



Support & Safety Hub

Support and Safety Hubs

Perpetrator practice guidance

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Aboriginal acknowledgement

The Victorian Government proudly acknowledges Victorian Aboriginal people as the First Peoples and Traditional Owners and custodians of the land and water on which we rely. We acknowledge and respect that Aboriginal communities are steeped in traditions and customs built on an incredibly disciplined social and cultural order. This social and cultural order has sustained up to 50,000 years of existence. We acknowledge the ongoing leadership role of the Aboriginal community in addressing and preventing family violence and join with our First Peoples to eliminate family violence from all communities.

The Orange Door

The public branding of the Support and Safety Hubs is The Orange Door. 'The Orange Door' and 'Support and Safety Hub' terms are used interchangeably across policy and communication materials.

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About this document

This practice guideline seeks to outline how Support and Safety Hubs (Hubs) will manage perpetrators of family violence, and in doing so, keep them accountable and in view. It identifies a range of Hub practice approaches, system and organisational mechanisms to ensure perpetrator accountability is embedded in Hubs operations.

This work draws on the contemporary evidence-base and practice wisdom, including:

- Principles for perpetrator interventions by the Expert Advisory Committee on Perpetrator Interventions (EACPI)
- Mapping perpetrator pathways through the service system (Centre for Innovative Justice, coordinated by the Department of Premier and Cabinet (DPC))
- The Hubs service model, interim integrated practice framework, Family Violence Information Sharing Scheme (FVISS) guidelines, perpetrator case management operational guidelines, and interim comprehensive risk assessment tool (ICRAT) guidance, led by Family Safety Victoria (FSV)
- A paper on engaging perpetrators and managing perpetrator risk at Hubs (FSV)
- Key stakeholder consultations with:
 - No To Violence, Domestic Violence Victoria and the Centre for Excellence in Child and Family Welfare
 - Magistrates' Court of Victoria, Family Violence Programs and Initiatives Unit
 - Victoria Police, Royal Commission into Family Violence (RCFV) Response and Reform Team
 - Men's Behaviour Change Program providers (MBCP)(n=3)
 - Department of Premier and Cabinet, Perpetrator Accountability
 - Expert Advisory Committee on Perpetrator Interventions.

Scope

The scope of this guideline is limited to the Hubs context and will complement previous and current work on perpetrator interventions, including:

- Principles for Perpetrator Interventions (Expert Advisory Committee on Perpetrator Interventions) – RCFV recommendation 85
- Pathways towards accountability: Mapping the journey of perpetrators of family violence (Centre for Innovative Justice, funded by DPC) – RCFV rec 85¹
- Family Violence Perpetrator Intervention Grants Program - testing new interventions for adult perpetrators of family violence (Department of Justice and Regulation) – RCFV rec 87
- Rollout of 2017-18 budget allocation of \$49.5 million over 4 years to enhance perpetrator interventions (DHHS/FSV) – RCFV recs 85-92
- New Men's Behaviour Change Program Minimum Standards.

The guideline does not explore approaches that cannot be supported within the Hubs integrated service environment, perpetrator interventions for use across the service system, or roles and responsibilities beyond the Hubs.

¹ Mapping service systems and perpetrator journeys, Report to the Department of Premier and Cabinet, Centre for Innovative Justice (CIJ), RMIT University, March 2017.

Context

The safety of victims of family violence is a paramount concern for Support and Safety Hubs (Hubs). A significant focus of the current family violence reforms is to improve victim safety by holding perpetrators of family violence to account for their actions. Hubs are a key part of Government's family violence initiatives, within the broader context of family violence and child and family services reform.

The Hubs will bring together the entry points to services for victims and perpetrators of family violence and for families in need of support with the care, development and wellbeing of children. Existing referral points for family violence services, family services and perpetrator/men's services will join together to receive Victoria Police referrals (L17s), other professional referrals and self-referrals for these services.

When fully established the Hubs will provide:

- a more visible contact point so that people know where to go for support
- help for people to identify family violence and child and family safety and wellbeing issues
- advice based on the latest risk assessment tools and best available information
- specialist support and tailored advice for victims, families and children, and perpetrators
- a strong focus on perpetrator accountability
- an approach across the spectrum of prevention, early intervention and response
- connection and coordination of access to support
- a system-wide view of service capacity, client experience and outcomes.

Perpetrator cohort

This is the term used in state and national policy to describe people who use violence. The aim in using this term is to ensure safety and accountability and to end the individual's use of violence. This term is not limited to people who have been accused or convicted of criminal offences. This term is not meant to define the perpetrator for life; the aim is to end the individual's use of violence. The term can include women who are primary aggressors, but for the purposes of this document, gendered language is used (referring to a perpetrator as 'he' or 'him'), recognising that most perpetrators of family violence are men. It is noted that practitioners will use other terms that are personally or organisationally more appropriate; for example, 'men who use violence' is used by some services that work with men.

The Hubs will engage with perpetrators of family violence and support women, children and families, and older people impacted by family violence. Perpetrators of family violence are largely, but not exclusively, men. They may be referred to Hubs already identified as perpetrators or be identified as perpetrators during the course of receiving a service from the Hubs. Adolescents who use violence may also be referred to the Hubs and/or present at the Hubs as a victim of family violence.

Hub staff will receive non-statutory referrals for perpetrators from a range of referral sources, including police, courts (for example, via respondent workers), justice services, housing and homelessness services and other community organisations. Perpetrators may also self-refer. Referrals to Hubs may be face to face (that is, walk-ins), but are predominantly expected to occur online or via the telephone.

A range of perpetrator cohorts may be referred to Hubs, including adolescent and female perpetrators, recidivist perpetrators and perpetrators with acquired brain injury, intellectual and physical disabilities. Perpetrators may come from culturally and linguistically diverse communities and/or identify as Lesbian, Gay, Bisexual, Trans and gender diverse, or Intersex (LGBTI). Being a member of these cohorts is not an excuse for violent behaviour, although may increase client complexity. All perpetrators can choose not to commit violence.

Not all men who access or physically present at Hubs will be perpetrators of family violence. Some men may access Hubs for services related to the care, wellbeing and development of children or as a support person for another client. Identification of perpetrators in this context requires clearly articulated guidance for Hub practitioners.

In cases where women are identified in an L17 police referral as perpetrators of intimate partner violence against a male partner, Hub practitioners will review the woman's history with particular regard for whether she is ordinarily the victim of family violence. The Hub response will consider the context of violence in her relationship and whether she is typically the primary/predominant aggressor.

Hubs will also work with victims of family violence who continue to maintain a relationship with a perpetrator. This may include victims who continue living with or maintain relationships with a perpetrator, intimate partners who do not wish to separate or victims with an ongoing connection to a perpetrator of family violence through the parenting of children. Hubs will work with parents living with a child or adolescent who uses violence, or older victims who continue to maintain relationships with their adult children, some of whom may be primary carers.

Adolescents who use violence

Adolescent violence in the home is a distinct form of family violence. This distinction arises from the adolescent's status as a child requiring care and protection according to their developmental needs. The most effective practice responses will be different than those used to respond to adults who use violence and will address the range of complex causal factors associated with adolescent violence.

Many adolescents who use violence in the home have themselves witnessed or experienced family violence, or experienced maltreatment. Other drivers include adverse childhood experiences, mental health problems, learning difficulties, substance abuse and poor attachment, parenting styles or family management. Responses should therefore focus on therapeutic individual and family work to improve family relationships, address underlying issues such as trauma and support the adolescents' developmental needs, skill development and self-awareness.

As with adult responses to family violence, emphasis on accountability and taking responsibility are paramount, but must be addressed sensitively in the context of the adolescent's unique circumstances. Criminal justice involvement and removal of the adolescent from the home should be a last resort. A high quality, integrated service response is needed that addresses the violence and its impacts on family members at the same time as supporting the safety, rights and developmental wellbeing of the child or young person.

Perpetrators from diverse communities

Under the *Equal Opportunity Act 2010 (Vic)*, it is unlawful to discriminate against someone based on a number of personal characteristics including race, age, sex, sexual orientation, disability and gender identity in a number of areas of public life including service delivery. Services also have a 'positive duty' to prevent discrimination from occurring. This means planning, considering service delivery barriers for diverse communities, and taking proactive steps to remove them and ensure discrimination does not occur².

Consistent with the Hubs commitment to all clients, Hub practitioners will take an intersectional approach that holds multiple lenses and:

- views a person as a whole
- recognises the many layers that make up a person's needs, experiences and identity
- recognises that each individual or family with multiple and complex needs has unique concerns, tied closely to the interaction with their social, economic and healthcare needs

- is mindful that individuals or families who present with multiple and complex needs are not assumed as forever being in that state
- recognises the overlapping, intersecting forms of discrimination and stigma that they may be exposed to within our society and service system
- recognises that a person's identity will affect the way they perpetrate family violence, how willing they are to seek help and what kind of support they require from a Hub
- recognises different forms and manifestations of family violence
- understands that the multidimensional nature of situations highlights the need for individualised, flexible and integrated approaches to better assist and support them.

For practitioners this means being aware that some people will need additional support or assistance to receive access and full participation at a Hub because of their characteristics and identities. For example, CALD community members may require timely access to interpreters to support their Hub engagement and support from CALD services to supplement longer-term service responses.³ For perpetrators with multiple and complex needs and parenting responsibilities, Hubs will need to recognise that perpetrators may have additional difficulties in parenting effectively and meeting the needs of their children.⁴

Perpetrator interventions

In 2017-18, the Victorian Government invested \$76.9 million over four years in perpetrator interventions. The investment supports a range of evidence-based initiatives that promote greater perpetrator accountability and support behaviour change, in response to recommendations 85, 86, 87, 88, 89, 90, 91, 92, 146 of the RCFV, and recommendation 6 of the Coronial Inquest into the death of Luke Batty. A summary of the range of evidence-based perpetrator initiatives underway is provided at Attachment 1.

In response to recommendation 85 of the RCFV, the Government also established the Expert Advisory Committee on Perpetrator Interventions (EACPI) in 2016. To date, EACPI has advised on:

- the principles that should inform Victoria's perpetrator interventions⁵
- mapping the roles and responsibilities of government agencies and non-government services that have contact with perpetrators
- how to strengthen current practice guidelines for engagement with perpetrators of family violence by child protection practitioners
- the scope for innovative interventions targeted at different cohorts of perpetrators.

Further work is planned on:

- the spectrum of programs, services and initiatives that should be available in Victoria, in the community and justice sector
- trials and evaluation of new perpetrator interventions
- developing a 'web of accountability' by skilling up the broader service system in identifying and responding to perpetrators.

Key issues

A number of key issues related to perpetrators of family violence have been identified in the literature and by key stakeholders consulted in the development of this guideline. These are briefly summarised below.

³ Further work on the intersect between Hubs and agencies which support diverse communities is required and will occur during the second half of 2018.

⁴ For further information on an intersectional approach, refer to the *Interim Integrated Practice Framework*.

⁵ See Attachment 2 for the EACPI Principles for Perpetrator Interventions.

Accountability

Keeping perpetrators accountable is a common aim across the family violence reform effort. Accountability speaks to individual and system responses which move perpetrators towards taking responsibility for perpetrating violence and abuse.

- At the individual level, Hubs will keep perpetrators personally accountable by challenging them to take responsibility for, and support them to choose to end, their violent behaviours and attitudes. Hub practitioners will employ low-empathy approaches to perpetrator engagement which avoid collusion, simultaneously monitor risk to the victim and family, and share information⁶ about perpetrator risk to inform the safety planning of victims and families.
- At a systems level, accountability speaks to timely service and system responses which move perpetrators towards taking responsibility for perpetrating violence and abuse, and monitor and manage risk. It is best driven through a collective approach, where parts of the system work together in a coordinated and mutually reinforcing manner, share information where relevant and understand the dynamics of family violence. Hubs will work with core and other services to respond proactively to perpetrators. Hubs will record and share information to establish a pattern of behaviour to help identify dynamic risk variables and inform safety planning for at-risk victims and families.

Keeping perpetrators in view

Keeping perpetrators in view refers to monitoring perpetrator risk and considering their actions and impacts on others. Hubs have an important role in understanding and monitoring perpetrator risk to inform safety planning for victims and families. Risk is monitored through information gathering, history checks, and liaison with the victim, family and other professionals. Hubs will hold perpetrators in view for the duration of Hub involvement in the case.

At a system level, perpetrators of family violence are kept in view through the coordinated and mutually reinforcing efforts of Hubs, core services, Police, justice, statutory and non-statutory agencies involved with perpetrators of family violence, and victims and families. This contributes to making the perpetrator of family violence more visible over time and across agencies.

Information sharing - The RCFV indicated significant deficits in information about perpetrators. The implementation of a new Family Violence Information Sharing Scheme (FVISS) and a redeveloped family violence risk assessment and management framework will support organisational and system responses to identifying perpetrator risk. The FVISS will allow prescribed information sharing entities to share and request information about a perpetrator to gain a clearer picture of the risk posed to victim survivors and to establish appropriate interventions for perpetrators.

Perpetrator risk - Many perpetrators referred to perpetrator services (typically by Police) refuse to voluntarily engage upon assertive contact by a perpetrator service, or cannot be contacted. To date, influenced by historical limitations to accessing and sharing information, and resourcing, perpetrator services have not typically monitored the risk posed by these perpetrators. Specialist family violence services have monitored perpetrator risk through engagement with the victim and family, and via limited information sharing with other services supporting the victim, consistent with the previous information sharing scheme.

⁶ Most Hub workers will be able to use or disclose information under the FVISS provided they are a person or body engaged or contracted to provide a service for family violence protection purposes and family violence assessment purposes in relation to a Support and Safety Hub established by Family Safety Victoria.

Stakeholders told us that Hub responses to perpetrators should attempt to engage and proactively manage the risk posed by a perpetrator, even in the absence of initial perpetrator engagement. Under the expanded information sharing capabilities available under the FVISS, the collation of information on perpetrator risk from a range of sources, including the Central Information Point and family violence services, child and family services, child protection, perpetrator and other services, will help to build a better picture of the perpetrator to support both current and future risk assessment and safety planning for victims and families.

Improved information sharing capability will enable Hubs to identify and respond to recidivist perpetrators, whose patterns of family violence were previously difficult to track over time, across victims and service responses.

Engaging with perpetrators – Hubs will engage with perpetrators in a timely manner, hold perpetrators accountable and support them to take responsibility for their behaviours and attitudes. Hub practitioners will support perpetrators to choose to end their violence and identify and work against perpetrator collusion, minimisation, victim-blaming and trauma-excusing narratives and attitudes which perpetrators use to diminish responsibility for their violence. Wherever possible, Hubs work with perpetrators will be informed by victims and families.

Workforce – The Hub workforce should itself be accountable for doing, thinking and responding, more than ever before, to family violence perpetrators. The hub practitioners should be confident and have the capability to consider and manage perpetrator risk across the service system. While specialised skills in working with perpetrators is already in place and well developed among staff working in perpetrator services, other Hub workforces such as Child FIRST and specialist family violence services, including women's family violence services, have had variable contact with perpetrators, to date. These workforces will be expected to grow and consolidate their capability to work with perpetrators in the Hubs context over time, supported by colleagues with specialist expertise in working with perpetrators, and a range of other Hub roles and supports.

End to end system responses – Hubs will provide a critical intake response to perpetrators by engaging with them to stop their violence, change their behaviour and work to manage the risk they pose. However, this is just one component of a broader system responsibility. All parts of the service system will need to respond to perpetrators in ways that make families safer, which do not increase risk and which make the perpetrator's use of family violence visible.

Hubs and perpetrators

All elements of the Hubs response to perpetrators will be informed by policy, operations and practice approaches which keep perpetrators in view and accountable, and prioritise victim safety, empowerment and agency. These approaches interact with each other to inform safe Hub responses, and are outlined below.

Managing perpetrator risk

Hubs will engage, manage and monitor perpetrators across each function of the service model to keep them in view and accountable. A range of timely responses will manage perpetrator risk, informed by specialist expertise available at the Hubs and focussed on keeping victims and families safe.

The Hub responses to perpetrators outlined in this guideline should be considered within the broader context of the Support and Safety Hubs Service Model.⁷ The Service Model details the overarching Hub response to victims and perpetrators of family violence, and children and families in need of support with the care, wellbeing and development of children and young people.

From initial roll out, active management and monitoring of perpetrators will occur from first contact or referral, through screening and triage, assessment and planning, connection to services and service delivery. Perpetrators who engage with the Hubs will be challenged to recognise the drivers of their violence and connected with tools and strategies to behave differently.

Assessment of perpetrator risk and risk management will be a business as usual activity for all Hub staff. Hub staff will seek information about perpetrator risk as part of day to day work practice with victims of family violence and their family, and perpetrators, regardless of their professional background, CSO employer, or client profile. Where required, Hub practitioners will seek further advice and support from staff with perpetrator expertise to ensure that an appropriate assessment of perpetrator risk is undertaken and considered in the safety planning of the victim and family. This work occurs in the context of an integrated service model, in which Hubs also respond to the needs and preferences of victims and families.

Even where no contact or direct engagement occurs with a perpetrator, Hub practitioners will manage perpetrator risk. In these circumstances, the practitioner supporting the victim or family will take responsibility for monitoring perpetrator risk. This includes identifying and recording relevant information about perpetrators and their behaviour, and sharing information about perpetrator risk with the victim and other service providers and agencies, in order to inform safety planning.

Over time, as the capability and capacity of the Hub workforce to engage with perpetrators grows, perpetrators will also be supported to access a wider range of Hub-delivered crisis responses and targeted interventions⁸ which help to keep victims safe.

⁷ Family Safety Victoria (April 2018) *Support and Safety Hubs Service Model*.

⁸ Further information provided below.

Prioritising victim safety

Hubs will prioritise the safety, empowerment and agency of adult and child victims by working in partnership with victims and families. Before initiating action with perpetrators, Hub responses will be informed, as much as possible, by the victim's experience, assessment of risk and safety planning strategies to prevent or mitigate the escalation of risk. This includes the timing and sequencing of perpetrator contact and engagement.

Hub practitioners will consider the victim's preferences with respect to perpetrator engagement. These preferences may reflect circumstances in which victims choose to continue a relationship with the perpetrator, or seek Hub assistance for parenting, rather than family violence, concerns.

Information on perpetrator risk will be supported by the new FVISS which allows information sharing relevant to assessing and managing family violence risk between a select group of practitioners, including Hubs, who are prescribed information sharing entities. This is particularly important where the Hub is unable to engage with the victim to gather information about the risk posed by the perpetrator.

Roles and responsibilities

All Hub practitioners who have ongoing perpetrator contact will be skilled and experienced in perpetrator engagement. At establishment, these practitioners are likely to be employed by perpetrator services. Over time, all client-facing Hub staff will be supported to develop the necessary skills and expertise to engage perpetrators and manage perpetrator risk, in order to support the safety of victims and families. Hub practitioners who undertake initial contact and screening with perpetrators will be supported by Hub colleagues with specialist expertise in working with perpetrators.

Referral pathways

Perpetrator pathways to and from the Hubs will vary according to the way in which perpetrators are identified and responded to by the broader service system. Some perpetrators will be identified and referred to Hubs through their contact with justice, police or other statutory agencies. Other perpetrators may self-refer or engage with the Hubs in the context of a child and family services response (for example, in their role as fathers). Some men may be identified as perpetrators through the course of this engagement. In these cases, where identification is an outcome of engagement with the Hub, the practitioners will consider, in close consultation with the victim, the preferred Hub response to the perpetrator and undertake a comprehensive family violence risk assessment and safety planning. This may involve another Hub team member working individually with the perpetrator, with due regard for the safety and ongoing Hub work with the victim and family.

Perpetrators will be referred to Hubs from:

- Victoria Police via an L17 referral
- Corrections Victoria
- Courts, including Headquarter courts of the Magistrates' Court of Victoria, the Children's Court, the Koori Court, Specialist Family Violence Courts, and the Federal Court within the family law system
- Self-referral, or through initial contact by family and friends
- Community service providers, including professionals in the health, human services and justice sectors
- The Men's Referral Service (which receives weekend L17 referrals from Victoria Police and provides telephone support 8am-9pm weekdays and 9am-5pm weekends)
- Community Operations and Victim Support Agency, where the perpetrator has been misidentified as a victim in the initial L17 referral.

It is noted that some perpetrators will be ordered by Courts or Corrections to access perpetrator programs, and will do so directly, rather than via Hubs. In these instances perpetrator services will undertake their own intake and assessment, and inform Hubs accordingly.

Perpetrators can be connected to the following specialist interventions from the Hubs:

- Men's Behaviour Change Programs
- Men's case management services
- Parenting/fathering programs
- Child Protection, in cases of serious risk to child safety
- Any other health, community and justice service identified as appropriate including, but not limited to, legal services, child and family services, housing and homelessness services, RAMPS, mental health services and alcohol and drug services.

Information Sharing and Central Information Point (CIP)

The FVISS enables Hub practitioners to use and share information gathered, without the perpetrator's consent, to inform the risk management of perpetrators and safety planning for victims. The initial tranche prescribed under the information sharing scheme will include practitioners in:

- support and safety hubs
- State-funded specialist women's family violence services (including refuge staff), men's family violence services (including Men's Behavioural Change Programs), and sexual assault services
- Senior Child Protection Practitioners, co-located in a support and safety hub (formerly known as community-based Child Protection practitioners)
- Child FIRST (excluding broader family services).
- Corrections
- Victoria Police
- Victims Support Agency
- Magistrates' Court of Victoria
- Children's Court of Victoria
- Risk Assessment and Management Panels.

Hub practitioners will consider whether each case warrants a request to the CIP for further information about perpetrator risk. Where deemed appropriate, the Hub practitioners will make a recommendation for a CIP request to the Advanced Family Violence Practice Leader, who will determine which requests are prioritised for action on the basis of the following factors:

- where initial risk assessment is unable to be completed due to insufficient information (for example, identity and/or location is unable to be confirmed)
- where there is limited or no information about the perpetrator within Hub and partner agency records.
- where gathering information directly from agencies would pose an unacceptable delay to providing an effective risk management response

The Hub practitioner will share information about perpetrator risk with other Hub practitioners and professionals supporting the victim and family, including the victim directly where appropriate. This will occur in a timely manner in the interests of informing safety planning for the victim and family, and in accordance with information sharing requirements under the law. Changes to perpetrator risk will be shared in a timely way to ensure that safety planning for the victim and family reflects current risk.

Hub functions

Hubs will engage, monitor and manage perpetrators and perpetrator risk across the breadth of Hub operations. Targeted activities related to this work are outlined below.

Screening and Triage

Hub Function	Summary of Hub response to perpetrators
Screening and Triage	<p>At establishment, Hubs will:</p> <ul style="list-style-type: none"> • Manage all L17 and other perpetrator referrals (including referrals from after-hours L17 intake services) • Undertake a perpetrator history check • Liaise with victim/victim’s practitioner prior to initial contact with perpetrator to clarify risk posed and inform victim’s safety planning • Make initial contact with perpetrator by outbound telephone call or SMS as quickly as possible • Screen for perpetrator risk and immediate/crisis needs • Refer the case to Police and inform the victim and/or practitioner where a perpetrator presents a live⁹ risk to victim • Identify, manage and rectify misidentification of primary/predominant aggressors, including through liaison with the Victims Support Agency and other agencies as needed • Identify critical dates that might escalate risk to a victim, for example, court dates • Determine perpetrator willingness to engage in Hub assessment and a safe approach • Compile and record risk information on the CRM for all referred perpetrators who engage with Hubs, including referred perpetrators who refuse to engage or cannot be contacted • Recommend a CIP request, where appropriate • Share relevant perpetrator risk information with victim/family’s practitioners or the victim/family in a timely manner • Refer or directly allocate perpetrators for a service response where the type and intensity of response required is clear at screening • Identify high risk perpetrators and, based on risk, prioritise for coordination with statutory services such as Police, Corrections, Child Protection in safe sequencing with victim contact and engagement <p>Over time, Hubs will:</p> <ul style="list-style-type: none"> • Share relevant perpetrator information with nominated liaison points in Magistrates’ Courts

⁹ Live risk - an immediate safety issue, requiring Police intervention.

Screening and triage in the Hubs will be undertaken for all perpetrator referrals. This includes referrals received via Victoria Police L17 forms,¹⁰ other professional referrals, and perpetrator self-referrals. All referrals will be reviewed by a Hub practitioner prior to making contact with the perpetrator. At initial rollout of the Hubs, this review is likely to be undertaken by a Hub practitioner with specialist expertise in working with perpetrators. As expertise and experience expands across the Hub team, this responsibility will be shared.

Review of referrals will determine if:

- the referral is appropriate, that is within scope for a Hub response
- there are immediate safety issues, wellbeing issues or risks that need to be addressed, and the urgency of the action required
- further information is required to determine perpetrator risk to the victim or Hub practitioners, to inform Hub approach to initial contact with perpetrator
- whether a recommendation for a CIP request is appropriate at this point, to supplement other information gathering
- female perpetrators are the predominant aggressor.

Where a perpetrator presents directly to a Hub, a Hub practitioner will clarify the perpetrator's identity and reason for presenting. Immediate risk will be determined based on presentation state and known information about the perpetrator. The Hub will have clear duress procedures for managing aggressive or challenging behaviours, as articulated in the interim operational and procedural guidelines.

Where deemed safe to do so, Hubs will be able to use the meeting rooms to ensure a perpetrator presenting at a Hub can be safely interviewed. The Hub practitioners will gather further information from the Hubs Client Relationship Management system (the Hubs case management record system) about whether the perpetrator or their victim is known to the Hub, to inform an assessment of risk posed by the perpetrator's presence.

In some cases, and where safe to do so on the basis of an initial assessment, Hub practitioners will meet with perpetrators in other locations, such as a men's family violence service or a court. Face to face contacts are to be arranged in collaboration with service providers in these locations, consistent with their assessment of perpetrator risk. Face to face contact of this nature is less likely to occur at initial contact, and more likely to be undertaken after initial contact has been made and risk has been assessed.

It is noted that some work with Aboriginal people perpetrating violence, undertaken by the Aboriginal Practice Leader and Hub practitioners, may employ more face to face contact than with other perpetrators, consistent with approaches to working with Community.

Prior to initial contact with a perpetrator, the Hub practitioners will consult with the victim and conduct a history check to gather information about the risk posed by the perpetrator, and to ensure that perpetrator engagement does not escalate risk. Coordinated and sequenced service responses are required to secure the victim's safety prior to first contact with the perpetrator.

It is expected that Hub practitioners will make 'reasonable' attempts at initial contact with the perpetrator, if safe to do so and as soon as practically possible following referral to the Hub. Prompt contact can capitalise on the window of opportunity for perpetrator engagement. A reasonable number of contact attempts will be determined in the context of what is known about perpetrator risk and with primary consideration for victim safety. Sector feedback indicates this currently ranges from 1-4 contact attempts, determined on an individual perpetrator basis. A single or no contact attempt may be deemed reasonable only where initial contact significantly increases the risk posed by a perpetrator. Hub practitioners will be required to record on the CRM a rationale for discontinuing attempts at initial contact with a perpetrator.

¹⁰ Where Koori Family Violence Police Protocols exist, these will be maintained, including for police L17 family violence referrals, unless otherwise advised by Aboriginal services and communities in the area.

At initial contact, the Hub practitioners will seek to engage with the perpetrator and screen for family violence and risk to child wellbeing. This contact and further information gathering will seek to determine whether an immediate response is required, and what type of Hub response is the most appropriate action at this time. It will:

- identify any affected adults and children connected to the perpetrator referral to enable early identification of risk and needs
- identify and respond to immediate safety issues, child wellbeing issues or risks that need to be addressed, and priority or urgency of the action required (for example, referral to Child Protection or Police)
- determine perpetrator willingness to engage with the Hub
- determine the immediate needs of the perpetrator, such as alternative accommodation required due to exclusion from the home, that will support the safety of the victim and family
- identify current interventions already underway including Family Safety Notices, status of intervention orders, family law orders, child protection orders, community corrections orders, corrections case management.

The Hub practitioners will clarify the perpetrator's willingness to engage with the Hub for further assessment, immediately or in the future. If the perpetrator is willing to engage, the practitioners will determine whether further assessment should occur:

- immediately during the initial contact as an extension of screening and triage
- at a scheduled appointment at a Hub or an alternative location
- via a scheduled telephone contact, or
- with the assigned Hub practitioners who made initial contact, or another professional within or beyond the Hub (for example, where an existing service relationship already exists or should be sought).

Where a separate appointment for assessment with a Hub practitioners is scheduled, practitioners continuity will be maintained where possible and appropriate.

Following initial contact, Hub practitioners will compile and record risk information on the CRM for all perpetrators. This information will be particularly important in understanding perpetrator risk where the perpetrator refuses to engage with Hubs or cannot be contacted. Information will be collected from a range of sources, including via:

- direct enquiries with the perpetrator
- enquiries with the victim and family directly or via their Hub practitioners
- information provided through a referral (L17 or professional referral)
- history of previous contact with the Hubs, Hub partner agencies or other services (from the Hubs CRM, Child Protection or other records)
- discussion with another practitioners or professional (both within and external to the Hub)
- direct request for information from another agency (for example, Maternal and Child Health)
- the CIP where relevant.

Information gathering is further supported by the FVISS which enables Hub practitioners to use and share information, without the perpetrator's consent, to inform the risk management of perpetrators and safety planning for victims.

Some perpetrators may indicate during initial contact that they are willing to engage with a further service response, such as a MBCP, case management or other perpetrator intervention. Where the type and intensity of response is immediately apparent, these perpetrators will be directly allocated to appointments with these services. The Hub practitioners will share information collected with the receiving provider, who will conduct their own specialist program assessment. Screening may also identify that the perpetrator has further or more complex health, legal and other issues that require a Hub assessment prior to direct allocation to a perpetrator intervention. Receiving providers should always use Hubs information as a basis on which specialist program assessments and plans are built.

A targeted intervention and/or crisis response, including the use of brokerage, may be identified as an appropriate Hub response for some perpetrators at initial contact. Supports will be put in place where they contribute to victim safety at any time, noting that these interventions may be particularly helpful to victims in the days following a family violence incident or when victims self-refer to a Hub. Targeted interventions and crisis responses may be delivered at the same time as a referral to MBCP or case management, or delivered as a standalone response.

All perpetrator interventions delivered by the Hub at screening and triage will be provided with an objective of monitoring perpetrator risk, working towards stopping perpetrator violence and changing behaviour, to keep the victim and family safe. This will occur in the context of dynamic perpetrator risk which can change over time.

Assessment and planning

Hub Function	Summary of Hub response to perpetrators
Assessment and Planning	<p>At establishment, Hubs will:</p> <ul style="list-style-type: none"> • Assess perpetrator risk to inform and support victim safety planning • Assess perpetrator needs and service preferences • Determine service eligibility for MBCP, case management, parenting and family programs, and other services • Share information about perpetrator risk with the victim’s practitioners and victim, particularly when risk escalates • Monitor risk by checking-in with the perpetrator and gathering/updating information from other professionals, more frequently at high risk times, for example, approaching a court date (risk monitoring is a shared responsibility with CSO providers, Police and Courts) • Develop an initial plan with the recommended service response • Refer the case to Police and inform the victim and/or practitioners where a perpetrator presents a live risk to victim <p>Over time, Hubs will:</p> <ul style="list-style-type: none"> • Liaise with the nominated contact in the Magistrates’ Court to share perpetrator information

Hubs will work with perpetrators to understand their risk to victims and families and inform safety planning and support their role as a parent, where appropriate. The transition between initial contact for screening and a scheduled assessment should capitalise on the ‘window’ for perpetrator engagement. Assessment and planning will seek to identify and manage the risk that perpetrators pose, rather than placing the burden of risk management on women and children.

Over time, as Hub functionality evolves, the redeveloped Family Violence Risk Assessment and Risk Management Framework will be implemented in the Hubs. In the interim and from Hub establishment, perpetrator risk will be assessed using the Interim Comprehensive Risk Assessment Tool (ICRAT)¹¹.

Assessment will build on information collected at screening. Hub practitioners will use the ICRAT to assess a perpetrator's circumstances and behaviours in the previous 12 months, seriousness of perpetrator risk, violent behaviours and risk to children. A recommendation to request further risk information from the CIP may be activated where the type or level of risk is unclear due to gaps or inconsistencies in available information.

The Hub practitioners will assess the perpetrator's eligibility for a further service response from a MBCP or case management, and other services such as family services and specialist fathering programs. The practitioners will confirm eligibility for a service and develop a service plan for the perpetrator which outlines the recommended service response and make referrals to broader community, health and justice services where identified.

A Hub practitioners undertaking assessment may also need to contact the perpetrator at agreed intervals, commensurate with the level of risk and informed by the perpetrator's preferences. This contact will seek to maintain Hub engagement, provide support to the perpetrator and assess dynamic risk at high risk points in time, such as an approaching court date. Support may include the provision of information and advice, referrals and motivational techniques which encourage engagement with the Hubs, court attendance or access to further service responses such as a MBCP or case management.

Where appropriate, supports delivered at assessment may use levers to motivate perpetrators, such as their role as a father, desire to re-engage or have contact with their children. This is particularly relevant where Child Protection or the Courts have limited the perpetrator's access to their children.

Engaging men through their role as fathers will occur in the context of current statutory orders and family service supports relating to children. It will also be informed by the assessed risk posed to adult and child victims and information provided by the protective parent. Where appropriate to the age and stage of development, children may be consulted by Hub practitioners. Hub practitioners will be mindful that perpetrators who are fathers may use their children as 'levers' and exert further coercive control against victims by, for example, withholding a victim's access to their children.

Hub practitioners will continuously review and update assessments and service plans to reflect additional or new information received during their contact with the perpetrator and the victim. Ongoing review and assessment will be critically important for perpetrators who:

- are not currently receiving a service response
- may 'escalate quickly' (for example, where there is a recurring pattern of intensified violence)
- have additional complexity factors that may heighten risk (for example, mental health or alcohol and drug issues).

The FVISS¹² enables Hub practitioners to use and share information gathered at assessment, without the perpetrator's consent, to inform the risk management of perpetrators and safety planning for victims. Hub practitioners will share information about perpetrator risk with practitioners supporting the victim and family, and also with Victoria Police, where an imminent risk exists, and Magistrates' Courts, to inform safety planning for court appearances of relevant clients. In accordance with information sharing and other laws, Hubs may also provide the Magistrates' Court with information about a perpetrator's risk assessment to assist a Magistrate to help inform the making of a court order.

¹¹ See Attachment 3 for further information on ICRAT.

¹² Hub workers must familiarise themselves with their obligations under the FVISS in relation to information sharing and record keeping.

Furthermore, Hub practitioners will coordinate with court-based staff (for example, Court Registrar, applicant and respondent practitioners and Court Integrated Services Program staff) when undertaking risk and needs assessment, planning and service coordination, when there is common or related work. Hubs will also access information from Magistrates' Courts about the outcomes of family violence-related court proceedings (such as whether a perpetrator has been remanded, sentenced, or released) to inform risk assessment and management of family members supported by Hubs.

Connecting to services

Hub Function	Summary of Hub response to perpetrators
Connecting to services	<p>At establishment, Hubs will:</p> <ul style="list-style-type: none"> • Review the service plan and recommendations prepared at assessment and planning • Confirm perpetrator eligibility for the recommended service responses, and their access priority • Check the current capacity and availability of the service • Allocate a service response for the perpetrator, for example, MBCP assessment or case management appointment • Refer to other health, housing, justice service responses, for example, accommodation, mental health services, alcohol and drug services • Deliver support and risk management where a MBCP or case management commencement is delayed

Allocation

The Hubs will be the central entry point for timely allocation of perpetrators into:

- family violence men's services (MBCP and perpetrator's case management)
- integrated family services.

Allocation is a process for assigning Hub clients, including perpetrators, into core services for a service response, based on information collected at the screening and triage or assessment and planning phase, and service capacity. It occurs in the broader context of the Hub's demand management approach.

Hub practitioners will be familiar with the availability of perpetrator services in the Hub area, and the relevant eligibility criteria for access.

As the central entry-point for core perpetrator services, Hubs will:

- identify the appropriate service and agree this with the perpetrator
- confirm that the person is eligible for MBCP or men's case management
- check the current capacity and availability of the service
- allocate the perpetrator into the service, for example, make and confirm an individual appointment with men's case management, an assessment appointment with a MBCP, and
- assign responsibility for engagement and monitoring of perpetrators when access to services is unavailable or delayed.

Where it is identified at screening or through assessment and planning that a core service response is required, the Hubs will:

- allocate urgent or priority cases within one day, with all other suitable cases allocated to services within one week
- clearly allocate the responsibility to either the Hubs or core services to provide active engagement and risk monitoring whilst the perpetrator is awaiting a service response
- provide the identified service with the perpetrator's assessment and plan and any other relevant information (including CIP information)
- transfer the role of active engagement and risk monitoring to a core service, upon allocation.

To support the allocation process, core perpetrator services will:

- accept the allocation and agree to provide a service
- confirm their ability to provide active engagement and risk monitoring, upon allocation
- receive the assessment and plan.

Where the core service believes they are unable or unsuitable to provide the service to the perpetrator, they should provide a notification and rationale to the Hub immediately on receipt of the allocation.

Referral to external services

Where it has been determined that support is required from services beyond core services (i.e. family services and perpetrator services), perpetrators will be referred to the most appropriate service in the local area using existing referral arrangements. This might include referrals to alcohol and drug services, mental health services, housing, homelessness and other services that meet the needs of the perpetrator and contribute to the safety of victims and families.

Where perpetrator access to services such as MBCP or case management is delayed, Hubs will offer more timely referral options and/or provide support to perpetrators via targeted interventions.

Crisis responses

Hub Function	Summary of Hub response to perpetrators
Crisis response	<p>At establishment, Hubs will:</p> <ul style="list-style-type: none"> • Assist the perpetrator to find alternative short-term accommodation to keep the victim safe • Facilitate use of brokerage funding to support access to short-term accommodation • Manage or refer for any other immediate needs identified at screening or assessment, for example, self-harm

Hub practitioners will be able to provide crisis responses to perpetrators where these responses help to keep victims and the perpetrator safe. Crisis responses may include assisting a perpetrator of family violence to locate alternative accommodation to reduce the risk of returning to the victim’s home, or linking them to support services to prevent and/or manage self-harm. Crisis responses for perpetrators must be balanced with the provision of Hub engagement, safety planning and support to the victim and family, wherever possible.

Brokerage

Crisis responses for perpetrators will be implemented in a timely and efficient manner, and may draw on brokerage funding. In this context, use of brokerage funding¹³ aims to support the safety of victims and families through purchasing products or services that engage perpetrators to stabilise and link them into programs to address their use of violence. Given the limited funds available, it is incumbent upon the practitioners administering brokerage to their client to undertake a careful eligibility assessment of need and explore alternative sources of financial support before issuing any funds.

Brokerage could include, but is not limited to, costs associated with accommodation, health, material needs and transport related to the perpetrator’s initial plan and the safety of victims.

¹³ Further information on brokerage for perpetrators is available in *Working draft - Perpetrator Case Management: Operational Guidelines* (FSV).

Further information on Hub allocation of brokerage funding is available in the Service Agreement Schedule and the Program requirements for Support and Safety Hubs brokerage.

Targeted interventions

Hub Function	Hub response to perpetrators
Targeted interventions	<p>Over time, Hubs will:</p> <ul style="list-style-type: none"> • Deliver targeted interventions to perpetrators who are ineligible or inappropriate for MBCP or case management services, where access to service is delayed or declined by the perpetrator • Provide short, targeted interventions, consistent with the perpetrator’s stage of change, to support perpetrator engagement and behaviour change, and inform risk monitoring and safety planning for the victim and family • Deliver targeted interventions via telephone and/or scheduled appointments at the Hub or elsewhere

Over time, Hubs will develop the capacity and capability to deliver targeted interventions to promote perpetrator engagement or actively hold perpetrators. Targeted interventions may be suitable for perpetrators who:

- are awaiting a perpetrator service response
- are contemplating engagement with a program such as MBCP or men’s case management
- are ineligible or inappropriate for a perpetrator service such as MBCP or case management
- are unlikely to attend a scheduled court date
- may require time-limited risk monitoring to ensure the safety of the victim and family.

Interventions delivered to perpetrators will be time limited and targeted to the perpetrator’s stage of change. Interventions will support perpetrator engagement and behaviour change, and inform risk monitoring and safety planning for the victim and family. They will be delivered via telephone and/or planned appointments at the Hub or other locations, such as MBCPs, case management or other perpetrator services. Hub practitioners will be expected to follow relevant operational guidelines in regard to practitioners safety when conducting scheduled meetings with perpetrators and other clients.

Targeted interventions may include delivery of, or referral to:

- individual counselling session/s including motivational interviewing
- regular proactive check-ins
- legal advice, housing, specific information about court processes and other interventions.

Review of practice guidance

This document outlines the statewide requirements and provides guidance to support the commencement of Hub service delivery across the first five Hub launch sites. However, it is recognised that this guidance needs to be developed iteratively, informed by the lessons we learn from the first six months of Hub implementation, as well as further policy and practice work led by Family Safety Victoria in partnership with key stakeholders across government and the service system. It is intended that the next iterations of statewide guidance will be in place by the end of 2018.

Attachment 1: Evidence-based perpetrator interventions - Initiatives

In 2017/18, the Victorian Government invested \$76.9 million over 4 years in perpetrator interventions. The investment supports a range of evidence-based initiatives that promote greater perpetrator accountability and support behaviour change, in response to recommendations 85, 86, 87, 88, 89, 90, 91, 92, 146 of the RCFV and recommendation 6 of the Coronial Inquest into the death of Luke Batty.

The investment includes:

- mapping the roles and responsibilities of all government and non-government agencies and service providers that have contact with perpetrators of family violence
- confirming the principles that should inform the programs, services and initiatives required to respond to perpetrators of family violence who pose a high, medium or low risk to victims
- convening a committee of experts on perpetrator interventions and behaviour change programs [within 12 months] to advise the government on the spectrum of programs, services and initiatives that should be available in Victoria - in the justice system and in the community - to respond to all perpetrators across varying forms and risk levels of family violence.
- enhancing the standards for Men's Behaviour Change Programs (MBCP) providers and increasing the number of program places available for perpetrators
- providing additional capacity to enable the Men's Referral Service to respond to increasing helpline demand
- increasing the capacity of intake services to respond to perpetrators
- strengthening a long-standing community-led behaviour change program for aboriginal male perpetrators of family violence
- continuing funding over the next 4 years for men's behaviour change programs in the corrections system
- trialling and evaluating family violence-specific assessment, case management and referral services in the criminal and civil jurisdiction of the Magistrates' Court and in the community sector
- providing flexible support packages for perpetrators with multiple and complex needs
- testing and evaluating new perpetrator interventions
- improving the ability of the courts to monitor perpetrators
- establishing a family violence Restorative Justice framework and pilot project
- trialling and evaluating an LGBTI applicant practitioner and LGBTI respondent practitioner in the Magistrates' Court at 2 locations
- trialling and evaluating interventions for adolescents who use family violence at the Children's Court to intervene before the offending behaviours become entrenched
- expanding the Court Integrated Services Program (CISP) and continuing the CISP Remand Outreach Pilot (CROP) program.

Attachment 2: EACPI Principles for Perpetrator Interventions

Principles for perpetrator interventions

- Victims', including children's, safety and freedom underpins all interventions with perpetrators of family violence.
 - Interventions with perpetrators are informed by victims and the needs of family members.
 - Perpetrators take responsibility for their actions and are offered support to choose to end their violent behaviour and coercive control.
 - Inter-agency risk assessment and risk management processes are consistent, robust and strong, and any risk associated with intervention is minimised.
 - Perpetrators are kept in view through integrated interventions that build upon each other over time, are mutually reinforcing, and identify and respond to dynamic risk.
 - Responses are tailored to meet the individual risk levels and patterns of coercive control by perpetrators, and address their diverse circumstances and backgrounds which may require a unique response.
 - Perpetrators face a range of timely system responses for using family violence.
 - A systems-wide approach collectively creates opportunities for perpetrator accountability, both as a partner and a parent. Actions across the systems work together, share information where relevant, and demonstrate understanding of the dynamics of family violence.
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Attachment 3: Perpetrator assessment

Initial assessment at Hubs for perpetrators of family violence will seek to:

- identify safety risks to women and children and support holistic risk assessment and risk management in response to family violence
- provide an appropriate service response to men using violence. This may include:
 - an initial eligibility review for a MBCP or men's case management
 - identification of needs that may require a service response from the broader service system (for example, drug and alcohol, mental health)
 - identification of other needs that the Hubs may be able to respond to through targeted interventions and Hubs brokerage. Note, these needs must be related to family violence and child safety, wellbeing and development issues.

Any service response provided to men perpetrating violence, including assessment, must contribute to victim safety and promote engagement and behaviour change (for example, emergency housing that will deter the perpetrator from returning to the victim's home).

The interim Comprehensive Risk Assessment Tool (ICRAT)

An early version of some components of a tool designed for specialist practitioners will be trialled in Hub launch sites while redevelopment of the Family Violence Risk Assessment and Risk Management Framework continues during 2018. The Interim Comprehensive Risk Assessment Tool (ICRAT) is the centrepiece of this trial.

The development of the ICRAT and its risk indicators has been informed by a review of literature, including literature relating to weighted risk assessment tools and an update to the current aide memoire, taking into account current evidence and recommendations from the Royal Commission and the Monash University *Review of the Family Violence Risk Assessment and Risk Management Framework in Victoria*.

The ICRAT will replace the current Framework aide memoire and must be used in the Hubs when:

- family violence risk is suspected, or it has been established, that someone is experiencing or has experienced family violence risk, or
- it is suspected, or it has been established, that someone is perpetrating or has perpetrated family violence

Four individual assessment templates will be included in the ICRAT:

1. adult victim survivor
2. child victim survivor
3. perpetrator
4. adolescent who uses family violence

The ICRAT perpetrator template will assess against three key areas – high risk factors, seriousness of risk and risk to children, as briefly outlined below.¹⁴

High risk factors

The IRAT assesses perpetrators for high risk factors related to the increased likelihood of death or near death to a victim from the actions of a perpetrator. The high risk factors are indicated throughout the assessment with an asterix (*), to bring practitioners' attention to these questions.

¹⁴ From ICRAT *Guidance for Support and Safety Hub workers (FSV)*.

Perpetrator behaviour and circumstances

The ICRAAT assesses the current circumstances of the perpetrator, focusing on the past 12 months prior to assessment. For example:

- Is there someone you're making feel unsafe or afraid?
- In the last 12 months have you:
 - Been unemployed?
 - Been diagnosed with a mental health condition?
 - Threatened or attempted suicide?
 - Had a problem with substance abuse such as alcohol or other drugs?
 - Controlled most or all of their daily activities? [e.g. tries to keep victim from seeing your friends or family, insists on knowing where they are at all times, stops them working or seeking health care or having access to money] *
 - Stalked, constantly harassed or phoned/texted/emailed them?
 - Been obsessively jealous towards them? [e.g. angry if they speak with another man, often suspicious that they are unfaithful when you haven't been]
- Has any physical violence increased in severity or frequency in the last year?*

The seriousness of risk

The ICRAAT assesses the seriousness of risk that the perpetrator poses to the adult victim/survivor. For example:

- Have you ever:
 - Seriously harmed them?*
 - [Where intimate partner violence] assaulted them when they were pregnant?*
 - Threatened to kill them?*
 - Threatened or used a weapon against them? (including any object used as a weapon)*
 - Tried to choke or strangle them?*
 - [Where intimate partner violence] forced them to have sex or participate in sexual acts when they did not wish to do so?*
 - Been reported to police by them for family violence?
 - Broken the conditions of an intervention order or a court order?
 - Had a history of violent behaviour to non-family members?
 - Harmed or threatened to harm a pet or animal?
 - Been arrested for violent or other related behaviour?
 - Been convicted of a violent crime?

Risk to children

The perpetrator's behaviour and risk to children in the home or family is also assessed, where applicable. For example:

- Are all the children in the house your biological children?
- Have your/your partner's children ever been present during FV incidents?
- Have you ever harmed or threatened to harm your/your partner's children?
- Do you believe you are capable of killing or seriously harming children or other family members?