments, which will usually take three hours per client</li> <li>• Carry out preparation, delivery and follow up of group work (see below)</li> <li>• Participate in case management with ISS staff if needed, including regular reviews of risk and of programme suitability</li> <li>• Communicate effectively with other professionals to manage risk within a multi-agency context</li> <li>• Participate in all required training and supervision activities</li> <li>• Participate in practice management</li> </ul>	<p><b>Competence and Safety</b></p>

	<p>The number of hours allocated for a facilitator to prepare for and run a DVPP group will be about the following:</p> <ul style="list-style-type: none"> <li>• One hour planning (both facilitators)</li> <li>• Two hours or more running the group session (both facilitators)</li> <li>• One hour de-brief immediately after the session or as soon as possible (both facilitators)</li> <li>• Three hours follow up, feedback to ISS staff, links to case management (one facilitator)</li> </ul> <p>Where the intervention is provided through individual work, staff will have time allocated to undertake any relevant follow up work, e.g. if the session is one hour in duration the staff member will have a further hour for follow up work.</p> <p>Sessional facilitators employed solely for running groups with another facilitator will therefore be employed for a minimum of four hours per week for group delivery, with additional hours allocated for staff supervision, practice management and training.</p> <p>Group work will be undertaken by a minimum of two staff; in the DVPP this will be a male and a female.</p> <p>Individual work with men using IPV may be undertaken by male or female workers.</p>	<p><b>Competence and Safety</b></p>
<p><b>B1.3</b></p>	<p>All proactive contact by ISS workers will be done by women.</p>	<p><b>Competence and Safety</b></p>

## B2 Service Standard

The organisation has a model of work which sets out clearly the content, delivery methods and underpinning theory for the work; staff follow this model and there is a method of monitoring this.

### *Purpose*

To ensure that there is a coherent model of work which staff understand and use and which is based on rigorous understanding of the dynamics, nature and effects of domestic violence.

<i>Evidence</i>	<i>Main aim</i>
<p><b>B2.1</b> The organisation has a written model of their work with clients. Staff are required to follow this. It reflects clearly the following principles:</p> <ul style="list-style-type: none"> <li>• The primary focus is on the safety of the victim/s and relevant children</li> <li>• The use of violent or abusive behaviour towards a partner, ex-partner or her children is unacceptable. The use of physical force as part of genuine self-defence is different (see glossary)</li> <li>• The perpetrator is 100% responsible for his use of abusive behaviour and the use of such behaviour is a choice</li> <li>• The use of violent and abusive behaviour is functional and instrumental</li> <li>• A willingness to choose to use violent and abusive behaviour towards a partner is influenced by learnt expectations and a gender-based sense of entitlement.</li> </ul> <p>Workers conduct all work in way that is non-collusive with:</p> <ul style="list-style-type: none"> <li>• Abusive behaviour</li> <li>• Expectations of power and control over women</li> </ul>	<p><b>Competence, Accountability and Promote respectful relationships</b></p>



	<ul style="list-style-type: none"> <li>• Denial and minimisation of abusive behaviour or any justifications for using abusive behaviour including the use of drugs and alcohol</li> <li>• The use of culture, race, or faith as a justification for domestic violence</li> <li>• Any marginalisation of the needs of children living with domestic violence</li> </ul>	<p><b>Competence, Accountability and Promote respectful relationships</b></p>
<p><b>B2.2</b></p>	<p>DVPP workers promote behaviour and thinking that:</p> <ul style="list-style-type: none"> <li>• Diminishes denial and minimisation of abusive behaviour and its effects</li> <li>• Promotes the taking of responsibility for an individual's own behaviour</li> <li>• Engages men using intimate partner violence in the questioning of any attitudes and beliefs, especially their own, which support a gender-based sense of entitlement</li> <li>• Is respectful of different cultures, ethnic backgrounds and sexual orientations and of the right to follow different faiths or none</li> <li>• Promotes safe and child-focused parenting (see glossary)</li> <li>• Enhances men's beliefs that they are able to develop and nurture respectful intimate relationships</li> <li>• Increases men's understanding of, and empathy for, others affected by their abusive behaviour</li> <li>• Recognises and addresses risk and contributes to risk management process</li> <li>• Promotes respectful, egalitarian ways of being in personal and intimate relationship</li> </ul>	<p><b>Competence, Accountability and Promote respectful relationships</b></p>

<p>ISS workers conduct work which is empowering of women by:</p> <ul style="list-style-type: none"> <li>• Enabling each woman to have informed and realistic expectations of whether her partner's or ex-partner's involvement in the DVPP will increase her safety. This will be based on the understanding that the perpetrator is the only one who can make the choice to stop the domestic violence and that whilst the programme and other interventions or people will help him to do this, he will still have to make the changes for himself</li> <li>• Supporting women in identifying the risks to their own and their children's wellbeing and safety; this will include carrying out risk assessment (see Standard D)</li> <li>• Informing an individual woman if her partner/ ex-partner fails to attend or is suspended from the programme, or if there are particular concerns about her safety</li> <li>• Contributing to the risk assessment and management process of the organisation (and within a multi-agency context) prioritising actions which are likely to increase safety</li> <li>• Supporting survivors to make informed decisions and develop strategies that may increase their safety and that of their children (safety planning)</li> <li>• Providing survivors with sufficient information about legal rights, and other relevant support services, in order for them to make informed decisions about these and to facilitate referral to other agencies (e.g. alcohol and drug agencies)</li> </ul>	<p><b>Competence, Accountability and Promote respectful relationships</b></p>
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<ul style="list-style-type: none"> <li>• Providing survivors with information about the content of service provided to her partner or ex-partner</li> <li>• Helping survivors to develop their own understanding of the abuse they have experienced</li> <li>• Assisting an individual survivor to focus on her own needs and those of her children, rather than her partner or ex-partner changing</li> </ul>	<p><b>Competence, Accountability and Promote respectful relationships</b></p>
<p><b>B2.4</b> Practice Management operates as a mechanism for ensuring that the service is being delivered in a manner that is consistent with its stated approach and model of work. All organisations record all group sessions with perpetrators (not with survivors) in order to provide a direct method for monitoring group work against the model of work. Individual work with DVPP clients beyond the assessment session will also be recorded to enable effective Practice Management. This can be either audio or video. There are clear guidelines for how these recordings are used for supervision/training and for how these recordings are stored. This is in line with the organisation’s confidentiality policy and agreement with clients.</p>	<p><b>Competence, Accountability and Promote respectful relationships</b></p>

### B3 Service Standard

The organisation ensures that its clients are aware of its confidentiality policy and that information is exchanged between ISS and the DVPP in a timely manner, so that victim safety is prioritised.

*Purpose*

To ensure that work with survivors of domestic violence is enhanced by using what is known about the risks the partner or ex-partner poses. To ensure that work with the perpetrators is enhanced by being rooted in their partner or ex-partner’s experience and risk management can occur effectively.

<i>Evidence</i>	<i>Main aim</i>
<b>B3.1</b> All those being assessed for the DVPP must provide information on how to contact their partner and/or ex-partner.	<b>Safety</b>
<b>B3.2</b> The ISS is offered to any adult who is at risk from the perpetrator.	<b>Safety</b>
<b>B3.3</b> The women using the ISS are offered a safe and appropriate space in which to meet with ISS staff.	<b>Safety</b>
<b>B3.4</b> There will be separate confidentiality agreements for use by each service. These agreements should set out clearly what information will be shared, with whom and under what circumstances. The staff should help the client to understand the implications of the confidentiality agreement. A client must sign this form as a condition of taking up the services of the organisation.	<b>Competence</b>
<b>B3.5</b> The organisation provides limited confidentiality to DVPP clients and greater confidentiality to survivors. The DVPP confidentiality agreement will include each man agreeing to case files being reviewed and session recording being viewed by managers, Respect assessors and external evaluators as part of accreditation, monitoring and other quality assurance processes. The organisation makes it clear to clients that this is something to which they have agreed if they sign the agreement or contract to attend a group or individual work. The confidentiality policy states these limits clearly.	<b>Assess and manage risk</b>

<p><b>B3.6</b></p>	<p>Contact details for partners and relevant ex-partners are given to the ISS within 24 hours of the men accessing the service or within 24 hours of a referral in which her details were also included. The ISS makes every possible effort to ensure that successful contact is made with the woman/women within one week.</p>	<p><b>Assess and manage risk</b></p>
<p><b>B3.7</b></p>	<p>All contact with clients and with other professionals, planned and unplanned, in relation to a client, are recorded clearly. This is contemporaneous within 24 hours.</p>	<p><b>Competence</b></p>
<p><b>B3.8</b></p>	<p>All client records are stored in secure cabinets. Where client information is stored electronically it is done so securely.</p>	<p><b>Safety</b></p>
<p><b>B3.9</b></p>	<p>It is a condition of the DVPP that men who deliberately frustrate the ISS efforts to make or maintain contact with their partners will be suspended from the programme.</p>	<p><b>Assess and manage risk</b></p>

## B4 Service Standard

The organisation will not offer services to men who use IPV where there is little or no expectation of a reduction in risk.

### *Purpose*

To ensure that DVPPs have a clear process for the start of the intervention, which increases men’s motivation, assesses risk and provides the opportunity for change. However, programmes should not continue to offer places to men who show little chance of benefiting from their work or reducing the risk they pose.

<i>Evidence</i>	<i>Main aim</i>
<p><b>B4.1</b> DVPP clients are assessed as to whether they are able to benefit from the service. They are offered adequate opportunity to discover their motivation to engage in change. They are not offered or continue to hold a programme place unless they can demonstrate that there is the potential for their behaviour to improve as a result of this intervention.</p>	<p><b>Competence</b></p>
<p><b>B4.2</b> Where a client is disruptive, the organisation takes steps to manage this or remove the client from the service.</p>	<p><b>Safety Accountability</b></p>
<p><b>B4.3</b> Assessment of programme suitability is a regular activity within the case management structure. The organisation has a formal de-selection process to guide staff to remove someone from the programme who is no longer benefiting from it.</p>	<p><b>Safety</b></p>
<p><b>B4.4</b> Staff working with clients in assessments and beyond routinely enquire about and remain alert to any substance use and misuse by all their clients, including the use and misuse of alcohol and prescription medication. They consider whether this may need to be addressed and how this will affect their participation in the programme.</p>	<p><b>Competence</b></p>
<p><b>B4.5</b> Staff working with clients in assessments and beyond routinely enquire about the mental health of all their clients, including the use of medication, and consider whether this may need to be addressed and how this will affect their participation in the programme.</p>	<p><b>Competence</b></p>
<p><b>B4.6</b> Unless the organisation has specific provision to meet the needs of young men, programme places are not offered to men younger than 18 years old.</p>	<p><b>Safety</b></p>

## B5 Service Standard

The organisation has a policy on working with domestic violence which falls outside the context of adult male-female relationships.

### *Purpose*

To ensure that organisations do not transfer understandings and approaches from domestic violence in one context to another without a thorough review of their appropriateness. This review should be completed before offering a service to a different client group.

<i>Evidence</i>	<i>Main aim</i>
<p><b>B5.1</b> If the organisation offers a service addressing domestic violence other than men’s violence towards female partners (e.g. women using intimate partner violence or people in same sex relationships), it will have considered the specific needs of these clients and made adjustments to the service it offers in response to this.</p>	<p><b>Safety</b></p>
<p><b>B5.2</b> Domestic violence perpetrators who are not heterosexual men should not be placed in a group of heterosexual men. If the organisation addresses domestic violence other than adult male perpetrators to adult female partners, it will usually require separate provision and additional content. The organisation puts sufficient resources aside to do so.</p>	<p><b>Competence</b></p>



## B6 Service Standard

The organisation has a clear policy in relation to interventions that involves the joint participation of both partners.

### *Purpose*

To ensure that survivors of domestic violence are not put in situations of danger or coercion within couples work.

<i>Evidence</i>	<i>Main aim</i>
<p><b>B6.1</b> The organisation clearly informs its clients that couples counselling is not appropriate whilst the perpetrator is using abusive behaviour or is engaged in ending it.</p>	<p><b>Safety</b></p>

## B7 Service Standard

When the organisation works with family members who are subject to a social work intervention, it will do so in a way that promotes effective inter-agency working and informed decision-making.

### *Purpose*

To ensure that the safety of all family members at risk of domestic violence is prioritised where social services are involved with clients of the service.

<i>Evidence</i>	<i>Main aim</i>
<p><b>B7.1</b> Where a man is attending the DVPP and then becomes involved in a child protection investigation, the organisation has a responsibility to ensure that information in relation to risk is available to the child protection professionals. In all cases, the organisation provides the professionals involved with adequate information about the work done with the client. This will include an explanation of the limitations of this information in the form of a brief report (see guidance).</p>	<p><b>Safety</b></p>
<p><b>B7.2</b> There is routine screening for social service involvement in all referrals to the organisation. Where there is social service involvement, the man is required to provide the name of the social worker (or lead professional) concerned, if possible.</p>	<p><b>Co-ordinated Community Response</b></p>
<p><b>B7.3</b> Where there is social work involvement, the organisation informs the social worker (lead professional) that they are working with this client. The organisation makes proactive efforts to obtain and share information about key concerns and risks of harm to the victim and to the children.</p>	<p><b>Assess and manage risk</b></p>
<p><b>B7.6</b> If the children of a man referred to the DVPP are subject to legal proceedings in the family court the organisation makes every effort to ensure that there is an expert assessment of domestic violence risk and impact. If the assessment recommends that the man should attend the DVPP, then the organisation states its views on progress and changes in risk to the court and to the expert assessor.</p>	<p><b>Safety</b></p>

<b>B7.8</b>	If there is another incident of domestic violence this automatically prompts a re-examination of the needs of the child/ren. This also occurs when there is a birth of a new baby, the introduction of a new child to the household, or a new pregnancy, or change in contact arrangement whether formal or informal. This is recorded via the case management process.	<b>Assess and manage risk</b>
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## B8 Service Standard

Where the organisation works with perpetrators who are involved in a private law (civil law) contact dispute it will do so in a way that promotes effective inter-agency working and the safety of those at risk from domestic violence.

### *Purpose*

To ensure that a perpetrator wishing to address his violence towards an ex-partner in the context of a private law child contact dispute does so in a way which holds him accountable for his abusive behaviour.

<i>Evidence</i>	<i>Main aim</i>
<p><b>B8.1</b> Organisations do not offer a service to men pursuing child contact through the family courts without there being an expert assessment of domestic violence risk and harm. The only exception to this is where attendance is a requirement of a court order in the criminal court or the organisation is a recognised Cafcass (England only) contact activity provider and the referral is under the contact activity provisions.</p>	<p><b>Safety</b></p>
<p><b>B8.4</b> <i>Applies only to Cafcass Approved Providers of contact activity services.</i> Organisations providing DVPP as a contact activity for Cafcass clients must follow the guidance that indicates when an expert assessment of domestic violence risk and impact may be required (see guidance).</p>	<p><b>Assess and manage risk</b></p>

## B9 Service Standard

The organisation will work in ways that support an effective criminal justice system response.

### *Purpose*

To ensure that the work they do does not undermine holding offenders accountable.

<i>Evidence</i>	<i>Main aim</i>
<b>B9.1</b> The organisation has routine screening in place for criminal justice involvement.	<b>Co-ordinated community response</b>
<b>B9.2</b> The organisation does not offer a place on a group or individual programme to a man who has been charged with a domestic violence related offence until the criminal proceedings have reached a conclusion.	<b>Accountability</b>
<b>B9.3</b> When an existing client is arrested and charged for a domestic violence related offence then the organisation suspends work with him (unless their attendance is already part of a community sentence), unless there are compelling safety reasons not to do so, until the criminal process has concluded.	<b>Accountability</b>

## Diversity and equality of access to services

Improving the relevance and accessibility of their services to all sections of the community is a key activity for all organisations.

### C1 Service Standard

Organisations are committed to monitoring and improving the relevance and accessibility of their services to all sections of their community.

#### *Purpose*

To ensure that the organisation is constantly taking steps to be as accessible and effective as possible to all sections of the community in which the service works.

<i>Evidence</i>	<i>Main aim</i>
<b>C1.1</b> Organisations have taken into account and have forecasted what their need for interpreters will be in order to serve the local population. They ring-fence sufficient resources in line with overall budget, to cover the cost of this.	<b>Diversity</b>
<b>C1.5</b> The organisation does not offer a service to a man if it is not able to offer an adequate service to his partner or ex-partner because of her language needs.	<b>Safety</b>

The identification and management of risk are key functions of the organisation.

### D1 Service Standard

The identification and management of risk are a central function of any accredited organisation, including risk identification, communication of risk internally and externally and having effective procedures to manage risk on a day-to-day basis through a case management process.

#### *Purpose*

To reduce risk to increase the safety of women and children.

<i>Evidence</i>	<i>Main aim</i>
<b>D1.1</b> There is a procedure for identifying the risk of further serious domestic violence by clients of both the DVPP and ISS. Organisations must use a recognised and commonly used risk assessment tool in all cases.	<b>Assess and manage risk</b>
<b>D1.2</b> The organisation brings together information on risk from partners and ex-partners of men attending the DVPP, third parties, and the men themselves to develop an overall view on risk within the case management process and at other times when needed and within 24 hours. The risk to children and other adults should also be reviewed.	<b>Assess and manage risk</b>
<b>D1.3</b> The organisation shares information with other professionals on risk, in line with its confidentiality policy. It does so using the risk identification tool used most commonly across agencies in its local area.	<b>Assess and manage risk</b>
<b>D1.4</b> When reporting to external agencies about risk, this is done with a clear understanding of the limitations of its assessment of risk. These limitations are clearly communicated.	<b>Competence</b>

<p><b>D1.5</b></p>	<p>Clients are informed of the outcomes of risk assessments and are given the opportunity to comment on these unless there is a compelling safety reason not to do so.</p>	<p><b>Safety</b></p>
<p><b>D1.6</b></p>	<p>The organisation refers to the MARAC and supports the management of risk through the MARAC process where a case meets the referral threshold.</p>	<p><b>Assess and manage risk</b></p>



The safety and welfare of all children connected to the organisation’s clients is considered at all levels of the organisation.

## E1 Service Standard

The organisation will consider the safety and needs of the children connected to its adult clients in all aspects of its work.

### *Purpose*

To ensure that the safety and welfare of children are clearly recognised and responded to effectively.

<i>Evidence</i>		<i>Main aim</i>
<b>E1.1</b>	The initial assessment explores the impact of domestic violence on the lives of any relevant children. This is recorded in the client’s file.	<b>Assess and manage risk</b>
<b>E1.2</b>	Staff have training and support to enable them to explore with their clients the impact of domestic violence on the lives of any relevant children.	<b>Competence</b>
<b>E1.3</b>	The organisation regularly monitors the safety and well being of any relevant children as part of the case management process and this is recorded in case management notes.	<b>Safety</b>
<b>E1.7</b>	Staff have a clear understanding of what constitutes child abuse and when to seek further support in order to safeguard children. Staff know who to contact in their organisation if they believe that urgent action needs to be taken to safeguard a child. All staff are aware of their responsibilities under the organisation’s safeguarding policy.	<b>Safety</b>

## Partnership working

The organisation recognises that co-ordinated community responses are the best way to reduce the risk of domestic violence and to hold perpetrators to account.

### F1 Service Standard

The organisation takes a positive and active role in creating inter-agency cooperation and supports the development of co-ordinated community responses to domestic violence.

#### *Purpose*

To ensure that responses to domestic violence improve across all agencies and in the wider community.

<i>Evidence</i>	<i>Main aim</i>
<b>F1.4</b> The organisation consults with local violence against women groups on significant changes to their service and new initiatives.	<b>Accountability</b>
<b>F1.5</b> The organisation takes steps to create co-ordination between professionals on a case-by-case basis.	<b>Co-ordinated community response</b>
<b>F1.6</b> The organisation supports the development of effective criminal justice system responses to domestic violence. The organisation informs men that their violence is a criminal act and gives clear messages to their clients that encourage reporting crimes.	<b>Co-ordinated community response</b>
<b>F1.9</b> The ISS supports women in using criminal and civil justice remedies to protect themselves and others from their partner's abusive behaviour. All staff understand what an effective response from criminal justice personnel should be and where their clients do not receive this they should inform their manager, so that their concerns can be raised at a senior level.	<b>Accountability</b>

# GLOSSARY OF TERMS USED IN THE STANDARD

Term	Definition
Accreditation	The process of assessment and eventual decision that an organisation has satisfied all the requirements of this Standard.
Accreditation assessment	The various activities carried out to assess how far the organisation is meeting the requirements of the Standard. This will include: interviews with staff; watching recordings of group work with men or listening to audio recordings of individual work; examining case files and other activities as required.
Accreditation panel	The independent panel appointed to scrutinise the assessment procedure and come to an independent decision about whether or not an organisation has satisfied the requirements of the Standard and can therefore be accredited.
Assessment	See separate listings for programme suitability assessment; risk assessment; accreditation assessment.
Case management	Case management is part of the risk management process as well as a mechanism for ensuring effective service delivery. It is expected that staff will communicate with each other on a day to day basis, in a way that is responsive to changes in risk regarding clients. While the term case management encompasses this, it is used in the Standard specifically to refer to a routine, systematic and comprehensive process that reviews risk and progress of work with all clients. As part of the case management process, decisions will be made and recorded as to how best to respond to individual needs or behaviour.
Child contact and residence proceedings	Also known as Children Act private proceedings Section 8. These are civil court proceedings (see below) to settle disputes between parents or carers or others about where a child should live and with whom (residence) and whom they should have contact with and how (contact).
Civil proceedings	Court proceedings which take place in the civil, rather than criminal courts and are therefore between individuals (or in some situations, between individuals and organisations), rather than between an individual and the Crown Prosecution Service. In responding to domestic violence, these cases are therefore usually between the victim of violence and the perpetrator. Relevant civil proceedings include applications for occupancy (or ouster), non-molestation (or protection) and harassment (or stalking) injunctions/orders. Other relevant civil proceedings include child contact and residence (see above). The person applying for the order is known as the applicant and the person responding is known as the respondent.
Clinical supervision	Clinical supervision is a term commonly used within counselling and psychology practices. In social care the terms consultancy or external supervision or non line management supervision are also used. These terms refer to the supervision and professional guidance provided by someone who is often external to the organisation with specific relevant skills and knowledge, for staff who work with clients, to give them opportunities to consider how they work with their clients, how their personal responses to clients may affect the work and to improve how they use the relationships they have with clients as tools for change.

Conjoint work	Any work with both adult intimate partners at the same time and usually in the same room, but without additional family members. This includes couples counselling and mediation.
Co-ordinated community response	A response to, for example, domestic violence in which all relevant agencies, individuals and, ideally, the community as a whole are involved. In domestic violence work, this has been demonstrated to be the most effective way of protecting victims and children and holding perpetrators to account. This usually involves the police, courts, specialist domestic violence agencies, child protection authorities, housing and others as relevant.
Couples work	Any work where both adult intimate partners or ex-partners are present in the same room, such as family therapy, couples counselling, mediation.
Criminal justice proceedings	Court proceedings which take place in criminal courts and under criminal law, rather than civil law (see above), taken out by the Crown Prosecution Service (CPS) against an individual alleged to have committed a criminal offence.
Cross cultural working	Working with clients from different cultures in ways which are respectful of differences of culture. In domestic violence work this presents particular challenges such as being able to recognise the use of culture as a justification for abuse and views on women in general and respond to such justifications clearly and in ways that help to support change. This is likely to include helping people to revise their understanding of what their culture means to them and changing some of the ways they describe and live out their culture.
DASH	The Domestic Abuse, Stalking and Harassment risk identification tool, developed by Co-ordinated Action Against Domestic Abuse (CAADA) particularly for use in MARAC work. There is a Respect version for use in DVPP and work with perpetrators, available on the Respect website in the risk assessment section.
DVPP	Domestic Violence Prevention Programme. In this Standard, this is taken to mean all the work with men who use violence against their partner, in order to help to hold them to account and to prevent them from continuing to abuse. See B2.2 for the range of activities included.
DVPS	Domestic Violence Prevention Service. The DVPP working with men and the ISS working with women together form the Domestic Violence Prevention Service. This is sometimes referred to in this document as 'the organisation'.
Extent	The amount of, for example, domestic violence in the population or a given section of the population.
Governing body/Board	The entity responsible for the overall management and direction of the organisation seeking accreditation. In most organisations running a DVPS this will be a voluntary management committee. Where the service is commissioned by a particular agency, this may be the commissioning body, or it may be a management sub-group of larger inter-agency partnership. This arrangement will vary and will always include a coherent management structure, clear lines of accountability and a governing body responsible for these.
Incidence	The number of individual incidents of something happening, in this case, individual incidents of domestic violence.

ISS	Integrated Support Service. This is the service for the partners and ex-partners of programme participants. The range of work of the ISS of an accredited organisation is described throughout this document and particularly in B2.1
Line management	Line management or supervision is the mechanism to monitor the effectiveness and welfare of individual staff. Managers and staff frequently discuss their work and deal with problems or questions as they arise. However, line management also includes time set aside specifically to focus on the development and performance of a member of staff, with a written record of what is discussed and agreed.
MAPPA	Multi Agency Public Protection Arrangement, convened by the Multi Agency Public Protection Panel (MAPPP), a locally based multi agency group with statutory responsibilities to protect the public from named individuals assessed as being at high risk of committing violent and sexual offences.
MARAC	Multi Agency Risk Assessment Conference. This is a locally initiated multi agency group who convene regularly to monitor risk of domestic violence involving specific named individuals and to agree and monitor action to reduce that risk. Usually this will include police, probation, DVPS, child protection agencies, women's organisations and others as relevant.
Model of work	The aims, underlying philosophy, content and methods for delivering the service. This will include descriptions of all activities including programme work and case management. It will also include a description of the theoretical and philosophical basis for the work.
Perpetrator	The term commonly used and the one used in this Standard to describe someone who is abusing or has recently abused their partner or ex-partner and/or children. Another commonly used term is abuser. Neither of these terms is usually suitable for use to describe a particular client to his face, as it labels them purely in terms of their abusiveness rather than their wider potential as a person to change and develop the ability to have respectful relationships. As this Standard is applicable to organisations working only with male perpetrators of domestic violence the term 'man' may sometimes also be used, particularly where the person's abusive behaviour is not the most relevant characteristic.
Practice or Treatment management	The process through which the delivery of the organisation's model of work is monitored. This should cover the ISS, DVPP and assessment processes. Commonly, one senior practitioner or someone externally with relevant experience has responsibility for this, as Practice or Treatment Manager. They will usually watch one in four video recordings of groups or audio recordings of individual work and discuss these with the facilitators, identifying with them any changes needed in their practice
Pre-programme work	Work carried out with an individual who is waiting to join a group work programme and is part of the preparation for the main programme. This pre-programme work can be in group or individual sessions. It will often include familiarising the man with programme material, helping to sustain motivation for change and continuing to monitor risk.
Prevalence	The number of people experiencing a particular condition or situation, in this case, domestic violence.
Proactive contact	Taking the initiative and making repeated efforts to make contact with someone (in this case, women referred to the ISS) and not waiting for them to make contact themselves. See B2.1 for further details.

Programme completer	Individual who completes the entire DVPP group work programme (or in some cases, individual programme).
Programme starter	Individuals starting a DVPP group work programme (or in some cases, individual programme). Organisations monitoring how many men start and complete programmes will count programme starts as men attending their first session, which may not necessarily be the first module of the programme, if this is a rolling programme.
Programme suitability assessment	The process of assessing an individual's suitability for a particular programme. This is likely to include looking at levels of abuse used and risk presented, motivation to change, recognition of the abuse as a problem and capacity to take an active part in group work.
Referral	Person being put into contact with an organisation to receive their services and the process of doing this.
Risk	For the purposes of this Standard, risk is taken to mean risk of domestic violence occurring either by a particular individual or to another particular individual or both.
Risk assessment	The processes of assessing levels of risk from a particular individual to specific other individuals, or vice versa. This will usually include gathering relevant information about an individual's circumstances, behaviour and demographic data and reviewing this regularly, identifying when risk factors change and reacting to these. It usually includes the use of a recognised risk assessment tool, such as the DASH tool (see above).
Risk management	The process of monitoring and reviewing risk, identifying and carrying out or initiating suitable responses to reduce risk, monitoring and reviewing these.
Routine screening	Asking the same or similar questions about a specific condition, behaviour or situation, such as being a survivor of domestic violence, or being involved in social services investigations.
Self defence	This has a legal meaning and does not mean all acts of retaliatory violence. Acts of self defence must be in order to protect life and limb of the self or of another vulnerable person and must be in proportion to the danger presented by the other person.
Sessional staff	Staff who work for a short, fixed time, usually on a regular basis, rather than as full or part time employees. In this work facilitators of group work with men will often be sessional staff working with permanent staff.
Staff	Anyone who undertakes tasks on behalf of the organisation (paid or voluntary)

<p>Survivor</p>	<p>This is a commonly used term to describe someone who is experiencing or has experienced domestic violence. Survivor is usually used to emphasise strength and resilience over victim status in someone who has been abused. Another commonly used term is victim. Although these terms are sometimes taken to mean the same thing, they have slightly different meanings and sometimes one is more accurate than the other and both are used in this Standard. See below for a definition of the term 'victim'. Some individuals and organisations have a preference for one or other term. As this Standard currently applies only to organisations working with male perpetrators (see above for a definition of this term) of female partners or ex-partners, the term 'woman' may also be used, though this will not apply to future standards for work with other categories of perpetrators and their partners/ex-partners. Wherever there is no need for a specific one of these terms to be used, the terms 'survivor' or 'woman' will be used.</p>
<p>Victim</p>	<p>The legal term for someone who is the object of a crime or series of criminal acts. It is therefore also a commonly used term to describe someone who has experienced or is experiencing domestic violence. Criminal justice agencies in particular often use this term rather than the other commonly used term 'survivor' (see above) as they are making a legal response. Agencies may also use this term to describe someone who is currently experiencing domestic violence as the person may not yet see themselves as having survived or the agency may need to be clear that they are currently the victim of a crime. The term victim is also the term used for someone who has been killed by their partner or has committed suicide as a result of the effects of the abuse. As this Standard currently applies only to organisations working with male perpetrators (see above for a definition of this term) of female partners or ex-partners, the term 'woman' may also be used, though this will not apply to future standards for work with other categories of perpetrators and their partners/ex-partners. Wherever there is no need for a specific one of these terms to be used, the terms 'survivor' or 'woman' will be used.</p>
<p>Violent resistance</p>	<p>The use of violence in resistance to domestic violence and abuse, which may be after many years or incidents of abuse, out of a feeling that there is no other option or in reaction to feelings that there is nothing that will ever stop the person using abuse. It includes, but is not confined to, self defence.</p>