

# Guidance for Domestic Abuse Perpetrator Programmes: Covid–19 challenges

We have developed this guidance paper to help member organisations overcome the challenges brought on by the Covid–19 pandemic. All organisations face problems with service delivery, continuity of staffing and the capacity to support and work with clients.

Within the sector there has been a strong commitment to offer a continuous service to clients, particularly when the social distancing and isolation measures used, will place many couples and families under extreme pressure.

As we step forward as a sector to support, challenge and engage our clients, Respect considers the following guidance essential in delivering safe and effective services. There may be other dynamics which individual services become aware of. We would ask that you continue to engage in dialogue with Respect, so we support you and represent the needs and interests of the sector at a high level.

## 1. Context of Service Delivery

#### Commissioning

Liaise with your service commissioners and keep them up to date with any changes you are making to the delivery of your funded interventions.

### • Local authorities

Maintain an understanding of how your local authorities are meeting the needs of the local community. Are there updated points of contact in place to meet the potential for increased need? What is the provision for emergency housing? Which schools are remaining open in your area and what is being done to meet the needs of children who have free school meals and other support with their social needs?

• Partner agencies

Ensure you know what other specialist services can deliver in your local area.

## 2. Domestic Abuse Perpetrator Programmes

- As organisations are moving to service delivery via phone and video-calling, it is essential that these services are delivered safely. Clients may struggle to find a suitable space to be alone in for their session. Despite the challenges, it is important that they attend each session alone. To ensure this is happening, we advise that a video-call is the best option, as the client can use the camera to verify that they are alone.
- It is unclear how long families and individuals will be required to self-isolate. This will represent a very challenging time for many. Safeguarding and risk management will remain a priority, and this may mean a greater focus on strategies for calming, de-escalating and containing abusive behaviour in the short-term, rather than behavioural and attitudinal change in the longer-term. These will all be components of your existing programmes. We recommend that you adapt worksheets or homework to focus on the current circumstances.
- Check-ins: we recommend that you have a structure to each appointment with the client, rather than simply perform a check-in. Ideally, the level of contact should be twice a week, but certainly no less than once a week. This will give you the opportunity to identify and manage risk. The aforementioned areas of focus should therefore direct how you are addressing risk in the home. In devising a focused approach, as opposed to a check-in, you will be able to evaluate the impact and delivery of these current approaches more effectively.
- Case Management: it is essential that these processes continue.
  Risk is dynamic and the presenting issues for families will put
  them under significant strain. This may lead to a significant
  increase in risk in some cases. The need to bring together
  practitioners working with perpetrators and survivors to discuss
  risk, safeguarding and wider concerns is of paramount
  importance. We recommend this is increased to a weekly
  delivery.

- Practitioners: they will be working in isolation, predominantly
  from their own homes without their peers. Treatment
  Management will be crucial for them to explore their practice of
  delivering the intervention through new methods (phone/video
  calling), as well as using new material. Support for your delivery
  practitioners professionally and emotionally will need to be
  maintained. We recommend this takes place on a weekly basis.
- New clients: for services who have the capacity to continue to take new clients, we endorse an assessment and triage process. If it is appropriate to make contact (and this is something to clarify with the referring agency), then it should be safe to proceed with the behavioural management sessions.
   We advise against taking new referrals, if you are unable to progress them in any way. This will present a risk to the clients and to the agency.

## 3. Integrated Support Services

- Safe spaces: it is essential to ensure, where possible, that clients are alone and in a safe space.
- Level of contact: we recommend this is increased to weekly or bi-weekly, where necessary. It will afford additional support and ensure responsiveness to risk is timely and accurate.
- Refuge provision/emergency housing: ensure you are aware of your local refuge or specialist survivor service capacity to offer support and what levels of service can be expected.

Respect is offering a weekly video-conference for member services to discuss emergent concerns and check-in with other services. The first one is planned for Tuesday 24 March 10:30–11:30. To join the video-conference, or to discuss any aspect of this guidance, contact Alistair Sherlock, Respect's Accreditation Manager.

**Email Alistair**