Medway Domestic Abuse Assessment Checklist for Children and Families

This checklist is designed to support professional when completing family assessments where domestic abuse has been identified. The checklist details potential protective factors that may be identified in homes where there is or has been domestic abuse. It also identifies risk factors that need to be considered for children, victim/parents and perpetrators where identified protective factors are being relied on. These risk factors should be considered in assessment, as part of safety planning, to prompt professional curiosity and the need for further referrals. It is not a risk assessment of domestic abuse and does not replace the DASH (Domestic Abuse, Stalking, Harassment and Honour based abuse) Risk identification Checklist which should be completed after each incident of domestic abuse. <u>http://www.safelives.org.uk/practice-support/resources-identifying-risk-victims-face</u>						
Identified potential protective factor	Child focused considerations	Victim/parent focused considerations	Perpetrator/abuser considerations			
1 Child/parent relationship is nurturing, protective and stable.	 Consider ongoing child contact with perpetrator and impact this has on the victim and child. Consider whether the child 'normalises' the abuse. Have the child's own vulnerabilities been acknowledged? 	 Will the victim be expected to manage contact arrangements? Consider other influencing factors e.g. financial, substance misuse, housing and relocation/isolation issues. Consider other influencing vulnerabilities of the victim including learning disabilities or difficulties, physical disabilities, substance misuse or mental health. Consider impact of parents own childhood experiences. 	 Consider the nature of the relationship between the perpetrator and child/ren. Consider the motivation of the perpetrator. Are they child/ren focused or victims focused? 			
2 Presence of children was a restraint for the abuser.	 Consider impact of children's routine changing e.g. being out of the home at early years settings, school/college or with other relatives/friends. 	 Consider times when the victim is "child free" i.e. social situations, or at work. Risk to victim and child increases at point of relationship breakdown 	• Domestic abuse escalates as it is repeated so this may change, use of alcohol or substances or change in mental health may also impact this.			
3 Abuser accepts responsibility for abuse and violence.	Consider the impact of experiences of previous abuse and violence.	 Do they recognise coercive and controlling behaviour? Consider how the victim may be accepting blame and responsibility for abusers actions. 	 Abuse and violence may still continue despite abuser accepting responsibility. Perpetrator has no regard to the impact on the child/ren. Do they recognise coercive and controlling behaviour? Consider other external risk factors or influencing factors for the abuser that are present that may continue the abuse including financial, substance misuse, housing and other historical issues. Consider any impact of learning difficulties. Has the perpetrator previous adhered to any order, injunctions or bail conditions? What has been the result of past police investigations? 			
4 Abuser indicates genuine remorse and is willing to seek support, or engage with services, to address their abusive behaviour.	• Consider the risks/signs of the child continuing to witness domestic abuse where reports are that the abuse has	 Consider and review safety planning is in place for the victim and children in case of future abuse/violence. Consider what continued support the victim may need and ensure that their voice continues to be heard. 	 Acknowledge/recognise trends and patterns of previous behaviour of abuser and levels of engagement with support/programmes or domestic abuse work. Are services/programmes available? If not, what support is needed/available? Does the language the perpetrator uses support their remorse? Is there evidence of victim blaming? Is there evidence of sustained progress? Are the identified next steps to support abusers rehabilitation and continued progress realistic and achievable? Consider if the perpetrator is working/volunteering with children and/or adults. Is a LADO referral required? Is there a concern that the perpetrator is in a position of trust? 			

5	Victim has positive support from family/friends and community. There is use of supportive family/friend placements for children and victim.	Consider impact of a move on children including education, social and emotional impact, and historical issues.	 Victim could still have a number of external vulnerabilities and not share these with support networks, meaning they and their children are still at risk. What other support measures can be put in place either in partnership with family/friends and community, or provided by other multiagencies? Family and friends may not be protective factors due to their own vulnerabilities or there may be a history of poor relationships. Has there been appropriate consideration of cultural influences to the support available? Consider whether abuser knows whereabouts of victims' family and friends and how close to the victim/abuser current address these networks are. Consider their understanding of domestic abuse given their own histories. Are there any disability issues that may contribute to isolation? 	 Consider family/fusing the particul Consider held be otherwine Be alert occurrine
6	Victim will seek positive support from significant other/ new partner; they also offer child a positive and nurturing relationships.	 Consider impact of separations from significant others. Is the new relationship positive and nurturing for all children? 		 Conside a trigge possibly perpetr
9	Victim appears emotionally strong (not worn-down by the abuse).	Consider the emotional state of the children.	 New/current partner has history of domestic abuse and/or being abusive. History of being in different abusive relationships. Victims can build emotional resilience to abuse and learn to minimise or deny abuse, appearing 'unfazed' by abuse. Consider future safety planning and other future risk factors that might de-stabilise the victims' emotional state. Is there any evidence of self-neglect? Consider any potential impact of mental health issues when they are not being managed. Consider victim's coping strategies; does it include drugs/alcohol? 	 Conside victim's
10	Victim will seek or has sought appropriate support and/or is willing to accept help from other agencies. This includes taking advice on safety issues.	 Are children focused agencies appropriately involved? Are children appropriately involved in safety plans? 	 Consider sustainability of engagement with supportive services and victims capacity to make informed decisions during times of high-risk abuse. How well were previous services/support engaged in? Did completing programmes make a difference, can the victim demonstrate learning? Do victims need support to engage with other multi-agency support? Consider what other multi-agency partners should be involved; are there any gaps? Are any agencies working in isolation? Consider any levels of control interfering with their level of commitment to engage. Consider risk to victim when attempting to communicate with them and the potential for 'rapid' escalation of violence at point of implementing safety planning and possible exit from the relationship. If the victim does act on the safety advice given, consider that the level of risk could increase for them and their children. Acknowledge that the victim is still vulnerable if other holistic risk factors are not considered including whereabouts of abuser and the abusers current situation. 	Conside in term relation

ider possibility of coercion of these y/friends by perpetrator in to the abuse, or g them to keep track of the victim. This is cularly true of identified Honour based abuse. ider if there is a family/friends/communities belief (influence by perceived culture or rwise) that agrees with male dominance. ert to domestic abuse having occurred or rring in extended families.

ider possibility/risk of a new relationship being gger for stalking and harassment of victim and ibly significant other/new partner by etrator.

ider escalation and change in abuse to counter n's appearance of being emotionally strong.

ider previous trends of behaviour of the abuser rms of control and tactics to resume the ionship.

				•	Is the victim acting on safety advice?		
11	In spite of abuse, victim was not prevented from seeing to the needs of their children.	•	Consider impact of abuse on the children and how they have been affected; has the victim actually been able to meet all needs? Including emotional? Does changing routines impact this i.e. when children are more likely to be in the home during school holidays?	•	Consider how the victim will process the abuse experienced and acknowledge the impact the abuse on their parenting. Consider if this could be a normalised behaviour that the victim will take into future relationships or accept in their children's behaviours. Consider holistic package of support provided to the victim and children.	•	Conside perpetr contact
12	Older children use coping/protective strategies.	•	Older children will still need professional multi-agency support and future referrals to relevant agencies. Consider vulnerability levels of older children and potential to become an abuser/victim themselves. Consider role the child may have had to assume in the home. Consider emotional trauma that the older child has experienced and opportunities to provide relevant individual support.	•	Is the victim able to implement and maintain appropriate boundaries and discipline? Does the victim/parent understand their role in supporting coping/protective strategies?	•	What ir access childrer strategi
13	Victim attempted to use protective strategies, or safety plans, for themselves and with the children.	•	Consider the emotional wellbeing of the children. Do the children exhibit any behaviours suggesting emerging concerns e.g. self-harming, harmful sexual behaviour or risk taking behaviour.	• • • •	Is the victim trying to use protective strategies but the abuser's violence and control is intense? Consider safety planning if abuser finds out that the victim is implementing protective strategies. Consider professional multi-agency support with victim and with older children, including future referrals to relevant agencies and possible family group work. Are the protective strategies being put in place by the victim sustainable? Consider what the impact of escalation of abuse/violence would be on these strategies. Consider multi-agency services to help support the victim and make the home safe.	•	Does th strateg behavio
14	Victim has insight into the risks to their children posed by the abuse.	•	Are agencies allowed access to complete direct work with the children?	•	Is the victim able to implement safety planning to prevent the risk to their children posed by the abuse? Does the victims support networks, including partner agencies, enable them to extend this insight into action?	•	Does th respons the chil

Where there are limited protective factors present, violence and psychological abuse of the victim, emotional abuse of the children and dome the DASH and Medway threshold criteria for statutory services) are present, appropriate referral MUST be made to MARAC (Multi Agency Ris and/or adult social care. Local domestic abuse service information can be found here http://www.domesticabusese



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der what caring responsibilities are held by the trator and the impact on these on child ct or effect of the loss of this support.	
interaction is there with the perpetrator? What s does the perpetrator have to the older en to challenge these coping/protective gies?	
the victim's implementation of protective gies lead to a change in the perpetrators viour?	
the perpetrator demonstrate insight or take nsibility for the impact of their behaviour on nildren?	
estic abuse risk factors (as identified by sk Assessment Conference) and/or child ervices.org.uk/	
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