

# Provisional Standard One Outcome

## DV-ACT LTD-Partner Abuse Interventions (DVACT-PAI)

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### 1. The Accreditation process

#### How we assess organisations against Standard One ('public interest test')

- 1.1 The Professional Standards Authority accredits registers of people working in health and social care occupations not regulated by law. To be accredited, organisations holding such registers must prove they meet our Standards for Accredited Registers (the Standards)<sup>1</sup>. Once accredited, we check that Registers continue to meet our Standards.
- 1.2 There are nine Standards. Registers must meet Standard One before we can assess against how the register meets the remaining Standards. Standard One checks eligibility under our legislation, and if accreditation is in the public interest.
- 1.3 Organisations may apply for a preliminary assessment against Standard One before submitting a full application.
- 1.4 Preliminary Standard One decisions are made by an Accreditation Panel following an assessment of evidence by the Accreditation Team. The evidence includes the organisation's application, a desk-based review of relevant sources of evidence about the benefits and risks of the role(s) registered, and responses received through our 'Share your experience' public consultation.
- 1.5 If the Panel decides that the activities of registrants fall within the definition of healthcare, and that overall, the benefits of the services of practitioners outweigh the risks then it may determine that Standard One is provisionally met. If the Panel decides that either of these requirements is not met, then this will be communicated to the organisation with the reasons for the decision, and it may apply again later.
- 1.6 Decisions for preliminary assessments against Standard One are provisional. If an organisation later submits a full application, we will check whether there have been any changes which affect this outcome. An Accreditation Panel can also issue recommendations for the organisation to consider should they decide to complete a full application. More about how we assess against Standard One can be found in our

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<sup>1</sup> <https://www.professionalstandards.org.uk/publications/standards-accredited-registers>

## **2. About DV-ACT LTD-Partner Abuse Interventions (DVACT-PAI)**

- 2.1 DV-ACT LTD was founded in 2018 and registered with Companies House as a private limited company in England and Wales, with registration number 11379215. In 2021, DV-ACT LTD, originally focused on assessments, consultancy and training, expanded to provide domestic abuse interventions named DV-ACTION programmes. DV-ACT LTD subsequently acquired Partner Abuse Interventions (PAI Limited) in September 2023 to trade under the name DVACT-PAI. PAI had worked for 15 years as a pioneering organisation in developing and delivering risk assessment and risk management interventions in family cases. DVACT-PAI provides expert domestic abuse assessments, interventions, training and consultancy to local authorities and the courts. DVACT-PAI holds a voluntary Register of Expert Domestic Abuse Risk Assessors who practice clinical empiricism as a modality. Its registrants may also hold membership with the British Psychological Society (BPS), British Association for Counselling and Psychotherapy (BACP), and the Health and Care Professions Council (HCPC).
- 2.2 The role included on the register is:
- Domestic Abuse Risk Assessor

## **3. Share your experience**

- 3.1 As part of our assessments, we seek feedback from service users, the public, professional and representative organisations, employers and others on their experience of a Register.
- 3.2 We received one response to our invitation to share experience on DVACT-PAI's application for preliminary assessment against Standard One.
- 3.3 The lone respondent gave an endorsement of DVACT-PAI as an organisation, the quality of its services, and its key public-facing communication tool ([website](#)).

## **4. Outcome**

- 4.1 On 24 March 2026 the Decision-Maker considered DVACT-PAI's application for a preliminary assessment against Standard One ('public interest test'). Overall, the Decision-Maker determined Standard One was provisionally met. We also identified some areas where we recommend the mitigations for risks are strengthened before a full application.
- 4.2 This section of the report summarises the key considerations in reaching this conclusion for each part of Standard One.

## **Standard 1: Eligibility and 'public interest test'**

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<sup>2</sup> <https://www.professionalstandards.org.uk/sites/default/files/attachments/accredited-registers-supplementary-guidance-for-standard-one.pdf>

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- 4.3 The Decision-Maker found Standard One was provisionally met. This is a provisional outcome and will be reviewed if DVACT-PAI submits a full application for accreditation to see if there are any changes that could affect this decision.
- 4.4 The Decision-Maker issued the following Recommendation for DVACT-PAI to consider if it decides to complete a full application:
- **Met prior to publication of this report: R-DVACT-PAI-S1-25/26: DVACT-PAI should amend the wording on the Home page of its website relating to the status of the organisation to make it consistent with that on the Register page.**

## The Decision-Maker's findings

### Standard 1a: Eligibility under our legislation

- 4.5 The Authority's powers of accreditation are set out in Section 25E of the National Health Service Reform and Health Care Professions Act 2002<sup>3</sup>. Standard 1a considers whether a Register is eligible for accreditation, on the basis of whether the role(s) it registers can be considered to provide health and care services and are not required by law to be registered with a statutory body to practise in the UK.
- 4.6 We found that DVACT-PAI is a professional association that holds a voluntary Register of Expert Domestic Abuse Risk Assessors. The Decision-Maker accepted the submission by the Accreditation Team that this is a register of individuals, and not of businesses, and that DVACT-PAI has a public-facing [website](#) where this register is published.

The eligibility decision regarding the DVACT-PAI register is somewhat more complex than prior decisions that we have made. This is because the practitioner group operates across multiple settings which are inclusive of health and social care settings but also may extend to the justice system and organisations providing direct support to victims and survivors. In addition, our powers related to social care workers are limited to England only and we are unable to accredit registers outside of England. As a result of this complexity, we have thoroughly considered the eligibility test in multiple stages to unpack the considerations around eligibility.

In addition, owing to the potential complexity in this assessment of eligibility we asked some focused questions during the consultation period (known as Share Your Experience or SYE) to determine stakeholder views on eligibility. Unfortunately, we only received one response to the consultation which did not give us any additional insight into the tests for eligibility.

Firstly, the key barring test for accreditation of a register is whether there is an enactment requiring registration of the practitioner group. We have found no evidence of an enactment across the UK or any nation of the UK which requires registration of Domestic Abuse Risk Assessors. Therefore, this first test of eligibility is met.

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<sup>3</sup> Roles that are required to be enrolled with a statutory register to practise in the UK are set out in Section 25E (2) of the National Health Service Reform and Health Care Professions Act 2002, available at: [National Health Service Reform and Health Care Professions Act 2002 \(legislation.gov.uk\)](#)

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Secondly, the test also involves whether the practitioner group is engaged in physical or mental health provision. In deciding how DVACT-PAI met this second element of our eligibility test, the Decision-Maker considered a few relevant issues:

*Where the practice takes place and which types of professionals are colleagues*

The Decision-Maker accepted that evidence submitted outlines the practice may take place in health settings, in support of health professionals such as General Practitioners, and social care professionals and the justice system. The overall picture is of practice taking place in multi-disciplinary contexts with the practitioners operating across the boundaries but overlapping heavily with health practice.

*What kind of judgments are being made by the practitioners?*

The Decision-Maker also accepted that evidence submitted makes it clear that there are inherently physical and mental health considerations involved in the assessments and decisions around protections for victims and survivors (and other people involved). These include considering the physical health (such as physical risks and compounding harms related to physical illness) and mental health of the clients in making judgments.

*What are the health impacts of decisions made by practitioners?*

The Decision-Maker considered further the evidence submitted by DVACT-PAI and accepted that the evidence makes it abundantly clear that there are unquestionable health impacts as a result of the interventions made by the practitioner group. These can include protecting the physical wellbeing of victims and survivors but also can result in significant positive mental health impacts, including preventing compounding and long-term harms.

*Prior registration*

The Decision-Maker noted that DVACT-PAI registrants may also hold membership with other regulators, such as the British Psychological Society (BPS), British Association for Counselling and Psychotherapy (BACP), and the Health and Care Professions Council (HCPC). The fact that prior registration may initially be held with these established health professional regulators also signals that the roles can be considered to be providing health-related care.

*Should this be an England Only register?*

The Decision-Maker noted further that the limitation in our legislation is specific to the role of social care workers and, therefore, not relevant to the practitioner group under consideration in this application. As a result, the accreditation of any register for Domestic Abuse Risk Assessors could extend across the whole of the UK.

*Conclusion:*

Based on the above considerations, the Decision-Maker accepted the submission of the Accreditation Team that DVACT-PAI met the second element of our eligibility test. Accordingly, the Decision-Maker concluded that the practitioner group appears eligible for accreditation on the basis that the group is not subject to an enactment requiring registration and appears to engage in health practice. In effect, DVACT-PAI falls within the scope of our powers of accreditation as defined in Section 25E(2) of our Act. As the

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eligibility and public interest tests are both met, the Decision-Maker decided that we are able to accredit DVACT-PAI on a UK wide basis.

### **Standard 1b: Public interest considerations**

- 4.7 Under Standard 1b, we consider whether it is likely to be in the best interests of patients, service users and the public to accredit a register, with consideration of the types of activities practised by its registrants. This involves consideration of the overall balance of the benefits and risks of the activities.
- 4.8 Factors considered by the Decision-Maker are discussed below.

#### **i. Evidence that the activities carried out by registrants are likely to be beneficial**

- 4.9 DVACT-PAI submitted a table of benefits in support of the lone role it has on its register. On review of this submission, the Accreditation Team noted that the organisation cited over 50 sources of evidence in support of the benefits of expert assessment in the context of domestic abuse where the role of Domestic Abuse Risk Assessor is embedded. The Accreditation Team further noted that the evidence base for the benefits and effectiveness of expert risk assessment is well established, internationally recognised, and expanding. It is important to note that the Accreditation Team opted for analysis of a selection of key studies rather than the entire list submitted by DVACT-PAI. The Team also carried out its own independent desk research with a view to corroborating or refuting the evidence presented by DVACT-PAI.
- 4.10 The Decision-Maker noted from the Accreditation Team's analysis of the evidence that most of the sources cited by DVACT-PAI are credible. Out of the over 50 research papers, the Accreditation Team noted that the majority are published in peer-reviewed or refereed journals while others are produced by reputable institutions. The latter include the Domestic Abuse Commissioner for England and Wales, Family Court, Barnardo's, UK Government departments (such as Ministry of Justice and Department of Health and Social Care), Office of National Statistics, the National Society for the Prevention of Cruelty to Children (NSPCC), UK Parliament, the National Institute for Health and Care Excellence (NICE), and Women's Aid.
- 4.11 The Decision-Maker considered that this rich combination of sources renders the evidence moderately strong, eclectic and authoritative. This is not to suggest that some of the studies and the overall evidence have no limitations. The Decision-Maker noted the Accreditation Team's submission that in some of the studies, there are identifiable issues of sample idiosyncrasies (small size, sample limited to specific populations, and self-selection, etc); difficulties with generalisability; lack of follow ups; and evidence based on non-UK populations. However, these caveats only rendered the data in the affected studies moderate rather than strong, and certainly not weak or irrelevant for the purposes of this assessment.
- 4.12 The Decision-Maker further noted that while some studies cited by DVACT-PAI are published in international sources, most of the studies in their evidence submission are focused on UK populations and published in UK-based journals. Even those studies identified as focused on overseas populations are published in peer reviewed and, therefore, reputable journals. This has enabled a robust comparison with data from the

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UK-focused studies.

- 4.13 We included in our definition of credible/reputable research an article or research paper published in a refereed or peer-reviewed journal and/or findings by a recognised statutory authority, such as those named above. The Decision-Maker noted the Accreditation Team's adoption of a thematic approach to their analysis of the strength of the evidence in support of the benefits of expert domestic abuse risk assessment to service users, patients and the public. These themes are interlinked and mutually reinforcing. Overall, the analysis has a strong focus on the settings in which risk assessments occur; the efficacy of risk assessments; and their impacts on victims, survivors, children and families.

### **Expert Domestic Abuse Risk Assessment and Mental Health**

- 4.14 Of great significance for this assessment was the need to demonstrate evidence that establishes the link between expert domestic abuse assessment and health (especially mental health). The Accreditation Team noted that the literature contains abundant evidence of the linkages between the two. DVACT-PAI submitted solid evidence to demonstrate that expert domestic abuse assessors have several settings, cutting across multiple and often overlapping fields, with health being one of them. Our desk research further confirmed that there is robust evidence in support of especially mental health as a setting for domestic abuse assessors. We noted from the literature that mental health settings are frequent but often missed opportunities for identification, assessment, and referral, which makes them directly relevant to domestic abuse risk assessors. The Team pointed to the existence of abundant evidence that domestic abuse survivors frequently present to mental health services with depression, anxiety, PTSD, and complex trauma. Consequently, mental health clinicians, according to the evidence, frequently encounter individuals affected by domestic abuse but may lack the systematic skills or frameworks that assessors bring. This supports the argument that specialist domestic abuse assessors operating in mental health-linked environments can significantly improve identification, accuracy, and risk management.
- 4.15 On health impact, the evidence assessed by the Accreditation Team confirmed that expert domestic abuse assessments can lead to improved mental health for adult victims. Some of the evidence in support of expertise in risk assessment submitted by DVACT-PAI also point in the direction of improved mental health for children. Not surprisingly, safeguarding children and young people living with domestic abuse has emerged as a priority area across health, justice and human service sectors. And neither is the literature silent with regards improved mental health for perpetrators arising from the work of expert risk assessors. Strong evidence exists that it is, in fact, the realisation of the link between mental health and domestic abuse that has led to the establishment of research projects by some NHS Trusts in the UK focusing on domestic abuse support in mental health services, with risk assessors as part of the practice.

### **Complexity of Domestic Abuse Risk Assessment and Implications**

- 4.16 The other theme that guided the Accreditation Team's analysis of the benefits of
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domestic abuse risk assessment was the complexity entailed in the practice and the implications for public protection. The Accreditation Team assessed evidence relating to a gamut of issues under this theme: the implications of the existence of multiple and varied titles and qualifications in the vast field of professionals; the contentious definition of “expert” as employed by the Family Court; concerns around the ineffectiveness in assessments by non-experts of the dangers to the child in cases where domestic violence is involved; the problem of experts who were unregistered with an oversight professional body and who are providing evidence to the court which had no clear basis in empirical research; the need to ensure appropriate identification in assessments of risks and accountability; the crucial importance of a certain depth of knowledge on the part of assessors of effective interventions for professionals, parents and children; and the benefits accruing from the quality of assessments made by experts who are subject to peer review and supervision, both of which would follow in the wake of professional regulation. The inescapable conclusion from this analysis is that domestic abuse risk assessment is such a complex process that it needs to be undertaken by specialists who operate under oversight.

### **Expert Domestic Abuse Risk Assessment and Improved Outcomes for Families**

- 4.17 Linked to the theme of need for specialist expertise is evidence of a direct correlation between expert domestic abuse risk assessments and improved outcomes for families broadly speaking. The Decision-Maker accepted the submission of the Accreditation Team that there is evidence suggesting that expert assessments improve safety and thus benefit families and children affected by domestic abuse. The Team concluded from its analysis of the evidence that key to enhancing the protection of children affected by domestic abuse is an efficient and focused assessment that identifies the source of danger. Of particular significance is evidence of the need for expert assessment in cases where coercive control is detected.
- 4.18 The Accreditation Team confirmed that some of the evidence indicates that domestic abuse expertise enables informed assessment of the potential harm to children in cases that are particularly difficult. Similarly, other evidence suggests that expert domestic violence assessments could improve outcomes for families through shorter timescales in accessing decisions and the support that results from the work of expert assessors. The Decision-Maker noted that some studies proffer evidence that expert assessment leads to improved insight and other outcomes for victims of domestic abuse and enables safer decisions to be made. In addition, analysis by the Accreditation Team confirmed the existence of evidence on how expert risk assessment can provide assurance to parents and children affected by domestic abuse that their assessment is being dealt with by qualified and experienced professionals. Evidence was also submitted to the effect that regulated risk assessment can improve the level of expertise that feeds into key child protection decisions, benefitting not only children and parents but also professionals and the public purse. Evidence of the incalculable positive physical and mental health implications associated with expert domestic abuse risk assessment was, therefore, taken into cognisance in this evaluation of benefits by the Decision-Maker.

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## **Role of Culture in Domestic Abuse Risk Assessment**

- 4.19 On the last theme of the role of culture in domestic abuse risk assessment explored by the Accreditation Team, the Decision-Maker accepted that there is a strong and consistent link between culture and both the experience and accuracy of risk assessment. The submission by DVACT-PAI, that expert risk assessment brings a level of cultural appreciation and competence in cases where risk is viewed differently by different cultures, is strongly supported by the evidence. Evidence from the Accreditation Team's desk research also suggests that there is little contention that cultural bias can lead to misdiagnosis and that this can have devastating health and other consequences on patients, pointing to the need for cultural competence in assessing domestic abuse related risk. Against the background of the existing evidence, therefore, failure to account for culture can result in systematic under-identification of risk. This is particularly true in cases involving coercive control, immigration dependency, honour-based abuse, extended family involvement, and language barriers. The evidence further suggests that failure to consider culture can lead to non-disclosure and disengagement, increasing risk if not accounted for in assessment, with devastating consequences.

## **NICE Guidelines on Domestic Abuse in the UK**

- 4.20 Going beyond the evidence submitted by DVACT-PAI, desk research by the Accreditation Team also led to the conclusion that like the Department of Health and Social Care (DHSC), the National Institute for Health and Care Excellence (NICE) has produced a couple of guidelines on domestic abuse in the UK. In general, the guidelines do not endorse a single risk assessment tool or approach, but rather promote targeted and evidence-based enquiry, structured professional judgement, ongoing review of risk, and an awareness of coercive control, psychological abuse, and non-physical harm. The Decision-Maker noted that any analysis of expert risk assessment must necessarily take cognisance of these guidelines.

## **Limitations of Expert Risk Assessment and Relevance for Risk Analysis**

- 4.21 In addition to the strong evidence of the benefits of expert risk assessment identified by the analysis of the Accreditation Team, the Decision-Maker also noted the limitations to what expert risk assessors can accomplish. This is helpful in fostering a greater understanding of the risks associated with the practice and what mitigations have been put in place. In summary, the evidence base identifies the following as the key limitations to expert risk assessments worthy of consideration: inaccuracy and misclassification (risk of over- or under- estimating danger); structural inequities and unequal access to protection emanating from ill-conceived assessments; contextual blind spots (notably in rural settings); over-reliance on tools rather than judgement or victim voice; weak or inconsistent evidence-base behind many tools; failure to capture dynamic and escalating risk; and fragmented multi-agency practice and implementation. The Decision-Maker noted the inevitable conclusion that it behoves any organisation working in this field to put in place measures to either eliminate or mitigate the impact of these risks if/when they occur.

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**ii. Evidence that any harms or risks likely to arise from the activities are justifiable and appropriately mitigated by the register's requirements for registration.**

4.22 Against the background of our conclusion above on evidence-based limitations and the harms associated with expert domestic abuse risk assessment, the Accreditation Team examined risk governance by DVACT-PAI. The focus was on the range of risks that DVACT-PAI has identified, the mitigations that have been instituted, the standards that DVACT-PAI has in place that govern the professional conduct of their practitioners, and any other measures that should be in place aimed at mitigating risks if/when they occur.

**Identification of Risks and Mitigations**

4.23 The Decision-Maker noted that DVACT-PAI submitted a Risk Matrix for this assessment. In this risk register, DVACT-PAI identified over a dozen risks associated with the practice of domestic abuse risk assessment. In general, the Accreditation Team found that DVACT-PAI has demonstrated an acute awareness of circumstances in which the services provided by their registrants could be harmful and the organisation has proceeded to either act or have identified actions they would take if/when any of those harms occurred. Although the rationale for that was not immediately clear and queries were raised, the Accreditation Team noted that DVACT-PAI's Risk Matrix appears to indicate that its Board is the sole risk owner for the risks they have identified. If confirmed, this would imply that the Board is not only engaged in the core business of risk governance but that it also takes full responsibility for the risk management of the organisation.

4.24 The Decision-Maker noted further the Accreditation Team's detailed analysis of DVACT-PAI's identified risks in their risk register and how these risks speak directly to those identified in the evidence presented above. They can be more accurately grouped under the following themes:

- Personal conduct of registrants (moral/ethical issues): e.g. registrants violate professional boundaries; exploit service users for financial gain; make false claims concerning training/experience; hold extreme or oppressive views and practice
- Technical competence: e.g. lack of effectiveness of assessment tools and methods; lack of knowledge of empirical research
- Professional experience: e.g. lack of experience of working with domestic abuse victims and perpetrators; lack of experience in the use of equipment or treatments in the practice of domestic abuse risk assessors
- Specialist knowledge: e.g. false optimism; lack of knowledge of impact on children and families; lack of knowledge of the complexities of domestic abuse
- Implications for wellbeing: e.g. impact on the health of registrants; impact on personal safety of registrants; impact on service users' mental health; and the link to suicide
- Issues of reputational risk: e.g. those associated with the financial exploitation of service users

4.25 The Decision-Maker noted that risks associated with technical competence,

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professional experience and specialist knowledge are particularly significant when arrayed against the Accreditation Team's analysis of the likely equalities impacts of accrediting DVACT-PAI. Our tentative Impact Assessment highlights the need for continuous professional and technical (including cultural) competence training of all assessors and decision-makers. Such training should in particular focus on matters of assessments impacts in relation to people who have shared protected characteristics.

4.26 The Decision-Maker noted further the Accreditation Team's assessment that DVACT-PAI's Risk Matrix demonstrates accomplishment of the following:

- Identified risk areas (e.g. registrants fail to establish appropriate boundaries with services users)
- Included likelihood ratings
- Identified potential impacts (e.g. on registrants and service users)
- Outlined current mitigation measures and their effectiveness
- Stated additional/new control measures to be implemented to reduce risk
- Identified what appears to be the single risk owner (Board) responsible for ongoing monitoring and action
- Included residual risk scores after mitigation

4.27 From the above analysis, the Decision-Maker confirmed that the resultant risk factor after mitigation is mostly very low or low for each of the risks that DVACT-PAI has identified, indicating that the risks are properly mitigated.

### **Regulatory Policies and Standards**

4.28 The Decision-Maker noted further that DVACT-PAI submitted for this assessment three key policy documents through which they regulate the behaviour of their registrants: an Ethical Framework constituting their code of ethics; their Professional Conduct Procedure governing complaints and concerns; and their [Standards in Expert Assessments](#). Their code of ethics deals with the gamut of issues that regulate good professional behaviour and practice, and outlines what registrants must and can or cannot do. These include acceptance of the central importance of assessment of impacts on children; working to professional standards; respect; maintaining appropriate relationships; integrity; accountability and candour; teamwork; supervision; training and education; research; care for self as an assessor; and responding to ethical dilemmas and issues. The professional conduct procedure, for its part, deals with complaints handling at DVACT-PAI. In its Standards in Expert Assessment policy, DVACT-PAI provides the practice context for expert domestic abuse assessors and outlines its expectations of how assessments should be conducted.

4.29 The Decision-Maker accepted that put together, the requirements for entry into the DVACT-PAI register contained in their standards and policies ensure that the risks associated with the practice of expert domestic abuse assessors that DVACT-PAI has identified are properly mitigated. These standards reinforce the effectiveness of the other actions and measures outlined in DVACT-PAI's Risk Matrix.

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**iii. Commitment to ensuring that the treatments and services are offered in a way that does not make unproven claims or in any other way mislead the public**

4.30 In its analysis of the functions of expert domestic abuse risk assessor, the Accreditation Team noted that the work of this practitioner group involves making specialist evaluations of the nature, pattern, and level of risk that obtains in domestic abuse situations and proffer clear recommendations to manage or reduce that risk. The Team noted further that the work of domestic abuse risk assessors is often carried out in high-stake contexts such as family courts, safeguarding (children’s services), justice settings, mental health services, and multi-agency risk management conferences. The work of an expert domestic abuse risk assessor, therefore, entails risk identification and analysis; structured professional judgment; safety and risk management planning; court-ready reporting and testimony; multi-agency working; and a focus on ethics and safeguarding. As DVACT-PAI puts it on their website [Domestic abuse experts | child safeguarding | UK](#), “[their] expert assessments offer clarity and insight into the dynamics of abuse and ongoing risks within the family, including a professional and realistic opinion on specific issues of concern and the sources of risk”.

**Review of Public Information**

4.31 In order to confirm that DVACT-PAI makes no unproven claims or provides no misleading information to the public about its services, the Accreditation Team first checked the public-facing website of DVACT-PAI [Domestic abuse experts | child safeguarding | UK](#). This was intended to help them evaluate how DVACT-PAI advertises its services. The Accreditation Team noted that on the landing or “Home” page of the website, DVACT-PAI (in addition to providing the usual basic information about contact and enquiries) informs the public about what they do in simple and non-controversial terms: “working with parents in court proceedings and child protection measures, our experts have many years of experience in providing specialist assessments and bespoke interventions”. In keeping with the ethos of their work, DVACT-PAI rightly claims to have expertise that can be trusted to deliver best practice, reduce costs, avoid delays, promote change, and prioritise children. The Accreditation Team further noted that the “Home” page proceeds to outline the services that DVACT-PAI offers – family safety assessments, psychological assessments, sex offender assessments, and specific programmes of work. On the same page, the Team also noted that DVACT-PAI outlines their values upfront: a child-centred approach; provision of relevant expertise; working within children’s timescales; and offering accessible sessions. Furthermore, on their webpage on “Interventions”, the public is noted to have been informed that DVACT-PAI programmes prioritise “the safety and well-being of children, ensuring that their needs are always at the forefront”. The Decision-Maker accepted the submission of the Accreditation Team that in neither of these two pages is there any evidence of unproven claims or misleading information about the services or treatments that are offered by registrants of DVACT-PAI.

4.32 However, the Accreditation Team noted that in the “About Us” page of their website,

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DVACT-PAI controversially claims to be “...the only provider of expert Family Safety Assessments and Bespoke Interventions for parents in the family courts...”. The Team clarified that this may be admittedly only a communication issue and does not amount to making an unproven claim about treatments and services. However, the Team noted that it could be construed as contentious and difficult to verify. This is because research by the Team led to the conclusion that family safety assessment is not a protected title or standardised term. Moreover, the Team’s research found out that assessment provision in family courts is made by a combination of independent experts, consultancies and organisations, and that the court does not have a single regulated provider list. The Accreditation Team noted in their analysis of the evidence on expert domestic abuse assessment that the courts themselves have called for regulation in this field. In the view of the Accreditation Team, what is more accurate and verifiable is DVACT-PAI’s claim on the Register page of its website [dvact.org/experts/register](https://dvact.org/experts/register) that as domestic abuse is a specialised area, “DVACT-PAI hold the only register of experts for child-focused Domestic Abuse Risk Assessments in the U.K.”. This is considered more accurate because the Team has neither identified nor confirmed the existence of any other register in this field. Accordingly, the Decision-Maker made the following recommendation, which we confirmed to have been implemented by DVACT-PAI prior to the publication of this report:

- ***R-DVACT-PAI-S1-25/26:*** *DVACT-PAI should amend the wording on the Home page of its website relating to the status of the organisation to make it consistent with that on the Register page.*

4.33 The Decision-Maker also noted that the Accreditation Team ran a check of DVACT-PAI’s Register of Experts [dvact.org/experts/register](https://dvact.org/experts/register) through which the Team confirmed that all 23 registrants have received professional training from DVACT-PAI. The details of the training courses (accreditation and qualification level) are not yet clear at this stage, but this can be explored at a later stage in DVACT-PAI’s application process. Meanwhile, the Accreditation Team’s analysis of the register also indicated that none of DVACT-PAI’s registrants owns a private website for advertising their services to the public. The Accreditation Team, through a random google check on a handful of the registrants, could not identify any DVACT-PAI registrant that has their own private website. The Team also noted, and the Decision-Maker accepted, that Risk 10 in DVACT-PAI’s Risk Matrix, under the category of Personal Behaviour, clearly identifies making false claims concerning training and experience as harmful and has put measures in place to ensure the effective mitigation of this risk.

### **Regulatory Policies and Standards**

4.34 The Decision-Maker took the view that risk mitigation is reinforced by DVACT-PAI’s requirements for registration, with which all registrants must comply. Acceptance by registrants of the terms and conditions stated in the standards constitutes their contract with DVACT-PAI. A case in point is the provision in the section on integrity in DVACT-PAI’s Ethical Framework requiring registrants to be totally honest regarding their work. In addition, the code commits all registrants to “providing clear, accurate information about [their] qualifications, experience and working methods”. Similarly,

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the provisions in DVACT-PAI's [Standards in Expert Assessments](#) place great emphasis on evidence-based assessment, sound professional judgment, and a focus on ethics and safeguarding. The Decision-Maker accepted that these speak directly to the core expectations outlined in the NICE guidelines on domestic abuse noted above.

## Conclusion

4.35 Following a thorough review of the Accreditation Team's assessment of the evidence, the Decision-Maker agreed with the Team's submission that:

- i) the activities of the registrants of DVACT-PAI are clearly beneficial to the public
- ii) DVACT-PAI has demonstrated a complete and thorough understanding of the risks associated with the practice of Domestic Abuse Risk Assessors and have put measures in place to ensure effective mitigation of risks
- iii) DVACT-PAI is committed, through its publications and regulatory policies and standards, to ensuring that its registrants provide accurate information about their services

4.36 In view of the above conclusions, the Decision-Maker determined Standard 1b is met and has issued one recommendation on this section of the assessment:

- ***R-DVACT-PAI-S1-25/26: DVACT-PAI should amend the wording on the Home page of its website relating to the status of the organisation to make it consistent with that on the Register page.***

## 5. Impact assessment (including equalities)

5.1 The Authority is required to carry out an assessment of the impact of accreditation on service users before accreditation is granted. This impact assessment included an equalities impact assessment as part of the consideration of our duty under the Equality Act 2010. Once accredited, the impact assessment is reviewed as part of a Register's annual renewal, and at any point if there are concerns or significant changes in the external environment in the meantime.

5.2 We have not published a full impact assessment since a decision on whether to accredit has not yet been made. However, we have considered which are the main groups likely to be affected by accreditation of DVACT-PAI, and what the main impacts are likely to be in terms of equalities, cost/markets, social and environmental impacts. This has included consideration of our duty as a public sector body under the Equality Act 2010.

### Equalities Impacts

- Through the work of domestic abuse risk assessors, expert opinion is provided to the courts and social care professionals (including risk management plans) which highlights difficulties and barriers faced by those with protected characteristics.

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This fosters greater understanding by health and social care professionals, which leads to more effective and targeted work aimed at improved integration and communication. However, we note that continuous professional development and technical competence training would be required.

- Accreditation of DVACT-PAI would potentially affect different groups with shared protected characteristics differently, making continuous professional development and technical (including cultural) competence training on equalities impacts an imperative.

### ***Cost and Market Impacts***

- DVACT-PAI informed us that they currently charge no fee for inclusion on the register, although a percentage of the fee paid by commissioners for assessments completed through DVACT-PAI is retained by DVACT-PAI to fund staff, office, etc. DVACT-PAI plans to increase the registration fee after accreditation.
- DVACT-PAI confirmed that service users do not generally pay anything for the assessments. The assessments are commissioned by professionals and paid for by local authorities or legally aided parties.
- In the longer term, the costs would be factored into operations costs of registrants and is, therefore, likely to be passed on to the commissioner (but not the service user).
- DVACT-PAI also confirmed that no increased costs for employers are envisaged by accreditation.

### ***Social and Environmental Impacts***

- DVACT-PAI submitted that employers are likely to be advantaged by the additional training and expertise of employees who are registered in the area of domestic abuse and the impact this has on adults and children who may use their services. Registration is not likely to impact employers in any other way.
- DVACT-PAI envisages no impact on employment as the sector is small and highly specialised. Neither is any impact on the environment expected as a result of accreditation.
- Our evidence review confirms that there are many advantages to communities, employers and the public in ensuring standards and expertise in domestic abuse risk assessment.
- Expert risk assessments and their recommendations on safeguarding and risk management planning result in reduced repeated criminal acts of abuse and violence.