



Western Australia Code of Practice for Specialist Family and Domestic Violence Services

Literature Review

Quality Standards in Family and Domestic Violence Services

Acknowledgement of Country

The Centre for Women’s Safety and Wellbeing (CWSW) and Stopping Family Violence (SFV) acknowledge the Traditional Owners of the lands and waters of Australia and the Torres Strait. We respect all Australian First Nations people (Aboriginal and Torres Strait Islander people)—their customs and their beliefs. We also pay our respects to Elders past, present and emerging, in particular the Whadjuk Nyoongar people, the traditional owners of the lands where our offices are located. WCSW and SFV support the First Nations people’s Uluru Statement from the Heart.

Recognition of Victims and Survivors

The Centre for Women’s Safety and Wellbeing and Stopping Family Violence recognise the strength and resilience of adults, children and young people who have experienced family and domestic violence and recognise that it is essential that responses to family and domestic violence are informed by their expert knowledge and advocacy. We pay respects to those who did not survive and acknowledge friends and family members who have lost loved ones to this preventable and far-reaching issue.

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Executive Summary

In Western Australia, the peak bodies for family and domestic violence, the Centre for Women's Safety and Wellbeing and Stopping Family Violence, have partnered to respond to the lack of quality principles and standards for specialist family and domestic violence services and advocated for a Western Australian Family and Domestic Violence Code of Practice.

A desktop review of current quality practice standards found most states and territories in Australia have quality standards guiding the service sectors. Community-based sectors intersecting with family and domestic violence such as mental health, alcohol and other drug, health, disability, aged care, community housing and community legal services all operate with national quality standards to guide service operations. Most of these standards are governed with an accreditation or compliance mechanism.

However, there are no national quality standards for the family and domestic violence sector. Furthermore, there are three states – Tasmania, ACT and Western Australia, that do not have a quality assurance and improvement system for specialist family and domestic violence services.

Four states, Queensland, New South Wales, Victoria and South Australia have a human services quality framework that applies to all community sector organisations. In addition to the human services quality framework, Victoria and New South Wales have voluntary codes of practice designed specifically for family and domestic violence services.

Within a Western Australian context, quality standard systems exist for health, alcohol and other drug, mental health, disability, aged care, early childhood and community housing sectors. However, apart from national perpetrator intervention Men's Behaviour Change Program standards, the WA family and domestic violence sector has no equivalent quality standards system to guide its practice - despite it being an area of work with demonstrated high risk.

The states with voluntary codes of practice for specialist family and domestic violence services have focused on specialist services that respond to women and children experiencing family and domestic violence and are not specific for perpetrator intervention services. This may be due to the different authorising bodies for perpetrator intervention response i.e., Justice, Police and Child Protection within each state.

Introducing and implementing existing practice standards (e.g. Victoria and NSW codes) in Western Australia is not a viable option. Western Australia requires a code that reflects its unique context and is co-designed with specialist family and domestic violence services. Developing a code of practice with specialist family and domestic violence services will ensure the Code reflects the diversity of service models, provides considerations for the

implication of responses to perpetrators and how they intersect with the Code, and increase sector ownership and buy-in for the Code through a continuous quality improvement process

Background

This review provides a national glance of current quality assurance (QA) and quality improvement (QI) schemes for family and domestic violence services in Western Australia, Queensland, New South Wales, Victoria and South Australia. Information was not found on schemes in Tasmania or the ACT. In the Northern Territory, a set of practice principles has been developed as part of a research project, but there does not appear to be any formal endorsement of these principles to date.

In addition to quality standard schemes relating to family and domestic violence services, a range of quality improvement and assurance schemes in other Western Australian community based sectors (mental health, alcohol and other drug, disability, housing) were reviewed, each showing a different approach. This comparison highlights the significance of WA specialist family and domestic violence sector underdevelopment in quality assurance and improvement processes and the need for prioritisation.

Why develop a code of practice?

As peak bodies for specialist family and domestic violence services and victim-survivors, both CWSW and SFV have a responsibility to advocate for the evidence on family and domestic violence to be taken up in practice and also in policy to enhance victim-survivors access to quality, best practice family and domestic violence services and improve their safety and wellbeing outcomes.

An inconsistency in service quality and evidence-based practice across the State means that currently victim-survivors may or may not access a quality good/best practice family and domestic violence service and may or may not have their safety and health and wellbeing needs met.

Apart from Tasmania and ACT, Western Australia is the only state without a quality assurance and improvement system for specialist family and domestic violence services (Appendix 1). Queensland, New South Wales, Victoria and South Australia have a human services quality framework that applies to all community sector organisations. In addition, Victoria and NSW have voluntary Codes designed specifically for specialist family and domestic violence services.

The impact of implementing industry specific Codes and Guidelines designed by specialist family and domestic violence services for Victim Survivors has provided essential industry resources and guides to inform service design and continuous quality improvement. The state specific guides allows both the Victoria and NSW sectors to translate their specific Codes into their own service settings. Each Code articulates principles and standards to guide consistent quality service provision for victim survivors accessing specialist family violence services. The development of these Codes used a range of research processes, including

participatory consultation with specialist family violence service leaders and practitioners, government and sector partners, and victim survivor advisers. Both Codes are founded on frameworks that are underpinned by evidence-based understanding of family and domestic violence as a gendered issue, intersectional feminism, and underpinned by supporting frameworks such as human rights, social justice, anti-oppressive practice and a trauma and violence informed approach.

In providing specialist family and domestic violence codes and practice guidelines, the sector:

- prioritises the importance for the service system to align through a set of shared principles and standards to guide consistent quality service provision for adult and child victim survivors and it ensures each service pivots to perpetrator behaviour patterns as the cause of harm.
- sets a standard of support towards continuous quality improvement that enables consistent, inclusive, safe and accountable service design and delivery.
- recognises and resources the development of sector professionals by naming competency, accountability and continuous improvement requirements through practitioner skill and training, monitoring and evaluating practice, consistent inducting of new workers and embedding practices for professional development.
- at an organisational level, governance is required to deliver sustainable, accountable, responsive services whilst ensuring legislative, regulatory and funding compliance.

The alignment of service standards between service providers increases the opportunity for services to enact safety and strengthen the service system response to minimise the impact of family and domestic violence.

Within the WA context, codes of practice or standard systems exist for the alcohol and other drug sector, mental health sector, disability sector, aged care sector, early childhood sector and community housing sector. However, apart from Men's Behaviour Change Program standards, the WA family and domestic violence sector has no equivalent quality system to guide its practice - despite it being an area of work with demonstrated high risk.

The 2022 Women's Report Card priority area for Safety and justice highlights the following risks to Western Australian women:

- WA has the highest rate of reported family and domestic violence-related assault offences against females¹ reported across the states, with 1,254 assaults reported to police per 100,000 females in 2021¹. Northern Territory is reported the highest rates in 2021 nationally sitting at 3.727 per 100,000 females.
- 48 per cent (28 victims) of homicide and related offences (including murder, attempted murder and manslaughter) in Western Australia were related to family and domestic violence. Of this, 19 victims were female.²

¹ Australian Bureau of Statistics. (2022). Recorded Crime – Victims, 2021. <https://www.abs.gov.au/statistics/people/crime-and-justice/recorded-crime-victims/latest-release>

² Australian Bureau of Statistics. (2020). Recorded Crime

- The hospitalisation rate of adult women with injuries related to family and domestic violence in WA in 2021 was 11.1 per 10,000 (a count of 1,158).³
 - Intimate partners are responsible for almost 80 per cent of the hospitalisations of women from domestic violence in WA, with 20 per cent of perpetrators being other family members.
 - Aboriginal and Torres Strait Islander women account for 68 per cent of hospitalisations the highest since 2005 (72.1%).
- Women were victims of 3,957 cases of a breach of violence restraining order reported to WA Police in 2020-21.⁴
- Of the 15,486 women supported by specialist homelessness services in WA, 51.5 per cent sought assistance because of experiences of domestic violence.⁵

The lack of a WA specific industry code of practice for specialist family and domestic violence services has a number of flow on effects:

- Service standards are not consistent, some examples include:
 - use of common risk assessment and risk management frameworks;
 - information sharing and confidentiality;
 - staff training and development.
- Some services perform poorly and may potentially cause harm.
 - Untrained staff lacking trauma and violence informed knowledge and skills increasing the likelihood of victim blaming, retraumatising victim survivors and minimising perpetrator patterned behaviours.
- Specialist family and domestic violence services across the State do not consistently reflect or promote culturally safe practices.
 - Service modelling and lack of staff development in culturally safe practices impacts on Aboriginal and Torres Strait Islander women and children who account for almost 70% of hospitalisations across the state.
- Performance reporting doesn't match appropriately with funding agreements, nor with service delivery output.
 - Standard requirements and outputs are variable to the funding body i.e., Department of Communities has one set of standards, Department of Health another and Grant funding through Premier and Cabinet has another.
- Lack of standards means that individual services need to create their own standards and practices, which is challenging and time consuming, especially for smaller, new or unsupported services.
 - This is time consuming for services who are resource poor. This siloed approach continues to result in inconsistent standards across the sector.

³ Government of Australia, Department of Health. (2022). Unpublished and Customised Data

⁴ Western Australia Police Force (2022). Unpublished and Customised Data. Government of Western Australia.

⁵ Government of Australia, Australian Institute of Health and Welfare. (2019). *Specialist Homelessness Services annual report 2020-21*. Government of Australia <https://www.aihw.gov.au/reports/homelessness-services/specialist-homelessness-services-annual-report/data>

- A lack of standards results in inadequate resources and training for staff, which poses risk to victim-survivors and staff.
 - staff training and development is inconsistent and differs in knowledge and skill development;
 - practitioner supervision quality and frequency variation, some practitioners receiving little or no clinical supervision to gain support and reflect on their practice;
 - increased risk of staff burnout and vicarious trauma
- A lack of shared standards hinders the identification of good practice in the sector and ways of building upon service strengths.

Introducing and implementing existing practice standards (e.g., Victoria and NSW Codes) in WA is not directly relevant because each jurisdiction has distinct structural considerations in terms of resources and systems.

Victoria's family violence reform includes implementing and funding all 227 recommendations from the Royal Commission into Family Violence. The Commission's 227 recommendations are directed at improving the foundations of the current system, seizing opportunities to transform the way that they respond to family violence, and building the structures that will guide and oversee a long-term reform program that deals with all aspects of family violence.

In 2016, the NSW government released the Blueprint for the Domestic and Family Violence Response in NSW (the blueprint). This was followed in 2017 with a review of its system design through the Domestic and Family Violence Service System Redesign: Recommendations Paper. The 21 recommendations to improve the capacity and capability of the DFV service system to deliver and this was supported through an implementation plan. A key finding of the redesign found that the DFV service system is faced with responding to a highly complex issue, one that is closely linked with many other social issues, such as child protection, homelessness, mental illness and drug and alcohol use. An ongoing challenge is the limited evidence on what works to prevent and respond to domestic and family violence in Australia and internationally. This means successful implementation of reforms to the domestic and family violence system will require a coordinated commitment from many government agencies, combined with regular assessment of emerging evidence on what works.⁶

Western Australia has its unique structural system as well as its geographical context as the largest state in the nation. The WA Code development is timely with the Department of Communities working with the sector to progress the commissioning of family and domestic violence services. The commission project is proceeding in two phases: the phase one focus included refuge and safe house funding and sustainability and phase two focus is towards

⁶ NSW Government (2017). *Domestic and family violence service system redesign: Recommendations paper*. Women NSW.

developing a strategic commission plan for all family and domestic violence services funded by the Department of Communities.

Another unique state consideration for the Code of Practice is WA's geographical challenges due to distance across regional, rural and remote communities, including a lack of essential services infrastructure and accessibility to over 140 remote communities. Digital connectivity across WA is critical for service access and delivery.

The landscape of WA contributes to victim survivor isolation by providing challenges enacting safety planning, safe housing and access to community support networks. For children, poor access to educational and development support services are barriers that reduce the opportunities for child victim survivor health and wellbeing assessments and receiving appropriate support.

Developing the infrastructure requires locally led action. When 'outsiders' fly or drive into communities, it takes a long time to foster community relationships and acceptance. Community acceptance is critical in building trust to work alongside local leaders to address family and domestic violence. The regional remoteness reduces the likelihood of locally based specialist professionals, and there are ongoing difficulties in recruiting and retaining staff. When considering perpetrator accountability, there is a lack of opportunities to assess risk and monitor perpetrators behaviours as well as maximise opportunities to disrupt unsafe behaviours through specialist intervention.

the existing practice standards (e.g., Victoria and NSW Codes) are not an immediate fit and need to be codesigned with specialist family and domestic violence services in Western Australia. The co-design of a WA specific Code will ensure the Code reflects the diversity of service models and increase sector ownership and buy-in.

Current Australian quality standards in family and domestic violence services

Western Australia – Quality standards in context

Western Australia has limited-service standards and guidelines to support specialist family and domestic violence services. These include:

- WA Practice Guidelines: Women and Children's Family and Domestic Violence Counselling and Support Programs
- WA Good Practice Guidelines for Working with Children and Young People in Refuges
- WA Code of Practice for Refuges
- WA Practice Standards for Perpetrator Intervention: Engaging and Responding to Men who are Perpetrators of Family and Domestic Violence

In addition, many of the state’s residential family and domestic violence services operate under homelessness funding therefore specialist homelessness service standards apply. However, homelessness standards are not family and domestic violence specific and lack the specific evidence-base required to support specialist family and domestic violence residential service delivery.

There are 14 Specialist Homelessness Services (SHS) Standards that sit under five overarching themes. See figure 1.

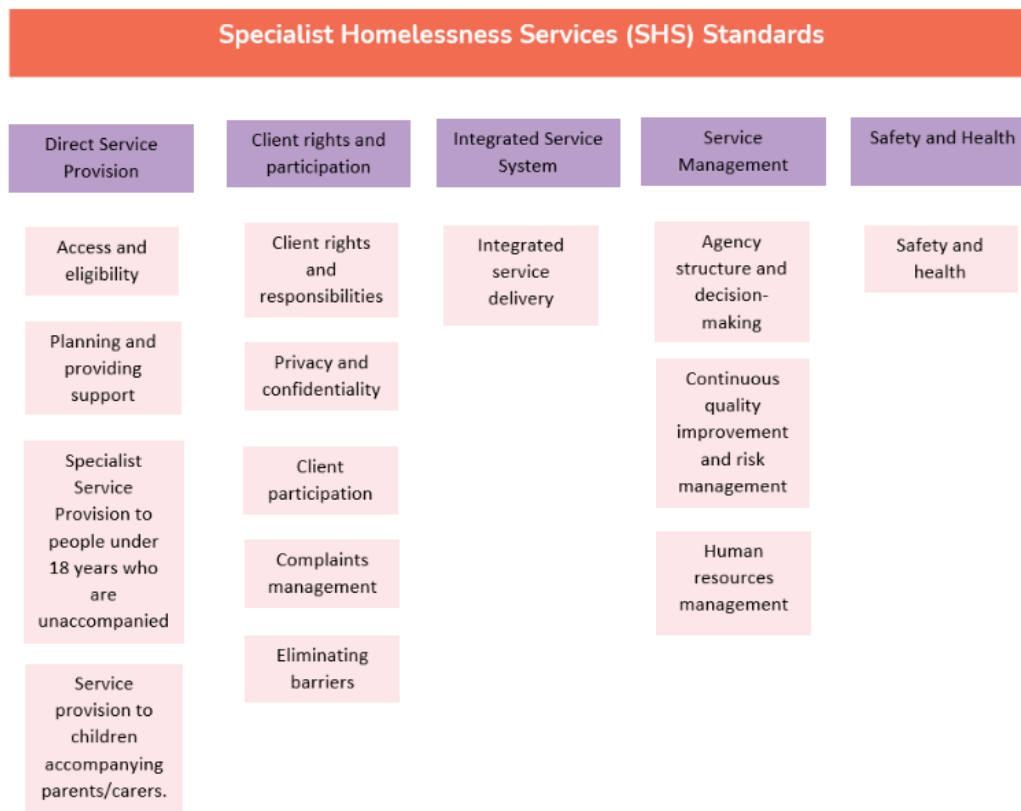


Figure1: Adapted from Western Australia Specialist Homelessness Service (SHS) Standards (2016).

Meeting the SHS standards is assessed by contract managers at the time of a service review. Where an agency does not meet the SHS Standards, the agency will be required to develop an action plan to improve the quality of the service. However, the missing piece in these services standards is the specialist family and domestic violence knowledge, skills and frameworks. For example, what does access, and eligibility look like for an adult and child victim survivor entering supported accommodation? Where is risk assessment and safety planning under planning and providing support? Absent also is trauma and violence informed lens; the gendered and intersectional feminist frameworks; and perpetrator accountability.

The National Principles for Child Safe Organisations has been endorsed at a Commonwealth level with regulation of the principles occurring at a state level. In Western Australia, the Department of Premier and Cabinet is the lead body regarding regulation, whilst the Department of Communities has a role in supporting implementation. At some stage,

organisations supporting children and young people will need to demonstrate implementation towards National Principles for Child Safe organisations. It is envisioned the Western Australian Code of Practice principles and standards may correlate to several Child Safe principles and indicators, therefore enabling specialist family and domestic violence services supporting children and young people to evidence some requirements within the Code of Practice and Child Safe principles and indicators.

Specialist Family and Domestic Violence Services

Western Australia currently has the following Practice Guidelines to support specialist family and domestic violence services. The key support guidelines focus on Women and Childrens family and domestic violence counselling programs, and perpetrator interventions. There are gaps in guidelines and standards for all other specialist family and domestic violence services. A summary of WA’s guidelines and minimum standards are below.

WA Practice Guidelines: Women and Children’s Family and Domestic Violence Counselling and Support Programs

In 2013, the Department for Child Protection and Family Support, adapted the Victorian *Practice Guidelines: Women and Children's Family and Domestic Violence Counselling and Support Programs* for the WA context. The guidelines can be both a voluntary standard or required to be met as part of the funding contract. See figure 2.



Figure 2: Adapted from WA Practice Guidelines: Women and Children’s Family and Domestic Violence Counselling and Support Programs

WA Good Practice Guidelines for Working with Children and Young People in Refuges

In 2014, the Women’s Council for Domestic and Family Violence Services (WCDFVS) developed the *Good Practice Guidelines for Working with Children and Young People in Refuges*. The Code is voluntary and there is no external quality assurance mechanism. The practice guidelines include eight areas of practice. See figure 3.

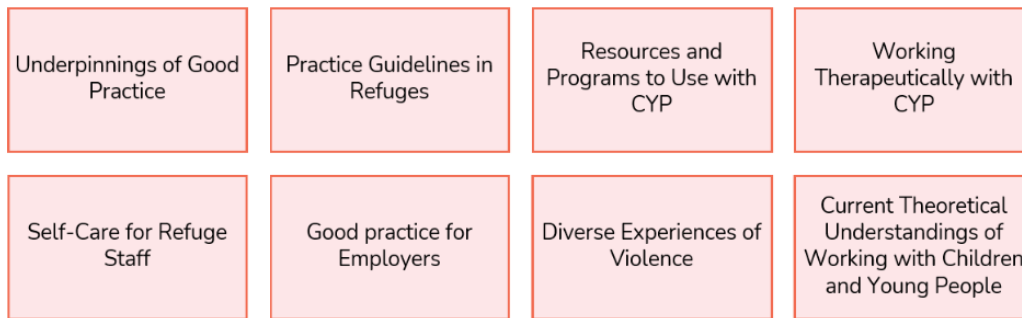


Figure 3: Adapted from WA Good Practice Guidelines for Working with Children and Young People in Refuges.

WA Code of Practice for Refuges

In 2015, the Women’s Council for Domestic and Family Violence Services developed the Code of Practice for Women’s Refuges in Western Australia. The Code is a requirement of funding contracts with the Department of Communities. The Code focuses on four overarching sections, further defined with subcategories and each with a set of minimum standards. See figure 4.

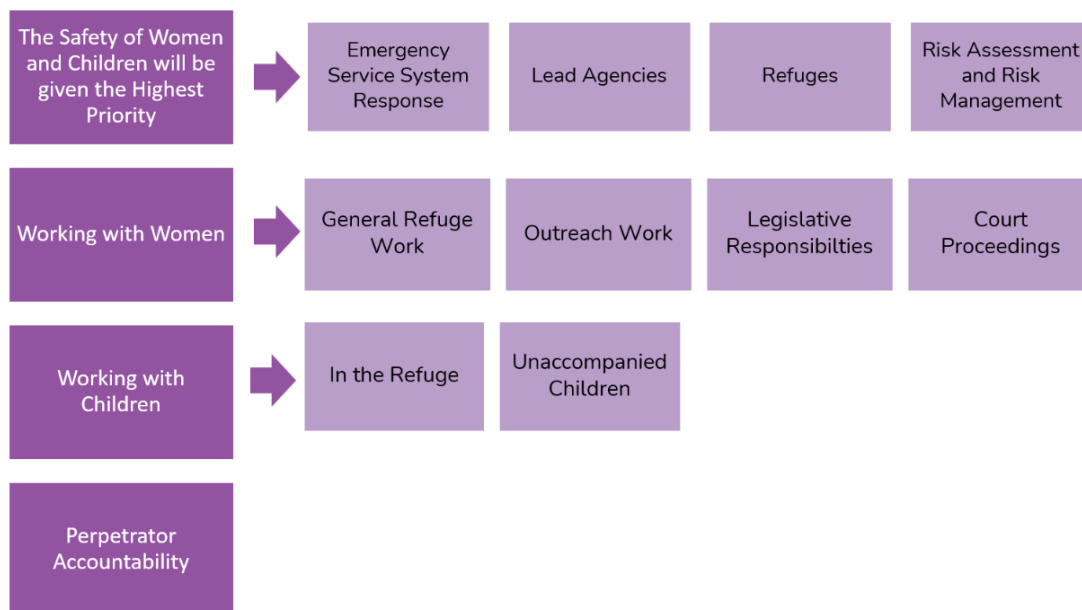


Figure 4: Adapted from the WA Code of Practice for Refuges

Perpetrator Intervention

WA Practice Standards for Perpetrator Intervention: Engaging and Responding to Men who are Perpetrators of Family and Domestic Violence

In 2015, the Department for Child Protection and Family Support, in partnership with Stopping Family Violence established the Practice Standards for Perpetrator Interventions in Western Australia. The State based minimum standards were aligned to the National Outcome Standards for Perpetrator Interventions (NOSPI). See figure 5.

The purpose of the practice standards is to support agencies and organisations to provide a response to men using violence that holds them accountable and provides opportunity for them to take responsibility for their behaviour.⁷ There are two focus areas of the Practice Standards:

1. Minimum standards for men’s family and domestic violence behaviour change programs. The minimum standards establish the key components of program governance, design, delivery and review/evaluation that all men’s behaviour change program (MBCP) must adhere to. Although the minimum standards is a requirement for funding contracts, it is self-assessed and at current has no authorising body or accreditation system requiring MBCP for ongoing monitoring of these standards.
2. Outcome standards for perpetrator intervention. The outcome standards establish the overarching standards of best practice necessary for leading effective work towards safety for women and children. These standards apply to all aspects of the service system including legislation, strategic and operational policy, procurement processes and service provision.

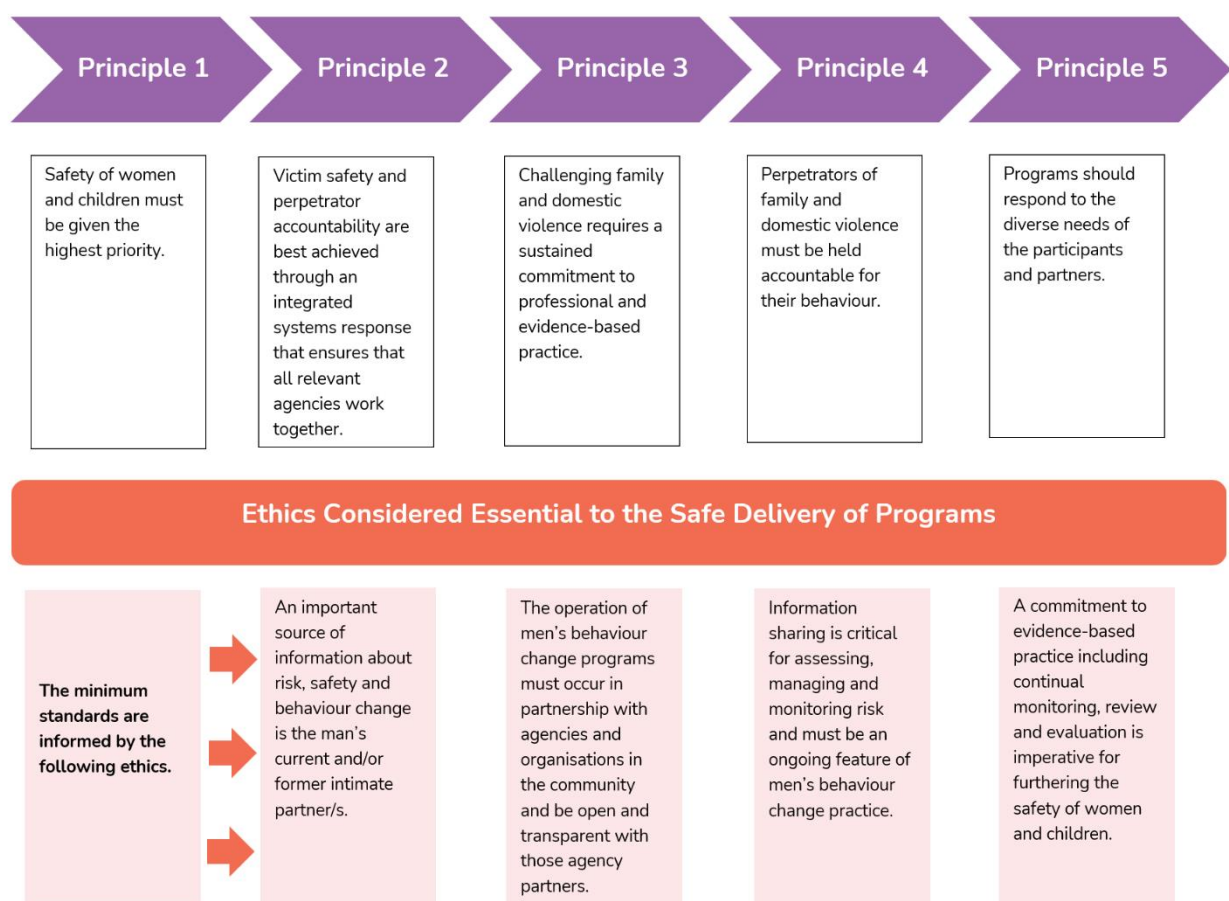


Figure 5: Adapted from WA Practice Standards for Perpetrator Interventions

⁷ Department for Child Protection and Family Support (2015). *Practice Standards for Perpetrator Intervention: Engaging and Responding to Men who are Perpetrators of Family and Domestic Violence*, Perth Western Australia: Western Australian Government

National examples of family and domestic violence quality assurance

Queensland, New South Wales, Victoria and South Australia all have (or are transitioning to) some form of *Human Service Standards (HSS)* or quality frameworks which funded organisations are required to meet. These standards/frameworks are generic and not family and domestic violence specific.

In Victoria, the HSS program enables the standards and independent review process to be used in four service areas:

- Child Protection and Family Services;
- Family Violence Service Delivery;
- Housing Assistance; and
- Disability Services

Service providers that meet HSS must also achieve and maintain certification in relation to governance standards, including:

- National Standards for Disability Service (NSDS);
- ISO 9001 – Quality Management System – Requirements (ISO 9001);
- National Safety and Quality in Health Service Standards (NSQHS).

In Queensland, New South Wales, Victoria and South Australia certification is mandatory and requires a form of external accreditation by an approved accrediting body. The cost of external assessment is borne by the agency, although support grants are available in NSW and SA for small organisations. In all these jurisdictions there is a clear distinction between contract management and quality assurance processes. Contract managers do not assess standards requirements.

The South Australian standard, the *Australian Service Excellence Standards (ASES)*, is arguably the most formalised standard, having achieved international accreditation with the International Society for Quality in Health Care External Evaluation Association. ASES is available nationally to any non-government organisations (for example, Linkwest is accredited under ASES). All South Australian agencies in ongoing funding contracts need to achieve certificate/award or accreditation against ASES or an equivalent standards scheme.

NSW is transitioning to the ASES scheme and from 30 June 2024, funded NSW homelessness providers will need to hold a minimum of certificate level accreditation against the Australian Service Excellence Standards or equivalent. If a domestic and family violence service is not a homelessness service (e.g. case management), there is not yet any requirement to meet the ASES.

In addition to the above mandatory human service standards, Victoria has the voluntary *Code of Practice: Principles and Standards for Specialist Family Violence Services for Victim-Survivors (2nd ed)*, developed by Domestic Violence Victoria (now Safe and Equal). Whilst

the peak body is the 'owner' of the Code, it does not provide any regulation or accreditation of the Code.

Domestic Violence NSW (DVNSW) has developed a similar family and domestic violence specific guide: *Good Practice Guidelines for the Domestic and Family Violence Sector in NSW (2nd ed)*. The second edition completed in 2022, has a stronger focus on intersectionality and separated the principles for what is necessary for services and what is necessary for individual practitioners.

As with the Victorian Code, the NSW Guidelines are a non-mandatory, self-assessed guide to quality practice, although commitment to the Guidelines is a pre-condition of specialist services joining DVNSW. DVNSW does not undertake any certifications against the Guidelines. DVNSW is currently working with the NSW Department of Communities and Justice to explore mandatory family and domestic violence standards.

South Australia doesn't have any family and domestic violence sector-wide code of practice or standards. However, this is an initiative that the peak body, Embolden, is currently exploring. Services may have their own service-level practice guidelines or standards (for example, Women's Safety Services SA has their own service guidelines). The AWAVA *Good Practice Principles in Addressing Sexual and Gender-Based Violence* are an endorsed resource, but implementation of this isn't monitored or mandatory.

Queensland has gone the furthest in relation to mandatory domestic and family violence standards. As of 1 January 2021, the *Domestic and Family Violence Services Practice Principles, Standards and Guidance* came into effect. All funded services will be assessed against the new DFV-specific criteria in their next scheduled (and future) Human Services Quality Framework audits. Domestic and family violence services seeking certification or re-certification under the HSQF must demonstrate all common requirements for all indicators as outlined in the HSQF user guide, as well the new domestic and family violence standards. The revised practice standards bring together all domestic and family violence service types under one consolidated set of standards, replacing the two existing sets of standards: *Practice Standards for Working with Women Affected by Domestic and Family Violence*; and *Professional Practice Standards: Working with men who perpetrate domestic and family violence*. Queensland is the only state addressing standards for victim-survivors and perpetrators in one set of standards.

Northern Territory in 2019, brought stakeholders from specialist and non-specialist agencies working in domestic, family and sexual violence sector to identify principles of good practice and developed *Hopeful, Together, Strong: Principles of good practice to prevent violence against women in the Northern Territory*. The principles and indicators outlined in this report are vital to ensure organisations, programs, and staff working in specialist and non-specialist domestic, family and sexual violence services are working from a shared understanding and

united approach in order to prevent violence against women in the Northern Territory⁸. This report is an endorsed resource, but implementation of this isn't monitored or mandatory.

National comparison of code of practice and specific FDV/DFV service principles.

In a national comparison of specialist domestic and family violence service principles. It is noted some principles/focus areas are highlighted as a standalone principle with specific standards, other principle areas are combined and addressed within one principle or identified as a standard. Where there are similarities, the language within the principle or standard may have variation. See table 1.

| Principle/Area of Focus | NSW | VIC | QLD | NT |
|--|-----|--------------------------------|-----|--|
| Rights, Safety and Dignity of Victim-Survivors | ✓ | ✓ | ✓ | ✓ |
| Knowledge of domestic and family violence | ✓ | ✓ In Foundational Framework | ✓ | ✓ |
| Evidence-Informed | ✓ | ✓ | ✓ | ✓ |
| Perpetrators Accountability/DFV Informed | ✓ | ✓ | ✓ | ✓ |
| Culturally safe for Aboriginal and Torres Strait Islander people | ✓ | ✓ | ✓ | ✓ |
| Client-centred/Person-centred/Strengths-based/Holistic | ✓ | ✓ | ✓ | ✓ |
| Community Driven | X | X | X | ✓ |
| Child-centred practice | ✓ | ✓ | X | ✓ |
| Collaboration and Integration | ✓ | ✓ | ✓ | ✓ |
| Inclusion, Equity and Accessible | ✓ | ✓ | ✓ | ✓ |
| Risk Assessment, Management and Safety Planning | ✓ | ✓ | ✓ | |
| Capable and Sustainable Workforce | ✓ | ✓ | ✓ | ✓ |
| Quality Governance, Leadership & Continuous improvement | ✓ | ✓ | X | ✓ Combined with the Sustainable principle |
| Trauma and Violence Informed | ✓ | ✓ In Foundational Framework | ✓ | ✓ |
| Confidentiality and Information Management | ✓ | ✓ | ✓ | References to information sharing to support integrated responses only |
| Prevention and Early Intervention/Educational | ✓ | X | X | ✓ |

Table 1: National comparison of specialist domestic and family violence service principles.

Examples from other community-based sectors.

Under the NDIS, registered providers must show compliance with the *NDIS Practice Standards and Quality Indicators*. The NDIS standards consist of a core module and supplementary modules that apply depending on the types of services and organisational

structure. The standards are assessed by NDIS Quality and Safeguards Commission approved quality auditors.

In Aged Care, the *Aged Care Quality Standards* apply. Unlike the NDIS scheme where registration of providers is separated from accreditation, the Aged Care Quality and Safety Commission both approves providers and accredits residential services against the standards.

The National Accreditation Scheme is an industry-based certification process for community legal centres (CLCs). CLCs that are full members of their State and Territory CLC Association are required to participate in the scheme. Assessment for accreditation is done through the state associations. This is the only example found in the research so far where a peak body has a specific role in assessment and accreditation (which some argue is a conflict of interest).

Community housing providers must demonstrate compliance against the *National Regulatory Code* for the National Regulatory System for Community Housing (NRSCH). The NRSCH is a legislative based regulatory system applied across Australia, with the exception of Western Australia and Victoria where state based regulatory systems are consistent with the NRSCH. The Community Housing Registrar within the Department of Communities has oversight of WA's regulatory system. This is an example of where the regulator is placed within the funding body (which some argue is a conflict of interest).

Under the National Quality Framework for Drug and Alcohol Treatment Services, agencies are required to obtain accreditation with at least one of eight approved accreditation standards to be compliant with the National Quality Framework. Accreditation is obtained (and maintained) through a recognised certification body.

One of the approved Drug and Alcohol Treatment accreditation standards is the Western Australian Network of Alcohol and other Drug Agencies (WANADA) *Alcohol and other Drug and Human Services Standard*. The WANADA standard is the only one of the approved standards that is AOD specific. The WANADA example is one where a standard has been developed by a peak body but accreditation is overseen by the Joint Accreditation System of Australia and New Zealand (JAS-ANZ). JAS-ANZ, does not certify organisations as such. Their role is to accredit the bodies that undertake external assessment and certification. JAS-ANZ also provides a framework for the management of schemes on behalf of scheme owners. Schemes are made up of one or more standards. The WANADA standard is in its third iteration. The first version was voluntary and intended to introduce quality improvement to the sector. It was in the second iteration, *Standard on Culturally Secure Practice (Alcohol and other Drug Sector)*, that external certification was introduced. Most Western Australian services use the WANADA standard for compliance with the National Quality Framework. WANADA demonstrates its own commitment to quality improvement through maintaining accreditation against ISO9001: *Quality Management Systems*.

Non-government mental health service providers are required to be accredited against the *National Standards for Mental Health Services* (NSMHS) through a recognised certification body. Western Australian services are also expected to align their practices with the six

Mental Health Outcome (MHO) Statements developed by the Mental Health Commission. Although accreditation against the MHO Statements is no longer required, they still form part of the service agreement. The MHO Statements also align with the requirements of the NSMHS.

The *National Safety and Quality Primary and Community Healthcare Standards* have been developed by the Australian Commission on Safety and Quality in Health Care. The Commission has aligned the Primary and Community Healthcare Standards to the National Safety and Quality Health Service Standards, which are implemented in all Australian hospitals and day procedure services. The Primary and Community Healthcare Standards are voluntary, however, healthcare services may be required to become accredited to the standards to satisfy regulatory, contractual or funding obligations. The Commission is developing an assessment model for healthcare services to become accredited to the Primary and Community Healthcare Standards under the Australian Health Service Safety and Quality Accreditation (AHSSQA) Scheme. Accreditation is expected to commence from mid-2022.

Summary

In summary, the Western Australia family and domestic violence sector has a significantly underdeveloped quality improvement and quality assurance process compared to Queensland, New South Wales, Victoria and South Australia. Quality standards are also less developed when comparing the family and domestic violence sector to other community-based sectors.

Whilst funded family and domestic violence services in Queensland, New South Wales, Victoria and South Australia are required to meet generic human service standards, Queensland is the only jurisdiction to introduce mandatory family and domestic violence specific standards. However, family and domestic violence peak bodies in the other three states are all exploring the development of some form of mandatory family and domestic violence quality standards or practice guides and NSW expressed support for a national approach to standard development.

There is an overall trend to separating quality accreditation from contract management, with an emphasis on external certification from approved accrediting bodies. Cost of accreditation is borne by the agencies, although financial assistance is available in some cases.

Examples reviewed found that although peak bodies have played a strong role in quality standard development, they do not play a role in certification or implementation oversight, with the exception of Community Legal WA. However, all family and domestic violence peak bodies spoke about having a role in building capacity and promoting good practice.

The audit tool that accompanies Safe and Equal's Code of Practice shows how the Code complements the Department of Health and Human Services Standards and the Community Services Quality Governance Framework. The Code is not intended to replace these essential resources.

Family and domestic violence industry codes of practice aim to assist specialist family and domestic violence services to use the Code alongside other government resources to provide high-quality family and domestic violence services to the community. It is understood that the complements between the Code and these resources may also assist services to prepare for accreditation processes. Government departments with responsibilities for funding and contracting specialist family and domestic violence services can support implementation of the Code by inserting it into service contracts and using it to inform service models, capacity building, evaluation and regulation.

With an industry code of practice for specialist family and domestic violence services in Western Australia there will continue to be a range of essential legislative and policy frameworks that inform specialist family and domestic violence service provision.

It is important that people and services working to respond to family and domestic violence understand foundational frameworks and strategies that are either legislated or embedded as key system enablers to facilitate consistent, safe and quality responses to family and domestic violence in the community.

Appendix 1: Cross sector comparisons of quality standards

The following table summarises specialist family and domestic violence quality standards in other jurisdictions and standards operating in other Western Australian community service sectors.

| Jurisdiction | Sector | Lead Agency | Practice Standard |
|------------------------------------|-----------------------|---|---|
| Gendered violence standards | | | |
| National | Gender based violence | The Australian Women Against Violence Alliance (AWAVA) | Good Practice Principles in Addressing Sexual and Gender-Based Violence |
| National | Sexual Violence | National Association of Services Against Sexual Violence (NASASV) | National Standards of Practice Manual for Sexual Assault Services |
| New South Wales | DFV | DFVNSW | Good Practice Guidelines for the Domestic and Family Violence Sector in NSW (2 nd ed.) |
| Northern Territory | DFV | DFV stakeholders across NT | Hopeful Together Strong: Principles of good practice to prevent violence against women in the Northern Territory |
| Queensland | DFV | Department of Justice and Attorney General | Domestic and family violence services: Practice principles, standards and guidance |
| South Australia | Human Services | Department of Human Services | The Australian Service Excellence Standards (ASES) |
| Victoria | DFV | Safe and Equal | Code of Practice: Principles and Standards for Specialist Family Violence Services for Victim-Survivors (2 nd ed.) |
| Victoria | DFV | Department of Family, Fairness and Housing | Mandatory minimum qualifications for specialist family violence practitioners |
| Western Australia | FDV | Department for Child Protection and Family Support | WA Practice Guidelines: Women and Children's Family and Domestic Violence Counselling and Support Programs |
| Western Australia | FDV | Women's Council for Family and Domestic Violence (WCDFV) | WA Good Practice Guidelines for Working with Children and Young People in Refuges |

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| Western Australia | FDV | Women's Council for Family and Domestic Violence (WCDFV) | WA Code of Practice for Refuges |
| Western Australia | FDV | Department for Child Protection and Family Support | WA Practice Standards for Perpetrator Intervention: Engaging and Responding to Men who are Perpetrators of Family and Domestic Violence |
| Standards in other WA community sectors | | | |
| National | Disability Services | NDIS Quality and Safeguards Commission | NDIS Practice Standards and Quality Indicators |
| National | Health | Australian Commission on Safety and Quality in Health Care | National Safety and Quality Primary and Community Healthcare Standards |
| National | Community Legal Centres | Community Legal Centres Australia | National Accreditation Scheme |
| National | Aged Care | Aged Care Quality and Safety Commission | The Aged Care Quality Standards (Quality Standards) |
| National | Community Housing | Department of Communities | The National Regulatory Code for the National Regulatory System for Community Housing |
| National | Mental Health | Mental Health Commission (in WA) | National Standards for Mental health Services 2010 (NSMHS) |
| National | Alcohol and other Drugs | Mental Health Commission (in WA) | National Quality Framework for Drug and Alcohol Treatment Services |
| Western Australia | Homelessness | Department of Communities | Specialist Homelessness Services Standards Western Australia |
| Western Australia | Alcohol and other Drugs | WANADA | Alcohol and other Drug and Human Services Standard |