

Appendix P

Creating a Model Response to Child Abuse

29 Point Assessment of your Service's Response

Assess before any programme implementation and then every six months

Date of Assessment: / /	Y/N	Y/N	Y/N
PROTOCOLS			
Are policies and protocols specific to child abuse:			
1. in the official hospital or service policy?			
2. present within relevant clinics, wards and other services?			
3. officially adopted (with notation)?			
Do these protocols:			
4. meet Ministry of Health standards?			
5. define child abuse?			
6. address documentation?			
7. address referral?			
8. Does the protocol clearly state the specific staff responsibility for child abuse?			
9. Does the protocol have administrative support from the CEO?			
CHILD ABUSE TASK FORCE			
10. Does the clinic/hospital/health care system have a child abuse task force?			
11. Is the task force multi-disciplinary?			
Does the child abuse task force:			
12. have goals and objectives?			
13. meet at least every two months?			
14. Has the child abuse task force established a relationship with the local CYF or have a member on its task force from CYF?			
15. Does the protocol of Child Abuse Task Force or any of the activities of the Task Force have financial support from the CEO?			

Assess prior to any programme implementation and then every 6 months

Date of Assessment: / /	Y/N	Y/N	Y/N
TRAINING IN CHILD ABUSE			
16. Has clinical staff training been scheduled in the past year?			
17. Is there evidence clinical staff training will be ongoing?			
18. Has non-clinical staff training been scheduled in the past year?			
19. Is there evidence non-clinical staff training will be ongoing?			
20. Are staff mandated to attend child abuse training?			
21. Is new staff orientation mandated in the training protocol?			
22. Is training held during paid working hours on all shifts?			
23. Is there an evaluation of the training's effectiveness?			
24. Has cultural competency training ever occurred in the past two years?			
INTERVENTIONS IN CHILD ABUSE			
25. Are brochures related to child abuse on display anywhere in the clinic/hospital/health care system?			
26. Are there any brochures about child abuse in the waiting rooms?			
27. Are posters related to child abuse on display so that patients can see them?			
28. Does the clinic/hospital/health care system have access to any off-site advocates or on-site social workers that can be used for further case management or in-depth advocacy?			
EVALUATIONS OF CHILD ABUSE PRACTICE			
29. Has there been an evaluation of the quality of assessment and documentation completed through a review of the medical record?			

Developed by the Family Violence Prevention Fund and the Centre for Violence and Injury Control, Allegheny University of the Health Sciences



Creating a Model Response to Partner Violence

35 Point Assessment of your Service's Response

Assess before any programme implementation and then every 6 months

Date of Assessment: / /	Y/N	Y/N	Y/N
POLICIES and PROTOCOLS			
Are policies and protocols specific to partner violence:			
1. in the official hospital or service policy?			
2. present within relevant clinics, wards and other services?			
3. officially adopted (with notation)?			
Do these protocols:			
4. meet Ministry of Health standards?			
5. define partner abuse?			
6. address documentation?			
7. address referral?			
8. Does the protocol specify screening for partner violence (who screens, how and when screening should occur)?			
9. Does the protocol clearly state the specific staff responsibility for domestic violence?			
10. Does the protocol have administrative support from the CEO?			
11. Has your clinic/hospital/health care system established employee policies and procedures that respond to partner violence among employees?			
DOMESTIC VIOLENCE TASK FORCE			
12. Does the clinic/hospital/health care system have a partner violence task force?			
13. Is the partner violence task force multi-disciplinary?			
Does the domestic violence task force:			
14. have goals and objectives?			
15. meet at least every two months?			
16. Has the partner violence Task Force established a relationship with the local partner violence program, or have a member of its Task Force from the local domestic violence program?			
17. Does the protocol of Domestic Violence Task Force or any of the activities of the Task Force have financial support from the clinic/ hospital/ health care system CEO?			

Assess prior to any programme implementation and then every 6 months

Date of Assessment: / /	Y/N	Y/N	Y/N
TRAINING IN PARTNER VIOLENCE			
18. Has clinical staff training been scheduled in the past year?			
19. Is there evidence clinical staff training will be ongoing?			
20. Has non-clinical staff training been scheduled in the past year?			
21. Is there evidence non-clinical staff training will be ongoing?			
22. Are staff mandated to attend partner violence training?			
23. Is new staff orientation mandated in the training protocol?			
24. Is training held during paid working hours on all shifts?			
25. Is there an evaluation of the training's effectiveness?			
26. Has cultural competency training ever occurred in the past two years?			
INTERVENTIONS IN PARTNER VIOLENCE			
27. Are brochures related to partner violence on display anywhere in the clinic/hospital/health care system			
28. Are there any brochures of partner violence information in the women's rooms?			
29. Are posters related to partner violence on display so that patients can see them?			
30. Does the medical record have partner violence screening questions or a place to record whether or not screening has occurred or a partner violence intervention check list?			
31. Are 'Domestic Violence Kits' or other materials readily available that staff can use when a victim of partner violence is identified?			
32. Are there patient discharge sheets or brochures with referrals to partner violence services available?			
33. Does the clinic/hospital/health care system have access to any off-site advocates or on-site social workers that can be used for further case management or in-depth advocacy?			
34. Is a respite room provided for victims of partner violence that cannot get to a shelter?			
EVALUATIONS OF PARTNER VIOLENCE PRACTICE			
35. Has there been an evaluation of the quality of screening, assessment and documentation completed through a review of the medical record?			