

# Human Services Quality Framework: HSQF User Guide – Certification Domestic and Family Violence Services Supplement

This Supplement has been developed for organisations seeking and/or maintaining certification of Domestic and Family Violence (DFV) services against the Human Services Quality Standards (HSQF). The criteria and evidence requirements included in this supplementary guide are part of the Domestic and Family Violence Regulatory Framework, the mechanism for monitoring services' compliance with the [Domestic and Family Violence Services: Practice principles, standards and guidance](#).

## How to use this Supplement

This Supplement must be used in conjunction with the [HSQF User Guide – Certification v8.0](#).

### Section A - Summary Table

Section A sets out the additional mandatory criteria that apply to DFV services funded by the Queensland Government's Department of Justice and Attorney-General. These criteria apply to all service types identified within the [Domestic and Family Violence Investment Specification](#), with the exception of the *T102 Research* and *T442 Events* streams. This includes services delivering:

- Aboriginal and Torres Strait Islander services (T310)
- Domestic violence counselling (T320)
- Children's domestic violence counselling (T315)
- Court-based services (T321)
- Perpetrator intervention programs (T328)
- Telephone services (T338)
- Women's shelters – temporary supported accommodation (ST6)
- Mobile support (ST5) and centre-based support (ST4).
- System Support – Local Domestic and Family Violence Service Systems (T437)

Section A also includes guidance on suggested evidence to assist services to demonstrate their compliance with the DFV-specific criteria.

**Note:** DFV services seeking and/or maintaining certification must demonstrate that they meet all common requirements for the indicators outlined in the [HSQF User Guide – Certification v8.0](#), as well as the criteria in this Supplement, in order to meet the Human Services Quality Standards. Organisations funded to provide DFV services should pay attention to criteria requirements listed against both:

**Common**  
(see User Guide)



**Domestic and  
Family Violence**  
(in this supplement)

### Section B – Links to DFV service specific legislation, policies and resources

### Section C – Terms and Definitions

## Section A – SUMMARY TABLE

This table contains the mandatory criteria specific to domestic and family violence services in scope of HSQF certification, as well as suggested evidence for how services can demonstrate their compliance with the criteria.

<b>Indicator 1.1</b>	The organisation has accountable and transparent governance arrangements that ensure compliance with relevant legislation, regulations and contractual arrangements.
<b>Domestic and Family Violence</b>	No criteria outside common indicator requirements.
<b>Evidence suggestions specific to DFV Services</b>	<p>Documented and implemented processes and systems that ensure compliance with legislative, regulatory, policy and contractual requirements that apply to the organisation, including:</p> <ul style="list-style-type: none"> <li>• <i>Domestic and Family Violence Services: Practice principles, standards and guidance (2020)</i></li> <li>• <i>Domestic and Family Violence Protection Act 2012</i></li> <li>• <i>Child Protection Act 1999</i></li> <li>• <i>Public Guardian Act 2001</i></li> <li>• <i>Human Rights Act 2019 – clause 28 Cultural rights—Aboriginal Peoples and Torres Strait Islander Peoples.</i></li> </ul>
<b>Indicator 1.3</b>	The organisation develops and implements a vision, purpose statement, values, objectives and strategies for service delivery that reflect contemporary practice.
<b>Domestic and Family Violence</b>	<ul style="list-style-type: none"> <li>☑ The structure, purpose, vision and values, objectives and strategies for service delivery are consistent with, and support the requirements set out in funding and service agreements and the <i>Domestic and Family Violence Services Practice, Principles, Standards and Guidance (2020)</i>.</li> <li>☑ Theoretical frameworks: <ul style="list-style-type: none"> <li>• are appropriate to the context of the service environment and are culturally safe, evidence based, gender and risk focussed and informed by trauma frameworks and attachment theories</li> <li>• guide practice in the organisation and are aligned and embedded throughout policies and procedures, assessment and intervention processes and staff training</li> <li>• are clearly articulated by staff as underpinning their practice.</li> </ul> </li> </ul>
<b>Evidence suggestions</b>	Services may demonstrate the following to support alignment with the Practice Standards:

specific to DFV Services	<ul style="list-style-type: none"> <li>evidence of frameworks that inform client engagement, collaborative risk assessment and safety planning, and strategic and structural advocacy to support safer outcomes.</li> <li>organisations adopt a gendered analysis of violence with a nuanced and intersectional understanding of the dynamics of gender, power and control, and acknowledge that gender inequality is a predominant cause and consequence of domestic and family violence. This may be evidenced in: <ul style="list-style-type: none"> <li>screening and assessments of clients</li> <li>quality of assessments and case notes</li> <li>the use of gendered language and lenses embedded in policies, procedures, vision statements, case notes, and human resourcing such as interview questions, inductions, and training</li> <li>managers and staff can clearly articulate the theoretical frameworks that underpin their practice, particularly those related to cultural safety and a gendered lens of DFV.</li> </ul> </li> <li>cultural safety principles are embedded within the organisation at all levels including governance, policies, processes, and practice</li> <li>services acknowledge and understand that cultural safety is not always upheld through an individual approach, and may include a wider family lens or case management approach</li> <li>governance and policy reflect that cultural safety is embedded in their frameworks and within practice, for example through: <ul style="list-style-type: none"> <li>systems and processes that align with cultural safety principles and best practice</li> <li>staff can explain the impact of social identity such as race, ability, sexual orientation or gender identity, marital status, or religious beliefs on a victim's experience, including the presence of structural or social impediments to equity and access</li> <li>acknowledging the impact of colonisation on Aboriginal and Torres Strait Islander Peoples.</li> </ul> </li> </ul>
Indicator 1.7	The organisation has effective information management systems that maintain appropriate controls of privacy and confidentiality for stakeholders.
Domestic and Family Violence	<input checked="" type="checkbox"/> Documented and implemented processes, policies and procedures including risk assessment processes associated with collection, security, disclosure, privacy breaches, client access to personal information and sharing of client related information, including without consent where applicable, in accordance with: <ul style="list-style-type: none"> <li>Part 5A of the <i>Domestic and Family Violence Protection Act 2012</i></li> <li><i>Domestic and Family Violence Information Sharing Guidelines</i> (May 2017)</li> <li>Section 159C of the <i>Child Protection Act 1999</i>.</li> </ul>
Evidence suggestions	<p>Services have the following structures in place to support information sharing:</p> <ul style="list-style-type: none"> <li>processes and/or protocols to assess, identify and mitigate risks associated with information sharing, and risk mitigation strategies that are defined in policies, procedures, or other organisational documentation</li> <li>case notes demonstrate a risk assessment process is followed in the sharing of client related information</li> </ul>

specific to DFV Services	<ul style="list-style-type: none"> <li>• client information that may be subpoenaed does not compromise victim safety in any way, for example safety plans may not outline specific details that could jeopardise victim safety if subpoenaed</li> <li>• processes for informing clients about when information may be shared with other agencies as a duty of care, e.g. child protection concerns</li> <li>• records that demonstrate information is appropriately shared or sought from other agencies</li> <li>• where electronic surveillance technology is installed, the organisation has documented and implemented processes to guide the collection, use, storage, retrieval of images and disclosure of footage, to ensure the privacy of personal information collected during surveillance activities as far as possible, and signage alerting people to the fact that cameras are in use</li> <li>• Policies, procedures, records, staff training, client and staff interviews, case notes and other relevant records and practice support that all staff and volunteers are aware of, and abide by confidentiality, privacy and record management requirements, including: <ul style="list-style-type: none"> <li>○ maintaining privacy and confidentiality</li> <li>○ understanding the legislative framework for information sharing</li> <li>○ obtaining client consent for sharing information wherever possible</li> <li>○ occasions where information can be shared without consent</li> <li>○ risks associated with information sharing and risk mitigation strategies.</li> </ul> </li> </ul>
Indicator 2.1	Where the organisation has responsibility for eligibility, entry and exit processes, these are consistently applied based on relative need, available resources and the purpose of the service.
Domestic and Family Violence	<ul style="list-style-type: none"> <li>☑ Documented and implemented processes to ensure: <ul style="list-style-type: none"> <li>• services are welcoming and accessible to a diverse range of client groups, so that anyone can access the service regardless of their race, religion, age, language, gender identity, sexual orientation, cultural background, complexity of their need, the presence of challenging behaviours, or an organisation's history of service provision with the client</li> <li>• eligibility, entry and exit processes for perpetrators address risk and safety to victims and children, staff, and other service users.</li> </ul> </li> <li>☑ Documented and implemented processes to ensure perpetrator interventions delivered by services who are approved providers, or approved intervention programs (or counselling), comply with the requirements of sections 72-74 <i>Domestic and Family Violence Protection Act 2012</i>.</li> </ul>

<p><b>Evidence suggestions specific to DFV Services</b></p>	<p>Policies, processes and interviews with staff and clients (where appropriate) demonstrate a service’s approach to inclusive practice, such as:</p> <ul style="list-style-type: none"> <li>• providing services over the phone or online</li> <li>• outreach work</li> <li>• disability access</li> <li>• use of a client’s preferred name, pronouns, and personal identity language and terms</li> <li>• duration of services takes into consideration client needs and when the client is comfortable exiting the service</li> <li>• assessment of eligibility for service access is at all times based on an anti-discriminatory, non-prejudicial, and consistent judgement of a person’s individual needs and experiences</li> <li>• consideration for child victims where appropriate (e.g. if a mother engaged with the service has a child, or a person attending the service is under the age of 18)</li> <li>• staff and managers can articulate how the service supports diversity and is accessible and inclusive</li> <li>• where appropriate, interviews with clients support that the service is accessible and inclusive.</li> </ul> <p><b>For perpetrator services:</b></p> <ul style="list-style-type: none"> <li>• Services have documented and implemented processes to enable informed signing of waivers by perpetrators engaged in interventions, enabling the disclosure of information to relevant advocate staff or agencies to prioritise the safety of people who have experienced domestic and family violence.</li> <li>• Services have records confirming perpetrators enter an agreement on standards of acceptable behaviour on entry to the program.</li> <li>• Services have and enact processes to recognise and manage heightened risk to victim safety when the dynamic and environmental risk factors of the perpetrator vary, (e.g. perpetrators attend programs and subsequently disconnect or asked to leave due to risk to other participants or staff).</li> <li>• Services keep records which indicate that approved providers under the <i>Domestic and Family Violence Protection Act 2012</i> comply with the requirements of sections 72-74 (summarised in the <i>Domestic and Family Violence Investment Specification</i>), including: <ul style="list-style-type: none"> <li>○ assessing the <u>suitability</u> of the person to participate in the approved intervention program and/or counselling</li> <li>○ if assessed as suitable, providing advice to the court of the details of the approved intervention program, and/or counselling using the approved form</li> <li>○ if assessed as <u>not suitable</u>, notifying the court and police commissioner using the approved form</li> <li>○ services have a process of notifying the court and/or police as required by the legislation, of a perpetrator’s engagement in the intervention program.</li> </ul> </li> </ul>
<p><b>Indicator 2.3</b></p>	<p>Where an organisation is unable to provide services to a person due to ineligibility or lack of capacity, there are processes in place to refer the person to an appropriate alternative service.</p>

<b>Domestic and Family Violence</b>	No criteria outside common indicator requirements.
<b>Evidence suggestions specific to DfV Services</b>	<ul style="list-style-type: none"> <li>Records indicate that services refer clients to other services where appropriate, including alcohol and other drugs services, mental health services, gambling support services, homelessness and/or housing support services, LGBTIQ+ services, and services that may be more culturally safe.</li> <li>Policies and processes for referral where services are unable to provide services to the clients on the basis of risk to staff or other participants.</li> <li>Staff can accurately explain the rationale and process for being unable to provide services to clients from a program or service on the basis of risk to staff or other participants and how they communicate with victims to minimise risk.</li> <li>Staff demonstrate an understanding of the organisation's offerings, limitations, and referral pathways to other services to address client needs.</li> </ul> <p><b>For perpetrator services:</b></p> <ul style="list-style-type: none"> <li>Managers and staff can explain how referrals are managed in a way that addresses any belief that problems such as substance abuse or gambling minimise the importance or accountability of the perpetrator's behaviour.</li> </ul>
<b>Indicator 3.1</b>	The organisation uses flexible and inclusive methods to identify the individual strengths, needs, goals and aspirations of people using services.
<b>Domestic and Family Violence</b>	<input checked="" type="checkbox"/> Documented and implemented processes ensure that the assessed needs of the individual are being addressed and responded to within a client centred, culturally inclusive, and integrated response.
<b>Evidence suggestions specific to DfV Services</b>	Policies, procedures, tools, records, and processes demonstrate flexible and inclusive methods of service delivery: <ul style="list-style-type: none"> <li>where appropriate, services are delivered using a case management framework or similar, with an expectation that responses provided include advice and referral, individualised risk and needs assessment, individualised safety and support planning (see 4.2), direct service and case coordination and a system for ongoing review of cases</li> <li>services are delivered from a client centred framework where dignity of choice and self-determination are respected</li> <li>where appropriate, assessments include consideration for and of children, family, kinship relations and support networks</li> <li>recognition of diversity and intersectionality</li> <li>evidence of culturally safe practice, for example: <ul style="list-style-type: none"> <li>acknowledgement of local systems, processes, knowledge and skills</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ understanding that a response in the best interest of the client may be an adaptation of a case management framework and include a wider family lens</li> <li>○ a holistic approach to seeking information about the availability of services in each community</li> <li>○ working in close collaboration with Aboriginal and Torres Strait Islander people, families, communities, and Elders.</li> </ul> <p><b>For perpetrator services:</b></p> <ul style="list-style-type: none"> <li>• intake processes for perpetrators include individualised processes for risk assessment, safety planning (see 4.2) and an orientation process prior to joining the group in order to introduce core concepts and commitments</li> <li>• group programs and other interventions for perpetrators are planned and structured, adhere to evidence-based practice, and are delivered by qualified and experienced staff.</li> </ul>
<b>Indicator 3.2</b>	The organisation formulates service delivery that respects and values the individual (e.g. identity, gender, sexuality, culture, age and religious beliefs).
<b>Domestic and Family Violence</b>	<p>☑ Policies and processes relating to service delivery are documented, implemented, monitored and reviewed and indicate that:</p> <ul style="list-style-type: none"> <li>• all clients receive non-judgmental service delivery, taking into account diverse backgrounds, cultural practices and/or specific needs that arise from diverse backgrounds</li> <li>• staff demonstrate an understanding of the connection between colonisation and intergenerational trauma that impacts on Aboriginal and Torres Strait Islander Peoples</li> <li>• victims are treated as individuals and are not stereotyped according to their cultural background, sexual orientation, gender identity, religious or other affiliation or individual needs or differences such as disability</li> <li>• every victim, perpetrator and relationship is different and that an in-depth assessment needs to be conducted, especially in circumstances where mutual violence has been raised.</li> </ul>
<b>Evidence suggestions specific to DFV Services</b>	<p>Procedures, training records and interviews and other evidence can demonstrate:</p> <ul style="list-style-type: none"> <li>• sensitivity to cultural practices and/or specific needs that arise from client's diversity which may be based on age, gender identity, culture, heritage, language, faith, sexual orientation, relationship status, disability, or other relevant characteristics</li> <li>• prioritising of social and emotional wellbeing of clients by building trust, being respectful and understanding local culture, kinship ties and traditions in all interactions with a client</li> <li>• safety plans and records of client advice which show inclusion of local culture, kinship ties, traditions and cultural considerations where applicable</li> <li>• the organisation has sought opportunities to engage and promote dialogue with Aboriginal and/or Torres Strait Islander community members as part of cultural induction and orientation before working within a particular community</li> </ul>

	<ul style="list-style-type: none"> <li>• recognition of the similarities and differences in experiences and impacts of domestic and family violence between different cohorts with consideration to intersectionality</li> <li>• feedback from clients and community stakeholders confirming inclusion of local culture, kinship ties, traditions and cultural considerations where applicable</li> <li>• staff facilitate the engagement of clients with advocacy, such as having an advocate or support service present</li> <li>• victims are offered a choice of staff member to engage with, taking into consideration availability of staff, cultural considerations, diverse backgrounds and gender.</li> </ul> <p><b>For perpetrator services:</b></p> <ul style="list-style-type: none"> <li>• staff working with perpetrators can explain and demonstrate how they ensure that group work environments are accessible for perpetrators from a range of socioeconomic and cultural backgrounds by being supportive of change, modelling respectful and safe communication, emotional regulation, and collaboration</li> <li>• perpetrators are supported in taking responsibility for their behaviour and identifying their capacity to be non-violent, for example encouraging the perpetrator to identify what a desirable future looks like and what would need to change.</li> </ul>
<b>Indicator 3.4</b>	The organisation has partnerships and collaborates to enable it to effectively work with community support networks, other organisations and government agencies as relevant and appropriate.
<div>Domestic and Family Violence</div>	<ul style="list-style-type: none"> <li>☑ Documented processes ensure that the organisation engages in an integrated service response: <ul style="list-style-type: none"> <li>• appropriate to the level of funding and size of the organisation, services engage in and provide an integrated service response by having established coordinated and collaborative relationships with other relevant agencies and services</li> <li>• the service has formal links and regular, collaborative and referral relationships with relevant specialist agencies providing legal, court, multicultural, medical, mental health and advocacy services and key persons in local cultural communities</li> <li>• the organisation shares appropriate and timely information with agencies in alignment with legislation and Queensland Government <i>Domestic and Family Violence Information Sharing Guidelines</i> that hold victim safety and perpetrator accountability at the core of practice.</li> </ul> </li> <li>☑ Organisations uphold cultural safety through strong ties with the local community and appropriate service providers, as well as providing resources that support clients to engage with services of their choice that may be better placed to respond in a culturally safe way.</li> <li>☑ Perpetrator Intervention Programs ensure that, where possible, staff working with perpetrators establish an ongoing relationship with the victim, by either communicating with the victim (with victim consent) or victim advocate to provide an integrated and collaborative response to victim safety and perpetrator accountability.</li> </ul>

**Evidence  
suggestions  
specific to DFV  
Services**

**Integrated Service Responses**

Evidence demonstrating that:

- the service supports meaningful efforts to establish and maintain an effective and purposeful local network with other domestic and family violence services, housing, mental health, alcohol and other drug and government and non-government service providers, as appropriate to service and regional scale, and the capacity and level of engagement of all key partners
- non-Indigenous organisations seek out, develop, and maintain relationships with local Aboriginal and Torres Strait Islander organisations to build a culturally inclusive integrated response
- organisations can demonstrate established collaborative relationships with Aboriginal and Torres Strait Islander Organisations to support culturally appropriate connections within the community for support and referral
- the service has readily available and accessible resources that explicitly outline and provide information about culturally specific organisations within the service area (ideally at the front door and provided in first contact with the service)
- organisations collaborate in capacity building, training programs and sharing resources and information to enhance their response to client diversity and provide effective and appropriate services
- documentation and staff articulate and recognise the importance of connection to country, culture and kinship relationships
- the service supports clients to connect with country through means such as facilitating transport or phone calls to community, referral to more appropriate services to ensure that Aboriginal and Torres Strait Islander Peoples have the capacity, ability or access to their people, community and/or country
- services may facilitate community groups led by the Elders within the community
- the service records of collaboration in capacity building, training programs and sharing resources and information to enhance response to client diversity and provide effective and appropriate services
- the service supports victims in their discussions and interactions with legal services, government, and non-government agencies, as well as other professionals, including (if required) liaising and advocating on their behalf to achieve goals that the victim has identified.

**Information Sharing**

Evidence demonstrating that:

- services have an internal process around information sharing and/or a formalised policy outlining appropriate process
- staff share accurate and appropriate information with relevant agencies providing support to clients to streamline services and prevent clients from having to tell their story multiple times
- appropriate information sharing guidelines that hold victim safety and perpetrator accountability at the core, particularly in the instance that a client exits the service and there is a risk to victim safety
- participation in local and regional inter-agency forums and networks to support information sharing, best practice when working with clients with specific needs, service coordination, and seamless service delivery
- processes acknowledging that information sharing in the interest of victim safety may be required depending on the client's engagement

	<p>and behaviour and may be supported through the client signing a waiver or agreement upon engagement with the intervention.</p> <p><b>Perpetrator Programs</b></p> <ul style="list-style-type: none"> <li>• staff working with perpetrators preferably communicate with the victim through the victim advocate (or the victim directly where appropriate) regarding the perpetrators' participation in a program or in a one-to-one setting. This includes providing verbal or written information about the content and approach of the intervention</li> <li>• communication and engagement with the victim is conducted in such a way that it does not increase risk to the victim, and where possible should be negotiated with the victim</li> <li>• perpetrators who request support to understand or clarify advice provided by organisations outside the service system are referred to appropriate service providers who can assist, for example legal services, the Queensland Police Service, the Children, Youth Justice and Multicultural Affairs or other government and non-government agencies.</li> </ul>
<b>Indicator 3.5</b>	<p>The organisation has a range of strategies to ensure communication and decision-making by the individual is respected and reflected in goals set by the person using services and in plans to achieve service delivery outcomes.</p>
<div>Domestic and Family Violence</div>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Documented and implemented policy and procedures that ensure use of accredited interpreters with domestic and family violence experience where possible.</li> <li><input checked="" type="checkbox"/> Documented and implemented policies, procedures and practice that ensure services are delivered in a manner that: <ul style="list-style-type: none"> <li>• provides a framework for access and inclusion</li> <li>• promotes the self-determination, dignity of choice and autonomy of victims</li> <li>• is tailored to clients' needs taking into account a range of client cohorts and their individual circumstances including their family situation, their personal values and preferences and specific risk and protective factors</li> <li>• actively seeks to enable clients to make informed decisions on their own behalf by assisting them to explore and understand the implications of their decisions</li> <li>• staff work collaboratively with the family acknowledging strengths and building self-efficacy</li> <li>• safety considerations recognising the unique needs of victims of DFV related to communication methods are observed</li> <li>• children participate in decisions that affect them where possible and appropriate.</li> </ul> </li> </ul>

<b>Evidence suggestions specific to DFV Services</b>	<p>Staff understand and demonstrate:</p> <ul style="list-style-type: none"> <li>• culturally appropriate, sensitive, and empathic communication and engagement according to client's individual communication needs</li> <li>• the impacts of trauma and how this may impact a client's presentation, communication, and narrative</li> <li>• sensitivity to people with disabilities such as difficulties in seeing, hearing, walking, remembering, self-care, or communication requirements.</li> </ul> <p>Evidence of access and inclusion may include that:</p> <ul style="list-style-type: none"> <li>• information provided to clients reiterates their autonomy and dignity of choice</li> <li>• processes for on-boarding new staff reflect core values of dignity of choice, autonomy, and rights of the client</li> <li>• clients are provided with information about available options for meeting their needs and are assisted to identify their preferred option</li> <li>• staff are mindful of the need to provide equitable access by providing supports such as using interpreters to communicate with clients (as in indicator 3.5 DFV criteria), providing disability access points, offering casework and support over the phone or online mediums for clients in rural or remote areas (if safe phone/internet access is available and reliable), and undertaking outreach work where feasible and safe to do so</li> <li>• clients have a choice of case worker (gender and cultural background) where possible and appropriate</li> <li>• acknowledgement of the cultural needs of Aboriginal and Torres Strait Islander and culturally and linguistically diverse service users such as support and communication with family and community</li> <li>• risk assessments and safety plans support the choice made by the client, e.g. keeping the client safe within the home, or planning to assist them in leaving the relationship</li> <li>• when working with victims, organisations show a range of communication methods and strategies that uphold victim safety such as not leaving voicemails if unsafe to do so, and various methods of safe contact, such as phone calls, in person engagement, or text messages</li> <li>• processes recognise and manage heightened risk to victim safety when the dynamic and environmental risk factors of the perpetrator vary, and ensure that there is effective communication (e.g. with the victim, victim advocate, perpetrator, relevant authorities, and services engaged and relevant to providing a wrap-around response).</li> </ul>
<b>Indicator 4.2</b>	The organisation proactively prevents, identifies and responds to risks to the safety and wellbeing of people using services.
	<p><input checked="" type="checkbox"/> Documented, implemented, monitored, and reviewed processes identify and address:</p> <ul style="list-style-type: none"> <li>• the significance of patterns of perpetrator behaviour beyond individual incidents of violence, and meaningfully assessment of these patterns to develop appropriate responses for the victim and appropriate interventions for the perpetrator</li> <li>• how challenging behaviours or threats against other people using the service or working in the organisation are minimised and responded to</li> </ul>

## Domestic and Family Violence

- how people using services are informed of how their safety and wellbeing will be protected and any actions they are required to take or not take while using the service.
- ☑ Records demonstrate that formal, documented, evidence-based risk assessments are:
  - linked to safety plans that are collaboratively developed
  - regularly reviewed, evaluated, and updated based on client circumstances
  - appropriately developed to suit the level of engagement and duration of need of the client
  - staff are trained to use these processes, and staff regularly participate in training to maintain currency.
- ☑ Documented and implemented processes:
  - for notifying relevant authorities or police where a child or young person involved with their service is identified as experiencing significant intra-familial harm or is at risk
  - for notifying relevant authorities with information as is necessary for the best interests, wellbeing and safety of the child or young person
  - service premises have physical security measures in place to meet the safety and privacy needs of service users and workers.

## Evidence suggestions specific to DfV Services

**Note:** evidence can be gathered through policies, procedures, interviews with staff, case notes, training and induction processes and other means that services see fit. However, information specific to safety planning may not be noted or physically recorded in case notes, records, documentation etc. to protect the victim in the instance of information being subpoenaed.

Evidence that individual risk assessments conducted for both victims and perpetrators:

- prioritise the victim's assessment of risk as one of the most accurate indicators of risk
- engage collaboratively with the victim to promote self-determination and dignity of choice
- do not press the victim for more information than is required
- consider the safety needs of children
- assess lethality and extent and history of abusive behaviour including strangulation, weapons use and/or suicide attempts and pet abuse
- identify attitudinal, behavioural, and physical risk factors of the perpetrator and incorporate this into safety planning
- accurately document the patterns of abuse and how these impact on the functioning, safety and wellbeing of the victim and family
- identify and address barriers to participation (such as language, culture, ability, safety, or physical access to services)
- reflect an understanding that a respectful, positive, or engaged interaction with the perpetrator does not necessarily indicate that they pose less of a risk
- demonstrate knowledge and consideration for social, environmental, and protective factors, support networks and personal circumstances of the client in the assessment and planning of responses.

	<p>Safety plans conducted for both victims and perpetrators are linked to a risk assessment, collaboratively developed, and may demonstrate:</p> <ul style="list-style-type: none"> <li>• protocols when medium to high risk is identified or the victim is in immediate danger</li> <li>• protocols reporting the disclosure of serious criminal offences committed against women and/or their associates, including their children</li> <li>• specific strategies to increase safety and security if the victim remains with the perpetrator</li> <li>• pre-planned scripts with the victim that can be used if someone other than the victim answers the phone when staff are trying to contact them</li> <li>• reality tested risk assessments and safety plans with the victim, for example have they tried this before and if so, what happened</li> <li>• respond to signs and/or risk factors for child abuse and neglect</li> <li>• encouragement of contact with the service at any time in office hours</li> <li>• encouragement of contact with relevant 24-hour or after-hours services</li> <li>• perpetrator services engagement with the perpetrator to identify actions they can take to ensure victim safety</li> <li>• acknowledgement that information specific to safety planning may not be noted or physically recorded in case notes to protect the victim in the instance of information being subpoenaed, however staff may be able to articulate these processes as evidence.</li> </ul> <p>Risk assessment and safety planning in remote and discrete locations and for Aboriginal and Torres Strait Islander People and Services may include:</p> <ul style="list-style-type: none"> <li>• a holistic response to risk assessment and safety planning localised to the community and available networks</li> <li>• engagement of family for support and advocacy</li> <li>• localised risk mitigation and management strategies that may be specific to communities, services and/or individuals</li> <li>• acknowledgement of community knowledge and networks that may not always be evidenced in policy, documentation, or case files</li> <li>• using community knowledge and connection as part of safety planning, risk assessment and risk mitigation.</li> </ul> <p>Physical premises may evidence safety and privacy of clients by:</p> <ul style="list-style-type: none"> <li>• having more than one entry and exit</li> <li>• separate interview rooms for clients</li> <li>• duress alarms and accompanying process to any threats or elevation in physical risks</li> <li>• processes around staff and client safety when conducting outreach services (e.g. conducting visits in pairs, safety protocol upon arrival and leaving the premises).</li> </ul>
<b>Indicator 6.2</b>	<p>The organisation has transparent and accountable recruitment and selection processes that ensure people working in the organisation possess the knowledge, skills and experience required to fulfil their roles.</p>

<div>Domestic and Family Violence</div>	<ul style="list-style-type: none"> <li>☑ Staff competency levels, knowledge, and qualifications align with the level of service and care provided to clients, and staff have the required skills consistent with their roles and responsibilities.</li> <li>☑ Organisations adhere to any mandatory experience and qualification requirements that may apply to recruitment processes for perpetrator intervention programs.</li> <li>☑ Organisations and services promote diversity in their recruitment processes in recognition of the diversity within their communities and client base.</li> </ul>
<div>Evidence suggestions specific to DFV Services</div>	<p>Services can demonstrate:</p> <ul style="list-style-type: none"> <li>• processes that promote and support access and inclusion for people from diverse and intersecting groups, e.g. based on age, gender identity, culture, heritage, language, faith, sexual orientation, relationship status, disability, or other relevant characteristics</li> <li>• on-boarding and e-learning modules show how the gendered lens, culturally safe and inclusive practice and trauma informed practice is demonstrated to new staff</li> <li>• policies around employing female-identifying people (where exempt under the <i>Anti-Discrimination Act 1991</i>) and culturally identified positions within organisations</li> <li>• interview questions and copies of applicants' answers demonstrate a gendered lens, the importance of cultural competency, and acknowledgement of necessary skills, knowledge, and experience</li> <li>• staff have a nuanced and intersectional understanding of the dynamics of gender, power and control, colonisation and trauma which informs all aspects of their practice</li> <li>• staff adopt a gendered analysis of violence in their practice, acknowledging that gender inequality is a predominant cause and consequence of domestic and family violence</li> <li>• staff and services acknowledge, understand and utilise the breadth of knowledge of Aboriginal and Torres Strait Islander Peoples and culturally and linguistically diverse people.</li> </ul>
<div>Indicator 6.3</div>	<p>The organisation provides people working in the organisation with induction, training and development opportunities relevant to their roles.</p>
<div>Domestic and Family Violence</div>	<ul style="list-style-type: none"> <li>☑ Documented and implemented policies and procedures enable continuous professional development for people working in the organisation to maintain currency, competence, and confidence in their role in working with adults and children affected by domestic and family violence.</li> </ul>

<p><b>Evidence suggestions specific to DFV Services</b></p>	<p>Evidence may be demonstrated in:</p> <ul style="list-style-type: none"> <li>• policies and procedures, training registers, training documents, interviews with management, feedback, and staff.</li> <li>• the organisation participates in joint training initiatives and community education activities with other stakeholders.</li> <li>• professional development programs for staff may include, where applicable, the following evidence as it relates to domestic and family violence: <ul style="list-style-type: none"> <li>○ understanding relevant theoretical frameworks</li> <li>○ respectful, developmentally appropriate, culturally safe, and non-judgemental approaches</li> <li>○ analysis of the concepts of power and their internalised bias in relation to raising understanding and awareness around providing culturally safe services and interactions</li> <li>○ cross-cultural competency and working with interpreters</li> <li>○ identifying signs of domestic and family violence and the ability to respond to disclosures of both adults and children</li> <li>○ risk assessment and safety planning</li> <li>○ understanding the tactics of power and control that can interfere in the relationship between children and their mothers</li> <li>○ recognising high risk factors such as history of strangulation, weapons use and/or suicide attempts</li> <li>○ dealing with potentially high levels of deceit, manipulation, and justification</li> <li>○ recognising ways in which perpetrators minimising, denying, and blaming victims or past events for their violence might prompt staff to sympathise with them</li> <li>○ understanding and applying trauma informed approaches</li> <li>○ recognising vicarious trauma in self and others</li> <li>○ recognising community strengths and resilience when working with Aboriginal and Torres Strait Islander Peoples.</li> </ul> </li> </ul>
<p><b>Indicator 6.4</b></p>	<p>The organisation provides ongoing support, supervision, feedback and fair disciplinary processes for people working in the organisation</p>
<p><b>Domestic and Family Violence</b></p>	<ul style="list-style-type: none"> <li>☑ Documented and implemented processes demonstrate how the organisation fosters a workplace culture that reduces work-induced trauma.</li> <li>☑ The performance of workers is managed, developed, and documented, including through providing feedback and development opportunities.</li> <li>☑ Processes ensure that all staff have access to regular, formal, informal, internal, and professional trauma-informed supervision, support, and resources relevant to the scope and complexity of their role, including specialist supervision where indicated.</li> <li>☑ Staff and volunteers are informed on how to access services to support their personal wellbeing and the wellbeing of their colleagues, and help them to manage their exposure to vicarious trauma.</li> </ul>

**Evidence  
suggestions  
specific to DFV  
Services**

Evidence may include:

- policy and/or procedures outlining how the organisation recognises, assesses, and supports staff and volunteers providing domestic and family violence services to deal with their exposure to distressing stories and other material related to clients
- records of access to, and utilisation of, specialist supervision services for staff
- documents that show how the organisation monitors staff and volunteer wellbeing
- feedback from staff and/or volunteers on their access to professional supervision
- staff leave arrangements, caring policies and leave entitlements (e.g. staff going into negative sick leave may demonstrate understanding that the workforce is largely female and may have caring responsibilities)
- staff demonstrate awareness of supervision and options and verify access to appropriate support
- evidence of personal and team reflection that addresses personal bias related to gender, sexism, intersectionality, culture, and race
- workplaces foster an environment where staff can understand and explore their bias and improve their practice through training, supervision, and feedback
- evidence of an employee assistance program (EAP) and/or external supervision and support.

## Section B – Links to DFV service specific legislation, policies and resources

### **Legislation – Queensland:**

[www.legislation.qld.gov.au/Acts\\_SLs/Acts\\_SL.htm](http://www.legislation.qld.gov.au/Acts_SLs/Acts_SL.htm)

- *Domestic and Family Violence Protection Act 2012*
- *Child Protection Act 1999 and Child Protection Reform Amendment Act 2017*
- *Human Rights Act 2019* – notably in relation to section 28 related to the Cultural Rights of Aboriginal and Torres Strait Islander Peoples.

### **Policies and Resources**

- [Not Now, Not Ever: Putting an End to Domestic and Family Violence in Queensland](#)
- [Queensland Domestic and family violence prevention strategy 2016-26](#)
  - [First Action Plan 2015-2016](#)
  - [Second Action Plan 2016-19](#)
  - [Third Action Plan 2019-20 to 2021-22](#)
- [Domestic and Family Violence Practice principles, standards and guidance](#)
- Human Services Quality Framework
  - [Scheme Rules Part 1](#)
  - [Scheme Rules Part 2](#)
  - [Human Services Quality Framework user guide](#)
  - [HSQF Framework Document](#)
  - [HSQF Audits and Notifiable Issues Factsheet](#)
- Blue Card Services factsheet – [Shelters for adult women and men](#)

## Section C – Terms and Definitions

Domestic and family violence services – Terms and Definitions	
Accountability	<p>System accountability within the DFV sector is multifaceted and consists of accountability of services to delivering high quality services through compliance processes, providing responses that support perpetrator accountability and victim safety through integrated services responses and that with a view of continuous improvement.</p> <p>The concept of perpetrator accountability is broad and includes:</p> <ul style="list-style-type: none"> <li>• keeping women and children safe</li> <li>• understanding and responding to the needs and experiences of the victim and their views about the outcomes they want to achieve</li> <li>• ensuring legal and police responses are adequate and include penalties for breach of orders</li> <li>• a focus on encouraging the perpetrator to understand and take responsibility for their actions</li> <li>• a focus on avoiding collusion with perpetrator attitudes and behaviours.</li> </ul>
Case management approach	<p>This approach is a collaborative process of assessment, planning, facilitation and advocacy to meet an individual's unique needs and recognises their dignity of choice and autonomy while maintaining victim safety and perpetrator accountability. Responses provided include advice and referral, individualized risk and needs assessment, individual safety and support planning, direct service and case coordination and a system for ongoing review.</p>
Client-centred approach	<p>This involves building interventions around the needs of the individual. Staff operate from a position of listening and believing and drawing on the strengths and resources of the client.</p> <p>It should be noted that while a client-centred approach is an important part of contemporary practice, it cannot be adopted at the expense of victim safety or perpetrator accountability.</p>
Confidentiality	<p>Any information acquired by an entity performing functions under the <i>Domestic and Family Violence Protection Act 2012</i> must be kept confidential. Provisions in the <i>Domestic and Family Violence Protection Act 2012</i> outline specific confidentiality requirements. For example, it is an offence for a person receiving information to use or disclose the information or give anyone access to a document except where the law allows it.</p>
Conformity	<p>The requirements of a standard, or element associated with a standard such as an indicator, are met. <a href="#">Human Services Scheme Part 1</a>, 3 – Definitions page 6-7</p>
Continuous improvement	<p>A continuous improvement framework supports the participation of people who use services in quality improvement.</p>
Cultural Safety	<p>Cultural Safety is multifaceted and imbedded and driven by governance and management structures so that it informs the physical environment and ensures appropriate service delivery. Cultural Safety is determined by Aboriginal and Torres Strait Islander people and connects to creating environments where Aboriginal and Torres Strait Islander Peoples feel safe, there's no challenge to their identity and their needs can be met. It underpins the physical environment, language, social structures, symbolic actions, sharing power, and developing knowledge, understanding and learning. Cultural Safety is the responsibility of all individuals, services and organisations cultivated by an understanding and acknowledgement of past injustices and working towards a process of respect and recognition</p>

	of cultural differences, by acknowledging that Aboriginal and Torres Strait Islander Peoples are the First Nations Peoples.
<b>Developmentally appropriate</b>	Developmentally appropriate is a concept which involves staff basing their practices and decisions on theories of child development (where the client is a child), individually identified strengths and needs, the client's cultural background and the context defined by the client's community, family or kinship structures.
<b>Domestic and family violence</b>	As defined by the <i>Domestic and Family Violence Protection Act 2012</i> , domestic violence means behaviour by a person towards another person in a relevant relationship that: (a) is physically or sexually abusive; or (b) is emotionally or psychologically abusive; or (c) is economically abusive; or (d) is threatening; or (e) is coercive; or (f) in any other way controls or dominates and causes fear.
<b>Empowerment</b>	<p>This is an iterative process, in which a person who lacks power sets a personally meaningful goal toward increasing their power, takes action, and makes progress toward that goal. In doing so, they draw on their evolving self-efficacy, knowledge, skills, and community resources and supports.</p> <p>Empowerment models of practice are survivor-centred and based on victim priorities.</p>
<b>HSQF</b>	The Human Services Quality Framework (HSQF) is a system for assessing and improving the quality of human services. ... The HSQF is designed to increase administrative efficiency and enable service providers to focus their resources on service provision and continued quality improvement.
<b>Informed consent</b>	For consent to be informed, clients must be given accurate, up to date information in a manner they can understand. The information will cover the nature of the decision and/or service, how it is relevant to the client's goals, and any alternatives. Benefits and potential risks or consequences are fully explored.
<b>Intersectionality</b>	Intersectionality is an analytical framework for understanding how aspects of a person's social and political identities combine to create different modes of discrimination and privilege. Examples of these aspects are gender, caste, sex, race, class, sexuality, religion, disability, physical appearance, and height.
<b>Intervention</b>	The response provided by services.
<b>LGBTIQ+</b>	Throughout the practice standards, the terms sexual orientation, gender diversity, gender identity, and LGBTIQ+ are used interchangeably to refer to the wide range of diverse sexual orientations, gender identities, and intersex variations that exist among the Queensland community. The acronym LGBTIQ+ stands for lesbian, gay, bisexual, transgender, intersex and queer/ questioning, and the + represents other identities not captured in the letters of the acronym.
<b>Major nonconformity</b>	<p>The requirements of a standard, or an element associated with a standard such as an indicator, are not met, or the outcome is ineffective. Human Services Quality Framework Scheme Part 1, 3 – Definitions page 6-7. In addition, a major nonconformity will be raised where the following occurs (and this is sometimes referred to as a technical major nonconformity): <a href="#">Human Services Scheme Part 2 – P2_7.4.11</a></p> <ul style="list-style-type: none"> <li>• Three or more nonconforming indicators in the same standard, or</li> <li>• Three or more nonconforming standards overall.</li> </ul>

<b>Non-judgmental approach</b>  <b>Nonconformity</b>  <b>Notifiable issue</b>  <b>Observation</b>  <b>Organisation</b>  <b>Perpetrator</b>  <b>Practice guidance</b>  <b>Practice standards</b>  <b>Service</b> <b>Victim</b>	
	Ensuring that workers treat clients with respect is essential. Workers are required to establish a trusting, empowering and supportive relationship with clients and ensure all communications and engagements are undertaken with sensitivity, care, and dignity.
	The requirements of a standard, or element associated with a standard such as an indicator, are not fully met, or the outcome is only partly effective – organisations have 12 months from written notification to close out an NC <a href="#">Human Services Scheme Part 1</a> , 3 – Definitions page 6-7
	In addition during an audit, if an auditor becomes aware of a serious concern (for example evidence or allegations that an organisation is failing to meet key legislative safeguards: significant harm to a person accessing a service including abuse, safety or wellbeing; financial impropriety including potential insolvency and/or professional misconduct), they are required to refer the matter as a Notifiable Issue to the HSQF team (for investigation by the relevant funding department). Further information is available in the <a href="#">HSQF Audits and Notifiable Issues factsheet</a> on the <a href="#">HSQF website</a>
	Opportunities for continuous improvement or guidance for the organisation on areas for potential system deficiencies that may need to be reviewed to prevent problems occurring in the future. Observations should be considered by the organisation although action on observations is not mandatory. Observations may also be positive findings (noteworthy features) that are included and reported by the auditor. <a href="#">Human Services Scheme Part 1</a> , P1_7.4.16, page 14.
	An agency providing a service in response to domestic and family violence.
	Person who uses domestic and family violence. The term is used as it is consistent with the principle of placing responsibility for violence with those who use violence. While domestic and family violence is primarily perpetrated by men against women, we acknowledge that perpetrators can be any gender. This is an overarching term used within the sector, however, may not always be culturally appropriate. Communities may identify alternative terms when speaking with or about the person who is using violence.
	Practice guidance is provided for each practice standard to describe in more detail what is expected of workers in their everyday practice. It provides examples for workers about how they can deliver quality services to their clients.  The examples provided in the practice guidance are not meant to be exhaustive. New and emerging examples of good practice will be identified in future as the evidence base for effective responses to domestic and family violence expands.
	Practice standards outline what is required for effective, professional and accountable practice, generally for a specific profession (such as social workers and psychiatrists) or for a specific workforce (such as mental health workers and child protection caseworkers).
	The program, intervention, or activity provided by an organisation.
	A person who has experienced domestic and family violence. This term is inclusive of all ages, including children, young people, and older people.

Victim advocate	<p>While DFV is primarily perpetrated by men against women, we recognise that victims can be any gender.</p> <p>We recognise that not every person who has experienced or is experiencing domestic and family violence identifies with this term. Domestic and family violence is only one part of a victim's life and it does not define who they are.</p>
	<p>The victim advocate role involves building a relationship with the victim and other key stakeholders to respond to the needs of the victim. Advocacy may involve, but is not limited to, the following:</p> <ul style="list-style-type: none"> <li>• liaising with government agencies so that the victim can access or apply for services, for example, housing and accommodation services</li> <li>• communicating with schools and employers on the victim's behalf</li> <li>• liaising with prescribed entities to ensure the safety of the victim.</li> </ul>