**DA Checklist for Early Help Services**

This checklist can be used as a tool by early help professionals in cases where domestic abuse and violence has been identified as a factor within a family (either current or historic). This is an initial checklist and should give an indication for a full DASH form to be completed.

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| **Areas for Consideration** | **Yes/No** | **Action to be taken/Comments** |
| **Have you considered your own emotional and physical safety when engaging with parents who are using abuse and violence within their relationships?**   * Have you considered the day/time & venue of meetings/conversations? * Do you have a safety plan in place? * Do you feel you have adequate support in place to manage this situation? If not identify what you need and who is best placed to offer this to you? |  |  |
| **Do you feel you know sufficient information about all family members i.e.**   * Does either parent have other children not resident within then household? * Does either parent have a history of DA incidents, offending or court orders against them? * Does either parent use alias’? * Does either parent have current or historic substance misuse issues? |  |  |
| **Have you fully considered the impact of the abuse on each child?**  Consider what they have witnessed, their relationship with each parent, whether they are encouraged to colluded or feel protective towards family members |  |  |
| **How you fully considered the level of emotional abuse within the family** e.g. are there rules the non-abusive parent and/or child has to abide by, can they go out freely, does the perpetrator control who they see and when? |  |  |
| **Have you completed a genogram for family? (if you have been appropriately trained)** |  |  |
| **Have you spoken to both parents separately?** |  |  |
| **Have you explained to the child (separately & in an age appropriate way) and family why you are involved and what your role will be? If yes have you addressed any anxiety around this they may have?** |  |  |
| **Have you considered whether safety planning with the non-abusive parent is required? If yes seek specialist support from local DA Services** |  |  |
| **Have you discussed safety planning with the child/ren or young person? If yes seek specialist support from local DA Services** |  |  |
| **Have you considered the non-abusive parent’s readiness and capacity to engage in services and with external processes?** |  |  |
| **Have you considered the impact the DA has had on parenting capacity?** |  |  |
| **Have you considered what positive change looks like for this family/child? What is realistic?** |  |  |
| **Have you considered whether the non-abusive parent is able to engage with their local DA services e.g. Womens aid, DASH** |  |  |
| **Does this case meet the referral criteria for MARAC and/or referral to Children’s Social Care?** |  |  |
| **If further incidents of Domestic abuse occur does this affect the level of risk to the children/family?** If yes seek immediate support from your line manager |  |  |

•Aylesbury Women's Aid - 01296 436827

•Wycombe Women's Aid - 01494 461367

•The Dash Charity - 01753 549865

•Victim Support - 08454 503883

•Thames Valley Domestic Violence Officers - 101

•Asian Women Helpline - 01494 446366

•Shelterline - 0808 800 4444

•The National Domestic Violence Helpline - 0808 200 0247

•LGBT Victim Support Helpline - 0808 168 9274

•Galop (support for LGBT victims) - 0800 999 5428