A Formative Evaluation of the Waikato Family Safe Network Pilot

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1 Executive Summary

Family violence (FV) is a significant issue in New Zealand. Where it is present, it has significant implications for all family members but women and children typically bear the greatest costs to their health and well-being. Family violence is largely hidden from view and thrives in the privacy enforced by the abuser. This makes it important to maximise the chances of effective intervention when it does come to notice. To be effective, such interventions often need to be multi-faceted to address the diverse and sometimes complex needs of the various family members. At the same time, the interventions need to be aligned, focused on common objectives. Therefore, interagency collaboration is imperative for effective, comprehensive intervention.

The Waikato Police District has an extensive history of interagency collaboration in family violence, particularly between the Police, Te Whakaruruhau Maori Women’s Refuge and the Hamilton Abuse Intervention Project (HAIP). It provided the ideal location for the pilot of the Family Safe Network (FSN), the focus of this evaluation.

The FSN brings together a network of government and non-government agencies. The former comprise the Police, Child Youth and Family (CYF), and Corrections. Te Whakaruruhau and HAIP are central to the NGO response but there is a much larger, and growing, group of agencies which provide services to families.

The FSN aims to reduce family violence by providing early and more effective interventions when it comes to Police attention, primarily via 111 calls. At its core, the FSN has three main processes:

1. A dual Police-Refuge crisis response to family violence, in which refuge advocates attend 111 callouts as quickly as possible after being advised by the police. The advocates provide immediate support and a preliminary assessment of needs.
2. A safety assessment and response planning meeting (SAM) addressing every family violence incident in the Waikato within 24 hours (excepting weekends). These meetings are chaired by a FSN facilitator and supported by an administrator. These staff collate agendas based on the previous 24 hours call-outs. The agendas are distributed to participating agencies who can search their records for information about either of the parties to the call-out. By combing such information with information collected at the scene of the incident, a reasonably sophisticated assessment of risk and need is possible. Further follow-up is planned and the case referred to a relevant agency or agencies. The aim here is to ensure effective engagement with families with the aim of reducing the frequency and severity of violence.
3. Follow-up actions are reviewed to ensure that the family members are engaged with the relevant service(s).

As this is a new initiative, one that is still evolving, a formative evaluation was appropriate. Through observation of FSN activities, interviewing staff, reviewing FSN documents and analysing a small amount of quantitative data our evaluation had three main aims.
1. **To document the development of the FSN.**

Although our evaluation did not begin until about three months into the pilot, it was clear that a lot had been achieved in that time. A multi-hub structure had been established: a city hub covering Hamilton and five rural hubs covering the rest of the Waikato Police District. All hubs are managed from Hamilton but each is responsible for the processes listed above for its own area. It was clear that the rural hubs were taking longer to get up and running than was the case with the Hamilton hub. While following the basic model, the rural hubs have had to develop specific solutions for local conditions; for example, SAMs are conducted by telephone conference because it is impossible for the rural facilitator to attend 5 daily SAMs across the District. Another difference is that there is no equivalent of the Te Whakaruruhau crisis available in the rural hubs.

A notable feature of the development of the FSN is the way the number of participating agencies has grown. This is a consequence of identifying gaps in services which become apparent in assessing needs of specific families. For example, it has become apparent that a number of people involved in family violence incidents have mental health issues which need to be addressed (which may be a precipitating factor and/or a consequence of violence).

2. **To develop a programme logic model for the FSN.**

A programme logic model lays out the underlying theory of a programme. It attempts to explain why the programme activities could be expected to achieve the desired results. We have developed a preliminary model (see section Programme logic model). This is consistent with the literature of family violence interventions but it may need refining in the light of further evaluation.

3. **To identify the priorities for a more formal evaluation.**

Assessing the impact of family violence interventions is notoriously difficult. Long time frames are needed, especially if evaluations are focused on population level measures such as the frequency of reported violence. One complexity is that good interventions can result in higher rates of reporting as family members become more confident in seeking help. In our view, the priority for further evaluation of the pilot is a formal process evaluation. This should closely examine programme processes to ensure that they are being implemented consistently and effectively. It must engage directly with family members to understand their experiences of FSN processes.

**General observations**

In our view, the FSN is a promising initiative. It exhibits several of the characteristics of effective collaborations in family violence: (mostly) well-defined relationships and roles; a collaborative structure, shared planning joint accountability. Six points stand out for us:

**Leadership and collaboration.** The FSN is widely regarded as a police-led initiative. While this tends to minimize the role of the interagency Waikato Family Violence Management Group, it is a fair reflection of the significant investment being made by the Police. It also reflects the fact that both of the two Directors the FSN has had so far
are senior Police officers. The leadership/governance team seems to have been extraordinarily effective in achieving such substantial change in a short time. This hasn’t always been appreciated: it would be surprising that building a system which required greater agency accountability was not resisted by some. However, overall, we think that the leadership of the project has been one of its strengths.

**Strong local history of collaboration.** One thing which has almost certainly made things a little easier, especially in Hamilton, is that the city has had a long history of collaboration in family violence interventions dating back to the mid-1980s. Mid-level managers repeatedly identified this history as a strength of the FSN. We agree. It does, however, suggest that replicating the approach in some other communities may be more challenging than establishing the FSN here.

**An emphasis on engagement.** Engaging families in processes that will lead to positive change is fundamental to the FSN. This starts with the dual police-refuge response to 111 calls and continues through the triage process of the Safety Assessment meetings and the follow-up referrals mandated by those meetings.

**Engaging the whole family.** A frequent criticism of family violence interventions is that they have engaged offenders or victims or children but seldom engaged with all the parties. By bringing a diversity of agencies and expertise to the table, the FSN is attempting to engage the whole family. This accords with recognised best practice.

**Collocation.** Most of the key people in the FSN work out of the HAIP office. Having people from different agencies, disciplines and backgrounds interacting on a daily basis has undoubtedly helped to build a common vision, to share knowledge and skills and to make identifying and addressing problems more efficient.

**Accountability and quality control.** A notable feature of the FSN is the emphasis on review and accountability. That is, cases are brought back for review to check that effective follow-up action has occurred. If the agency has not been successful in engaging the client(s), further action is planned. This may involve reassignment of the referral. This level of accountability is a significant advance on the FVIARS.

Naturally, there are some aspects of the FSN which could be further developed. In our view, these include:

- Enhancing the dual crisis response so that police officers and refuge advocates are working together as seamlessly as possible.
- The training and supervision of some staff may need to be enhanced. We noted that, particularly in large organisations, the understanding of the FSN was not always as good as it might have been.
- The efficiency of the FSN could be enhanced by better technology and a centralised database.
- The sustainability of the FSN will depend on adequate resourcing. This is particularly urgent for small agencies which cannot easily absorb extra work. Resourcing needs to be aligned with FSN workflows.

Most, if not all of these issues are being addressed. Indeed, one thing that has impressed us is the speed at which problems are identified and address in the drive to produce a more effective response to families affected by violence.
2 Introduction

2.1 Family violence in New Zealand

Family violence in New Zealand has been described as epidemic (Herbert & MacKenzie, 2014). For example:

- In 2014 alone, the New Zealand Police made over 100,000 family violence investigations\(^1\). These are likely to be the tip of a very big iceberg: it is commonly estimated that only about 10% of family violence assaults are reported to the Police.
- Over 60% of these investigations involved at least one child\(^3\)
- Last year, 5 women and 2 men were killed by an intimate partner\(^2\)
- From 2009-2012, 139 people died from FV or FV related homicides. That’s an average of 35 deaths per year. 63 of these deaths were intimate partner violence (IPV) related, and 37 were child deaths, resulting from abuse or neglect\(^6\)
- Of the 63 IPV deaths in 2009-2012, 50% occurred during the context of an actual or planned separation\(^6\)
- In 2013/14, there were 78,161 calls to Women’s Refuges (note this statistic only includes Refuges affiliated to the National Independent Collective Women’s Refuges)\(^3\)
- 1 in 3 (35.4%) ever-partnered women in New Zealand report having experienced physical and/or sexual violence at least once in their lifetime\(^3\)
- In 2013/14, Child, Youth and Family received 146,657 reports of concern, 19,623 of which resulted in findings of abuse and neglect\(^4\)
  - Maori were the offenders in homicides 13 times more often than other ethnicities (excluding Pasifika)\(^6\)
  - Maori children were 5.5 times more likely to die from child abuse and neglect than other ethnicities (excluding Pasifika)\(^6\)

There is evidently a need for an urgent, efficient response to family violence in New Zealand.

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2.2 The nature of family violence

According to the New Zealand Police (2015),

Family violence is violence against a person by any other person with whom that person is, or has been, in an intimate relationship, or who is a family member of that person.

That is, family violence covers violence against a partner, a child, a sibling and a parent, as well as other relatives, including elders. While any of these forms of violence can have a significant impact upon victims, it is intimate partner violence that is most likely to be the subject of a police call-out. Within the category of intimate partner violence, assaults by men on women partners are by far the most common.

Male violence against female partners is particularly significant for a number of reasons:

- It is the most common form of violence brought to the attention of the Police.
- It is the form of family violence most likely to result in homicide.
- It affects a large proportion of the population: in 2004, between 33% and 39% of women in New Zealand reported being assaulted by a male partner. These findings were retrieved from a highly reputable FV prevalence study in NZ (Fanslow & Robinson, 2004).

It is important to understand the dynamics of men’s violence within the family. Such violence is often associated with isolation, disempowerment, economic deprivation and patterns of power and control (Lauzon & McCallum, 2005; Park, 2011), what Evan Stark (2007) has named “coercive control”. This framing is useful in that it reminds us that men’s violence against woman partners is much more than a series of individual fights. Rather, it is a pattern of behaviour in which the abuser systematically undermines his victim’s liberty. Understood this way, such “violence” is a process; not a series of events. This presents a significant challenge for policing family violence, as the criminal justice system is oriented toward responded to specific events.

In terms of control, perpetrators of violence are known to use psychological manipulation tactics against their partners (Brown, Brady & Letherby, 2011; Strauchler et al., 2004). The perpetrator may closely monitor social interactions, enforcing privacy, and limiting the victim’s contact with the outside world (Strauchler et al., 2004). As a result, victims are less likely to have social support networks from which they can receive help (Antle, Barbee, Sullivan, Yankeelov, Johnson, & Cunningham, 2007; Strauchler et al., 2004). This creates a highly difficult situation for the victim. It may be very dangerous for her to contact Police or other authorities (Schechter & Edleson, 1999). Not only may she be exposed to “pay back” from the abuser: she may also fear having her children taken into care. Thus, when women do reach out for
help, it is vital that they receive a positive and effective response. Responses that are ineffective, expose her to further violence and/or jeopardise her ability to retain the care of her children will only serve to discourage future attempts to access external intervention.

2.3 The need for early intervention
The need for early intervention in violent households is paramount. The intergenerational perpetuation of family violence is now a well-reported phenomenon (Kwong, Bartholomew, Henderson, & Trinke, 2003; Langhinrichsen-Rohling, Hankla, & Stormberg, 2004; Tondowski et al., 2014). Violence can cause permanent changes in the way an individual processes information, whether that abuse is ongoing, or has ended (Langhinrichsen-Rohling et al., 2004). Witnesses or victims of ongoing violence may go on to perpetrate abuse themselves, or tolerate abusive behaviour in an intimate relationship (Fanslow, Robinson, Crengle & Perese, 2007; Kwong et al., 2003).

2.4 The need to engage victims and perpetrators
When victims do breach abuser-imposed privacy and reach out for help, it is important to optimise the opportunity. As time passes, the abuser may be able to reassert his (occasionally her) power and control, through threats, apologies or promises or some combination of these. At the same time, victims may forgive and/or hold out hope for change. The motivation to change can dissipate quickly – and in the case of victims, their ability to engage in positive change may be short-lived, as the abuser’s coercive control is reasserted.

Often, positive change requires a multi-faceted approach. For example, women victims who want to end the relationship may face any of the following issues: personal safety, (re)housing, financial independence from the abuser, and arrangements about the care of children. Whether women leave the relationship or stay, they may face the challenge of healing from trauma, while simultaneously helping children heal from their trauma. Both victims and abusers may face complex psychological and relationship issues. They may need help in reassessing their expectations of relationships. New parenting skills might be necessary. Where teenage or adult children have directed violence against parents, there are likely to be complex family dynamics to be addressed. Victims and abusers may also need to address a dependency on alcohol or other drugs.

Considering these many issues, it is hardly surprising that, increasingly, family violence is being tackled using a multi-agency approach, both in New Zealand and abroad (Hague & Bridge, 2008; Harvie & Manzi, 2011; Herbert & MacKenzie, 2014).

3 History of inter-agency responses

3.1 Understanding Interagency Responses
It is important to put the Family Safety Network (FSN) into its historical context, primarily because the FSN brings together several elements of earlier configurations of inter-agency collaborations. In fact, the close collaboration between Hamilton Police
and Te Whakaruruhau, a major component of the FSN, dates back to 1985. Community psychologist and Police sergeant Greg Ford piloted the original Police (pro-arrest) family violence policy in Hamilton. An important aspect of this pilot was passing on information from Police to Te Whakaruruhau, following attendance at routine FV incidents. This information included the names and contact details of female victims at Refuge (and the now defunct Hamilton Refuge and Support Services). The aim here was to provide timely support and advocacy. Ford’s research (1986) showed that, overwhelmingly, women appreciated this innovation which has of course, more or less become a standard practice throughout the country.

It is useful to note that in the context of family violence intervention, the term inter-agency covers a range of processes and structures. Sheryl Hann (2012) has developed a useful model for understanding levels of collaboration in family violence interventions (see Figure 1). The model sets out four levels. In order of increasing formality, these levels are networking, cooperation, coordination and collaboration. As Hann notes “collaboration” is often used interchangeably with terms such as “partnership”, “inter-agency” and “cooperation” but in her model, she reserves the term for highly formal arrangements in which: a) relationships are clearly defined, b) there is a specific collaboration structure, c) parties share a common vision and aims and, d) there is joint accountability.

Hann’s model envisages a movement through these stages over time, from the informal networking (e.g. sharing information, building relationships) to the formal collaboration as defined above. We suspect that this step-wise progression is neither inevitable, nor necessary. For some purposes, simply networking or cooperating may be sufficient. This might be the case in public awareness campaigns or in making the best use of training resources for upskilling family violence workers. However, at the “sharp end” of family violence work, interventions with abusers and victims of abuse, where individuals and families face significant risk, where gaps or inconsistency responses may result in further abuse or even death, it likely that only collaboration as narrowly defined by Hann will suffice.

In a different context, collaboration has been defined as

The practice of combining and leveraging public and community-based organisational resources and power to address difficult problems in the community (Dovey, 2003, p18).

This seems like a useful way to think about the FSN. As it has been explained to us, it attempts to combine public resources and power (i.e. Police, CYF, Corrections) with the resources and power of community-based partners (particularly Te Whakaruruhau and the Hamilton Abuse Intervention Project but also a range of other agencies). The FSN addresses a “difficult” problem in the community. That is, family violence has been described as a “wicked problem,” one that is complex and hard to solve. The promise of collaboration is that it allows leveraging: by collaborating, a whole is created that is more than the sum of its parts.
It is not our intention to provide a comprehensive history of interagency collaboration in family violence intervention in New Zealand. The timeline maintained by the New Zealand Family Violence Clearinghouse (at https://nzfvc.org.nz/?q=timeline) lists a number of agreements between government agencies (e.g. the 2013 Memorandum of Understanding between the Police and CYF) and agreements between government agencies and NGOs, including iwi (e.g. the 2013 memorandum of understanding between Ngāti Porou and CYF). These agreements encompass the criminal justice system, the child protection system, health, education and social services. However, there are two initiatives that are particularly relevant to the FSN, the Hamilton Abuse Intervention Pilot Project and the Family Violence Interagency Response System (FVIARS). These are significant because they occupy a major place in the history of government-NGO collaboration in Hamilton (and in the case of FVIARS, elsewhere). These initiatives are covered in the following sections.

### 3.2 Family Violence Prevention Coordinating Committee and the Hamilton Abuse Intervention Pilot Project

The Family Violence Prevention Coordinating Committee (FVPCC) which was established in 1985, could be considered the first significant national interagency response to family violence in New Zealand. Although it was preceded by some interdepartmental committees, FVPCC was significant in that it brought together the heads of government departments (e.g. Police, Justice Health, Housing, Maori Affairs).
and key non-governmental organisations (National Collective of Independent Women’s Refuges, Rape Crisis, Men for Non-Violence, National Council of Women).

In 1992, FVPCC was replaced by the Family Violence Advisory Committee and a Family Violence within the (then) Department of Social Welfare, but not before it had set in train the Hamilton Abuse Intervention Pilot Project (HAIPP, now HAIP). The pilot project was based very closely on the Duluth Abuse Intervention Project in Minnesota. In philosophical terms, this meant adopting a power and control analysis of violence in which violence was seen as inherent in the culture and not in individual pathology. In structural terms, HAIPP was an independent community-based office which worked with both the relevant statutory agencies – Police, Courts, Probation – and non-government agencies, principally, the two Hamilton Women’s Refuges. The general aim was to reform the criminal justice response to family violence. More specific objectives were to:

- Increase the safety of victims.
- Enhance the autonomy of women.
- Ensure that abusers were held accountable for their use of violence.

The main mechanism used to pursue these objectives were protocols which set out the way cases were to be processed through the criminal justice system. Key parts of the protocols covered

1. **Arrest.** Police were expected to make an arrest whenever there was sufficient evidence without requiring the victim to make a complaint.
2. **Immediate referral.** Police were expected to call Refuge, who would ensure that victims were visited by Call-out Advocates within an hour or two of the Police attendance.
3. **Pre-hearing custody.** Police were expected to hold all arrested domestic violence offenders in custody until the first hearing.
4. **Further remands.** Unless victims specifically asked for the abuser to be allowed back home, a non-association order in relation to the victim was to be applied to all offenders granted bail by the Court.
5. **Court advocacy for victims.** A crucial part in making the criminal system more user-friendly for victims was the HAIPP Court Advocate. Effectively, this role was an intermediary between the victim and the Court. Briefed by the call-out advocates, the Court Advocate could convey the victim’s wishes to the Court. After the hearing, the Court Advocate would report back to the victim, keeping her fully informed. Where victim testimony was required for a defended hearing, the Court Advocate supported victims and provided information about trial procedures.
6. **Treatment for offenders.** Although the judiciary did not formally sign up to the protocols, standard practice was to refer family violence offenders to the HAIPP stopping violence programme, either as part of a supervision order or, where a term of imprisonment was imposed, as a condition of release.
7. **Support for victims.** Along with the refuges, HAIPP ran education and support programmes for women victims of domestic violence – as well as individual advocacy.
8. Monitoring and evaluation. Crucially, the HAIPP office had a central role in monitoring the implementation of the protocols. Both the Call-out Advocates and the Court Advocate routinely collected information from victims. This information was collated and analysed. Where gaps were found and/or departures from the protocols identified, these were drawn to the attention of the relevant agencies. Exemplary practice by individuals was drawn to the attention of their managers. Regular inter-agency meetings became a forum for problem solving and system improvement.

Monitoring evaluations conducted over the two years of the pilot phase showed that the protocols were implemented with a high degree of consistency. Feedback from women victims showed high levels of satisfaction with the police and other parts of the criminal justice system. Significantly, during the pilot period, every woman whose testimony was required in a defended hearing attended Court and gave evidence. By the end of the pilot period, 90% of the charges for male assaults female were resulting in convictions. In comparison, the national figure was 64%. (See Robertson (1999) for a full analysis of system-level outcomes of HAIPP).

The HAIPP experience proved to be quite influential in establishing the importance of interagency collaboration in family violence. This was evident in the 1996 New Zealand Government statement on family violence (Department of the Prime Minister and Cabinet). This document adopted much of the language of HAIPP; for example, the statement committed the Government to a “co-ordinated and consistent” response to family violence and to “promot[ing] consistent policy through a shared understanding of family violence” (p.7).

The release of the Government statement was accompanied by a more detailed document, Good practice guidelines for coordination of family violence services (Family Violence Unit, 1996). The guidelines set out how relevant government agencies should work together and with community organisations to ensure the safety of victims. They also advocated for increased accountability of abusers, and consistent responses across agencies. However, while the Good practice guidelines explicitly acknowledged the example of HAIPP, they departed from the HAIPP model in one important respect. As mentioned above, central to HAIPP was the fact that collaboration was led by an independent, community-based office. This office’s functions included monitoring the response of both the state and NGO agencies, while working with those organisations to enhance their accountability to victims. The Guidelines on the other hand, referred to monitoring primarily as accountability to higher level documents. That is, the performance of government agencies was to be assessed only against policy guidelines. Contrary to the DAIP/HAIPP model, there was no notion that the community might have a role in monitoring state agencies.

Following the end of the pilot project, HAIPP was reconstituted as a Trust, the Hamilton Abuse Intervention Project (HAIP). Reduced funding meant that HAIP could no longer be so active in monitoring the criminal justice system. It has, however, continued to maintain a data base of family violence cases, which have been processed through the Hamilton Courts. This database contains information spanning 23 years. Fortunately, it has been made available to the Family Safe Network.
3.3 Family Violence Inter-Agency Response System

In a generic way, interagency collaboration continued to be promoted in subsequent government policy statements, namely: the Review of family violence prevention in New Zealand: plan of action (Ministry of Social Policy, 2001); Te Rito: New Zealand family violence prevention strategy (Ministry of Social Development, 2002); and the Care and protection blueprint (Ministry of Social Development, 2003). A more specific model was promulgated in 2006, the Family Violence Inter-Agency Response System. In Hamilton, the Family Safe Network can be seen as a refinement and elaboration of FVIARS.

As it happens, the prototype of FVIARS was a Hamilton initiative developed by the Hamilton Abuse Intervention Project (the successor of HAIPP). POL400 meetings, as they were called, brought together key agencies to review Police Family Violence forms to assess risk, particularly the risks facing children exposed to domestic violence, and to plan follow-up interventions. Similar groups developed in other centres in New Zealand, and the general approach was formalised nationally with the FVIARS system.

FVIARS has been described as “an interagency initiative designed to more effectively manage cases of family violence reported to the Police” (Carswell et al., 2010, p.4). Regular meetings are a key mechanism of the FVIARS initiative. Here, referrals from the region’s Police FV Investigation Reports are divided between agencies. The interagency meetings are expected to assess the risk posed in each case, and plan appropriate follow-up (Carswell et al., 2010; Herbert & MacKenzie, 2014).

The FVIARS approach spread quickly. According to Herbert & MacKenzie (2014) there were 62 FVIARS operating in New Zealand although an earlier assessment by the Family Violence Unit (2012) identified 66 groups. Each exists as a relatively independent and unique entity. A stock-take conducted in 2012 by the Family Violence Unit revealed considerable variation between groups. This included variation in

- Number and type of agencies participating. Police and CYF were the only agencies which participated in all groups. Refuges participated in most groups. Some groups had only these agencies as participants while other groups were very large and included a range of iwi and other NGO social services, health services (particularly mental health and addictions services), stopping violence groups, and non-statutory child protection groups.

- Frequency of meetings. These ranged from daily to fortnightly.

- Coordination and leadership. For many of the FVIARS, the Police were identified as the coordinating agency. Often, meetings were facilitated by a Police Officer. In other cases, much of the coordination and administration was done by another agency (typically CYF or an NGO). In these groups, facilitation was typically also provided by an agency other than the Police.

- Breadth of discussion. Most groups seemed to have a fairly narrow focus on triage: assessing risk and making appropriate referrals. Some groups appeared to discuss the ongoing management of cases to the point that they self-described as being involved in clinical supervision.
The disposition of cases. Some groups instituted follow-up for most cases: some recorded almost half as needing no further action. This is likely to have reflected differences in the way risk assessments were conducted.

Record keeping. Some groups reported having a centralised database: others did not, relying instead entirely on the record keeping of each agency.

The monitoring of actions. Some groups appeared to have no monitoring in place while others reported processes by which cases were reviewed (Carswell et al., 2010; Family Violence Unit, 2012; Herbert & MacKenzie, 2014).

According to the 2012 stocktake, the Waikato Police District included six FVIARS groups: Hamilton City, Huntly, Matamata-Piako, Te Kuiti, Thames-Coromandel and Waipa. This stocktake allows us to view these groups within the national context. In terms of the volume of work, these FVIARS groups ranged from the very small to the very large (average referrals per week ranged from 7 to 100). However, in terms of the number of participating agencies, all of these could be seen as medium to large groups (7 to 11 participating agencies). The diversity of the groups can be illustrated by comparing Te Kuiti with Hamilton. The former had 11 agencies participating in meetings, and processed an average of 7 cases per week, while the latter had the same number of agencies, but processed 80-100 cases per week.

We do not suggest that there is an optimum number of agencies to have participating in interagency meetings. What is best may well differ according to the characteristics of each community. However, the analysis above does point to significant variations in practice across the region, and this does need to be taken into account in implementing change.

When being briefed for this formative evaluation we were told that the FSN is not an attempt to replace the FVIARS groups. However, were also told that FVIARS was in danger of “falling over.” A number of agencies had withdrawn and others were reportedly considering doing the same. It appears likely that at least some agencies were finding the time spent in FVIARS meetings disproportionate to the contribution the meetings made to their work. That is, they might have a representative sit through a lengthy meeting but contribute to discussion on only one or two cases – and come away with few or no referrals to follow-up.

Follow-up featured in another criticism of FVIARS reported to us. While our interviews focused on the FSN, several of the people we spoke to were critical of the limited efforts some agencies made to engage the families who had been referred to them under the FVIARS process. According to these interviewees, such agencies often simply sent a letter or made phone call – neither of which was regarded as a sufficiently robust response to result in engagement in most cases. We were told that face-to-face contact is needed to engage most families.

A related criticism of FVIARS was the lack of accountability. That is, some of the people we spoke to in our evaluation, expressed concern about the way agencies took referrals but generally did not report back on what had happened. There appears to have been no routine monitoring of the outcomes of FVIARS-initiated actions. In this respect, FVIARS would seem to have been falling short of Hann’s (2012) definition of collaboration in relation to joint accountability (see figure 1).
When being briefed for this evaluation, we were told that the FSN was not designed to replace FVIARS groups. Instead, we were told, the aim was to adapt them, to create a more efficient and outcome-focused initiative. As will become obvious in later sections, two striking characteristics of the FSN are the energetic and assertive efforts to engage families and the expectation that agencies will be accountable to each other for the work they do – or fail to do.

3.4 Children’s Teams

A final part of the context needs brief mention. As part of the Children’s Action Plan, multi-disciplinary Children’s Teams are being established throughout the country (see [http://childrensactionplan.govt.nz](http://childrensactionplan.govt.nz)). A team is being established in Hamilton. Undoubtedly, this has implications for the FSN, if only because the initiatives will have clients in common. We understand that the FSN and Child’s Team managers are currently discussing working alongside one another, in a complementary capacity. From the perspective of the FSN, the establishment of a local Children’s Team is likely to provide another agency to whom referrals can be made.

4 The Family Safe Network Pilot

When placed in its historical and geographic context, the FSN can be seen as the latest iteration of interagency arrangements in family violence intervention. As will become evident in the following sections, there is much here that is reflective of earlier initiatives, both national and local: the police-refuge cooperation in the piloting of the pro-arrest policy, the Hamilton Abuse Intervention Pilot Project, and the Family Violence Interagency Response System, along with various arrangements between government departments.

The FSN is not an attempt to remove the FVIARS, but adapt it, to create a more efficient and outcome-focused family violence initiative. Weaknesses of the FVIARS process such as lack of accountability and having clients ‘falling through the gaps’ are primary concerns to be addressed. As we understand it, the motivations behind establishing the FSN include the following:

- A desire to establish a new way of working together focusing on the first response agencies: namely Te Whakaruruhau, Police and CYF (although as discussed below, other agencies are involved).
- A belief that the existing practices meant that opportunities for early, effective interventions were being missed. It was hoped that the FSN will reduce the amount of “repeat business.”
- A wish to adopt a more holistic family response to FV, through increased integration of women’s advocacy services, child protection and perpetrator accountability mechanisms.

As the FSN is still developing rapidly, a formative evaluation was appropriate. Formative evaluation is “directed at improving a programme’s design, planning, development and implementation” (Duignam, 2003, pp.84-85). It takes place before or during a project’s implementation (Evaluation Toolbox, 2015). Formative evaluation
does not examine outcomes: there is little point in trying to assess outcomes in a programme that is currently under development. On the other hand, formative evaluation might include the creation of a programme logic model. Logic models aim to describe the problem the programme is designed to solve, and lay out the theory of how the elements of the programme work together to address that problem (Kellog Foundation, 1998). A formative evaluation may also help to inform planning for a formal process and outcome evaluation, as the programme matures (Duignam, 2003).

Our objectives in this study were to

1. Document the development of the FSN.
2. Develop a programme logic model for the FSN.
3. Identify the priorities for a more formal evaluation.

5 Our Approach

5.1 Data collection

For this evaluation, conducted during May and June 2015, we collected information primarily via interviews and observation of FSN activities. We have also been able to collate some quantitative information.

5.1.1 Semi-structured interviews

Key informants and experienced staff from participating agencies were interviewed. We also had discussions with agency employees who had developed models or software for various aspects of the FSN.

We interviewed from the following agencies:

- The New Zealand Police
- Te Whakaruruhau Maori Women’s Refuge
- Child Youth and Family
- Department of Corrections
- HAIP
- Barnardos
- Family Start
- Other staff seconded to the Family Safe Network

Material covered in these interviews typically addressed:

- The objectives of the FSN
- The way the FSN works to achieve those objectives
- The rationale behind the FSN
- The participant’s role in the FSN
- Any strengths and weaknesses they might have identified in the developing initiative
- Suggestions for changes which could improve the effectiveness of the FSN
- How future evaluations could be most useful
We did not interview agencies from the rural FSN, due to the fact the hubs were in early stages of development. This meant the hubs were continually trialling and adapting protocols, such that any data collected would be obsolete almost immediately.

5.1.2 “Go-along” interviews
The go-along method involves accompanying participants in their day-to-day activities, and engaging them in discussion about what they are doing. This method is often used for health-related, qualitative research (Carpiano, 2009). Going-along allowed us to understand, as much as it is possible, the lived experiences of the participant, in the community environment in which these experiences take place. It allowed us to observe the processes of practice, and the type of approach the individual is taking in her or his work. Going-along allows for rich data collection, as some of the most useful information is collected by merely being present with the participant (Evans & Jones, 2011). We accompanied participants on the following occasions:

1. Attending call-outs to domestic violence incidents in the Hamilton region (with both the Police and Te Whakaruruwhau, Maori Women’s Refuge)
2. Attending daily safety assessment meetings and weekly Family Safety Network meetings (for both the central and rural FSN)
3. Accompanying employees on their day-to-day activities related to the FSN

We also attended general meetings regarding the FSN, as these were key opportunities to interact with stakeholders.

5.1.3 Quantitative data
Basic statistics were gathered in order to provide an overview of the processes and early outcomes of the Family Safety Network. This data was collected by agencies and shared with the evaluators. Sometimes the data was already collated into useful statistics, other times raw data was analysed and mapped to display any useful trends. Staff from the Network also provided schematics, diagrams and maps. These are invaluable for understanding of what the FSN actually involves. These tools can be found throughout this document, and in this appendices.

5.2 Analysis

5.2.1 Qualitative
Due to the specific objectives outlined in this evaluation, much of the interview material naturally fell into one of the preordained objective categories. After familiarisation with the body of data, several further broad categories became clear, and these topics were slotted logically into the existing structure. Many of the interview discussions required little thematic analysis because stakeholders tended to cover highly similar topics.

5.2.2 Quantitative
Raw data was collated and analysed in the Microsoft programme Excel. A more sophisticated analysis package was unnecessary given the small body of data and the
simple calculations. Corresponding graphs and figures were created using Excel and Microsoft Word.

The following sections describe the FSN in its current form, set out a programme logic model and make some tentative recommendations for a more formal evaluation. Our report concludes with a discussion of strengths apparent in the FSN approach and of issues which may need to be addressed as the FSN begins to mature.

6 The Development of the Family Safety Network

6.1 Overview of the FSN process

The FSN brings together a network of agencies delivering services to families. At its core, the FSN has three main processes:

5. A safety assessment and response planning meeting (SAM) addressing every family violence incident in the Waikato.
6. Weekly FSN meetings, to review progress on cases from the previous week

These processes are delivered via six hubs which cover the Waikato Police District. One hub covers Hamilton City: five other hubs cover the rural parts of the Waikato District. These match the existing FVIARS areas. It should be noted that the processes are more developed in the city hub than the rural hubs. This is hardly surprising: the FSN is still a very “young” initiative: processes are still being refined, and that applies to the City hub as well, albeit that things are further advanced there. In fact, we were told by one of the key people involved, “We’re flying an aeroplane while we are still building it.” Like our interviewee, we see this as a positive: any new initiative needs to be developed in a way that is sensitive to local conditions. This takes time and some flexibility. It is a process of incremental problem solving, of development informed by local experience.

These processes are set out diagrammatically in figure 2 and the main stages are described in more detail below.
6.1.1 Dual Police-Refuge crisis response to family violence

111 calls to the Police regarding family violence incidents represent a brief but critical opportunity to access a family and provide intervention and support. This support might include:

- Carrying out an initial assessment of the family’s needs (children, mental health issues, substance abuse concerns, etc). This assessment is made available to the next SAM.
- Assisting the victim to file a protection order against the perpetrator
- Gauging victim/offender openness to accessing services
- Providing counselling to the victim(s)
- Asking the victim’s views on the offenders conditions of bail

Under FSN protocols, Police attending a family violence incident typically tell the victim that Refuge will be contacted. They then call the Refuge. In Hamilton, Refuge attempts face-to-face engagement with every family referred as quickly as possible (although occasionally, the Police advice is to wait until the next day). Our observations of 111 call-outs showed that call-out advocates were usually on the scene very quickly, sometimes while the police were still at the scene.
Although at this stage, we are not able to quantify the proportion of call-outs resulting in successful victim engagement, our observations do confirm the value of a rapid crisis response by Refuge. That is, while we were accompanying call-out advocates, they invariably made contact with victims while the police were at the scene, or shortly thereafter. When Refuge response was delayed (usually because of delay in Police notification), fewer victims were successfully located.

Engagement with offenders is more complex. When an arrest is made, the offender is removed from the home but in other cases, Refuge advocates may talk to both parties. In fact, one of our go-alongs provided an interesting example of Refuge engagement with an offender. This man had left the home before the police had arrived but later returned while the call-out advocates were talking to his partner. While he was initially angry, the advocates handled the situation expertly and the situation was quickly diffused. The outcome was that the man voluntarily turned himself into the Police.

While this particular situation was handled well by the women call-out advocates it should be mentioned that Te Whakaruruwhau also employs a male advocate whose role is to engage men. It may be neither practical, nor necessary, for the men’s advocate to be part of every crisis response: after all, it is unlikely that a man who has assaulted his partner is going to feel intimidated by women advocates. However, the further development of the role of men’s advocates is currently being considered.

At this stage, there is no joint Police-Refuge crisis response in the rural regions. In most cases, this is because Refuge does not exist in the region, or because the Refuge do not have adequate staffing to provide such assistance. The FSN is currently looking at alternatives to a Refuge crisis-response in some areas.

While a 111 call is by far the most common way cases enter the FSN process, there are a small number which enter by other routes. Typically, these enter the system when a family member contacts the Police by some other means, such as coming into a Police Station.

6.1.2 Safety Assessment Meetings

The difference between the city and rural areas is also apparent in the next stage of the process, the Safety Assessment Meetings (SAMs). The SAM is essentially triage. Ideally, this process should be implemented as soon as possible following a domestic violence incident. Currently, in the city hub, there are SAM meetings five days out of seven: Monday to Friday. The rural hubs also hold daily SAMs, via telephone conferencing.

Typically, the following groups are represented at the Hamilton City hub meeting: Te Whakaruruwhau Maori Women’s Refuge; Police Family Violence Harm Prevention Team; Child, Youth and Family; and the Department of Corrections. On some occasions, other agencies are also present, including Barnados which, we understand, is to become a regular participant. The meetings are typically run by the central FSN facilitator. She is supported by the central administrator, who is seconded from HAIP. These roles are described below.
The agenda for the SAM consists mainly of the cases from 111 calls over the previous 24 hours (although Monday meetings consider cases from the previous 3 days). Before the meeting, the agenda is circulated to participating agencies so that they can search their records for information relating to anyone involved in the incident and their immediate family. Such information may relate to either past or current involvement with the agency. This information is tabled at the meeting. Usually, this is done in person by agency representatives but agencies not represented in person at the meeting can pass on relevant information to the facilitator.

Each case is reviewed using the information provided by the Police about the current incident, along with other information about family members provided by participating agencies. Each case is given a risk rating. Risk is assessed on a 5-point scale ranging from tier 1 (“Crisis – urgent intervention”) to tier 5 (“Zero to low risk - No further action required”) - see Appendix for the tier rating system.

Based on the risk rating and the apparent needs of the family, the case is referred to the most appropriate agency for follow-up. Multiple agencies may also be assigned to a case. In the City hub, 36% of cases are currently receiving two referrals, and 20% are receiving three agency referrals (see Figure 6). These cases which are given multiple referrals are typically homes where risk is thought to be relatively high, and service providers may wish to be accompanied on home visits by a member of the Family Violence Harm Prevention Team. Alternatively, the family may have multiple needs (eg. children, mental illness, and substance abuse), which can be better addressed by multiple agencies.

We felt the risk assessment and follow-up planning was informed by a wealth of information. This includes, but is not limited to:

- Cultural identity of the family
- Age of any children
- Mental health issues of family members
- Level of extended familial support available to that family (e.g. grandparents)
- History of interaction with social service agencies
- Openness to engagement

This information is only available by aggregating all of the information held by participating agencies. For example:

- The HAIP database is critical because it contains a 23-year history of victims and offenders involved in family violence incidents in Hamilton. This means the FSN can track an individual moving from one violent relationship to another and ‘connect the dots’ to see the larger picture.
- Police provide extensive information about any previous incidents and, where relevant, the criminal history of the abuser, including information about sentences imposed. In some cases, this information may relate to previous relationships as well as the current relationship. Police can also inform the other agencies about the existence of protection orders and Police Safety Orders. Such information is critical for gauging risk.
• CYF can often provide information about previous reports of concern, and previous interventions for the children present in a violent home. Such information can be invaluable in assessing risks to children.
• Corrections often provides information about the abuser’s history, including behaviour during previous sentences. In some cases, the abuser – and/or occasionally the victim – may be under supervision. In such cases, Corrections may become an integral part of the follow-up.
• If there is a relevant history, Refuge can provide information about the victim’s previous use of Refuges services. This includes both admissions to a safe house, and community-based advocacy.
• Similarly, the other agencies to whom the agenda has been circulated can provide relevant history about any family member with who they are working or have worked in the past.

Referral decisions are based primarily on assessed risk and needs. In addition, current or previous agency involvement is taken into account. That is, where there is an established relationship between a family member and an agency, follow-up by that agency may become part of the referral plan.

So far, the City SAM has referred cases for follow-up to the following agencies:

<table>
<thead>
<tr>
<th>Age Concern</th>
<th>Kaute Pasifika</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alternative Learning Centre</td>
<td>Link House</td>
</tr>
<tr>
<td>Barnardos</td>
<td>Pai Ake Solutions</td>
</tr>
<tr>
<td>Child Protection Team</td>
<td>Red Cross</td>
</tr>
<tr>
<td>Infant, Child and Adolescent Mental Health Service</td>
<td>Te Runanga o Kirikiriroa</td>
</tr>
<tr>
<td>Family Safety Team</td>
<td>Salvation Army</td>
</tr>
<tr>
<td>Family Start</td>
<td>SHAMA</td>
</tr>
<tr>
<td>Family Works</td>
<td>WISE group</td>
</tr>
<tr>
<td>HAIP</td>
<td>Youth Services</td>
</tr>
</tbody>
</table>

This list of agencies is continually growing as gaps in services are identified and new agencies brought into the system.

It is also important to note that when referrals are made, there is an expectation that the agencies will report back on progress. This is done in one of three ways. The most challenging high risk cases are brought back to another SAM meeting, usually the next day. Tier 1-3 cases are brought back to the weekly FSN review meetings (see below). With tier 4 cases, agencies are required to feedback to the FSN facilitator regarding engagement. If this engagement is deemed insufficient by the facilitator, these cases are upgraded to tier 3, and brought back to a SAM meeting.

The requirement to report back is a critical accountability mechanism for FSN agencies. The aim is to ensure thorough follow-up on every case and that no one falls through the gaps. We have noticed that when an agency experiences difficulty in engaging with family members, the review process results in the case being handed to another agency. That is, the FSN is sensitive to the needs and response of each family, and responds with the most appropriate service.
6.1.3 Weekly FSN review meetings
As mentioned above, the FSN also meets weekly to check on progress for cases. This follow-up is critical for:

- Accountability of agencies
- Accountability of victims and offenders
- Ensuring each case receives an acceptable and appropriate level of intervention and support
- Ensuring no individual or family is missed

See Figure 2 for a diagram depicting the procedure of the Family Safe Network.

6.2 Structure
At a governance level, the FSN is overseen by Waikato Family Violence Management Group, comprising local managers from the organisations that have key responsibilities in relation to family violence. This is an important forum for high-level oversight and developing the relationships which underpin the FSN. The day to day management of the FSN is vested in the Director. He oversees the processes described above which are delivered via six hubs: one covering Hamilton City and five other hubs covering the rural parts of the Waikato District. Supporting these hubs are four other staff: the Hamilton City hub has a facilitator and an administrator, while the rural hubs share a facilitator and an administrator. These staff are located at the HAIP premises, along with a specialist Family Violence Harm Prevention Team. The roles of the staff are described below.

6.2.1 The Director
The FSN director, who has been a key figure in its development, oversees the Network generally. He is responsible for managing staff (e.g. finding staff when service gaps are identified), facilitating meetings with management, and liaising with high level decision-makers across a range of government organisations.

There have been two directors of the FSN during the pilot, both seconded from the Police. Additionally, in his previous role, the current director played a central role in getting the FSN off the ground and he continues to be crucial to its continued development. As the FSN is still developing, it is unclear how much the role of the Director will change as the initiative matures but in a general sense, the Director is responsible for ensuring the FSN is achieving objectives and for implementing changes when a problem is identified. It has been suggested to us that, due to the large work load, an assistant director may be needed. In our view, the Director’s role has been pivotal in developing the collaboration which underpins the FSN: it is not a straightforward task to bring agencies together to work on a common kaupapa, especially when at least some of those agencies may have seen themselves in competition with each other. We return to the theme of collaboration and the Director’s role in supporting it in section 9.1.
Figure 3: Roles and structure of the Waikato Family Safe Network.
6.2.2 The Facilitators
There are two FSN facilitators: one for the Hamilton City hub and one for the rural hubs. Neither has contact with clients, but both play a pivotal role in facilitating FSN activity. Central to this is chairing their respective SAMs. This includes:

- Preparing agendas. This involves collating new cases from the Police Family Violence forms, and bringing back old high-risk cases, to review progress.
- Facilitating decision making in the SAM, including risk tier-ratings.
- Preparing referral plans. Facilitators are responsible for informing agencies of referrals, and following up to check work has been completed to an acceptable standard. If the facilitator is not satisfied, she will bring back the case for re-evaluation at the weekly SAM, and/or reassign the case to another service agency.

The Hamilton City facilitator described her role as analogous to a switchboard operator: it is like being responsible for directing incoming calls where they need to go. She also sees it as her role to identify gaps in service provision which may necessitate the recruitment of other agencies.

In general terms, the rural facilitator has an identical role to the City facilitator, but with a larger geographical area to cover. However, over the last several months, the main focus has been on transitioning the existing FVIARS arrangements to FSN hubs. This has involved building rapport, and identifying and filling service gaps. It is clear that the task of developing hubs is much more challenging in the rural area.

6.2.3 The Administrators
Each facilitator is supported by an administrator. These people are responsible for organising data and preparing for SAM and FSN meetings. In the case of the Hamilton City administrator, a major role is of collating relevant case information from the 22-year old HAIP database to present at the daily SAM and weekly FSN meeting. As mentioned earlier, this information has the capacity to change the outcome of the SAM tier rating and the nature of the referrals.

The rural administrator’s role is still being negotiated, much like the rural networks. Over the past month, the administrator has organised an entirely new database which makes preparation for SAM and FSN meetings much easier. This database is in the process of being synchronised with the central database. The rural administrator also often attends rural meetings, and is aiding the facilitator in streamlining all systems related to the rural FSN.

6.2.4 The Family Violence Harm Prevention Team
The Family Violence Harm Prevention Team (FVHPT) is a group of six police officers. Their primary role is to engage with families who are not otherwise engaging with the FSN. They cover both arrest and non-arrest cases. From time to time they provide support to other workers who may be visiting residences which might be unsafe. In those cases in which there is a prosecution, a FVHPT member may have the role of supporting victims whose testimony is needed. Supporting victim-witnesses is
expected to reduce the number who fail to attend court or otherwise fail to come up to brief. More generally, by maintaining contact with at-risk families, the FVHPT aim to reduce re-offending; or to use a phrase we heard several times, to reduce the number of “frequent fliers.”

The FVHPT see engagement with family members as central to their work. This can involve repeated visits to families, and being generally available to support the families. The purpose, according to one officer, is to ensure that “They know we are here.” We were told that some families respond well to the “up-front” approach of the Police.

They see the police as straight up. And as soon as they see we’re not there to arrest them – or even if we are – because we are straight up, they’ll respond.

On the other hand, some team members expressed some frustration about their ability to “really engage” with families because of time constraints. It was noted that too often it was “a case of ‘Hi, we’re here’ and move on”.

It is important to note that the FVHPT is quite separate from the Family Safety Team. The latter focus on working with the very highest risk families. We were told that in part, the FVHPT was created because the Family Safety Team is inundated with work. The Family Safety Team are family violence specialists. As such, they are regarded by some FVHPT team members as the “real experts”. The Family Safety Team were seen as a potential source of support and training. As it is, two FVHPT members have had previous experience in the Family Safety Team. They see that experience as being excellent preparation for their current role.

6.2.5 Partner Agencies

As mentioned in section 6.1.2 there are a number of agencies who are involved in the wider FSN. For most, their primary role is taking referrals. Some of these also participate in FSN review meetings and, occasionally, in SAMs. But there are five organisations which are central to the work of the FSN: the Police, Te Whakaruruhau, the Hamilton Abuse Intervention Project, CYF and the Department of Corrections. Each is making a substantial commitment of staff and other resources to support the FSN. The roles of these agencies within the structure of the FSN are described below.

The New Zealand Police

Without the Police, there would be no FSN. The Police have committed significant resources to the initiative, including seconding key staff. The roles of the Family Violence Harm Prevention Team and the Family Safety Team have been discussed. But as is clear from the description of the FSN process, the “front end” of intervention is the responsibility of police section staff who attend 111 calls, liaise with Refuge, process offenders and collate the information which is integral safety assessments. To a large extent, this is “business as usual” but by integrating it with the FSN, the work of section staff is expected to attract added value.

Te Whakaruruhau

Following the Police, Te Whakaruruhau are at the “front” end of FSN. Once the Police have ensured immediate safety of victims, the role of Te Whakaruruhau advocates is to be the first response to victims, to undertake a preliminary assessment of needs,
and to gather information to assist SAM decision making. As shown in Figure 5, Refuge picks up 40% of the referrals from SAMs.

Providing an immediate response to all FSN cases and follow-up support to 40% is a major contribution to the project. We understand that the crisis response service – which is, of course, a 24 hour/7 days a week operation – requires 14 staff (Te Whakaruruhau, 2015). While adequate funding is being negotiated, the Crisis Response service is being sustained only by reallocating staff from other Refuge services and by staff working unpaid overtime. This is clearly unsustainable in the long term without secure and adequate funding. Given that the provision of immediate support is a crucial part of the programme logic of the FSN (see section 7), it is imperative that this situation is addressed.

**Hamilton Abuse Intervention Project**

As mentioned in section 3.2, as a pilot project, HAIP was at the centre of inter-agency family violence collaboration in Hamilton, negotiating and monitoring protocols relating to the processing of family violence offenders through the criminal justice system. Since the pilot project was wound up, HAIP has continued to play an important part in family violence interventions in Hamilton, even if it was no longer recognised as having a formal monitoring role. For many years, it hosted regular interagency meetings. However, more important in relation to the FSN, HAIP has continued to maintain its central database. As mentioned above, this is a valuable contribution to SAM decision making. HAIP has one worker who job it is to maintain the database and participate in both SAM and FSN review meetings. This is a significant commitment.

**Child, Youth and Family**

As mentioned earlier, CYF has input into the SAMs. How this is best achieved in the rural hubs is still a matter of negotiation. In the City hub, CYF’s representation alternates between the East and West teams who share coverage of the city. Shortly, there will be one single CYF staff member for the entire FSN.

We have already mentioned the way information held by CYF can be crucial to SAM decision-making. This perhaps deserves emphasis. Some of our interviewee’s expressed the view that CYF were perhaps less than fully committed to the FSN. It is not for us to make judgements about the agency, but our interviews with some of the relevant CYF staff suggested that some were more enthusiastic about the FSN than others.

More generally, CYF staff see themselves as fulfilling two primary roles:

1) In an advisory capacity, providing child-specific advice
2) As a gateway, when a serious incident happens and services become involved, CYF can use the opportunity to intervene with other serious family problems

CYF are also responsible for making reports of concern, and can provide feedback from social workers who have recently visited the household. CYF can only become involved with families where there is a high degree of risk for the children. They are currently taking on a slightly larger number of cases than ordinary, because other child related agencies are not yet present at the FSN table, for various reasons (eg. lack
of funding). The Children’s Team is in the process of building a relationship with the FSN, which is likely to alleviate some of the pressure on CYF. The FSN itself has proved useful to CYF, by feeding back information about relevant families, to allow them to assess the ongoing situation.

**Department of Corrections**

Corrections staff we spoke to see their role as providing information about risk, history and context, largely regarding offenders. This allows for more informed decisions to be made, particularly regarding risk ratings. Currently, there is one staff member who is allocated full time to FSN work.

Corrections, the Local Governance Group and the wider FSN have been surprised at the wealth of relevant information Corrections has brought to the table. The Department also provides a link to the Court System, which can be critical for maintaining the safety of victims, following offender release. For example, a Probation Officer is now able to contact the FSN to update on whether an offender is back in the community. Probation may also be able to utilise existing contacts to increase engagement; for example, a woman on probation may be contacted by the FSN and asked her opinion about her partner’s sentence management. Without the premise of her probation, it may have been dangerous to contact this woman.

Similar to CYF, FSN data can also be fed back through Corrections to influence sentencing or conditions of bail. To date, the provision of a Corrections staff member to the FSN initiative appears invaluable, completing the core FSN agency circle.

### 6.3 Family Safe Network Outputs

It was not our role to assess outcomes of the FSN: that requires a more intensive and longer term evaluation. We can, however, provide a snapshot of outputs.

#### 6.3.1 Volume of work

The city FSN handles between 100 and 130 cases per week while the rural SAMs handle between 80 and 100 cases per week.

“Downstream”, the workload is largely influenced by the risk assessments. As can be seen in figure 4, which is based on data from a 3-week period, the bulk of cases (57%) are assessed as tier 4: low to medium risk requiring a single agency response. The next largest category is tier 3: chronic or escalating risk with high demands and/or complex needs. This accounts for a further 34% of cases. There are relatively few cases assessed as tier 1 (0.30%) and tier 2 (5%). (See the appendix for the descriptions of tier ratings.)
6.3.2 Follow-up action as determined by SAMs

Figure 5 provides an analysis of referrals made by the city SAMs over a period of approximately four and a half months. As can be seen, 20% of the total cases considered at SAMs were allocated to Refuge for further follow-up. From what we could see, these referrals seemed appropriate: often Refuge had already conducted a preliminary (i.e. call-out) assessment which had indicated the need for further victim advocacy and/or Refuge had an existing relationship with the victim. The second largest group of cases was those assigned to the Family Violence Harm Prevention Team to follow-up (see Figure 5).

Corrections received 9% of the referrals during the 3-week period. This reflects the fact that a significant proportion of family violence offenders – and some victims – are under Corrections supervision. It makes good sense for the relevant Corrections staff to play a role in following up such cases, especially as conditions of supervision may mean that Corrections has some leverage over offenders not available to other agencies.
Figure 5. A snapshot of SAM referrals

Notes
1 n=1561
2 Services which fall into the “other” category include referrals Age Concern, Shama (Hamilton Ethnic Women’s Centre), Epilepsy NZ, Stroke NZ, CIB, FST, Family Works and Schools (eg. follow-up regarding truancy).

While 37% of the SAM referrals were made to a single agency, multi-agency referrals were more common (see figure 6). At first glance, it may seem to be undesirable to have two or more agencies involved with one family but it seemed to us that this was a reflection of the multiple needs being identified in the SAM. For example, while a referral to Refuge might be needed for women victims needing advocacy, a simultaneous referral to Plunket might be needed to deal with issues relating to parenting and children’s exposure to trauma. Another scenario in which joint referrals were made were high risk families where it was thought advisable that police accompany NGO workers in home visits.
7 Programme logic model

As mentioned earlier, one of our aims was to develop a programme logic model. A programme logic model is designed to explicate the rationale behind a scheme: that is, the programmes theories and assumptions, and how these link to prospective outcomes, in both the short term and the long term (W.K. Kellogg Foundation, 2004). A programme logic model is different to a process model. A process model (such as that shown in figure 2) simply sets out the stages of a programme from intake to discharge. It shows the various stages of the programme, and the order in which things happen. A programme logic model, on the other hand, attempts to explain why those various stages might be expected to produce the expected outcomes and why those outcomes might be expected to produce the desired short and long term changes. Figure 7 sets out a tentative programme logic model for FSN.

As discussed on page 15, the desired outcome of the FSN is a reduction in family violence by maximising the opportunities for early, effective intervention and adopting a whole of family response through better integration of women’s advocacy, child protection and perpetrator accountability processes. Underlying these processes are three key concepts:

1. Immediate intervention
2. Accurately identifying risk and needs
3. Multiple agency engagement, to cater to the diverse needs of individuals and families
The rationale behind these processes is described below.

### 7.1 Inputs

Section 6.1 has described the FSN process. Although this “aeroplane” is still being “built” it is “flying” and the main inputs are in place. Of course, many of the inputs (people, organisations, community) were there before the FSN. What the FSN has done is bring them together, through a particular set of practices and processes.

### 7.2 Actions

#### 7.2.1 Immediate intervention: dual police-refuge crisis response

The front-end actions – support and engagement at the time of crisis – can be regarded as a re-development of the HAIPP protocols. The rationale here is as strong now as it was in the 1990s.

Lenore Walker’s seminal “cycle of violence” article (1979) set out three phases that were believed to constitute a regular pattern of domestic violence. In the first, tension builds with arguments and verbal abuse. In the second, the tension escalates into an explosion of violence. The third phase was termed a “honeymoon” phase, characterised by profuse apologies from the perpetrator, with assurances he will never hurt the victim again. He may give her presents, making her feel guilty and encouraging her to self-blame, or consider the incident a one-off (Dempsey & Day, 2011).

The model has come under considerable criticism, principally because of its lack of gender analysis, including its failure to address men’s assumed entitlements. It has also been criticised by women’s advocates who pointed out that for some women, there is no “honeymoon.” Instead of apologies, such women may be given “reasons” why they deserved the beating. Nevertheless, the idea of a cycle still has some usefulness in understanding women’s experiences in the aftermath of an assault. That is, as the intense experience of the assault recedes, a number of factors may discourage women from seeking help. For example, things may be relatively peaceful, even pleasant. It may be easier to remember the good times. Where the partner has expressed regret and made promises to change, it might be easier to give him the benefit of the doubt. The challenges of separating (re-locating self and children; solo parenting; relative poverty; risk of post-separation violence; loss of face etc.) may come to the fore. For some women, seeking help may be interpreted as shameful. For other women, the designated leaders or helpers in their community might be anticipated as blaming her for the violence, a scenario which is not uncommon in certain religious and migrant communities.

While the factors which come into play may vary significantly from situation to situation, the critical point is that there is very good reason to believe that engaging women at the time of crisis, when they are highly aware of their partner’s capacity for violence, is likely to increase the chance of an effective intervention being put in place. We are not aware of research that supports the value of rapid engagement with victims of other forms of family violence but it is possible that factors similar to those outlined above may apply.
For similar reasons, there is good cause to believe that engaging perpetrators as quickly as possible after the crisis may also increase the chance of an effective intervention being put in place. In the case of a man who has perpetrated violence against a woman partner, as time passes and his partner hasn’t left, he may come to believe that his relationship in not in jeopardy. He may come to believe more firmly that he is not at risk of repeating the violence. As mentioned in section 6.1.1, the provision of men’s advocacy is currently under further development.

For the reasons outlined above, our programme logic model emphasises specific short time-frames in the boxes within the “Action” area. These apply to all three components - dual police-refuge crisis response, triage (SAMs) and review (FSN meetings). Of course, these components are inter-related. If refuge advocates can get to the scene quickly after the 111 call, it is more likely that they will be able to make contact with the victim. As well as improving engagement generally, this will mean that advocates can collect information relevant to risk and needs, and ensure that this is available for the SAM the next day. It is worth noting that general calls to the FSN and walk-ins are also dealt with promptly. The timely provision of information can be expected to improve decision making and enable relevant support and services to be mobilised more quickly.

7.2.2 Identifying risk and needs: SAMs
Not all family violence incidents which are the subject of a 111 call pose the same level or type of risk. Identifying the level of risk to a family following a violent incident is important for determining

- Which cases need the **most urgent** support
- The **level** of support to provide
- The **type** of services which are needed

Offenders and victims are a heterogeneous group of people, and therefore every individual and family must be assessed on a case by case basis (Dempsey & Day, 2011). Moreover, risk assessment is complex. The bare facts of a particular incident provide only a very limited basis for estimating risk. An incident which results in “only” damage to property may appear to suggest low risk. However, if such an incident occurred in the context of a long history of physical violence and threats to life, a much higher risk may be evident than if the damage was seen in isolation.

Hence an important part of the “logic” of the FSN is better decision making regarding risk. As mentioned earlier, this is achieved at SAMs by collating a wider range of information than is typically available on a Family Violence Form Set (Pol 1310). Information from the HAIP database, CYF records and the Department of Corrections are important sources of additional information in assessing risk. Where relevant, so too is information from other participating agencies.

The FSN makes a risk assessment rating at the soonest time possible following the family violence incident. Currently, families involved in incidents which occur Sunday to Thursday are assessed within (approximately) 24 hours: incidents which occur Friday-Saturday are assessed on Monday. With this mechanism in place, further support and intervention can be mobilised quickly. This should increase engagement
and hence, the increase the likelihood of successful intervention. Rapid response should also decrease risk substantially, where there is escalation which might result in serious harm.

7.2.3 Accountability
The final action component is the review process which ensures that the planned follow-up has resulted in successful engagement. If it hasn’t, alternative referrals are made, and the case is brought back again. This provides an excellent accountability mechanism for the FSN, and is a critical improvement from the FVIARS.

7.3 Outputs: multiple agency engagement
If we think of the crisis response and SAM triage process as being at the heart of the FSN, then engagement with relevant services is the short-term output of the FSN process.

Family violence does not occur in a vacuum. There are inevitably associated factors. These might include any of the following: socio-cultural factors such as notions of male privilege and entitlement; substance abuse; mental health issues; inconsistent or inadequate parenting practices; child abuse and neglect; stress (Antle et al., 2007; Mertin & Mohr, 2002; Pence & Paymar, 1993; Robertiello, 2006; Rogers, McGee, Vann, Thompson & Williams, 2003). The relationships between these variables are not simple. Nor for the most part are they unidirectional. For example, although excessive consumption of alcohol is popularly perceived as a major cause of family violence, a more rounded view also recognises the use of alcohol as a form of self-medication against the psychic pain of violence. The point here is that addressing the impact of violence, and reducing the risk of reoccurrence, typically requires addressing multiple factors.

Thus, an important part of the underlying logic of the FSN process is the support, referral and follow-up that are expected to result in families engaging with appropriate services. In some cases, a single service may be sufficient; more often, multiple services may be needed. Unless engagement occurs, it is unlikely meaningful outcomes will be achieved. Having multiple agencies on-hand ensures more holistic support can be provided if necessary. It appears to us that the FSN agencies in Waikato are highly dedicated to achieving engagement with families. As we note later, giving high priority to meaningful engagement seems key to the success.

7.4 Outcomes
The fourth component of the model includes short and medium term changes which could be expected to be associated with effective engagement with agencies. It is important to be realistic about how long some of these changes can take. It can take months, if not years, to overcome a serious addiction. A common criticism of stopping violence programmes is that they are too short.

It is also important to expect that in the short to medium term, some measures may indicate a worsening situation. Here, we are drawing attention to one of the paradoxes of family violence intervention. As families become more engaged, “tolerance” of
**Formative evaluation of the FSN**

**INPUTS**
- Large team of interdisciplinary, multi-skilled FV staff
- Multiple comprehensive databases with >20 years of FV related data in Hamilton
- An extensive history of interagency cooperation and collaboration in Hamilton

**OUTCOMES**
- Refuge attends every family violence incident
- Daily safety assessment meeting for every family violence incident
- Weekly medium-high risk case review meetings
- Immediate support and intervention before crisis passes

**OUTPUTS**
- Each case allocated to agency best-placed to do follow-up
- Medium and high risk cases monitored and re-evaluated
- Officers more accountable due to information sharing and re-evaluation of high risk cases

**OUTCOMES**
- Fewer serious assaults reported over all
- Safer homes for children, particularly for families with a history of FV
- Better family functioning as multiple issues have been addressed

**IMPACT**
- Safer homes for families, particularly for children
- Better family functioning as multiple issues have been addressed
- More efficient and effective system for dealing with FV

**7-10 YEAR FORECAST**
- More incidents reported
- Fewer serious assaults

**MEDIUM TERM**
- More efficient child protection system for FV
- Better family functioning as multiple issues have been addressed
- Safer homes for children

**SHORT TERM**
- Immediate support and intervention before crisis passes
- Each case allocated to agency best-placed to do follow-up
- Medium and high risk cases monitored and re-evaluated
- Officers more accountable due to information sharing and re-evaluation of high risk cases

**REFERRALS**
- Violence incident reported to do follow-up
- Daily safety assessment
- Medium and high risk case review meetings
- Weekly medium-high risk case review

**HUMAN RESOURCES**
- Large team of multi-skilled FV staff
- Interdisciplinary, interagency

**COMMUNITY**
- Multiple databases with >20 years of FV related data in Hamilton
- FV data collaborated in
- An extensive history of interagency cooperation and collaboration in Hamilton

**ORGANISATION**
- Better family functioning as multiple issues have been addressed
- Safer homes for children
- Fewer serious assaults reported over all

**PROGRAMME LOGIC MODEL FOR THE FAMILY SAFE NETWORK**

*Figure 7: Programme logic model for the Family Safe Network*
violence may reduce and a willingness to seek help may increase. Certainly, this was a point made by a number of our interviewees, including police officers. The logic here is that effective intervention might well produce an increased number of reports of violence in the short to medium term. However, while the number of reports may increase, the corollary is that effective intervention should mean that the severity of incidents coming to notice will decrease.

7.5 Impacts
Under this heading, we have grouped changes that may be observable mostly at the community or population levels. They will likely take a long time to emerge. Unlike the more immediate outputs and outcomes, it will be almost impossible to confidently attribute these impacts to the FSN. For example, the number and seriousness of family violence assaults is likely to be influenced by a wide range of factors. These include: education programmes, prevention campaigns, decreased tolerance of violence in the general population, changes in economic conditions, changes in gender role expectations, changes in income support policies and greater awareness of family violence. There may also be improved responsiveness to family violence by agencies outside the sector (e.g. schools, health services), which will result in earlier intervention.

8 Recommendations for further evaluation

8.1 Process evaluation of the FSN
As indicated above, progress in the family violence sector is notoriously difficult to measure. A reduction in reporting of family violence is not equivalent to reduced violence, as only a small minority of assaults are currently being reported to the Police (Herbert & MacKenzie, 2014). In fact, increased reporting of family violence could be viewed positively, as it could reflect an increased willingness to contact Police and/or engage with Refuge.

The programme logic model provides a framework for thinking about further evaluation. It identifies some of the processes that link inputs and impacts. It is those processes which need to be the focus of the next stage of evaluation. A consistent theme in the scholarship of programme evaluation is the importance of process evaluation. While policy makers and funders are usually more interested in the evaluation of outcomes and impacts – understandably so – it can be a mistake to focus on these where the programme is immature. There are at least three reasons for this.

- It may be too soon for the programme to achieve significant impacts.
- The programme is typically still developing. Almost by definition, any outcome or impact evaluation will be immediately out of date as the programme no longer exists in the form in which it was evaluated.
- No-change findings can be wrongly attributed to a faulty programme design whereas it may be that the design is sound and that the problem is a failure to implement one or more key processes adequately (Patton, 1997).
It is our strong recommendation that the next step is a formal process evaluation. While a process evaluation of the form we are suggesting may provide some preliminary information on the impact of the FSN on families, this should not be the focus: instead, the broad aim of the process evaluation should be to examine the processes of the FSN to determine the extent to which they are being implemented, identifying strengths and weaknesses of those processes and making recommendations for improvement.

We envisage an evaluation with three main components.

1. Further go-along interviews
2. Key informant interviews.
3. A quantitative analysis of actions and outputs.
4. Qualitative analysis of outputs and outcomes for a sample of cases.

These components are elaborated below. Our elaboration uses first person pronouns. We do this because our recommendations are very much based on our experience conducting this formative evaluation. However, we fully appreciate that other evaluators may be engaged to do this work should it go ahead.

8.1.1 Further go-along interviews

These have been very useful in gaining insights into the day-to-day reality of the FSN. However, the programme continues to develop and it is likely that what we have observed thus far will change over the next few months. This will definitely be the case with the rural hubs. Go-alongs will give us an up-to-date picture of the operation of the FSN. By engaging staff in conversation about their work, we could expect to better understand the rationale for changes made. We need to increase the number and diversity of our go-alongs to include, for example, follow-up activities and rural hub meetings. Go-alongs will allow us to contextualise the other information we collect.

8.1.2 Key informant interviews

For similar reasons, we would want to complete further key informant interviews. One priority would be people associated with the rural hubs and new agencies who have joined the FSN. This would include the rural region service providers. We would also want to re-interview most of the key informants we spoke to for the formative evaluation. As the project matures, we would expect them to be able to reflect on the changes that they have witnessed in the FSN and the impact of those changes on their agencies.

8.1.3 A quantitative analysis of actions and outputs

Here we are referring to crisis support, risk and needs assessment (SAMs), referral and the provision of follow-up support. The current evaluation has given us some valuable insights into how these actions and outputs are being generated. However, we have not been able to quantify these (apart from some very simple measures reported in Figures 4, 5 and 6). Further analysis is needed to answer questions such as:

- In what proportion of family violence 111 calls do advocates make face-to-face contact with families? Within what timeframe is this engagement occurring?
• What referrals are made as a result of SAMs? Here we would want to report on not only what agencies receive referrals but also the general purpose of that referral (e.g. finding suitable accommodation, obtaining a protection order, improving parenting skills, addressing chemical dependency, helping children heal from trauma, addressing problematic beliefs relevant to family violence etc.
• Are 111 calls being made at an earlier time, before the violence has escalated?
• What is actually delivered as a result of the referrals? This will be the hardest of the outputs to quantify, partly because of the diversity of support and services provided.

Collating this information will be a complex and time-consuming process. It would make best use of evaluation resources to restrict the analysis to a sample of 111 calls. Because family violence call-outs follow a weekly pattern, the sample would need to be drawn from all days of the week. For example, the sample could focus on a specified period (e.g. a month) and include all calls taken on a randomly selected Monday, Tuesday, Wednesday etc from that month.

We would need to access Police records to identify all eligible family violence calls from the sampled days. Police records would also be necessary to gather basic information about the call (e.g. relationship between offender and victim, whether there was an arrest, narrative of incident). This sort of information could be taken from Family Violence Reports. We would need to then match this information with information from
  • Refuge (especially call-out engagement and initial risk assessment),
  • SAM agendas and records of SAM outcomes.
  • Relevant agency client files.

Clearly this sort of analysis would be possible only with the full cooperation of the relevant agencies.

8.1.4 Qualitative analysis of outcomes for a sample of cases

While the quantitative analysis will provide a good overview of the actions and outputs as recorded against a sample of families involved in 111 call outs, it will not provide any insights into the lived experience of those families. Nor will it give any real indication of any change – or lack of change – for those families. For these reasons, we think it important to supplement the quantitative analysis with qualitative information. This would probably be in the form of case studies. Case studies allow the experiences of participants to be understood in context. Case studies are time-consuming and there are issues in maintaining the anonymity of participants but we believe that these challenges can be overcome. We have used case studies effectively in previous family violence research (Robertson et al., 2007, 2013).

An important issue here would be selecting the sample for case studies. It would be important for the case studies to reflect some of the diversity of cases coming to the attention of the FSN. We would propose a sampling matrix which, potentially, could include the following dimensions.
  • Ethnicity
• Arrest and non-arrest cases
• Relationship between victim and abuser: i.e. while the majority of case studies would be male assault female partner cases, it would be useful to capture other scenarios in the case studies: e.g. female on male partner; sibling violence, violence against parent.
• Location: i.e. including both city and rural hubs.
• Risk level (as assessed at the SAMs).
• Nature of follow-up: i.e. it would be useful cases allocated to a variety of agencies.

Compromises would need to be made: potentially, such a matrix could contain hundreds of cells. Neither a representative sample, nor one that included all possibilities relating to diversity would be possible. Nevertheless, we think case studies to have an important role to play in process evaluation as they help understand participants’ experiences of the intervention(s). Case studies may also be useful to inform planning for later outcome evaluation.

9 Apparent success factors of the FSN

In this section, we discuss what seem to be key features of the FSN. We have termed these “apparent success factors” because we do not yet have good information about the impact of the FSN on the lives of families who come to its attention. Nevertheless, it is possible to identify aspects of the programme which show considerable promise: it is likely that further research may confirm these to be crucial to programme effectiveness. These factors are discussed below. It is also possible to identify some areas in which the programme might be vulnerable. These are aspects that may need further attention and development and they are discussed in Section 12.

9.1 Leadership and collaboration

In section Understanding Interagency Responses3.1, we cited Cheryl Hann’s (2012) model of interagency networking. Like Dovey (2003) before her, Hann reserved the term collaboration for networks in which there are

well-defined relationships and roles with MoU; a collaborative structure with a coordination function; planning and commitment to a shared vision, aims and objectives; and joint accountability (Hann, 2012).

This seems to accord with the vision of the FSN, even if some aspects of it are still under development – as could be expected of a pilot project. It also seems to accord with most, but not all, of the views of the managers we interviewed. Mostly, when we spoke to senior people in participating agencies, we heard a recognition that it was important to commit to supporting a vision and an enterprise larger than their agency.

This is not easy. One experienced manager put it this way.

I don’t think working together is natural for most people. Most agencies act pretty much like tribes. Teaming up with the tribe next door isn’t necessarily an easy thing to do. And a lot of people in the agencies don’t have the skills to do it. So you have to pick your people, because the wrong people can wreck an interagency relationship quite quickly.
When we reflected on our interviews, it seemed to us that most of the managers we spoke to seemed happy to “team up with the tribe(s) next door.” Given the prevailing environment of competitive funding, this is quite remarkable. It is important to note that this was not a universal feeling. Some managers were resentful of the way the FSN had been implemented. As could be imagined, there is considerable potential to upset agencies whose way of doing business was being challenged. It is possible too, that some agencies may be receiving fewer referrals than they did under FVIARS.

One relatively common comment from our interviews was that the FSN has been Police-led. Technically, that may overstate the Police role a little as it ignores the contribution of the multi-agency Waikato Family Violence Management Group. But while that group has no doubt been important in shaping the FSN, its governance role is not very visible to front-line staff. Instead, the Police, especially as personified by the former and current FSN directors, are widely perceived as leading the initiative.

In some cases, this was seen as a negative. One manager told us, that the FSN “was not a well thought-out initiative... (police) destroyed in one foul sweep, years of collaboration.” Other comments were more measured. Some interviewees described a “bulldozer approach” which may have alienated some agencies but immediately qualified that by describing the benefits of Police leadership. Here, they seemed to be referring to a certain action-orientation which ensured that things got done. They also referred, quite explicitly, to the resources the Police had brought to the table. It was, to most agencies, an opportunity that could not be ignored.

It is relevant to note that there was an understandable urgency in getting the FSN up and running: or to rephrase one of our interviewees, to get the aeroplane flying while still building it. National-level decision-makers expected tangible results for the resources being invested in the FSN. We have found a near-consensus view that the FVIARS was no longer effective in the Waikato District. There was, therefore, an urgent need to improve accountability processes in local family violence interventions. It would be surprising if there was not at least some resistance to innovations which aimed to increase agency accountability.

When viewed in this context, the leadership of the project must be considered as one of its significant strengths. This was reflected in what can only be described as a high level of enthusiasm about the FSN in most – but not all – of the key agencies. It is possible too, that this enthusiasm is growing. Although we have been involved with the FSN only a short time, it is tempting to conclude that as it gains traction, its doubters may be coming on board.

### 9.2 A strong local history of collaboration

As we noted in section 3, there has been an extensive history of interagency collaborations in the Waikato, especially in Hamilton. This arguably started with the Police-Refuge cooperation which was part of the trial of the Police domestic violence arrest policy in the mid-1980s. It developed considerably with the HAIPPP and has continued in various ways since. Interestingly, there are several people involved in the FSN whose careers have spanned most, in a few cases all, of that history.
A consistent theme in our interviews, especially those with mid-level and senior managers, was a claim that Hamilton had a strong history of interagency collaboration in family violence – both between government agencies and between government and non-government agencies – that made it different to other centres. It is impossible to objectively assess such claims, but in our experience – outside this evaluation – Hamilton has often been seen as an exemplar for interagency collaboration. It is likely, therefore, that the FSN has been developed in a particularly favourable environment.

This raises issues for the possible replication of the FSN approach in other centres. While the general approach may be widely replicable, it would be naïve to expect such rapid progress as we have observed in centres in which there is not such a strong history of collaboration.

9.3 An emphasis on engagement

It is axiomatic that family violence thrives in privacy and isolation. Both the research literature and the practitioners we spoke to confirm the importance of making the best use of the often limited opportunities to engage families – victims and offenders. The dual Police-Refuge crisis response is obviously a key strategy for engaging families and our observations suggest some success here. However, the emphasis on engagement goes beyond that, with the follow-up actions mandated at the SAMs. Repeatedly, FSN staff and staff in other agencies spoke of engaging families as their top priority.

One incident that we observed during police ride-alongs showed how the commitment to engagement can work in practice. This involved a “silent” 111 call; one in which the woman caller hung up after being connected to the Police. The standard practice in such circumstances is to call back. These calls were not answered, so Police were dispatched to the scene. As we approached the house, the noise of a vacuum cleaner could be heard. This was turned off when the officers knocked at the door, which was opened by a woman who clearly did not want the police to enter. She said that things had got “a bit stressful” when the children had broken the television but things had now calmed down. However, in the background we could hear an angry male voice telling the Police to leave.

Although the officers considered the explanation implausible – they thought it much more likely that the man in the background was responsible for the damage – they had no grounds for entering the house in the absence of an invitation. They left after inviting the woman to call again if there was any problem. Ordinarily, this might have been the end of the matter but the next SAM meeting developed a more strategic response. Information collated from Refuge, the HAIP database, Police and Corrections helped identify this as a high risk case. The man presumed to be in house (he had remained out of sight) was a recidivist offender with a long history of assaults against the woman who answered the door and against former partners. Because it was thought to be unsafe for advocates to visit alone, a joint Police-Refuge follow-up was planned. The plan was to make repeat calls until one succeeded in making contact with the woman while her partner was out.
More generally, engagement was widely considered to require face-to-face contact. The importance of face-to-face comment was an almost universal theme in our conversations with FSN personnel and the practitioners in participating agencies. Several made an explicit contrast with FVIARS meetings, noting that follow-up from FVIARS meetings was often limited to sending out a letter. Such practitioners uniformly described relying on letters to engage families was totally inadequate. We agree. The face-to-face engagement we refer to here includes moving the woman and children to a safe house and assisting women to file a protection order against her partner. Alternatively, teenagers might be assessed for suitability to a Big Brother or Big Sister mentor, and males offered attendance at a Stopping Violence Programme through HAIP. There are many tangible, practical assistance options available to families who engage. The point is that these options will only be utilised if the relevant people are engaged.

9.4 Engaging the entire family

A growing critique of family violence interventions is the way services have developed essentially as isolated silos (Herbert & McKenzie, 2014). Different services have different responsibilities in respect of different clients: the criminal justice system processes offenders; women’s advocacy services seek to empower women and help them heal from trauma; child protection services seek to keep children safe from abuse. Another crucial player is the Family Court and those charged with helping families resolves issues relating to parenting post-separation. Not only do these various organisations and systems tend to focus on different parties, they also tend to have difference priorities and different world views (American Psychological Association Presidential Task Force on Violence and the Family, 1996; Herbert & McKenzie, 2014; Hester, 2011). In the analysis of Marianne Hester, it is as if they live on different planets.

Increasingly, there is interest in developing a more holistic response to family violence. In part, this has been inspired by indigenous cultures which tend to favour collective responses (Coker, 2006). A local example is the Whanau Ora Wellbeing programme developed by Te Whakaruruhau (Robertson et al., 2013). This post-crisis programme supports women in re-establishing themselves in the community. A defining characteristic is the way that it seeks to engage whanau members, including abusive partners, providing a wrap-around, whole of whanau approach.

The FSN offers similar possibilities through strategic referral and follow-up. The variety of agencies to which referrals can be made (see page 22) means that there are services available to cater for the diversity of needs within a family. As noted earlier, nearly two thirds of cases are referred to two or more agencies (see page 28). We were told that the aim of multiple referrals was to engage the offender, the victim, the children and the wider family. Such referrals offer exciting possibilities but further research is needed to assess the extent to they result in consistent and coherent wrap-around services which are effective in addressing the needs of the whole family.

9.5 The advantages of colocation

The Hamilton Abuse Intervention Project headquarters (HAIP) is currently the ‘base’, for the FSN. This includes the central and rural FSN facilitators and their respective
administrators, the Family Violence Harm Prevention Team, the FSN director, Corrections Project Leader, and one full-time Child, Youth and Family representative. Collocation has been unanimously reported by the above staff as a critical component of the initiative. It has also been referred to as “cross-pollination”. This is congruent with literature which states that the most tightly collocated collaboration groups are the most successful (eg. Thakur, 1998). In the family violence sphere, collocation allows immediate interdisciplinary decision making, as well as increased skills from informal training between FSN staff.

A good example of the former concerns cases where decisions need to be made before the next scheduled SAM, such as those where an offender is arrested on a Friday. Such an offender would have a bail hearing well before the next SAM (Monday). Because most the relevant people work in the same office, the FSN team can come together quickly to make a recommendation regarding Police submissions on bail. While the Police alone will have some relevant information, decisions can be enhanced by consulting Corrections and the HAIP database.

9.6 Accountability and quality control

Many of the FSN leadership team stated the importance of holding agencies accountable for the effectiveness of their interventions with the cases they have referred to them. As mentioned, a consistent criticism of the FVIARS was the lack of accountability: what happened in respect of a referral generally remained hidden to the other agencies. In contrast, the FSN provides a framework for such accountability.

As mentioned earlier, this happens in at least three different ways. Urgent and/or high risk cases may be brought back to another SAM, either the next day or shortly thereafter. Other cases are brought before the weekly FSN meetings. Some cases are signed off by the relevant facilitator.

This may be an area for development. For example, it wasn’t clear to us why cases were allotted to one of the review options and not another. Neither is it clear at what point the FSN review should be considered complete. For example, is it enough to know that an initial intake process has been scheduled or should the outcome of that assessment be required? We don’t have answers to these questions but the main point is that the (developing) accountability processes of the FSN constitute a major advance compared to the FVIARS.

A higher level accountability mechanism is the Family Violence Inter-Agency Management Group. This group is composed of high level staff from the central FSN agencies. Meeting once a month, this group is able to discuss the general operation of the FSN, and recommend any changes in protocol or procedure. Each member then returns to their agency to relay and implement changes. Such a process makes each agency accountable, and aims to ensure reflexivity in practice, on an organisational level.
10 Areas for development

In our view, a lot has been achieved in substantially re-engineering the family violence response system in the Waikato Police District in a remarkably short time. As with any new initiative, growing pains have been apparent. On the whole, we have been impressed with active problem-solving approach evident within the leadership of the FSN such that “rough spots” are identified and addressed as quickly as possible. Indeed, the issues we discuss below are being worked on and are likely to be resolved in the near future. Nevertheless, we think it worthwhile to cover these issues: there may be lessons here for those responsible for any replications of the FSN in other Districts.

10.1 Developing the rural hubs

The FSN approach is less developed in the rural hubs. Collectively, the hubs process around 100 cases per week. As the rural facilitator and administrator are based in Hamilton, travelling and communication with each hub is an issue which has required consideration. Currently, daily SAM meetings are being held via telephone conferencing, for each hub. Weekly review meetings are held in person, run by the facilitator. The hub areas are reasonably diverse in terms of their demographic profile, the services available and their history of working together. This adds to the challenge of developing them.

- Some regions do not have refuge, or have a refuge which cannot afford to contribute staff to 24/7 crisis response.
- The much smaller number of cases may mean it is harder to justify the time commitment to engage in SAMs. Therefore, telephone conferencing has proved an important mechanism for saving time.
- Each hub needs to find a range of agencies which cater to the needs of each region, with wide service coverage and no service gaps.

FSN are working hard to develop a version of FSN that will work for the rural hubs.

10.2 Training and supervision

The implementation of the FSN has required some significant changes to the way participating agencies operate. This is particularly so for Police and Refuge front-line staff. Our observation was that the extent to which such staff understood the aims and philosophy of the NSN varied. Some staff were confused about some aspects of the process. This is hardly surprising: any new initiative will take some time to “bed in.” Finding time to adequate brief and train staff can be difficult when those staff have to cope with “business as usual” – or, as may be the case here, cope with more “business” than usual. Nevertheless, ensuring that all front-line staff understand what they need to do and monitoring their performance will need to be given some priority over the early stage of the FSN implementation.

10.3 More efficient communication and data systems

The literature consistently reports that good communication is key for successful collaboration (Herbert & MacKenzie, 2014; Potito, Day, Carson & O’Leary, 2009). A lack of technological infrastructure for both communication and information sharing
has been identified as an issue for the FVIARS (Herbert & MacKenzie, 2014). These remain a challenge for the FSN.

On the whole, communication between the main agencies involved in the FSN seems to be quite effective. Similarly, some of the technology available to government agencies is impressive. The ability of representatives of government agencies to access their respective databases while participating in SAMs has undoubtedly improved the speed and quality of decision making. We saw similar use of remote access to databases by Police patrols: knowing more about the relevant background than what is supplied by Police comms is undoubtedly useful.

At the same time, we observed what several of our interviewees commented on.

1. The efficiency and effectiveness of FSN could be enhanced by improved communication. A good example of this is delay that occurs from time to time in Police notifying Refuge Call-out advocates about incidents. Typically, there are details about the scene and family which need to be relayed to the advocates. When Police have another job to attend, taking the time to relay case details can be problematic for Police. Perhaps there is a more efficient system which could be developed here, to relay the facts to Refuge.

2. There is quite lot of double data-entry. Typically, two or more agencies are entering the same information on their respective databases.

3. The databases of some organisations seem to be structured in a way that makes compiling information for SAMs quite complicated and time-consuming.

The FSN leadership is well aware of these problems. The possibility of a FSN database is being discussed. Ideally, such a database would set up in a way that allowed for certain information to be automatically uploaded from relevant agency databases.

10.4 Further development of the dual crisis response

In order for Refuge to respond at the scene of every family violence incident in Hamilton, a certain amount of information must be transmitted to Refuge relatively soon after the event has been reported to Police comms. Although substantial improvements in this communication have been made during the pilot, we consider this a critical component of the Network. Further streamlining could be useful.

Discussion with Police staff identified reasons why making the call to Refuge may be delayed. First, there may be a need to assess the safety of the scene and make sure it is secure before Refuge Advocates arrive. Some Police Officers also thought that having two services at the scene at one time may make it difficult for each to interview family members. On the other hand, other officers raised the possibility of conducting interviews jointly with an advocate. This is an intriguing possibility worthy of further discussion. While Police Officers and Advocates have different roles in interviewing victims, it is likely that having two interviews means that some matters are canvassed twice, possibly needlessly. A more seamless approach is worth considering.

10.5 Sustainability

The FSN pilot has been implemented largely utilising existing resources. The secondment of staff to the FSN is a case in point. This is probably sustainable only in
the short term, even for large agencies (Corrections, CYF, Police). Specific provision for FSN staff will be needed in the medium and long term. We are aware that this is currently being discussed.

The provision of a crisis response service by Te Whakaruruhau is a major commitment, especially for an organisation of its size. Some funding has been obtained and we understand further discussions about funding are being held. Sustainability will require predictable and adequate funding for this service.

It is also clear that the FSN is increasing the workload for “downstream” agencies which receive referrals from SAMs. We are not in a position to quantify this increase but Barnardos and HAIP both report a significant increase in workload related to the FSN. For Barnardos, the increase is mainly in relation to working with children exposed to family violence. For HAIP, the increase is mainly in unfunded, voluntary self-referrals to the Men’s Education Programme. It is likely that other agencies are also experiencing increases in workload, although at least one agency reported reduction in referrals compared to FVIARS. Therefore, while the pilot is running, agencies need to be aware that the distribution of referrals may have changed.

Current funding arrangements may be an impediment to further development of the FSN approach. That is, some agencies have reportedly declined to take on referrals because to do so would mean that the service quotas they are contracted to deliver would be exceeded. Funding arrangements will need to be aligned with FSN workflows.

11 Conclusions

Our objectives in this study were to

1. Document the development of the FSN.
2. Develop a programme logic model for the FSN.
3. Identify the priorities for a more formal evaluation.

Documenting the development of the FSN. As will be abundantly clear to readers, one of the main characteristics of the pilot is the speed at which it has developed, and continues to develop. Because we began our work only in May, we were unable to adequately document the early phases of the development. However, our observations over two months and the reflections of our interviewees, which covered a longer period, paint a picture of an initiative which is proactive, reactive and adaptive. That is, it has been proactive in taking a largely moribund, unaccountable FVIARS and re-engineering it in line with a strong commitment to early invention, engagement and accountability. It has been reactive in quickly addressing the inevitable problems and roadblocks along the way. It has been adaptive in that staff have been prepared to refine their approach in the light of experience.

Programme logic model. In figure 7, we set out our initial version of a programme logic model: that is, an attempt to explicate the rationale for the initiative and to provide an explanation for why it might be expected to produce the desired results. It is important to note that our model has been developed primarily from our interviews and observations. Missing are the experiences of the members of families in which
violence has come to notice. Further work is needed to understand from their perspective the processes of reaching out for help and engaging in processes of change. A more robust programme logic model may result. In the meantime, it is encouraging that the literature does seem to support the logic of engagement and early intervention.

**Priorities for further evaluation.** In the end, the FSN is justified only if it is making a meaningful contribution to reducing the incidence and severity of family violence. However, the priority for further evaluation, in our view, is a formal process evaluation. That is we need to be able to closely and systematically examine programme processes to ensure that they are being implemented consistently and effectively. We need to identify which processes seem to be central to the mission of the FSN and which may be less crucial. A formal process evaluation will need to engage directly with family members to understand their experiences of FSN processes. Such an evaluation will need to be properly resourced if it is to produce credible conclusions.

In the meantime, we think that the FSN is a very promising initiative worthy of further development and evaluation. Much has been achieved in a short time to re-engineer the response to family violence in the Waikato Police District. What is being put in place now is a step-change from the FVIARS. It appears to be generally consistent with what the literature tells us is good practice in family violence collaboration. As with any pilot, there have been a number of setbacks and hurdles to navigate and while the basic framework is in place, the approach still needs development in certain aspects. In our view, this tends to suggest that consolidating the FSN in the Waikato needs to take priority over attempts to replicate it elsewhere.

### 12 References


## Appendix: FSN Tiered Assessment and Review

### Tier 1: Crisis response - Urgent intervention

These are occurrences requiring immediate case management to minimise issues of risk and ensure the safety of victims and children. They may also require urgency regarding offender accountability and a multi-agency joint safety plan.

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Entry</strong></td>
<td>Where the risk of harm has been assessed on seriousness, escalation, repeat calls for service, and/or imminent risk to children</td>
</tr>
<tr>
<td><strong>Intervention time</strong></td>
<td>Commenced immediately within the first 24 hours - Reviewed daily at SAM</td>
</tr>
<tr>
<td><strong>Action</strong></td>
<td>Providing immediate response and victim safety, dealing with the circumstances of both subjects and their children if applicable (Police and Refuge initial attendance and actions), communication with relevant agencies and information gathering for assessment.</td>
</tr>
<tr>
<td></td>
<td>- Information is shared</td>
</tr>
<tr>
<td></td>
<td>- Risk assessment and timeline established</td>
</tr>
<tr>
<td></td>
<td>- Priorities and agreed actions established</td>
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<tr>
<td></td>
<td>- Referred to the FSN Meeting</td>
</tr>
<tr>
<td></td>
<td>Further development of those specific actions to address the risks identified, implementation, and delivery by agencies/providers, monitoring progress and reviewing the actions</td>
</tr>
<tr>
<td></td>
<td>- Further information is obtained</td>
</tr>
<tr>
<td></td>
<td>- Preparation of joint safety plan</td>
</tr>
<tr>
<td></td>
<td>- FSN Facilitator is identified as case plan owner and timeline established</td>
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<tr>
<td></td>
<td>- the risk mitigation is reported back reviewed daily at the SAM until risk level reduces and is re-assessed accordingly</td>
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<tr>
<td></td>
<td>- Multi-agency joint safety plan reviewed weekly at the FSN</td>
</tr>
<tr>
<td></td>
<td>- Case outcomes are feedback to FSN Facilitator</td>
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<td></td>
<td>- Agencies keep records of their own data</td>
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</table>
**Tier 2: Escalating towards crisis**

These are occurrences that indicate a worsening trend moving towards crisis. These cases require an acute assessment of safety needs, development and implementation of case management by multiple agencies.

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Entry</strong></td>
<td>Where the risk of harm is of a serious, repeat nature and escalating, and risk to children, family history, and intuition that risk is greater than that presented</td>
</tr>
<tr>
<td><strong>Intervention Time</strong></td>
<td>As soon as possible within 7 days - Reviewed weekly at FSN</td>
</tr>
<tr>
<td><strong>Action</strong></td>
<td>Providing immediate response and victim safety, dealing with the circumstances of both subjects and their children if applicable (Police and Refuge initial attendance and actions), communication with relevant agencies and information gathering for assessment</td>
</tr>
<tr>
<td></td>
<td>▪ Information is shared</td>
</tr>
<tr>
<td></td>
<td>▪ Risk assessment and timeline established</td>
</tr>
<tr>
<td></td>
<td>▪ Priorities and agreed actions established</td>
</tr>
<tr>
<td></td>
<td>▪ Referred to the FSN Meeting</td>
</tr>
<tr>
<td></td>
<td>Further development of those specific actions to address the risks identified, implementation, and delivery by agencies/providers, monitoring progress and reviewing the actions</td>
</tr>
<tr>
<td></td>
<td>▪ Further information is obtained</td>
</tr>
<tr>
<td></td>
<td>▪ Preparation of joint safety plan</td>
</tr>
<tr>
<td></td>
<td>▪ FSN Facilitator is identified as case plan owner and timeline established</td>
</tr>
<tr>
<td></td>
<td>▪ Progress of the plan is reported back and reviewed weekly at the FSN until risk level reduces and is re-assessed accordingly</td>
</tr>
<tr>
<td></td>
<td>▪ Case outcomes are feedback to FSN Facilitator</td>
</tr>
<tr>
<td></td>
<td>▪ Agencies keep records of their own data</td>
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</tbody>
</table>
Tier 3: Chronic or escalating risk, high demand, and/or complex needs

These are occurrences that indicate a worsening trend, chronic risk, escalating risk, high demand for services, or complex needs. These cases require an assessment of needs and development and implementation of case management by involving multiple agencies.

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Entry</td>
<td>Where the risk of harm to any party is lower than tier 1 and 2, but occurrences present a worsening trend, chronic risk, escalating risk, high demand for services, or complex needs requiring a multi-agency response</td>
</tr>
<tr>
<td>Intervention Time</td>
<td>Within 14 days - Reviewed <strong>fortnightly</strong> at FSN</td>
</tr>
<tr>
<td>Action</td>
<td>Providing immediate response and victim safety, dealing with the circumstances of both subjects and their children if applicable (Police and Refuge initial attendance and actions), communication with relevant agencies and information gathering for assessment</td>
</tr>
<tr>
<td></td>
<td>▪ Information is shared</td>
</tr>
<tr>
<td></td>
<td>▪ Risk assessment and timeline established</td>
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<td></td>
<td>▪ Priorities and agreed actions established</td>
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<tr>
<td></td>
<td>▪ Referred to the FSN Meeting</td>
</tr>
<tr>
<td></td>
<td>Further development of those specific actions to address the risks identified, implementation, and delivery by agencies/providers, monitoring progress and reviewing the actions</td>
</tr>
<tr>
<td></td>
<td>▪ Further information is obtained</td>
</tr>
<tr>
<td></td>
<td>▪ Preparation of multi-agency joint safety plan</td>
</tr>
<tr>
<td></td>
<td>▪ FSN Facilitator is identified as case plan owner and timeline established</td>
</tr>
<tr>
<td></td>
<td>▪ Progress of the plan is reported back and reviewed <strong>fortnightly</strong> at the FSN until risk level reduces and is re-assessed accordingly</td>
</tr>
<tr>
<td></td>
<td>▪ Case outcomes are feedback to FSN Facilitator</td>
</tr>
<tr>
<td></td>
<td>▪ Agencies keep records of their own data</td>
</tr>
</tbody>
</table>
**Tier 4: Low to medium risk - Single-agency response**

These are occurrences of reported domestic violence but do involve a worsening trend, chronic risk, escalating risk, high demand for services, or complex needs. These cases require an assessment of needs and a single-agency or SAM agency response, including internal agency action (Policy/Practice)

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Entry</td>
<td>Where the risk of harm to any party is lower than tier 1, 2 and 3, but there are needs requiring a single-agency/SAM agency response</td>
</tr>
<tr>
<td>Intervention Time</td>
<td>Within 7 days - Reviewed weekly at SAM</td>
</tr>
<tr>
<td>Action</td>
<td>Providing immediate response and victim safety, dealing with the circumstances of both subjects and their children if applicable (Police and Refuge initial attendance and actions), communication with relevant agencies and information gathering for assessment</td>
</tr>
<tr>
<td></td>
<td>- Information is shared</td>
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<tr>
<td></td>
<td>- Risk assessment and timeline established</td>
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<tr>
<td></td>
<td>- Priorities and agreed actions established</td>
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<tr>
<td></td>
<td>- Case outcomes are feedback to FSN Facilitator</td>
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<td></td>
<td>- Agencies keep records of their own data</td>
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</tbody>
</table>
**Tier 5: Zero to low risk - No further action required**

These are occurrences of reported domestic violence that present zero to low risk to any party and require no further action by any agency.

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Entry</td>
<td>Where the risk of harm to any party is zero to low</td>
</tr>
<tr>
<td>Intervention Time</td>
<td>Not applicable</td>
</tr>
<tr>
<td>Action</td>
<td>Providing immediate response and victim safety, dealing with the circumstances of both subjects and their children if applicable (Police and Refuge initial attendance and actions), communication with relevant agencies and information gathering for assessment</td>
</tr>
<tr>
<td>▪ Information is shared</td>
<td></td>
</tr>
<tr>
<td>▪ Risk assessment and timeline established</td>
<td></td>
</tr>
<tr>
<td>▪ Priorities and agreed actions established</td>
<td></td>
</tr>
<tr>
<td>▪ Letter offering assistance sent to parties by FSN Facilitator</td>
<td></td>
</tr>
<tr>
<td>▪ Agencies keep records of their own data</td>
<td></td>
</tr>
</tbody>
</table>