UNDERSTANDING THE RESPONSIBILITIES FOR ORGANISATIONAL LEADERS

VICTORIA
State Government

Acknowledgment of Aboriginal people and communities in Victoria

The Victorian Government proudly acknowledges Aboriginal people as Australia's First Peoples and as the Traditional Owners and custodians of the land and waterways upon which we depend. We acknowledge Victoria's Aboriginal communities and culture and pay respect to their Elders past and present.

Aboriginal culture is founded on a strong social and cultural order that has sustained up to 60,000 years of existence. Victorian Aboriginal communities and peoples are culturally diverse, with rich and varied heritages and histories pre- and post- invasion. The impacts of colonisation — while having devastating effects on the traditional life of Aboriginal Nations — have not diminished Aboriginal people's connection to country, culture or community.

The Victorian Government recognises the long-standing leadership of Aboriginal communities in Victoria to prevent and respond to family violence, supported through self-determination and self-management, to improve outcomes for Aboriginal people and families, whilst also acknowledging the devastating impacts and accumulation of trauma across generations as a result of colonisation and the dispossession of land and children.

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In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people.

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Determining which MARAM responsibilities apply to the organisation

Pillar 3 of the MARAM Framework requires organisations to 'assign responsibilities of services and service providers within them'.

Framework organisations have responsibilities under MARAM. To effectively meet these responsibilities, organisations need to:

— understand what responsibilities apply to the organisation

— enable the workforce to implement the responsibilities in practice.

Victim survivor focused practice guides illustrate how to meet the responsibilities.

The Responding to Family Violence Capability Framework (the Capability Framework) refers to four workforce tiers. These span specialist family violence services, core support services and professionals, mainstream/social support services and universal services.

The Capability Framework also identifies five capabilities (as well as foundational knowledge) and details the level of skill each tier should have within each capability.

The table on p. 14 of the Capability Framework shows where different organisations fit within the workforce tiers.

If your organisation is new to MARAM, these tiers are a useful starting point to determine where you fit in the family violence service system.

However, the tiers do not encapsulate or address the complexity and diversity of individual roles and programs within specific services and sectors under MARAM. For example, a tier 4 organisation might provide education services, but also employ welfare officers who hold capabilities described in tiers 2 or 3.

Once you have identified the tier your organisation belongs to according to the large portion of its workforce, you can cross-reference this with the 'Decision guide for organisational leaders' (see Figure 2 over the page).

The decision guide cross-references the capability framework with the MARAM responsibilities.

So for example, a tier 4 service holds responsibilities 1, 2, 5, 6, 9 and 10 – however, some tier 4 organisations may also have staff members holding responsibilities 3 and 4 or 7 and 8.

Suggested steps to identify responsibilities that apply to your organisation

- ❑ Identify the closest related tier for your organisation from the Responding to Family Violence Capability Framework.
- ❑ Identify whether your organisation has workers who fall within a higher tier.
- ❑ Cross reference the tier with the 'Decision guide for organisational leaders' (see figure 2 below)

3.1 SUMMARY OF THE WORKFORCE TIERS

The following table is intended to provide a broad guide to the four Tiers of workforces that have responsibility for responding to victim survivors or perpetrators of family violence.

This table is not designed to encapsulate or address the complexity and diversity of individual roles and programs within specific services and sectors. Rather, it provides a broad overview within which different workforces can understand the scope and limits of their role and expertise.

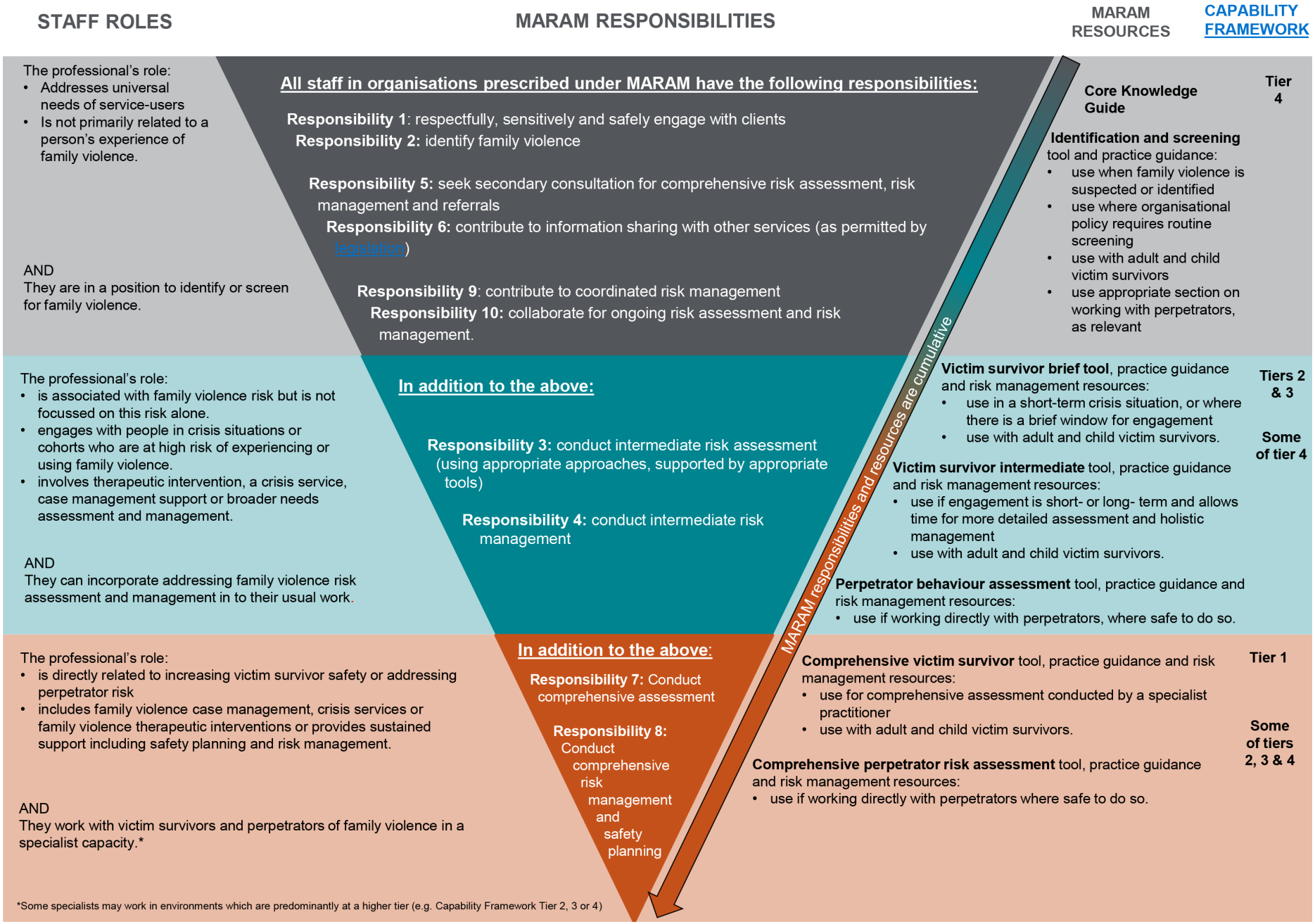
Tier 1: Specialist family violence and sexual assault practitioners	
Statewide family violence crisis and specialist services Support and Safety Hubs Family violence outreach services Women's refuges Centres Against Sexual Assault Perpetrator intervention services	Men's family violence telephone/online services Crisis family violence and sexual assault telephone/online services Specialist family violence or sexual assault professionals operating in in Tier 2 or 3 services Specialist family violence or sexual assault services for Aboriginal or culturally and linguistically diverse women and children or women and children with a disability
Tier 2: Workers in core support services or intervention agencies	
Courts and court services [14] Legal and paralegal agencies and services Corrections Police Family dispute resolution services	Forensic physicians and medical staff providing sexual assault crisis care Child Protection Child and Family Services Family and relationship services Homelessness services
Tier 3: Workers in mainstream services and non-family violence specific agencies	
Health care services Drug and alcohol services Housing services Mental health services Centrelink Individuals providing therapeutic services Emergency services	Maternal and Child Health Services Youth services Disability services Culturally and linguistically diverse services Aboriginal services Lesbian, gay, bisexual, trans and gender diverse and intersex services Aged care services
Tier 4: Workers in universal services and organisations	
Includes workplaces, education services, early childhood services, sport and recreation organisations and faith based institutions.	

[14] Within courts there are a range of roles that are primarily situated within Tier 2, however, it is acknowledged that there are some specialist practitioners (such as applicant workers, respondent workers and family violence registrars) that are situated in Tier 1 and some court-based services, such as duty lawyers, that might identify themselves in Tier 3.

Figure 1: Responding to Family Violence Capability Tiers

Figure 2: Decision Guide for Organisational Leaders

MARAM Responsibilities: Decision Guide for Organisational Leaders



Responsibility 1: respectful, sensitive and safe engagement

Who it applies to

- ✔ **All** Framework organisations (tiers 1–4)
- ✔ **Most** employees

Employees likely to hold responsibility 1

Any employee who interacts with a service-user or discharges other responsibilities related to family violence needs to be able to engage in a respectful, sensitive and safe way.

How your organisation can meet responsibility 1

Enable relevant employees to:

- understand the gendered nature and dynamics of family violence
- engage with service users respectfully, safely and sensitively
- work in an accessible, culturally responsive environment (which enables safe disclosure of information)
- respond to disclosures sensitively and prioritise the safety of victim survivors
- tailor engagement with adults, children and young people, Aboriginal people and people from diverse communities and maintain a person-centred approach
- recognise and address barriers that impact a person's support and safety options
- know what to do if disclosures of family violence are made
- ensure the organisation is a safe environment for employees and service users.

MARAM practice guide foundational knowledge and MARAM practice guide: responsibility 1: respectful, sensitive and safe engagement explore these concepts in greater detail.

Things to consider

Consider training **all** employees to have the capability to meet responsibility 1, even those who do not directly engage with service users.

This will enable all employees to engage respectfully, safely and sensitively with colleagues who may be dealing with family violence either personally or in the work scenario.

Responsibility 2: identification of family violence

Who it applies to

- ✔ **All** Framework organisations (tiers 1–4)
- ✔ **Most** employees

Employees likely to hold responsibility 2

Any employee who interacts with or observes service users will hold responsibility 2. This involves supporting the early identification of family violence indicators and observable signs of trauma.

Responsibility 2 also entails 'screening', where family violence is indicated by disclosure or by observation of signs of trauma.

The word screening may have different meanings in different organisations. For responsibility 2, screening means asking appropriate questions where family violence is suspected to identify family violence risk and to inform the next steps to take.

Some organisations require 'routine screening', including antenatal and some health settings. In this context, screening may occur at identified service delivery points, regardless of whether there are disclosures of family violence or observation of signs of trauma.

How your organisation can meet responsibility 2

Enable relevant employees to:

- identify family violence risk indicators and observable signs of trauma in adults and children / young people (e.g. physical indicators such as bruising, emotional indicators such as depression etc) (see MARAM practice guide 2, appendix 1: observable signs of trauma)
- Ask risk-relevant screening and identification questions (see MARAM practice guide 2, appendix 2: screen tool practice guidance and appendix 3: screening tool)

Refer to MARAM practice guide: responsibility 2 – identification of family violence risk.

Things to consider

Employees who do not directly engage with service users may be able to identify family violence.

This could include employees such as food service workers in a hospital, support workers in an early childhood education centre, administrative staff positioned in waiting rooms.

These staff may observe concerning behaviour among service users.

Screening should take place in a safe space, and responsibility 1 addresses what a safe environment may be.

A 'safe space' for screening will depend upon the circumstances of the interaction.

Office-based organisations that interact with service users in a controlled environment may be able to use private rooms for screening. Emergency responders may have to undertake screening in a variety of scenarios and locations.

In addition, a safe space for a child may be different than that for an adult ('child friendly environments').

The following considerations apply:

- identify the safest place possible in the context of your organisation's practice for screening questions to be asked
- set a standard for privacy – i.e. screening questions should never be asked in the presence or hearing of a potential perpetrator
- provide clear procedures for screening to take place
- screening questions for children and young people should be age appropriate.

Responsibility 3: conduct intermediate risk assessments

Who it applies to

✔ **Most** Framework organisations (tiers 1–3, some tier 4)

✔ **Some** employees

Employees likely to hold responsibility 3

Employees who can assess family violence risk alongside their usual work.

These employees are those who:

- engage with people in crisis situations or cohorts who are at risk of experiencing or using family violence, or
- provide therapeutic intervention, a crisis service, case management support or broader needs assessment and management.

How your organisation can meet responsibility 3

Enable relevant employees to:

- use intermediate (or brief as required) assessment tools for adults and children/young persons as indicated
- understand the assessment process and how to determine risk levels using the model of structured professional judgement
- identify protective factors for victim survivors, including children and young people
- seek secondary consultations, make referrals and share risk relevant information (see responsibilities 5 and 6)
- use organisational procedures to appropriately conduct risk assessments.

Refer to MARAM practice guide: responsibility 3: intermediate risk assessment and appendices 5–8, adult and child assessment tools and practice guidance.

Things to consider

Consider the position of employees undertaking intermediate risk assessments.

Will those employees practically be able to undertake information sharing, secondary consultations and referrals under responsibilities 5 and 6? Or would this be the responsibility of another employee within the organisation or a manager or central team?

While the ideal is for individual employees to hold both responsibilities, if this is not possible, your organisation must ensure procedures are in place to prevent delays or failure to record important information.

Generally, employees who hold responsibility 3 will also hold responsibility 4. If there is any circumstance where this is not the case, Framework organisations must have in place a clear policy and procedure to map a facilitated/warm referral to get from assessment to management.

This should also include ensuring risk is managed on an interim basis pending that referral being completed.

Responsibility 4: intermediate risk management

Who it applies to

- ✔ **Most** organisations (tiers 1–3, some tier 4)
- ✔ **Some** employees

Employees likely to hold responsibility 4

Employees who can manage family violence risk assessed under responsibility 3, alongside their usual work.

These employees are those who:

- engage with or be able to engage with the service-user on more than a 'one-off' basis, **and**
- have a trusted relationship or the ability to create a trusted relationship with the service user, **and**
- engage with people in crisis situations or with cohorts who are at risk of experiencing or using family violence, **and**
- provide therapeutic intervention, a crisis service, case management support or broader needs management.

How your organisation can meet responsibility 4?

Enable relevant employees to:

- respond to risk appropriately
- conduct safety planning with adult and child victim survivors (using MARAM aligned templates)

— talk to victim survivors about their options

— document evidence of family violence and the risk management plans created, intervention actions taken and engagement with other services

— seek secondary consultations, make referrals and share risk relevant information (see responsibilities 5 and 6)

— utilise organisational procedures to appropriately conduct risk management

Refer to MARAM practice guide: responsibility 4 – intermediate risk management and appendices 9–10, adult and child safety plans.

Things to consider

Consider the management of risk at an intermediate level in all circumstances.

As well as ongoing risk management as agreed with the service user, there may be a need to manage risk on an interim basis. This may include when waiting for a referral to be accepted to a specialist family violence service if immediate assistance is not available.

Risk management may also change over time. There must be procedures to ensure risk levels and safety plans are reviewed in response to change of circumstances or risk periodically.

Managers must be able to actively review and facilitate safety plans and risk management activities.

Responsibility 5: secondary consultation and referrals

Who it applies to

✔ **All** organisations (tiers 1–4)

✔ **Most** employees

Employees likely to hold responsibility 5

A core component of the MARAM Framework is to work collaboratively to assess and manage risk. Organisations are required to align with the responsibilities, and need to ensure their employees can appropriately make secondary consultations and referrals.

Most employees within Framework organisations make referrals and seek secondary consultations. This will enable a holistic response to family violence risk by supporting victim survivors to be safe, recover and thrive, and by keeping perpetrators in view and accountable.

How your organisation can meet responsibility 5

Enable relevant employees to:

— appropriately seek consent or views from victim survivors on referrals

— keep accurate records of secondary consults and referrals

— be aware of service barriers

— actively support and progress referrals

— actively seek and receive internal supervision

— actively seek and give (where appropriate) secondary consultations to support service users.

Refer to MARAM practice guide: responsibility 5.

Things to consider

— **Secondary consultations** are used to seek and receive additional input to assess or manage risk, determine actions in line with the assessed level of risk, and/or determine whether a referral or further coordinated actions are needed (see responsibilities 9 and 10).

— **Referrals** are used make and receive referrals – a process of connecting individuals (adults or children) to information, services or another professionals outside the original professional's practice area. This may be within the same organisation or in a different organisation. It may help provide targeted support to enable a culturally safe and appropriate service response and to respond to wellbeing and needs.

Organisations can enable their workforces to feel confident in seeking and providing secondary consultations and to make warm referrals by building key external partnerships.

Responsibility 6: information sharing

Who it applies to

✔ **All** organisations (tiers 1–4)

✔ **Most** employees

Employees likely to hold responsibility 6

A core component of the MARAM Framework is to introduce a **collective** responsibility to understand, assess and manage risk.

Framework organisations will need to ensure their employees can share information appropriately.

Most employees within framework organisations will seek and share risk-relevant information as authorised under relevant information-sharing schemes (which include, but are not limited to, the FVIS and CIS Schemes).

This will enable a holistic response to family violence risk by supporting victim survivors to be safe, recover and thrive, and by keeping perpetrators in view and accountable.

How your organisation can meet responsibility 6

Enable relevant employees to:

- understand the legislative framework for sharing of risk relevant information
- appropriately seek consent or views from victim survivors on information sharing
- understand what information is risk relevant in the circumstances for both assessment and management purposes
- keep accurate records of information sharing
- be aware of service barriers
- actively share information on a voluntary basis
- actively seek and receive internal supervision
- be confident to discuss with service users how and why information may be shared.

Refer to MARAM practice guide: responsibility 6.

Things to consider

- **Information sharing** occurs to support more robust risk identification, assessment and management, and to reduce the number of times a victim survivor needs to speak about the violence. Information sharing can be sharing information between organisations, but also sharing risk-relevant information directly with a victim survivor.

Organisational leaders need to consider the process for sharing information with other organisations and responding to information sharing requests.

For example, will managers or a central team be responsible for information sharing? (Note that even with a central team, all employees still hold responsibilities 5 and 6, as they need to share the information with their central team if not straight to external partners.

All employees need to understand the organisation's responsibilities to share information under all relevant legislation, and specific obligations if prescribed as an Information Sharing Entity (ISE) under the FVIS or CIS Scheme.

Record-keeping systems must be established as required under the Family Violence Information Sharing Scheme, and to comply with the legislative requirements of any other information sharing legislative provisions.

In relation to the FVIS Scheme, the Ministerial Guidelines (p. 20) require ISEs to prioritise requests for information sharing[1] in a timely manner. In particular, where a serious threat has been identified, ISEs should respond to those requests for information without delay. Organisations need to ensure processes are in place to enable a timely response to information-sharing requests.

1 Under Part 5A Family Violence Protection Act 2008

Responsibility 7: conduct comprehensive risk assessments

Who it applies to

- ✔ **Some** organisations (tier 1 and tier 2–3 organisations with individual specialist family violence practitioners)
- ✔ **Some** professionals

Employees likely to hold responsibility 7

Building from strength: 10-year industry plan for family violence prevention and response and the *Responding to family violence capability framework* identify family violence specialists as professionals whose role may sit in specialist services, or in organisations with a focus on the provision of other services.

These positions:

- carry considerable responsibility expertise and lead work in the delivery of services to victim survivors or perpetrators of family violence
- comprehensively assess family violence risk and manages serious risk
- are required to undertake this work as their primary activity.

How your organisation can meet responsibility 7

Enable relevant employees to:

- use the comprehensive family violence risk assessment tool
- use the model of structured professional judgement to assess the level of risk
- determine the predominant aggressor
- apply an intersectional lens when assessing risk
- assess for traumatic or acquired brain injury whether or not as a result of family violence
- identify protective factors.

Refer to MARAM practice guide: responsibility 7: comprehensive risk assessment and appendices 11–12, including the adult comprehensive assessment tool.

Things to consider

Your organisation may include employees who hold responsibility 7 even if it is not a specialist family violence service.

Responsibility 8: conduct comprehensive risk management

Who it applies to

✔ **Some** organisations (tier 1 and tier 1–3 organisations with individual specialists)

✔ **Some** professionals

Employees likely to hold responsibility 8

Their positions:

— carry considerable responsibility and expertise and lead work in the delivery of services to victim survivors or perpetrators of family violence

— comprehensively manage family violence risk and serious risk

— are required to undertake this work as their primary activity.

How your organisation can meet responsibility 8

Enable relevant employees to:

— develop a comprehensive risk management strategy with victim survivors

— use MARAM comprehensive risk management safety plans

— respond appropriately where victim survivors do not want to separate or are not ready to engage or ready to receive assistance

— engage with the justice system

— manage risk with an intersectional lens

— identify where a RAMP response is required and coordinate the referrals

— respond to wellbeing and needs of victim survivors.

Refer to MARAM practice guide: responsibility 8: comprehensive risk management and safety planning and appendices 14–15, including the comprehensive safety plan template.

Things to consider

Your organisation may include employees who hold responsibility 8 even if it is not a specialist family violence service.

Responsibility 9: contribute to coordinated risk management

Who it applies to

✔ **All** organisations (tiers 1–4)*

✔ **All** professionals

*Note that specialist family violence practitioners lead, and non-specialists contribute to, coordinated risk management.

Employees likely to hold responsibility 9

Coordinated risk management requires an employee to actively work with others to manage risk.

In practice, this means maintaining visibility of risk and a shared understanding of the perpetrator's behaviour, tactics and whereabouts to have a coordinated response.

All employees will hold responsibility 9, but may meet the responsibility in different ways (i.e. some will action safety plans, others may be the contact point for coordinated risk management plans).

All specialist family violence professionals/services are responsible for setting up and managing coordinated risk management meetings and processes.

How your organisation can meet responsibility 9

Enable relevant employees to:

— contribute to coordinated risk management through information sharing, referrals, action planning and coordination of responses

— take an ongoing role in collaboratively monitoring, assessing and managing risk over time, including identifying any changes in assessed level of risk. This includes ensuring risk management and safety plans are responsive to escalation of risk and changed circumstances

— participate in joint action planning, coordination of responses and collaborative action including enacting and monitoring safety plans.

Refer to MARAM practice guide: responsibility 9.

Things to consider

Organisations should identify the processes required for effective coordinated risk management.

This may include:

— being able to flag on systems when a service user is subject to a coordinated risk management plan

— assigning responsibility for updating partners on change of circumstances (including change of risk)

— keeping the perpetrator in view.

Tier 1 organisations will take a lead role in any multi-agency collaboration to assess and manage family violence risk.

Framework organisations with employees holding responsibilities 7 and 8 will need to ensure those employees are able to fulfil a coordination role.

To ensure successful operation of responsibility 9, organisational leaders should take steps to build strong external partnerships.

Responsibility 10: collaborate for ongoing risk assessment and risk management

Who it applies to

- ✔ **All** organisations (tiers 1–4)*
- ✔ **All** professionals

*Note that specialist family violence practitioners lead, and non-specialists contribute to, collaborative practice.

Employees likely to hold responsibility 10

Ongoing collaborative risk management requires an employee to actively work with others in assessing and managing risk.

All employees involved with an at-risk service user will contribute to ongoing risk assessment and risk management by keeping the victim survivor visible and the perpetrator accountable.

How your organisation can meet responsibility 10

Enable relevant employees to:

- information share using responsibility 6
- work collaboratively with colleagues and external partners to assess and manage risk
- review and monitor risk on an ongoing basis, including updating risk assessments and safety plans and responding to changes in circumstance
- participate in joint action planning, coordination of responses and collaborative action including enacting and monitoring safety plans.

Refer to MARAM practice guide: responsibility 10.

Things to consider

Responsibility 10 overlays the preceding responsibilities, and essentially requires organisations to ensure structures are in place to facilitate collaborative practice and promote ongoing assessment and management of risk.

Organisations should consider how they can strengthen organisational culture change and procedures/practice so that ongoing risk assessment and management, and collaborative practice, become business as usual.

Steps should also be taken to build multi-agency practices through participating in governance groups, communities of practice, advocating for policy changes, and memorandums of understanding with key partners.

Mapping between the responsibilities

As well as assigning responsibilities within the workforce, it is important to map the relationship between responsibilities both in terms of internal workforces and external partnerships.

Internal mapping – the responsibilities in practice within an organisation

Particularly in large organisations, it is likely the MARAM responsibilities will be held across different job roles.

Identification and screening may be undertaken by an office administrator, an assessment by an intake worker, and management by a case manager.

It is important to have clear organisational charts on the family violence pathways within the organisation.

Consider:

- Will information sharing be possible by all staff members, or will it be best handled through a central unit?
- Does there need to be a different process for night/weekend shifts to daytime shifts?
- Does there need to be a different process for regional and rural branches of an organisation to metro branches?
- How will risk be managed on an interim basis pending allocation for risk management?
- Who will be responsible for maintaining MARAM and family violence resources to ensure they are kept up to date?
- How will managers be trained to support front line staff undertaking identification, screening, assessment, management and information sharing?

A tool to assist organisations in mapping MARAM responsibilities is available on the MARAM Resources website.

External mapping – the responsibilities in practice between two separate organisations

All organisations will need to consider mapping responsibilities to external agencies.

This is particularly the case if a Framework organisation holds identification and screening, but not risk assessment and risk management responsibilities (noting that limited safety planning is still required after screening).

Consider:

- Who within the organisation will hold the responsibility to manage risk pending referrals being accepted?
- Who will be responsible for keeping referral and secondary consultation lists and resources up to date?
- In cases where coordinated responses are required, will this be handled by the case worker or by management?
- How will information sharing requests and shares be recorded and monitored?

— Who will manage relationships with external partners to ensure quality of information sharing and referrals, and promote communities of practice?

— How will feedback loops with external agencies be managed?

The role of managers

Framework organisations should consider the role of team managers and leaders.

Responding to family violence may impact upon the wellbeing of staff members, and this can be mitigated if they are fully supported in meeting the MARAM responsibilities.

Consider:

— How will managers be trained in the MARAM responsibilities, even if not directly undertaking identification, screening, assessment, management or sharing roles?

— Training management on responding to staff disclosures of family violence (which may be by a victim survivor or perpetrator). A greater awareness of family violence and responding to family violence in the workplace often leads to more disclosures by staff members and managers need to be equipped to respond.

— Managers have a role in supervision staff members' response to family violence, as well as providing support. What supervision processes will be put in place for managers to promote family violence supervision?

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