

National Service Standards for Domestic and Sexual Violence

Core Standards

Background

The National Service Standards (NSS) began life in 2005 as a project by Women's Aid to develop specific domestic violence standards for Women's Aid member services (as opposed to generic standards like Investors in People or Supporting People Quality Assessment Framework). The intention was to develop Core Standards for all services as well as service specific standards for different specialist functions (See appendix 1 below). As well as national consultation meetings held with local organisations, Women's Aid also established a National Advisory Group with representatives from a range of local and national domestic violence charities and government departments. In the course of the consultation process it became clear that many service providers were delivering a range of domestic *and* sexual violence services and the standards therefore needed to reflect both (see introduction below for definition of domestic and sexual violence) and became the National Service Standards for Domestic and Sexual Violence (NSSDSV).

Following this, and to reflect the move towards a joint strategic response to domestic and sexual violence within government, a working party was set up, with representatives from sexual violence services and supported by the Home Office, to work with Women's Aid to ensure that the Core NSSDSV were appropriate for use within all domestic and sexual violence services. Further work is also underway to develop specific standards for specialist functions where needed.

The Core National Service Standards for Domestic and Sexual Violence (NSSDSV) are in their final stage of consultation until March 31st 2009, after which time, any final amendments will be made. The next stages will include:

- testing out the NSSDSV within some local services;
- agreeing with government how they will form part of the process for commissioning local domestic and sexual violence services;
- providing support to enable local services to meet the requirements of the NSSDSV.

For Women's Aid member services, the NSSDSV form part of a wider quality framework which will also include National Occupational Standards (NOS) and a national accredited training programme that will support both the implementation of the NSSDSV and the NOS (see appendix 2 for model of Quality Services Framework).

Introduction

These standards apply to all organisations that provide domestic and/or sexual violence and abuse services.

The term **domestic and sexual violence** is used throughout and refers to *all* forms of domestic and sexual violence . whether physical, psychological, sexual or financial. Domestic and/or sexual violence and abuse services refers to organisations providing a range of services for survivors/victims of the following: rape, sexual assault and sexual abuse; sexual violence, domestic violence, including forced marriage, and so-called honour-based violence, childhood sexual abuse, female genital mutilation, trafficking and sexual exploitation; ritual abuse and sexual harassment - irrespective of whether the violence is from known or unknown perpetrators.

Each of these forms of abuse can take place in child and adulthood, across a range of relationships and in public and private contexts. They need to be understood at a range of levels: social, community and individual. Victimation and perpetration patterns are gendered, with the majority of victims being female and the majority of perpetrators being male.

Although many services specialise in providing for a particular service user group, all services must have an awareness and knowledge of the links and continuities between these forms of violence in peoples' lived experience, in order to provide an appropriate response to individuals. The specialist service knowledge and expertise may however, be reasonably weighted toward the issues faced by the service user group for which they primarily provide.

Structure of the National Service Standards for Domestic and Sexual Violence

Core Principles

These are the overarching principles that the standards relate to. For example; *Safety, security and dignity*

Outcomes

These are the intended outcomes of the core principles. For example; *Services ensure that all interventions prioritise the safety, security and dignity of service users and staff*

Standards

There are several standards relating to each core principle. These standards describe how the service meets the core principle. For example; *Services ensure that there is a formalised approach to risk assessment and management that takes account of, and is responsive to, the particular risks faced by service users.*

Indicators

These are statements that describe how one would know that the service was meeting the particular standard they refer to. Some of these are concrete and tangible, for example; *There is a procedure for identifying, assessing and managing risk*; others are based on stakeholders experience of the service, for example; *Service users are aware of and engaged in the process of risk assessment.*

Sources of evidence

Some examples are given to assist in sourcing evidence. These sources of evidence might come from agency documents or policies and procedures. They can also be drawn from other sources such as conversations with staff or service users. Evidence is not however limited to those listed and services may have very credible examples as evidence from a variety of other sources. Whatever evidence is presented, the assessor must feel satisfied that it is sufficient and credible to meet the needs of the particular standard.

Notes

Where appropriate, further information is provided here to support the indicators.

Possible sources of evidence (as referred to in Standards below)

Agency documents	Policies and procedures	Other
<p>A1: Accident/Incident book A2: Accounts/budgets A3: Agency definition of domestic and sexual violence A4: Agency presentations/training materials A5: Agency promotional literature A6: Aims and objectives A7: Annual report A8: Appraisal records A9: Articles of Association A20: Assessments A21: Business Plan . Mission Statement A22: Call logs A23: Case notes A24: Code of conduct A25: Communications book A26: Complaints log A27: Correspondence with service users/other agencies A28: Diaries A29: Eligibility criteria A30: Exit interviews (staff and/or service users) A31: Induction records A32: Feedback forms A33: Fire/health and safety check records A34: Information sharing protocols A35: Information held about other agencies A36: Job adverts A37: Job descriptions/Person specifications A38: Minutes of meetings . internal and</p>	<p>B1: Assessment and support planning B2: Child protection B3: Complaints B4: Confidentiality and access to information B5: Consulting and Involving Service Users B6: Data protection B7: Domestic and sexual violence B8: Equal Opportunities and Anti-discriminatory practice B9: Financial controls B10: Grievance and Disciplinary B11: Harassment B12: Health and safety B13: Induction, Training and Development B14: Lone working B15: Media and communications B16: Partnership Working B17: Probationary B18: Protection from abuse/Whistle blowing B19: Record keeping B20: Recruitment B21: Referral B22: Risk assessment and management B23: Supervision and appraisal</p>	<p>C1: Conversations with management, staff and volunteers C2: CRB checks C3: Demographics of local community C4: Demographics of staff team C5: Feedback from service users C6: Feedback from other agencies C7: Fire safety and health and safety certificates C8: Information displayed for service users C9: Information held by the service about rights, entitlements, other services etc. C10: Observations of service delivery C11: Organisational structure C12: Publicity about the service within other mediums C13: Press coverage about the service C14: Promotional activity . visits to groups etc. C15: Security measures C16: Service operating hours C17: Suggestion box C18: The physical environment and equipment C19: Use of interpreters</p>

Agency documents	Policies and procedures	Other
external A39: Newsletters A40: Operational manuals A41: Policy reviews A42: Quality awards A43: Recruitment records A44: Risk assessments A45: Service description A46: Service user handbook/induction information A47: Staff development plans A48: Staff handbook A49: Statement of rights and responsibilities A50: Strategic reviews/Service audits A51: Strategic plans A52: Statistical data A53: Supervision records A54: Support/care plans A55: Training log		

NB: Evidence relating to the support of individual service users should always be anonymised

Core principles underpinning all standards

1. Understanding domestic and sexual violence and its impact

Outcome: Services demonstrate an appropriate and informed approach, relevant to their service users, that recognises and understands the dynamics and impact of domestic and sexual violence, within an equalities and human rights framework.

2. Safety, security and dignity

Outcome: Services ensure that all interventions prioritise the safety, security and dignity of service users and staff

3. Diversity and fair access to services

Outcome: Services respect the diversity of service users and positively engage in anti-discriminatory practice, and service users are supported and assisted to access services on an equitable basis.

4. Advocacy and support

Outcome: Services provide independent institutional/individual advocacy and/or support to promote the needs and rights of service users

5. Empowerment and participation

Outcome: Services promote empowerment and self help to enable service users to take control of their lives and inform the delivery and development of services

6. Confidentiality

Outcome: Services respect and observe service users' right to confidentiality and all service users are informed of situations where that confidentiality may be limited.

7. A co-ordinated multi-agency response

Outcome: Services operate within a context of relevant interagency cooperation, collaboration and coordinated service delivery

8. Challenging social tolerance of domestic and sexual violence and holding perpetrators accountable

Outcome: Services challenge social tolerance of domestic and sexual violence in all aspects of their work and work from the belief that it is preventable.

9. Accountability and Governance

Outcome: Services provide effective management of services so that service users receive a quality service from appropriately skilled staff

CORE STANDARDS RELATING TO ALL SERVICES

1. Understanding domestic and sexual violence and its impact

Outcome: Services demonstrate an appropriate and informed approach, relevant to their service users, that recognises and understands the dynamics and impacts of domestic and sexual violence within an equalities and human rights framework.

Standards:	Indicators:	Possible sources of evidence:
1.1 Services acknowledge and promote the understanding that domestic and sexual violence is unacceptable and a violation of human rights.	1.1.1. There is an agency definition of domestic and sexual violence that is consistent with contemporary Human Rights definitions. 1.1.2. Staff recruitment and inductions ensure that staff understand and promote this approach. 1.1.3. Case notes and information given to service users show that staff take this approach in their work. 1.1.4. Where necessary, staff challenge other agencies constructively when myths or false beliefs about domestic and sexual violence are evident. 1.1.5. Service users are aware that the service takes this approach	A3, A5, A6, A9, B7 A31, A43, B13, B20, C1 A23, A45, A46, A54, B1, C5, C8 A4, A22, A25, A27, B16, C1, C6 C5, C10
Notes: 1.1.1. In 2006, the UN published a summary definition of gender-based violence against women as: <i>"Violence that is directed against a woman, because she is a woman, or violence that affects women disproportionately. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty".</i>		

Standards:	Indicators:	Possible sources of evidence:
<p>1.2 Services recognise that domestic and sexual violence takes place in a range of contexts in which the relationship is characterised by power and control (often based on gender or age) and is underpinned by the perpetrator's sense of entitlement.</p>	<p>1.2.1. There is an agency definition of domestic and/or sexual violence that recognises that</p> <ul style="list-style-type: none"> - It is an abuse of power - It is largely perpetrated by men against women - It is most commonly perpetrated by a known person - Where it is perpetrated within an intimate relationship, it forms a pattern of coercive and controlling behaviour <p>1.2.2 Management and staff can describe the key principles of the agencies definition.</p> <p>1.2.3 Promotional literature about the service promotes the agencies definition.</p> <p>1.2.4 Case notes (where relevant) and/or associated documents show that this definition is reflected in practice with service users.</p>	A3, A5, A6, A9, B7 C1 A5 A20, A23, B1, C5, C10
<p>1.3 Service recognise the links between domestic and sexual violence, violence against women and the abuse and neglect of children and acknowledge the implications of the above for help seeking, service provision, child and adult protection.</p>	<p>1.3.1. Operational policies and procedures address the range of abuse that service users may have experienced.</p> <p>1.3.2. There is a Child Protection and Protection of Vulnerable Adults policy.</p> <p>1.3.3. Staff can describe the links between domestic and sexual violence, violence against women and the abuse and neglect of children.</p> <p>1.3.4. Support and information is offered in relation to the range of abuse a service user and their children may have experienced.</p>	B1, B2, B7, B13, B18, B22 B2, B18 C1 A4, A5, A6, A7, A20, A23, A27, A30, B1, B7, C1, C5, C10

Standards:	Indicators:	Possible sources of evidence:
1.4 Services understand the impact that domestic and/or sexual violence has on service users, the barriers to disclosure, and operate from a position where service users are believed and listened to with respect and dignity.	1.4.1. Services do not require proof that service users have experienced domestic or sexual violence before offering a service. 1.4.2. Personnel files show that staff are experienced in working with those needs most commonly encountered amongst service users. 1.4.3. Staff can describe the impact domestic and sexual violence can have on service users. 1.4.4. Staff can describe the barriers that may prevent service users from seeking help and what steps are taken to minimise these. 1.4.5. Staff can describe their approach in ensuring service users feel listened to and not judged. 1.4.6. Service users state they have felt listened to, respected and not judged.	A5, A20, A23, A27, A29, B1, B7, B21, C1, C5, C6 A8, A36, A37, A43, A47, A55 C1 C1 C1 C5
1.5 Services recognise that the social and cultural identities, needs, experiences and circumstances of individuals will impact on their experience of domestic and sexual violence and this is acknowledged within service planning and provision	1.5.1 Assessment and support planning processes take account of the individual needs and experiences of the service user. 1.5.2 Services adapt their support to meet the individual needs of service users. 1.5.3 Staff induction and training plans address the need to develop staff knowledge in this area.	A20, A23, A54, B1 A20, A23, A27, A30, A38, A44, A54, B1, C1, C5, C10, C16 A8, A31, A47, A55, C1

2. Safety, security and dignity

Outcome: Services ensure that all interventions prioritise the safety, security and dignity of service users and staff

Standards:	Indicators:	Possible sources of evidence:
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Standards:	Indicators:	Possible sources of evidence:
<p>2.1 Services prioritise safety, security and dignity and recognise that service users, their children and other family members, and staff working with them, have a right to be protected from violence and abuse, and will take action in accordance with procedures to ensure this.</p>	<p>2.1.1 Procedures for service users to raise concerns about safety and security are publicly available and accessible.</p> <p>2.1.2 There is written documentation where action is taken to protect individuals from abuse.</p> <p>2.1.3 Decision making always considers and minimises risk factors.</p> <p>2.1.4 Staff can describe procedures for avoiding and responding to actual or suspected neglect or abuse.</p> <p>2.1.5 Staff can demonstrate an understanding of the principle of human dignity and what it means to their roles and responsibilities.</p> <p>2.1.6 Staff are provided with regular support and supervision to ensure concerns regarding their own or others safety can be raised and action agreed.</p> <p>2.1.7 Service users are aware of how they can raise concerns and what action will be taken if they do.</p> <p>2.1.8 There is a lone working policy and procedure and staff can describe how these impact on their practice.</p> <p>2.1.9 Identified risks to staff and/or service users are recorded and acted upon.</p>	<p>A46, A48, B2, B3, B7, B10, B11, B12, B14, B18, B22, C8</p> <p>A1, A23, A25, A26, A27, A33, A38, A44, A53, A54</p> <p>A23, A27, A33, A38, A53, A54, B22, C1, C5, C10</p> <p>C1</p> <p>C1</p> <p>A28, A38, A53, B23, C1</p> <p>A23, A27, A32, A46, C5, C8</p> <p>B14, C1</p> <p>A1, A22, A23, A25, A26, A27, A33, A38, A54, C1, C5</p>
<p>Guidance:</p> <p>2.1.5 The concept of <u>human dignity</u> is used to signify that all human beings are worthy of and deserve unconditional respect, regardless of age, sex, health status, social or ethnic origin, political ideas, religion, or criminal history. If violated, this can be considered discrimination. This intrinsic worthiness is widely recognised by international law as the source of all human rights.</p>		

Standards:	Indicators:	Possible sources of evidence:
<p>2.2 Services ensure the safety and dignity of service users, and enable effective recovery, by providing services that meet gender specific needs.</p>	<p>2.2.1 Services ensure that domestic and sexual violence services for women are provided within a safe, separate, women-centred environment in accordance with women's needs; that there is a women only space that is staffed only by women.</p> <p>2.2.2 Where appropriate, publicity and promotional material explicitly states that the provision of women only and men only services complies with the Gender Equality Duty Code of Practice 2007 (section 2.13)</p> <p>2.2.3 Staff can describe the gendered meaning of interpersonal violence.</p> <p>2.2.4 Staff can describe the reasons a gender sensitive service is required.</p> <p>2.2.5 Staff agree protocols with other professionals to maintain the sensitivity of a women only or men only environment.</p> <p>2.2.6 Where a mixed gender service is provided, service users are able to choose whether to see a male or female worker where possible.</p>	<p>A29, A43, A45, C4, C15, C18</p> <p>A4, A5, A36, C12</p> <p>C1</p> <p>C1</p> <p>A38, A40, B16, C1, C6</p> <p>A5, A23, A40, A46, B1, C1, C5, C12</p>

Notes:

- 2.2.2 The Gender Equality Duty requires public authorities to proactively promote equality of opportunity between men and women and to eliminate unlawful sex discrimination and harassment in all their functions. This can mean providing single sex services where there is evidence that this approach is needed to address inequality and ensure that services are provided in a way that achieves the desired outcomes.
- 2.2.3 Interpersonal violence is mostly commonly experienced by women and men are most commonly the perpetrators of such violence. In this way, domestic and sexual violence by men against women can be seen as a cause and consequence of the inequalities between men and women, rooted in patriarchal traditions that encourage men to believe they are entitled to power and control over women.

Standards:	Indicators:	Possible sources of evidence:
<p>2.3 Services ensure that there is a formalised approach to risk and need assessment and management that takes account of, and is responsive to, the particular risks faced by service users.</p>	<p>2.3.1 There is a procedure for identifying, assessing and managing risk.</p> <p>2.3.2 Services utilise effective risk assessments to identify any immediate risk of harm to service users at the point of referral and, where services are ongoing, follow up with a comprehensive assessment of risks to service users and their children, which is regularly reviewed and support/safety plans updated as appropriate.</p> <p>2.3.3 Where appropriate, the service use an evidence based risk indicator checklist that reflects the risks faced by the service user.</p> <p>2.3.4 Staff can describe the potential risks faced by service users and the process of risk identification, assessment and management.</p> <p>2.3.5 Recruitment and training records show that staff who conduct risk assessments are competent to do so.</p> <p>2.3.6 Services seek information from other agencies to enable effective assessment of risk and contribute to risk assessments conducted by other agencies by providing specialist advice and information as appropriate, and ideally with consent.</p> <p>2.3.7 Service users are aware of and engaged in the process of risk assessment.</p>	<p>B22</p> <p>A20, A23, A44, A54, B1, B22</p> <p>A20, A44, B1, B22</p> <p>C1</p> <p>A8, A31, A36, A37, A43, A55, B13, B20, C2</p> <p>A20, A23, A25, A34, A38, A44, B1, B16, B22, C5, C6</p> <p>A20, A23, A27, A46, B1, B5, B22, C5</p>

Standards:	Indicators:	Possible sources of evidence:
<p>2.4 Services take appropriate action in response to identified risk of harm by providing appropriate information, conducting safety planning with service users and working with other agencies to provide support and advocacy services to manage the risk.</p>	<p>2.4.1 Initial assessments show an appropriate response to immediate identified risk.</p> <p>2.4.2 Where services are ongoing, service interventions show an appropriate response to reducing identified risk.</p> <p>2.4.3 Staff provide information, referral to other services, safety planning and/or support and advocacy as appropriate, in response to identified risk.</p> <p>2.4.4 Interventions are reflective of the full range of appropriate safety options available.</p> <p>2.4.5 Services work with other agencies where appropriate, to improve the management of identified risk.</p> <p>2.4.6 Staff can describe a range of interventions that will reduce risk.</p> <p>2.4.7 Service users are aware of, and engaged in, the process of safety planning.</p>	A1, A20, A23, A25, A44, A54, B1, B22 A1, A20, A23, A25, A44, A54, B1, B22 A23, A25, A27, A38, A44, A54 A23, A27, A38, A54 A23, A25, A27, A34, A35, A38, A54, B16, C6 C1 C5
<p>2.5 Services work from the position that confidentiality and privacy are key to enabling disclosure and the provision of effective support and ensure that all work with service users is conducted in the safest environment possible.</p>	<p>2.5.1 Interview rooms used are considerate of the need for safety and privacy.</p> <p>2.5.2 The environment the service operates within is gender sensitive.</p> <p>2.5.3 There is a protocol in place for providing services to service users in environments that are away from the services base.</p>	C18 A5, A45, C1, C5, C8, C18 A24, A40, A48, B22

3 Diversity and fair access to services

Outcome: Services respect the diversity of service users and positively engage in anti-discriminatory practice, and service users are supported and assisted to access services on an equitable basis.

Standards:	Indicators:	Possible sources of evidence:
<p>3.1 Services recognise that domestic and sexual violence intersects with social inequalities and different service users have different needs and that particular groups may face disadvantage in help seeking and agency responses.</p>	<ul style="list-style-type: none"> 3.1.1 Assessment and support planning processes acknowledge and respond to the individual needs and experiences of service users. 3.1.2 Services demonstrate that they adapt their support to meet the individual needs of service users. 3.1.3 Promotional material and activity demonstrates that the service actively seeks to reach out to marginalised groups. 	<p>A20, A23, A25, A44, A54, B1, B22, C1, C5</p> <p>A23, A25, A54, B1, C1, C5 A4, A5, A21, A45, A52, C8, C12, C14</p>
<p>3.2 Services and staff respect the diversity of service users and positively engage in anti-discriminatory practice.</p>	<ul style="list-style-type: none"> 3.2.1 Services demonstrate that they take all reasonable steps to ensure they are accessible and welcoming to all service users. 3.2.2 Literature is available and publicised in a range of formats and aimed at a diverse range of service users. 3.2.3 Service users can contact the service in several ways depending on their particular need. 3.2.4 Services have a good local knowledge of the demographic profile of their community. 3.2.5 The service considers the needs of service usersq accessibility in terms of financial constraints, childcare, location and opening hours. 3.2.6 The environment within which the service operates is compliant with The Disability Discrimination Act (DDA) 1995. 3.2.7 Services take a positive approach to promoting diversity within their literature, environment and service provision. 3.2.8 Where necessary, service users are able to communicate in their own language. 3.2.9 Case files show that cultural, faith and lifestyle needs are considered and addressed. 3.2.10 Staff development plans address the need to develop anti-discriminatory practice. 	<p>A5, A46, B8, C1, C5, C8, C12, C18</p> <p>A5, A45, B8, C1, C5, C8, C12, C18</p> <p>A5, A22, A27, A46, B2, B8, C1, C5, C8, C12 C1, C3</p> <p>A5, A25, A45, A46, A49, B8, B21, C1, C5, C8, C16, C18, C19</p> <p>C18</p> <p>A4, A5, A21, A23, A27, A38, A39, A40, A42, A45, A46, A54</p> <p>A20, A23, A54, B8, C1, C5, C19</p> <p>A20, A23, A54, B1</p> <p>A8, A31, A53, A55, B13, B23, C1</p>

Standards:	Indicators:	Possible sources of evidence:
	3.2.11 There are procedures in place to prevent and respond to unfair discrimination experienced by staff.	A24, A26, A48, B3, B8, B18, C1

Notes:

3.2.6: The DDA states that it is against the law for service providers to:

- ~ refuse to provide services to disabled people
- ~ provide a lower standard of service to disabled people than to other members of the public
- ~ provide services to disabled people on worse terms than to other members of the public
- ~ fail to make reasonable adjustments, including reasonable adjustments to physical features

Physical features will include steps, stairways, exterior surfaces, doors, gates, toilets, lighting, furniture, signs and so on. Policies, procedures and practices will include, for example, allowing assistance dogs in the premises or formulating a fire evacuation strategy for disabled people. Auxiliary aids may include, for example, providing information on audiotape, providing a portable ramp or training a member of staff in the use of British Sign Language (BSL). It is recommended that you first consider whether any physical features that create a barrier for disabled people can be removed or changed; if this is not possible, then you should consider a way of avoiding the physical feature; and if this is not possible either, then you should provide a reasonable alternative of making the service available to disabled people.

Note that the duty to make reasonable adjustments does not only apply to the built environment . a service provided via a website or over the telephone also needs to address access issues.

Standards:	Indicators:	Possible sources of evidence:
<p>3.3 Services ensure that eligibility criteria are clear and that service users, when attempting to access or when receiving services, will not experience unfair discrimination.</p>	<p>3.3.3 Equalities policies address sex, age, faith, disability, race, nationality and sexuality, as well as inequalities that are not addressed by UK legislation e.g. financial or social status, HIV status etc.</p> <p>3.3.4 Services are aware of and work in accordance with the relevant equalities legislation and organisational policies.</p> <p>3.3.5 Services monitor access to their service to ensure it fairly reflects the demographics of the local community.</p> <p>3.3.6 There are clear processes for reporting concerns in relation to equality issues.</p> <p>3.3.7 Eligibility criteria is publicly available in a range of formats that are clear and concise.</p> <p>3.3.8 Staff can demonstrate that there is a fair prioritisation of referrals.</p> <p>3.3.9 Staff, volunteers and referral organisations are clear about the eligibility criteria and referral procedures.</p> <p>3.3.10 Services do not operate a blanket ban on service users with particular support needs.</p> <p>3.3.11 Where support need cannot be met, records show attempts are made to access other appropriate services.</p> <p>3.3.12 Staff can describe the process for responding to unfair discrimination.</p> <p>3.3.13 Staff can show that unfair prejudice and discrimination is challenged when it arises.</p> <p>3.3.14 Service users are aware of the agencies response to unfair discrimination.</p> <p>3.3.15 Staff, volunteers or trustees who demonstrate behaviour, which discriminates against an individual on any basis, will be subject to appropriate disciplinary procedures.</p>	<p>B8</p> <p>B8</p> <p>A22, A52, B6, B8, B19, B21</p> <p>A26, A46, A48, B3, B8, B10, B11, B18</p> <p>A5, A29, A45, B21, C8, C12</p> <p>A20, A52, B1, B21, C1</p> <p>C1, C6, C12</p> <p>A29, B8, B21, C1, C6</p> <p>A20, A22, A23, A25, A27, A35, A52, B1, B16, B21</p> <p>C1</p> <p>A26, A27, A53, C1</p> <p>A46, C5, C8</p> <p>A26, A38, A53, B3, B8, B10, C1</p>

Standards:	Indicators:	Possible sources of evidence:
Guidance:		
	3.3.4 At a minimum, organisations should ensure they comply with the Human Rights Act 1998, Equal Pay Act 1970, Sex Discrimination Act 1975, Race Relations Act 1976 and Disability Discrimination Act 1995.	
3.4 Services maintain appropriate links with specialist agencies and use multi-agency networks to promote access to services.	3.4.1 Staff can name relevant local agencies and the roles they play. 3.4.2 Staff can demonstrate joint working with and/or referrals to specialist agencies to meet individual need. 3.4.3 The specialist work of other relevant agencies is promoted. 3.4.4 Anyone who does not meet the organisation's criteria to access the service will be supported via signposting to other appropriate organisations. 3.4.5 Staff are knowledgeable about and can facilitate access to support and services provided by other organisations that may meet the need of service users e.g. employment, education. 3.4.6 Up to date information is secured and maintained about other organisations and services both locally and nationally.	C1 A22, A23, A27, A35, A38, A54, B1, B21, C1, C6 A35, C8, C9 A20, A23, A25, A52, B1, B21, C1, C5, C6 A23, A25, A27, A31, A35, A38, A54, B16, C1 A35
3.5 Services recognise the needs of, provide support for, and seek assistance for, service users with insecure immigration status, wherever possible.	3.5.1 Operational policies and procedures identify how the service will respond to service users with insecure immigration status. 3.5.2 Staff can describe what options there are, and steps they will take, to meet the needs of service users with insecure immigration status. 3.5.3 Staff can demonstrate that steps are taken to meet the needs of service users with insecure immigration status.	A29, B1, B2, B7, B8, B22 C1 A20, A23, A25, A27, A38, A54

Outcome: Services provide institutional/individual advocacy and/or support to promote the needs and rights of service users

Standards:	Indicators:	Possible sources of evidence:
<p>4.1 The service provides advocacy and support that is managed and delivered by a specialist domestic and sexual violence service that is structurally independent from statutory organisations.</p>	<p>4.1.1 The service is not part of a statutory organisation . eg. Criminal Justice or Local Authority.</p> <p>4.1.2 The service has an independent Board of Management.</p> <p>4.1.3 Staff providing the service are line managed and supervised within a specialist domestic and sexual violence service.</p> <p>4.1.4 Records show that practice is based on the needs of service users and not other agencies/bodies.</p> <p>4.1.5 Services have clearly stated aims and objectives that refer to individual and institutional advocacy.</p>	<p>A9</p> <p>A9, C11</p> <p>A53, B23, C1, C11</p> <p>A6, A20, A23, A25, A27, A29, A38, A40, B1</p> <p>A6, A21</p>
<p>4.2 Services make use of all relevant legislation and statutory provision in order to enable service users to access their rights and entitlements.</p>	<p>4.2.1 The service holds up to date information about the range of rights and entitlements of their service users.</p> <p>4.2.2 Staff and volunteers are familiar with all relevant legislation and can demonstrate that service users are advised and assisted to utilise the statutory framework for their benefit.</p> <p>4.2.3 Staff know where to access information about service users rights and entitlements that is beyond their knowledge.</p> <p>4.2.4 Relevant staff and volunteers are able to explain the choices sensitively and support services users in making informed choices / decisions in relation to the options available to them.</p> <p>4.2.5 Organisations support service users to speak to and work with law enforcement agencies and to seek compensation through civil or criminal courts if the service user so desires.</p>	<p>A35, C9</p> <p>A23, A25, A27, A37, A38, A43, A54, A55, C1, C9</p> <p>C1</p> <p>C1, C5, C10</p> <p>A22, A23, A27, A38, A46, B1, B7, C1, C5</p>

Standards:	Indicators:	Possible sources of evidence:
<p>4.3 Services ensure there is a formalised approach to advocacy, care and support planning appropriate to and the needs and wishes of the service user.</p>	<p>4.3.1 There is early and periodical assessment of need.</p> <p>4.3.2 Where applicable, there is a formalised process for the allocation of caseload that takes account of the service users particular needs</p> <p>4.3.3 Where applicable, service users have individual support/care plans in response to their identified needs. The plan is outcome focused and shows a clear response to their assessment of need.</p> <p>4.3.4 Support/care plans are regularly reviewed and updated.</p> <p>4.3.5 There is continuity of support and advocacy either by ongoing contact with the same staff (key-working), or through appropriate information sharing with others that maintains safety and confidentiality.</p> <p>4.3.6 Advocacy work undertaken is agreed with the service user and based on her needs and wishes.</p> <p>4.3.7 Withdrawal of services is planned wherever possible and includes referral onto other services where needed.</p>	<p>A20, A23, B1 A38, A40, A53, B1, C1</p> <p>A54, B1</p> <p>A23, A38, A54, B1</p> <p>A23, A25, A34, A54, B1, B4</p> <p>A20, A23, A27, A38, A54, B1, C1, C5</p> <p>A23, A27, A30, A38, A54, B1, B21</p>
<p>4.4 Services work with other relevant agencies in order to maintain and develop effective responses to meet the needs and interests, safety and well being of service users.</p>	<p>4.4.1 Services demonstrate that they carry out institutional advocacy with relevant agencies and that opportunities to improve responses to service users are utilised.</p> <p>4.4.2 Case notes show work with other agencies to meet the range of needs of the service user.</p> <p>4.4.3 The service is an active participant in relevant local fora/partnerships.</p>	<p>A4, A22, A25, A27, A38, B16, C1, C6</p> <p>A23, A54</p> <p>A27, A38, B16, C1</p>

5. Empowerment and participation

Outcome: Services promote empowerment and self help to enable service users to take control of their lives and inform the delivery and development of services

Standards:	Indicators:	Possible sources of evidence:
5.1 Services acknowledge service users life experiences and strengths and draw upon these to inform the delivery of services and promote self help and independence.	<p>5.1.1 Business planning and service development plans demonstrate involvement of service users.</p> <p>5.1.2 Risk assessment and management show a balance of a duty of care with promotion of independence.</p> <p>5.1.3 Case notes and support/care plans show that service users strengths have been identified and self help promoted.</p>	A21, A51 A20, A23, A44, A54, B1, B22 A23, A54
5.2 Services ensure service users are familiar with their rights and entitlements, within the service and externally, and are presented with information and choices to make informed decisions in a supportive environment.	<p>5.2.1 Information about service users rights and entitlements is publicly available in a range of formats.</p> <p>5.2.2 Records show that service users are presented with choices available to them and relevant information to enable them to make informed decisions.</p> <p>5.2.3 Records show an inclusive and empowering approach is taken to support/care planning and delivery.</p> <p>5.2.4 Staff can describe what steps are taken to empower service users in receipt of the service.</p> <p>5.2.5 Services demonstrate that service users have a say in the level of involvement and the style of advocacy and support they want.</p>	A46, A49, C8, C9 A23, A25, A27, A38, A46, A49, A54 A20, A23, A25, A27, A38, A46, A54 C1 A20, A23, A27, A38, A46, A54
5.3 Services provide clear information about the range of services they provide, how to access the service, and about the rights and responsibilities of service users upon accessing the service.	<p>5.3.1 The user group and eligibility criteria are clearly defined and publicised.</p> <p>5.3.2 Service information is publicly displayed and available in a range of formats and is accurate and up-to-date. Publicity and promotional material explicitly states the service that the organisation provides.</p> <p>5.3.3 Service users are informed of their rights and responsibilities upon accessing the service.</p> <p>5.3.4 Other relevant agencies can describe the service provided and how to access it.</p> <p>5.3.5 Service users can describe the service provided and how to access it.</p>	A5, A21, A29, B21, C12 A5, B21, C8, C12 A27, A38, A46, A49, C1, C5, C8 C6 C5

Standards:	Indicators:	Possible sources of evidence:
5.5 Services promote service user involvement in the development, delivery and evaluation of the service, wherever possible.	<p>5.5.1 There is a documented approach to consultation, which makes clear what steps are taken to ensure consultation occurs and is effective.</p> <p>5.5.2 Records show group consultation with service users, either directly or via other services.</p> <p>5.5.3 Services use a range of methods to consult service users to inform the management of services, service delivery, and policy development.</p> <p>5.5.4 The processes for consultation, giving feedback and/or making a complaint are well-publicised and known to staff and service users.</p> <p>5.5.5 Services demonstrate that the needs of service users have been taken into account in designing, planning, delivering and evaluating services.</p> <p>5.5.6 Staff and service users can describe the ways in which service users can influence service delivery, development and evaluation.</p>	A32, A40, A46, A48, B5 A23, A27, A30, A38, A50 A23, A27, A30, A32, A46, B5, C1, C5, C8, C17 A4, A5, A46, C1, C5, C8, C17 A21, A50, A51 C1, C5

6 Confidentiality

Outcome: Services respect and observe service users' right to confidentiality and all service users are informed of situations where that confidentiality may be limited.

Standards:	Indicators:	Possible sources of evidence:
6.1 All service interventions and practice are respectful of the service users right to confidentiality	<p>6.1.1 The service ensures confidentiality at all times. The only exceptions are to :</p> <ul style="list-style-type: none"> - protect the service user, when there is reason to believe that her life, health or freedom is at risk. - protect the safety of others, when there is reason to believe that they may be at risk. <p>6.1.2 There is evidence that any written or spoken communication or other information containing the name of the service user or other identifying</p>	B4 A23, A25, A34, A54, B4, C1, C5

Standards:	Indicators:	Possible sources of evidence:
	<p>information is only be passed on to others with the service user's informed consent.</p> <p>6.1.3 Where information must be shared, services evidence that this is restricted to those with a need to have access to the information and limited to the information they need.</p> <p>6.1.4 Staff can demonstrate full understanding and correct implementation of confidentiality policies and protocols, including third party disclosure.</p> <p>6.1.5 Staff can describe the limits of confidentiality and information sharing.</p> <p>6.1.6 All records are kept locked and secure and are only accessible by authorised persons.</p> <p>6.1.7 Records are not held for longer than is necessary and are disposed of in line with recognised good practice.</p> <p>6.1.8 Service users are aware of their right to have access to information held about them and the process for doing so.</p> <p>6.1.9 Services have a policy and guidance on how staff respond to legal orders requesting confidential information.</p> <p>6.1.10 Service users know about the service approach to confidentiality, data protection and information sharing and what its limits are.</p> <p>6.1.11 There is evidence that, where inappropriate breaches of confidentiality occur, the service takes action in response to this.</p>	<p>A22, A23, A25, A27, A34, A38, A54, C6</p> <p>C1</p> <p>C1</p> <p>B4, B6, B19, C10, C15, C18</p> <p>B6, B19, C1</p> <p>A46, A49, B4, C5, C8</p> <p>B4</p> <p>C5</p> <p>A26, A27, A38, A53, B3, B10, C1</p>
6.2 Services understand and respond to the particular staff and service user needs (in the context of domestic and sexual violence) that	<p>6.2.1 Services take steps to minimise identified risks that could arise from inappropriate information sharing.</p> <p>6.2.2 Where possible, the support is given at a confidential location.</p> <p>6.2.3 Interviews take place in private facilities.</p>	<p>A25, A34, A44, A40, A53, B4, C1</p> <p>A5, C12, C18</p> <p>C18</p>

Standards:	Indicators:	Possible sources of evidence:
may occur in relation to confidentiality.	<p>6.2.4 Services know about the ways in which perpetrators can gain information and advise service users appropriately.</p> <p>6.2.5 Service users understand their role in maintaining the confidentiality and safety of other service users they may be in contact with through services.</p> <p>6.2.6 Support is conducted in a way that protects the anonymity of staff as much as possible.</p> <p>6.2.7 Services proactively challenge breaches of confidentiality in other organisations.</p>	C1 C1 A24, A48, B14, B22, C1 A22, A27, A38, C1, C6
6.3 Services have procedures in place to share both anonymised and case specific information appropriately and safely, including information sharing protocols within a multi-agency framework.	<p>6.3.1 Services provide a statement on confidentiality to partner agencies, setting out the principles governing the sharing of information.</p> <p>6.3.2 Potential disclosures of records are explained at first contact with the service user.</p> <p>6.3.3 Written consent forms are used when sharing information with other agencies.</p> <p>6.3.4 Staff are aware of, and work within, agreed local information sharing protocols that are compatible with these standards.</p>	A4, A5, A27, A34, A38, B4, C12 A22, A23, A27, A38, A46, C1, C5 A23, B4 C1

7. A co-ordinated multi-agency response

Outcome: Services operate within a context of relevant interagency cooperation, collaboration and coordinated service delivery

Standards:	Indicators:	Possible sources of evidence:
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Standards:	Indicators:	Possible sources of evidence:
<p>7.1 Services work as part of safe, consistent multi-agency responses to domestic and sexual violence in order to protect service users, provide appropriate services, and to reduce and prevent domestic and sexual violence.</p>	<p>7.1.1 Up to date information is held about other services that may be relevant to the needs of the service user.</p> <p>7.1.2 Staff are knowledgeable about a range of statutory and voluntary services, understand their roles and responsibilities, and are able to identify and access them to meet the varying needs of service users.</p> <p>7.1.3 Records show that services are proactive in their attempts to work in partnership with other agencies.</p> <p>7.1.4 Services demonstrate that responses are provided within a co-ordinated multi-agency approach as appropriate.</p>	<p>A35, C8, C9</p> <p>C1</p> <p>A20, A22, A23, A25, A27, A34, A38, A54</p> <p>A23, A25, A27, A38, A44, A54, B16, C1, C5, C6</p>
<p>7.2 Services take steps to ensure that, as a specialist domestic and sexual violence provider, they represent the needs of service users within relevant local multi-agency partnership working arrangements.</p>	<p>7.2.1 Services can describe the role of local multi-agency partnership arrangements and their relevance to the domestic and sexual violence sector.</p> <p>7.2.2 There is representation from a specialist domestic and sexual violence provider on relevant local multi-agency partnership arrangements, including: Domestic Violence Fora, Multi-Agency Risk Assessment Conferences (MARACs), Multi Agency Public Protection Arrangements (MAPPA), and Local Safeguarding Children Boards (LSCBs) and other relevant strategic partnerships.</p> <p>7.2.3 Services hold records of the minutes taken at appropriate local multi-agency meetings.</p> <p>7.2.4 Information about the service is provided to other relevant organisations and key professionals.</p>	<p>C1</p> <p>A38</p> <p>A38</p> <p>A5, A27, A39, C12</p>

Standards:	Indicators:	Possible sources of evidence:
<p>7.3 Services promote awareness amongst other statutory and voluntary agencies of domestic and sexual violence and its effects on service users and, where appropriate, develop co-ordinated quality responses.</p>	<p>7.3.1 Information about the service and about domestic and sexual violence is provided to relevant organisations and other key professionals in the community.</p> <p>7.3.2 Key staff are able to present on the work of the organisation.</p> <p>7.3.3 Key staff are able to deliver a training session to other professionals about domestic and/or sexual violence.</p>	<p>A4, A5, A27, A39, C1, C6, C12</p> <p>A4, A37, C1</p> <p>A4, A37, C1</p>

8. Challenging social tolerance of domestic and sexual violence and holding perpetrators accountable

Outcome: Services challenge social tolerance of domestic and sexual violence in all aspects of their work and work from the belief that it is preventable.

Standards:	Indicators:	Possible sources of evidence:
8.1 Services recognise and promote the fact that responsibility for the violence rests with the perpetrator and that perpetrators should be held accountable for their actions.	8.1.1 Services do not work with perpetrators. 8.1.2 Where the service has operational links with a perpetrator programme, there are clear procedures for sharing information and managing risk. 8.1.3 Services do not offer mediation between perpetrator and service user or couple counselling. 8.1.4 Case notes show that staff promote holding perpetrators accountable and do not blame service users for the violence 8.1.5 Work with service users recognises and promotes the fact that responsibility of the violence rests with perpetrators, and encourages a focus on their own and their children's needs, and not that of the perpetrator.	A4, A45, C1 A34, A44, B4, B22 A4, A45, C1 A23 A20, A23, A25, A27, A38, A44, A46, A54, B1, C1, C5, C10
8.2 Services promotes public awareness of the impact of domestic and sexual violence and works to improve societal responses and values to domestic and sexual violence.	8.2.1 The service promotes its own service provision within appropriate public arenas. 8.2.2 The service utilises opportunities to share common themes and issues faced by the service user group. 8.2.3 Services challenge the social tolerance of domestic and sexual violence and address myths or stereotypes about domestic and sexual violence in their own and in other agencies, and the wider community. 8.2.4 Services demonstrate that they raise awareness using different media such as leaflets, Press Releases, letters to politicians, statutory agencies, agenda items in relevant partnership meetings. 8.2.5 The organisation participates in local, regional and national networks (where relevant), and works	A4, A5, A27, A38, A39, C12, C13, C14 A27, A38, C14 A4, A5, A27, A38, A39, , C1, C6, C8, C14 A7, A4, A5, A27, A38, A39, C1, C6, C12, C14 A7, A27, A38

Standards:	Indicators:	Possible sources of evidence:
	<p>collaboratively with other services for social and legislative change to ensure development and implementation of practices for prevention, protection and provision for service users.</p> <p>8.2.6 The Service initiates and participates in research activities and consultations associated with domestic and sexual violence.</p> <p>8.2.7 Services liaise with the local, regional (and where appropriate), national media on issues relating to domestic and sexual violence.</p> <p>8.2.8 Services promote consultation and collaborative work with other domestic and sexual violence agencies to ensure media comment is consistent with the philosophy of their sector/Umbrella Body.</p> <p>8.2.9 The organisation may carry out some or all of the following:</p> <ul style="list-style-type: none"> - Awareness raising presentations/training - Multi-agency working - Schools work - E-bulletins/newsletter - Lobbying/System Advocacy 	<p>A7, A27, A38, B5, C1</p> <p>B15, C13</p> <p>A22, A27, A38, B16, C1</p> <p>A4, A27, A38, A39, A55, C14</p>
8.3 Services models and promote respectful relationships and non-violence in all aspects of their work.	<p>8.3.3 Information is publicly available that promotes the fact that the service takes this approach.</p> <p>8.3.4 Grievance, Disciplinary, Harassment, Child Protection, Protection from Abuse and Whistle blowing policies and procedures are accessible and publicly promoted.</p> <p>8.3.5 Minutes of management and team meetings demonstrate respectful working relationships.</p> <p>8.3.6 Staff supervision records show that staff are able to raise concerns and discuss solutions to ensure that this approach is maintained.</p> <p>8.3.7 Records show that non respectful and violent</p>	<p>A5, A21, C12</p> <p>B2, B10, B11, B18</p> <p>A38</p> <p>A53</p> <p>A23, A25, A27, A38, A53</p>

Standards:	Indicators:	Possible sources of evidence:
	<p>behaviour is challenged when it arises and appropriate action taken.</p> <p>8.3.8 Service users are aware that the service takes this approach.</p>	C5

9. Accountability and Governance

Outcome: Services provide effective management of services so that service users receive a quality service from appropriately skilled staff

Standards:	Indicators:	Possible sources of evidence:
9.1 Services are effectively managed in order to meet their stated mission, values and objectives.	9.1.1 The governing document has clear objectives that specify meeting the needs of and promote the interests of service users. 9.1.2 Minuted, quorate meetings of the governing body take place on a quarterly basis. 9.1.3 The governing body and senior staff can demonstrate that they have the knowledge, skills and experience that their role requires. 9.1.4 The governing body are aware of the duty of care that they collectively and individually take on in relation to the organisation and care of its assets and reputation. 9.1.5 The governing body, staff and volunteers can describe the management structure and can explain their part within it. 9.1.6 The management of services is reflective of the need for gender sensitivity. 9.1.7 The policies and procedures necessary for effective service management and delivery are in place and undergo regular review and updating.	A6, A9, A21 A28, A38 A31, A36, A37, A43, A55, B13, B17, B20 C1 C1, C11 C4 B1 . B23 (inclusive)

Standards:	Indicators:	Possible sources of evidence:
9.2 Services have clear operational structure to ensure that service users receive an appropriate, good quality service.	9.2.1 There are documented lines of accountability and reporting within the service. 9.2.2 The levels of staffing are sufficient to meet the needs of the target service user group. 9.2.3 All operational policies and procedures are available and utilised by staff and trustees. 9.2.4 The service environment meets relevant fire safety and health and safety standards as required by law. 9.2.5 Staff can describe the ways that they assess whether they are meeting the needs of service users. 9.2.6 Service users state that the service meets their needs.	A9, A25, A48, C11 A52, C11 B1 . B23 (inclusive) C1 A1, A33, C7, C18 C1 C5
9.3 Services operate effective financial management to ensure the ongoing sustainability of the service.	9.3.1 The service has an effective financial control system in place with robust accounting systems 9.3.2 The service produces annual accounts and has clear financial audit trails of all activities. 9.3.3 The service has a robust financial planning and budgeting processes that includes fundraising. 9.3.4 Organisations registered as a Charity or Charity Limited by Guarantee meet the associated financial reporting requirements. 9.3.5 The organisations accounts are independently audited. 9.3.6 Business and strategic plans address the longer term financial security of the service.	A2, A40, B9 A2, A7, B9 A2, A21, A50, A51, B9 A7, A9, A27, B9 A2, A7, A27, B9 A21, A51

Standards:	Indicators:	Possible sources of evidence:
<p>9.4 Services ensure the staff providing services are recruited, employed and developed to ensure that they are competent to meet the requirements of specialist domestic and sexual violence service provision.</p>	<p>9.4.1 All volunteers, staff and the governing body are inducted into the work of the organisation and can provide an overview of service provision. Policies are considered in inductions.</p> <p>9.4.2 Records show a rigorous, fair recruitment process.</p> <p>9.4.3 Services ensure that all staff and volunteers are competent and appropriately skilled to deliver services.</p> <p>9.4.4 Records show regular supervision of staff where development needs are discussed.</p> <p>9.4.5 A periodical appraisal takes place where staff training needs are identified and responded to.</p> <p>9.4.6 There are appropriate systems in place to monitor the performance of staff and volunteers and to ensure that the appropriate level of support and supervision is being provided.</p> <p>9.4.7 The service promotes the well being of staff and volunteers and promotes a range of activities intended to create a supportive atmosphere where staff and volunteers can address Vicarious/Secondary Trauma.</p> <p>9.4.8 Enhanced Criminal Record Bureau (CRB) checks are carried out for new staff and periodically.</p>	<p>A31, A53, B13</p> <p>A36, A37, A43, B20, C2 A37, A43, A47, A55, B13, B17, B20</p> <p>A53, B23</p> <p>A8, A47, B13</p> <p>A30, A32, A47, A53, A55, B13, B17, B23, C1</p> <p>A30, A48, A53, B23, C1</p> <p>A43, B20, C2</p>
<p>Guidance:</p> <p>9.4.7 Vicarious/Secondary Trauma can occur when staff are exposed to the trauma of the service users they are supporting and experience a similar traumatic response.</p> <p>9.4.8 An Enhanced CRB check is the highest level of check available to anyone involved in regularly caring for, training, supervising or being in sole charge of children or vulnerable adults. These contain the same information as Standard checks but with the addition of any locally held police force information considered relevant to the job role, by Chief Police Officer(s).</p>		

Standards:	Indicators:	Possible sources of evidence:
9.5 Services operate within transparent internal and external communication and information sharing systems.	<p>9.5.1 Case files demonstrate consistent recording of essential information to enable a consistent, informed response to service users each time they contact the service.</p> <p>9.5.2 The service has clear systems for ensuring that all staff have access to the information they need to do their work.</p> <p>9.5.3 Staff are able to describe the processes of information sharing and exchange that happen within the organisation.</p> <p>9.5.4 Where the service works with service users in public media work, measures for safety and protection are integral to the practice.</p>	A23, A25, A54, B19 A25, A40, A48, B4, C1 C1 B15, B22, C1, C13
9.6 Services utilise effective recording, monitoring and data collection to evidence need, unmet need, outputs and outcomes.	<p>9.6.1 The service monitors and collates data that enables reporting on referrals received, service interventions and the outcomes of service interventions.</p> <p>9.6.2 The service utilises the care and support planning process to identify outcomes achieved appropriate to the needs of the service user.</p> <p>9.6.3 The service contributes to national surveys and data collection relating to domestic and sexual violence.</p>	A25, A52, A54, B19, B21 A23, A54, B1, C1, C5 A27, A34, A52, B4, B6, B16, C1
9.7 The service has transparent and publicised mechanisms for hearing and addressing complaints.	<p>9.7.1 Complaints procedure is accessible and publicly promoted.</p> <p>9.7.2 Staff can describe the process for receiving a complaint.</p> <p>9.7.3 Service users know what to do if they are not happy with an aspect of the service.</p> <p>9.7.4 Other organisations are aware of the service's complaints procedure.</p> <p>9.7.5 Records show that complaints have been received and responded to appropriately.</p>	B3 C1 A46, B3, C5, C8 C6 A26

Standards:	Indicators:	Possible sources of evidence:
9.8 Services take a strategic, proactive approach to continuous service development and improvement.	9.8.1 The service undertakes appropriate and regular strategic review of the need, purpose and delivery of its services. 9.8.2 The service demonstrates strategic planning to develop and improve services. 9.8.3 Strategic reviews and planning take account of national and local priorities regarding domestic and sexual violence. 9.8.4 Strategic reviews and planning take account of the views of internal and external stakeholders. 9.8.5 Quantitative and qualitative targets for service improvement are set and reviewed regularly.	A21, A50 A21, A51 A50, A51 A50, A51 A21, A51