

## **Communities and Environment Overview and Scrutiny Panel**

# **DOMESTIC ABUSE REVIEW**

**March 2017**



## **Foreword by the Chair of the Communities and Environment Overview and Scrutiny Panel**

Domestic Abuse continues to be one of the biggest challenges faced by the Safer Stronger Doncaster Partnership. A great deal is known about the dreadful effects it has on individuals, their families and the wider community. It is recognised that a great deal of work has been undertaken to respond appropriately and effectively to reports of domestic abuse. Over the last few years there has been a significant improvement in Doncaster's response and we are starting to see the positive impact of the work that is being done.

The Adults and Communities Overview and Scrutiny Panel previously undertook an in-depth domestic abuse review during 2014/15. Due to the continuing importance of this matter, the Communities and Environment Overview and Scrutiny Panel made the decision as part of their 2016/17 workplan to revisit that information and look at what progress has been made taking this agenda forward. The Panel agreed to focus on identifying the challenges and gaps that currently existed and look at how well processes were working. The current review also looked to investigate key partners and organisations roles within the domestic abuse agenda. Members of the Panel also had the opportunity be involved in the consultation for the recently revised Domestic Abuse Strategy.

We are therefore delighted to present the findings of this recent scrutiny review which includes recommendations made by the Panel.

We would like to thank everyone who contributed to the review including Councillors, Local Authority officers, partners, stakeholders and those individuals affected by abuse, who all gave up their time to support the work of this group and are very much appreciated.

We look forward to receiving the response to our findings and recommendations made.

**Councillor Jane Kidd**  
**Chair of Communities and Environment Overview and Scrutiny**  
**Panel**

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## **EXECUTIVE SUMMARY**

The following recommendations were made by the Communities and Environment Overview and Scrutiny Panel following a review looking at Domestic Abuse that took place between July 2016 and February 2017. The reasons for the recommendations are detailed at the end in the report within Conclusions and Recommendations on Pages 34 to 40.

The Panel's recommendations are therefore that consideration is given to the following: -

### **Commissioning**

1. Embedding domestic abuse into all aspects of commissioning where possible.
2. Ensuring that where services are commissioned, qualitative outcomes are the main driver as well as being value for money.

### **Referral Process**

3. Reviewing the referral process and the single point of contact for partner organisations and victims of domestic abuse.
4. Ensuring that the referral pathway is publicised with workers on the peripheries of the Department of Work and Pensions (DWP), being provided with free training on domestic abuse issues and the referral process.

### **Sharing Information**

5. Ensure that information is shared within the remit of the Data Protection Act and that all services work towards shared protocols and the same goal.

### **Changes in policy**

6. That all policies ensure that the needs of victims of domestic abuse are responded to immediately.

### **GP Service**

7. The consideration is given to GPs or staff at GPs premises providing further assistance to enable domestic abuse victims to access services.

### **Support Services – Post Domestic Abuse**

8. After Care - That the provision of aftercare support for low and medium risk victims be reviewed.
9. Counselling and Therapeutic Services - Review the sufficiency of counselling and therapeutic services currently available and whether it meets the increasing needs of domestic abuse victims and their children.

### **Networking, Training and Raising Awareness**

10. That arrangements for front line workers to meet as regularly as possible are supported, to ensure that training is regularly undertaken and raising awareness is promoted.
11. Continuation of partnership events to be held on domestic abuse

### **Gaps**

12. Ensure that gaps in Domestic Abuse services are identified and addressed.
13. That consideration is given in respect of funding gaps, as whilst the Council and other partners have signed up to the strategy there are still major funding gaps with many services being at risk now and in the near future.

### **School Involvement**

14. Ensuring that support be given to the cultural and behavioural changes made from a young age, through strengthening school involvement and building upon the work currently being undertaken.

### **Elected Members Role**

15. Councillors be provided with a crib sheet and further training to help them report Domestic Violence

### **Monitoring - Reviewing Recommendations**

16. That the Panel reviews progress on recommendations and issues raised as part of the 2017/18 workplan.

### **Concern – Recruitment and Retention of Staff**

17. The Panel also wished to highlight their concern regarding the difficulties in Partners recruiting and retaining good quality frontline staff through addressing issues such as differences in salary.

## **FOCUS OF THE REVIEW**

1. The remit of the review was to address and consider challenges, gaps, how things were working since the last domestic abuse review was undertaken in 2014/15 and what were key partners and organisations roles within this agenda. The Panel also had the opportunity to consider the revised Domestic Abuse Strategy in its draft form as part of the consultation and supported its direction and focus.

## **METHOD OF INVESTIGATION**

2. The Communities and Environment Overview and Scrutiny Panel agreed that a review should be undertaken through a series of informal meetings alongside the development of the Domestic Abuse Strategy, with Contributors detailed on Page 7 and 8.

Three set questions were posed to partner organisations.

- What part do you play in the response to Domestic Abuse?
- What are the key challenges for your organisation in delivery services?
- Will your organisation need to change to facilitate effective whole family working, if so, what are the challenges?

## **MEMBERSHIP**

3. The Members of the Communities and Environment Overview and Scrutiny Panel include the following: -
  - Councillor Jane Kidd (Chair)
  - Councillor Jane Cox (Vice Chair)
  - Councillor Susan Durant
  - Councillor Iris Beech
  - Councillor Ken Keegan
  - Councillor Craig Sahman
  - Councillor Austen White
  - Councillor Cynthia Ransome
  - Councillor Clive Stone  
  - Invitees: Tom Fent, Unison Representative

## **TIMESCALE**

4. It was agreed by the Communities and Environment Overview and Scrutiny Panel that the review would be undertaken mainly over a two day period including a separate meeting with victims of domestic abuse and a site visit to the refuge, the Chair and Vice Chair also attended a national Domestic Abuse

seminar. All meetings were undertaken between July 2016 and February 2017 and the final report to be sent to the Executive in March 2017.

## MEETINGS

5. The Panel or Chair and Vice Chair undertook the following meetings as part of the review: -

	<b>Date</b>	<b>Meeting</b>
1.	28 <sup>th</sup> July 2016	Site Visit To Housing Refuge (Riverside)
2.	11 <sup>th</sup> August 2016	Full Day Meeting With Officers And Partners
3.	3 <sup>rd</sup> October 2016	Meeting With Domestic Abuse Victims Recommendations Meeting
4	14 <sup>th</sup> December 2016	Domestic Abuse Seminar
5.	10 <sup>th</sup> January 2017	Meeting With Panel And St Leger – Review Of Recommendations (Part 1)
6.	17 <sup>th</sup> January 2017	Meeting With Panel And St Leger – Review Of Recommendations (Part 2)

## CONTRIBUTORS

6. During the review, the following individuals have kindly provided their time and expertise to enable Members to receive a broad range of information: -

### **DMBC;**

#### Cabinet Members

Councillor Chris McGuinness - Portfolio holder for Communities, the Voluntary Sector and Environment

#### Officers;

Bill Hotchkiss – Head of Service (Community Safety)

Sandra Norburn – Domestic and Sexual Abuse Theme Manager

Judith Vickress – Knowledge Hub Team (Safelives)

### **EXTERNAL;**

Phil Hayden – Interim Project Manager, Performance and Business Improvement – Children's Trust

Cheryl-Henry Leech – Operational Manager, Performance and Business Improvement – Children's Trust

Andrea Parkinson – Service Manager - Riverside

Debbie McKinney – Service Manager – Changing Lives

Hannah MacKay-Christie - Business Development Manager – Changing Lives

Rebecca Newcombe - Senior Business Developer- Doncaster Rape and Sexual Abuse Counselling Service

Nikeisha Bragger – Project Manager - Foundation for Change  
Paul Hardman - Development and Communications Director - Foundation for Change  
Karen Hockley - Detective Inspector Karen Hockley – South Yorkshire Police  
Julie Wells - Service Delivery Manager  
Vespa Rynng – Former Doncaster Women's Aid Employee  
Julie Jablonski - Housing Safeguarding Partnership Manager (St Leger)  
Two victims who has been affected by domestic abuse.

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## BACKGROUND

### 7. Key facts:

- Upwards of 27,060 of women and girls aged 15 to 59 in Doncaster have experienced an incident of abuse or sexual assault in their life;
- The overall wider public cost of domestic abuse in all cases for Doncaster is estimated to be over £56m;
- The cost of support for children and young people known to Children's social care is calculated at £7.5m;
- Since services to support people affected by domestic abuse were launched there has been a 10.25% reduction over the 2 years which is not reflected in the rest of South Yorkshire, this suggests that the Council and its partners are having an impact;
- Police incidents have flattened over the last three years against a continued increase in South Yorkshire;
- Familial links – now seeking a second generation going through the Multi Agency Risk Assessment Conference (MARAC) programme. Some children grow up with domestic abuse as 'normal' and go on to have abusive adult relationships;
- Domestic Homicide Reviews – these are management reviews and as from 2011 are statutorily required if there is a death following domestic violence. They are chaired by an independent person with the process managed by DMBC Community Safety Team. There have been 4 reviews in Doncaster, the recommendations of which have been fed into the Domestic Abuse Strategy. It was noted that none of the victims had been engaged with support services although all had made a least one call to the police about domestic abuse.
- Commonly find a combination of issues present in a domestic abuse environment, for example, mental health, substance misuse, poverty, disability, parenting and worklessness.

### 8. Services for victims (both men and women) of Domestic Abuse

- Free Domestic Abuse Helpline 0800 4701505 (Riverside);
- Refuge, housing provision and floating support where people need to move (Riverside);
- 3 Domestic Abuse Caseworkers (DAC) including one based at Doncaster Royal Infirmary and two targeting GPs (DMBC Community Safety). They focus on preventing escalation of risk, supporting victims at lower levels with their intervention looking to reduce repeat incidents.

- 4 Independent Domestic Violence Advocates (IDVAs) supporting high risk victims as part of the Multi Agency Risk Assessment Conference (MARAC) managing high risk cases, including 1 specialist for young victims aged 13 to 19. It was recognised that due to the high abuse in teenagers a specialist for this age range was required;
- Multi Agency Risk Assessment Conference (MARAC) managing high risk cases and managed by DMBC;
- Domestic Abuse Navigators (DANs) (Doncaster Childrens Services Trust) support recovery of children and young people.

9. Services for people using abusive behaviour:

- Foundation – a voluntary programme offering support to change behaviour. This was the only facility in South Yorkshire and will be evaluated by Sheffield University with a report expected in 2017.
- Police response – new tools such as Domestic Violence Protection Notice and Order (DVPN/O's), Clare's Law and new coercive control law;
- Intensive management and monitoring of high risk offenders through joint work with Police and Probation;

10. Domestic Abuse Strategy

Following a partner development day the vision and core principle of practice emerged as:

“In Doncaster people no longer experience Domestic Abuse”

The vision was aspirational and was for a Doncaster where domestic violence and abuse is recognised as unacceptable, and people live safe and happy lives free from abuse.

11. Strategic Outcomes and Key Objectives:

- Outcome 1 – Communities and families no longer accept or experience domestic abuse.
- Outcome 2 – Families who are vulnerable or experience domestic abuse are identified earlier and receive effective support to stay safe; reduce repeat victimisation and recover.
- Outcome 3 – People who use abusive behaviour are challenged and provided with effective support to change or face the consequences of their actions.

## 12. Consultation

Consultation on the Strategy had been undertaken but further consultation was required through the summer with opportunities to contact young people through Growing Futures. Some of the comments following consultation included the requirement for a cultural change particularly in small close knit communities, particularly working with several generations where there has been abuse. Further consultation was required with service users and residents which would be continuing up to September 2016.

It was thought through consultation that the Strategy was easy to understand which all front facing organisations within Team Doncaster and partners would be able to implement.

It was recognised that Doncaster required a whole system and place approach including all residents, staff from any partner or agency and that domestic abuse was not “just the way of life”.

## 13. Prevention and Education

There was a need to educate people to report incidents to receive support and avoid repeat incidents.

It was stressed that there was a change in culture required, particularly in families where domestic abuse had been present in a number of generations with education in communities and schools to change acceptability of the problem.

There was currently delivery of awareness sessions in school for teenagers and a programme was being developed for primary age children.

The delivery of free multi-agency training for workers in all partner agencies was being undertaken to give people skills to recognise and respond to disclosures of domestic abuse.

## 14. Early Intervention and Promoting Recovery

It was essential to have good partnership working to provide the whole family approach with a single lead professional co-ordinating work. This ensures effective sharing of information to protect those at risk;

There was a lot of emphasis on making a referral if someone suffered or suspected domestic abuse which raised that people had to have the confidence to firstly make the referral,

To aid recovery therapeutic and educational programmes are delivered to help victims recover from the impact of living with domestic abuse.

15. Management of risk of serious harm

A Multi-Agency Risk Assessment Conference (MARAC) is held every 2 weeks where 20-25 cases are discussed. In 2015/16 there were 442 high risk cases – 43% repeat cases and 151 from April to June 2016.

Domestic Abuse, Stalking and 'Honour' based violence (DASH) to manage the risk of serious harm, it is vital to make an accurate and fast assessment of the danger people are in, so they can get the right help as quickly as possible. The DASH risk checklist is a tried and tested way to understand risk.

16. Doncaster Children's Services Trust

Growing Futures – outlined that it was a long term way of thinking and working differently together as partners with families not just a project with Key Objectives as follows, whilst informing Doncaster's DVA strategic approach and mainstream practice:

- Reduce emotional harm caused by domestic abuse to children;
- Directly support recovery from abuse for victims and their children;
- Reduce repeat victimisation;
- Challenge acceptance of domestic abuse and violence by families and whole communities; and
- Break the pattern of abuse as it re-presents itself in children and young people.

Headlines:

- Work intensively with around 240 high risk families per year (350 children) cohort 1;
- Work intensively with 350 medium risk families per year (500 children) – cohort 2;
- Reduce repeat cases to Multi-Agency Risk Assessment Conferences (MARAC) by 25% in year 1;
- 30% reduction of repeat referrals to social care where domestic abuse is a factor;
- Reduction of children admitted to care resulting from 10% reduction in children in need where domestic abuse is a factor.

17. Raising awareness - Key areas to raise awareness and consult with were partner agencies, practitioners, communities and families (adults and children/young people) through changing how agencies think and practice, communications strategy, research.

18. Achieving Impact - Domestic Abuse Navigators are at the heart of the practice to effect change for children and support the transformation of domestic violence abuse (DVA) practice. 8 Domestic Abuse Navigators (DANs) work on high risk cases through Multi-Agency Risk Assessment Conferences (MARAC) currently with 164 cases being worked and 58 concluded. Re-referral is

currently 12.3% compared with 24% in other cases. The approach is based on early intervention and prevention with the view that this would reduce the need later through children's social care by avoiding the need for child protection plans or children going into care). The service model provides flexibility and a differentiated approach to address individual children's needs, recognising children and young people will experience and be affected by DVA in different ways for example, 3 children at different ages in the same family could require different support whether it be therapeutic or support discussions. It was noted that there was currently a short waiting list which was being managed through Domestic Abuse Navigators (DANs) co-working or mentoring other professionals currently working with these families.

It was also acknowledged that very few services nationally provide recovery for children living with domestic violence or abuse. Doncaster was therefore leading the way in rethinking practice through a whole family approach by working with or ensuring work with the adult victim; the abuser and the children within a family at the same time.

To support the development of direct practice and support transformation of services through other agencies Domestic Abuse Navigators (DANs):

- Undertake direct casework the high risk families (50%);
- Mentoring and modelling practice in casework;
- Group work with children and young people
- Delivering the Getting on Programme (Teen to Parent abuse);
- Workforce Training Programme and seminars;
- Project development including action learning and external evaluation;

19. Outcomes and Impact – success of the programme is being evaluated by an appointed external evaluator through a range of indicators. The external evaluation is focused on the following key questions:

- what impact has Growing Futures had on families experiencing DVA?
- what impact has Growing Futures had on systems, protocols and professional practice within services dealing with cases of DVA?
- has there been a reduction in repeat referrals to Multi-Agency Risk Assessment Conferences (MARAC) over the course of the project?
- has there been a change in the vulnerability status of children (that is, children in Need, Children with Child Protection Plans, and Looked After Children) as recorded on the social care IT system?
- what challenges have Growing Futures faced in achieving its objectives?
- what has enabled Growing Futures to achieve its objectives?

20. Challenges – Members recognised the intensive work required with victims; perpetrators and children; as well as taking a whole family approach. This is further complicated by:

- Difficulty recruiting specialists (Mental ill health and drugs and alcohol) as agencies restructure and reduce capacity reluctant to take on innovation short term funded work;
- Workers drawn to this work could have lived experience of domestic abuse or only worked in the past with aspects of domestic abuse (not whole family) which poses potential burn out, it is therefore vital to have clinical supervision;
- Changing practices (thinking and working differently) takes time and requires consistent leadership;
- Limited or poor understanding of the types or typology of domestic violence and abuse alongside other multiple needs;
- Reluctance of some workers across the partnership to engage and work with abusers – this is their current competency; confidence or not seen as their role;
- Domestic Abuse, Stalking and 'Honour' based violence (DASH) risk assessment not routinely used across the partnership by agencies to understand the level of risk and referring to Multi-Agency Risk Assessment Conferences (MARAC).

## 21. **Safelives**

The representative stated that Members must be proud of what workers were trying to achieve in Doncaster, particularly good practice ideas that were now being used elsewhere in the country. Nationally they wished to see more referrals from partner agencies not just the Police. It was learnt that some organisations dare not ask the question "is it domestic abuse" for fear of the answer, therefore there was a need to enable people to disclose and identify the issue.

- Since 2005, SafeLives, a national charity formally known as CAADA, has found new ways to help victims at risk of murder or serious injury. It pioneered the use of the Domestic Abuse, Stalking and 'Honour' based violence (DASH) Risk Assessments; trained more than 1800 IDVAS (specialists who help victims become safe) and enabled professionals to work together to cut domestic abuse, setting up over 285 Multi-Agency Risk Assessment Conferences (MARACs) in the England, Wales, Scotland and Northern Ireland.
- Frontline services are not delivered but work is undertaken to support others to implement, develop and sustain Multi-Agency Risk Assessment Conference (MARAC) processes, training. Expertise is also provided through the Knowledge Hub team all of whom scour the country to see what works and disseminate good practice.
- In 2015, SafeLives was developed with a mission to make every family safe. It is delivering pilots to work with perpetrators and a new One Front Door model which will assess the risk to every family member. It was felt that unless information is shared at the earliest opportunity, domestic abuse victims and their children will remain at risk of serious harm and murder.

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## **EVIDENCE GATHERED – WHAT MEMBERS LEARNT**

### **Riverside – Andrea Parkinson**

#### **What part do you play in the response to Domestic Abuse?**

##### **22. Refuge**

- A safe 24-hour access accommodation (if police or Social Care referral), comprising of 2 self-contained flats and 5 shared accommodation.
- Referrals are made from all agencies and self-referrals to [victoriahouseservices@riverside.org.uk](mailto:victoriahouseservices@riverside.org.uk) or 01302 883599.
- Supports women to overcome language barriers and cultural barriers.
- Capacity to accommodate 7 women and up to 15 children.
- Within 24 hours a comprehensive needs and risk assessment will be completed to identify key priorities for intervention.
- A pre-CAF (Common Assessment Framework) will be completed for all the children within 5 days of arrival.
- Specific work undertaken with women to identify needs; Safety, Accommodation, Benefits, Parenting, Health and Counselling.
- Promote independent living through encouraging self-esteem and empowerment. 28 day stay (contracted but there's leeway depending on the individual).

##### **23. Dispersed Service**

- There are 8 units of dispersed housing.
- Suitable for both men and women fleeing domestic abuse, if refuge is not suitable or moving on from the refuge.
- Safety measures; house tagged, alarms installed.
- Maximum length of support will be up to 6 months.

##### **24. Helpline**

- Provided for public and professionals to make initial contact for support and advice about domestic abuse. Tel: 0800 4701505.
- Immediate response and assessment of needs and risks over the telephone – 7.30am to 10.30pm – calls will go to voicemail outside the core hours and will be addressed at 7.30am the following day.
- Signposts and provide information identifying support available.
- Available to both men and women experiencing domestic abuse.

##### **25. Floating support service**

- Tenancy related support for males and females (16+) who have or are experiencing domestic abuse.
- Supports 50 individual clients/families to make choices, manage risks and recover from domestic abuse.
- Assist with accessing education/employment opportunities, mental health issues, substance misuse, counselling, budgeting, debt advice and tenancy issues.



- Service delivered in clients own home or with agreement can take place at alternative venues.
- Service operated flexibly to meet the individual's needs.

#### 26. Freedom Programme

- Available to anyone experiencing or have experienced domestic abuse.
- Develops an understanding of the dynamics of domestic abuse and to recognise abusive behaviours to recognise the impact of domestic abuse on themselves and children.
- Warning signs and how to protect themselves from further abuse.
- To gain self-esteem, confidence, improve quality of life and live free from abuse.
- To meet other people who have had similar experiences.
- Sessions delivered 1 day a week over 6 consecutive weeks.
- Starting new course around healthy relationships.

#### 27. Children's Services

- Supports families to understand how domestic abuse may have affected them and their children, by offering courses such as; "You and Me, Mum".
- Promotes healthy and non-violent relationships by raising confidence and empowering both mother and child/children.
- A detailed support plan is completed for each child and reviewed every six months to ensure the child's individual needs are met.
- Offers one-to-one support sessions with the child or with the whole family to help them communicate difficult issues through therapeutic play.
- Offers safety support for children to encourage personal safety and identify risks.
- Support is delivered in the refuge, in clients own homes or at an external venue.

#### 28. You and Me, Mum Programme

- Develops an understanding of how domestic abuse affects parenting.
- Empowers mothers to gain a better understanding of their role as a parent by addressing the needs of children and young people who have lived with domestic abuse.
- Promotes effective communication skills with parents, children and young people.
- Explores key protective behaviour messages and strategies for keeping mothers, children and young people safe.
- Course participants can self-refer to the programme or can be referred by external agencies.
- Sessions are delivered for 2 hours a week over a 6 week period

All sessions open to males apart from refuge and they employ males as well.

## **What are the key challenges for your organisation in delivery services?**

Members were informed of the following challenges;

29. Lack of housing – Members were informed that there was a 28 day period to remain at the refuge with three main aspects including 1. safety, 2. health and safety of whole family and 3. maximising benefits. Members heard that when it came to looking at where the client would be moving onto, there could be a backlog in getting people moved and settled. It was explained that appropriate privately rented accommodation were used and that work is being undertaken with landlords to find ones that can move quickly.
30. Refuge building not fit for purpose – It was explained that the refuge used was not a purpose built refuge and therefore had its limitations. The building was described as a lovely residential home rather than a purpose built refuge as it was dark, with small rooms and shared accommodation. It was explained that there were issues with families sharing a kitchen and problems such as food stealing and money being borrowed and owed. It was outlined that there were often complex needs which can't all be resolved. Members were informed that there were health and safety and safeguarding issues such as discarding needles with children and residential substance misuse.
31. No recourse to public funds – Members were informed that there were a lot of immigrations issues with visas causing complications when applying for benefits. It was explained that Riverside will signpost clients as well as those with no recourse to public funds accordingly
32. Befriending services – Members were informed that although befriending services could be very beneficial and could become a comfort blanket for the emotional issues, there was not a lot available in Doncaster.
33. Children slipping through the net – It was identified that children moving from one place to another could slip through the net especially in terms of education as well as instability and creating emotional issues. It was explained that it was not always easy to get children into the local school when they were constantly moving about. Also, difficulties with social services such as with transportation children to schools (when it is 2 to 3 bus rides away) were more complicated when there was more than one child.
34. Grants/resources to move on – Money and finances play an important role for many victims when considering whether to leave an abusive relationship. Members were informed how there was limited money available to help survivors build financial independence and that the processes could be quite confusing.
35. Need to change – Members were informed that Riverside was bound by agreement with the local authorities and held regular meetings with commissioners when they discussed outcomes, difficulties and gaps and how issues could be addressed in a flexible way. It was recognised that the service was dealing with individual people with different needs and that one size did not fit all. Members were informed that Riverside's contract was stringently audited and that there were lots of systems they have to work with. It was added that

monthly and weekly reports were produced and Key Performance Indicators (KPIs) were of a high standard that needed to be met.

36. Honour based violence on the rise – it was explained that this was a complex issue and difficult to understand and address as all cultures were different.

**Will your organisation need to change to facilitate effective whole family working, if so, what are the challenges?**

37. It was felt that there could be more involvement with other social care teams across the country but with only a small transition team this could be difficult.

### **Changing Lives – Debbie McKinney (Women’s Centres)**

**What part do you play in the response to Domestic Abuse?**

38. Changing Lives is a national charity which provides specialist support services to vulnerable people and their families. Originally a homeless charity dating back to 1970 (formerly Tyneside Cyrenians), Changing Lives now operates nationally. There is a Head Office and significant presence in the North East, also delivering across Yorkshire and Humberside, East and West Midlands and the North West.
39. Services are specifically designed and delivered for the most vulnerable and disadvantaged in communities, including homeless accommodation and longer term housing solutions; addictions and recovery services; social prescribing and employment. There are also women’s services, support for women and girls to achieve more through holistic one-stop-shop women’s centres, such as the Doncaster Women’s Centre as well as specialist services including support for women exposed to sexual exploitation, survivors of domestic abuse and women in the Criminal Justice System. There are family services to work with parents and carers providing practical, positive solutions for adults and children experiencing family breakdown in partnerships with Children’s Services and the Troubled Families agenda.
40. Its projects are supported by the successful social enterprise, Homelife where previously empty homes are purchased, refurbished and rented out to those in need. Approximately, one quarter of the staff team of nearly 400 are previous users of our services as experts by experience.

### **Changing Lives in Doncaster**

41. Changing Lives Women’s Centre in Doncaster provides tailored support to help women and girls achieve more whether through accredited training programmes, counselling, confidence building work or specialist services for women experiencing domestic abuse, involved in the Criminal Justice System and those involved in street sex work. A vibrant multi-cultural community centre is run in the heart of the town, working with approximately 2000 girls and women per year of all ages. Work is currently undertaken with 46 different nationalities. An Ofsted registered crèche is provided for mothers and carers accessing the services.

## Changing Lives response to Domestic Abuse

42. Changing Lives provide a number of services for women, men, children and families whose lives are impacted by domestic abuse across the North of England as follows:

- The refuge and Independent Domestic Violence Advocates (IDVAs) service in Halton runs a psychologically informed environment and outreach service for both male and female survivors.
- Changing Lives are partners of a newly commissioned service in Newcastle upon Tyne, managing staff within a new-build refuge and run an integrated IDVA/Independent Sexual Violence Advocacy (ISVA) service across the City.
- Their commissioned IDVA service in Blackburn with Darwen is established to reach out to medium and high risk victims in the community. This team is located within the city centre, with staff also based in multi-agency safeguarding hub, accident and emergency and local maternity units. The Outreach Team deliver recovery group work to adult survivors, and young people who have witnessed domestic abuse in the family home. They engage children in schools and deliver a voluntary perpetrator programme.
- Changing Lives have recently been funded by a significant Big Lottery Reaching Communities grant to develop an exciting new project in Blackburn with Darwen. This project will seek to address a significant gap around early intervention work for women experiencing domestic abuse which minimises the likelihood of harm escalating and repeat victimisation. The team will engage families with additional complexities due to their intention to stay together; women with multiple needs where violence and abuse can be normalised; women in employment; and BAMER women. This new approach will be fully evaluated with learning shared with all stakeholders nationally.

43. Changing Lives also have considerable experience working directly with families who may be impacted by domestic abuse:

- The Knowsley Families Project is linked closely to the Troubled Families team as a 'step-down' service supporting all family members to address their needs, including domestic abuse, social exclusion, mental health and poverty.
- Ridley Villas in Newcastle and Gateshead provides abstinence-based supported accommodation for women with children who are at significant risk of being removed into the care of the Local Authority. Almost all the families engaged with in this capacity are at risk as a result of domestic abuse and the team is highly trained to safeguard children whilst working with families to stay together.

- Changing Lives in Doncaster is commissioned by The Children's Trust Growing Futures programme to deliver a range of domestic abuse recovery group work programmes to break the cycle of repeat victimisation. Work includes engaging with young people who have witnessed domestic abuse in the family home as has been shown from service user consultation in Doncaster Women's Centre that so often this increases likelihood of domestic abuse in early intimate relationships and ongoing into adulthood.
  - The Women's Centre in Doncaster is well known as a central point of contact for all women and girls to access with an open door policy, receiving advice and guidance, signposting and support. A number of those people who drop in to the Centre do so to seek support for domestic abuse and we have local Solicitors offering free legal advice attending weekly to enhance the service we can offer. Women and girls can access counselling and therapeutic group work as well as more practical opportunities to address these needs. Partnerships across the City are essential to ensure women and girls can access the most appropriate and seamless advice and we engage with the Multi-Agency Risk Assessment Conference (MARAC) process as required.
44. The provision has a Town Centre location which is very accessible and provides a first point of call for women presenting and asking for help. Women are referred through the Growing Futures initiative or by presenting directly at the Centre or via another service addressing other needs.
45. Added value through the Changing Lives offer and plays a role in the long term recovery of domestic abuse. Other Changing Lives services individuals impacted by domestic abuse may present include:
- Amber Project – support for women with experience of sex work, survival sex and sexual exploitation in Doncaster. The majority of clients have experience of domestic abuse.
  - Positive Mental Health – the team supports women with low level mental health by delivering a number of therapeutic groups, one to ones and counselling.
  - Young People – support for 18 – 25 year olds to get back into training or work, breaking down barriers to employment via Talent Match.
  - Women in the Criminal Justice System – structured group work, drop in and one-to-one support for women subject to community supervision and on release from custody, commissioned by South Yorkshire CRC and NOMS.
46. It was outlined that Doncaster women's centre receives 20 referrals per week for counselling; and through the DMBC programme there are 300 to 400 counselling sessions per year. This may meet the needs of young people (particularly young men) who may not engage well with group work. It was noted that some clients attended such sessions whilst in a relationship with the perpetrator.

47. Changing Lives understand that a co-ordinated community response to domestic abuse is important, and that their services are just one element of a wide range of services and interventions. As an organisation they ensure that all their staff are able to consider the whole family at all times as so often these attachments are an integral element of recovery and resilience.

**What are the key challenges for your organisation in delivery services?**

48. Our challenge is to continue building partnerships and working in collaboration to provide the best support available for a person's support plan. Our hope is that this would contribute to a single point of contact that co-ordinates the process through. The provision of aftercare support when required to prevent reoccurring problems is key in the process and a challenge is to balance resources enabling a team to be fully effective and supportive for people accessing the service. This form of aftercare could be strengthened to reduce the number of clients returning back into treatment and empowering people to move in their lives.
49. It was added that clients of domestic abuse and from the Amber project were in and out of hospital and many agencies were involved. This resulted in information not being communicated effectively.

**Will your organisation need to change to facilitate effective whole family working, if so what are the challenges?**

50. Changing Lives expressed a desire to see the development of fully integrated partnerships across Doncaster including early intervention to break the cycle of abuse before it escalates family support and a holistic offer for everyone in the community through a genuinely co-ordinated community response.
51. As an organisation, they have worked in close partnership with The Children's Trust to develop a Whole Family model, moving away from the 'parallel planets' of children, adults and offender services towards a genuinely integrated approach.

**Doncaster Rape and Sexual Abuse Counselling Services (DRASACS) - Rebecca Newcombe**

**What part do you play in the response to Domestic Abuse?**

52. It was explained that DRASACS delivers counselling and the services of Independent Sexual Violence Advocacy (ISVA) to men, women and children of all ages who have suffered any form of sexual violence, at any time in their life.
53. Many of the clients DRASACS work with in the counselling service have suffered sexual violence within a domestic setting. DRASACS were able to offer specialist counselling to support clients in coping with the emotional impact of sexual violence, working on empowerment and supporting them to live a life free from the legacy of abuse. Support is extended to family

members who have also been impacted by the abuse suffered by a loved one.

54. DRASACS also runs the Doncaster Independent Sexual Violence Advocacy (ISVA) service and can support clients, practically, who have suffered sexual violence within a domestic setting. ISVAs work in close partnership with the Criminal Justice System. It was explained that ISVAs can go with an independent perspective with the client to make sure that their needs are maintained and that this relationship can last around 18 months to 2 years. It was noted that the ISVA role is to keep the client up-to-date, explain police jargon and decisions and undertake pre-trial visits to court.
55. It was reported that over 500 Doncaster residents were seen in a year with the youngest being 6 months of age and counselling being provided to children from as young as 3 years old.
56. Members were informed that the aim of the organisation was the wellbeing of clients and keeping them engaged in the process, it was noted that once the ISVA had become involved then the client was more likely to stay engaged.
57. It was reported that there was a waiting list for counselling although the service provided by ISVAs was more immediate. In relation to Mental Health services, it was acknowledged that they were in high demand and it was difficult for people to feel confident enough to speak out.
58. It was explained that DRASACS was a specialised organisation and worked in partnership with other charities and projects such as Changing Lives and Victim Support. It was noted that the Police and Crime Commission was looking to make this provision more consistent across South Yorkshire.

**What are the key challenges for your organisation in delivering services?**

59. Funding - DRASACS is in a strong funding position, however, many of the funding pots available are for a maximum 3 year period, with some only being for a 12 month period, creating an ongoing need for funding to be sought and secured.
60. Relationship with Agencies – It was commented that DRASACs had a good relationship with agencies but that it was only as good as the length of time people remained post and that when those people left they took away valuable knowledge and expertise.
61. Referrals - It was stated that referrals escalated significantly following the Jimmy Saville enquiry.

**Will your organisation need to change to facilitate effective whole family working, if so what are the challenges?**

62. DRASACS currently delivers family working through the support provided to family members. The counselling effectively utilises the limited resources

available to accommodate whole families attending for individual 1-2-1 counselling, at the same time to reduce cost of travel and time for the clients.

63. It was added that the Independent Sexual Violence Advocacy (ISVA) service support extends to whole family throughout the duration of the engagement with the client.

DRAFT



## **Foundation 4 Change – Nikeisha Bragger**

### **What part do you play in the response to Domestic Abuse?**

64. Foundation is a charitable organisation with over 30 years' experience of providing a range of housing and complementary services to vulnerable and socially excluded groups. It delivers tailored support to help customers reduce social isolation and build rewarding futures through recognising people's strengths, championing their voices and working in partnership to deliver excellent services.
65. Foundation provides a range of support services including working with adults to prevent and tackle homelessness, domestic abuse and substance misuse. They also work with young people to support them with housing and resettlement, leaving care and offending. They provide practical, financial and emotional support, offering advice and guidance and deliver services for both victims and perpetrators of Domestic Abuse whilst working in partnership with external agencies.
66. It was explained that the service started 2 years ago offering something slightly different with shorter term interventions for more low and medium risk perpetrators who family had not had any interventions at that point. It was explained that it was an 8 week voluntary programme delivered in Doncaster. For this course, a needs and risk assessment of individuals needed to be undertaken for a pathway to be chosen for them. It was outlined that the programme was on average 5-6 months all together with signposting to other agencies to address other needs.
67. In 2015-2016, Foundation supported 4584 customers across their services and undertook 56,000 face to face contacts; this excludes an increasing number of customers who access the triage service for short term focused interventions. 2610 customers left the services which was a planned outcome for 83% of these customers.
68. In Doncaster, Foundation currently deliver three services; CLASS our Care Leaver Accommodation Support Service to support 16-18 year old care leavers who want to live independently, Foundation our voluntary perpetrator programme and Working Towards Change delivered in partnership with Growing Futures to offer support to perpetrators who's families are supported by Domestic Abuse Navigators and individuals who are arrested for Domestic Abuse offences.
69. Foundation is commissioned until March 2017 and is funded by the Police and Crime Commission (PCC) and DMBC (Public Health).
70. Foundation was developed as an early intervention, preventative model for perpetrators of domestic abuse. The service is available to all individuals aged 16 and over, who live in Doncaster, who are committed and motivated to change their abusive behaviour and provide consent to sharing information

and working with victim services to ensure the safety and wellbeing of victims and children.

71. The aims of the service are:

- To reduce harm caused to families by domestic abuse;
- To challenge the acceptance of abusive behaviour;
- To change the behaviour of individual perpetrators of domestic abuse; and;
- To provide early intervention to prevent abusive behaviour occurring in the future or escalating.

72. The purpose of the service is to:

- Increase the safety of victims and children;
- To offer all individuals displaying abusive behaviour towards partners or family members the opportunity to recognise, acknowledge and change their behaviour; and
- Target all levels of abuse and offer early intervention.

73. The support provided includes group based interventions, 1:1 work and assesses the needs of the individual. Their approach is holistic so they work closely with other agencies throughout Doncaster to provide tailored services to suit the individual ensuring the best for its customers.

74. Progress so far - Since Foundation started they have received 425 referrals with 227 customers placed on a programme of support. They have developed a drop in service and 51 customers have accessed this additional support service on completion of the programme.

75. It was reported to Members that there had been a good success rate, high number of referrals and self-referrals (which was seen as positive that clients were actively seeking out the service as the programme would not work if client was made to come).

76. On completion of the programme, 90% of customers said they have been able to address their abusive behaviours, 88% reported positive changes in their relationships and 96% said they have a better understanding of the consequences of their behaviour on others.

77. Services are flexible to work around the needs of the customers. Many customers are in full-time employment so they offer evening and weekend appointments to make sure that the service is inclusive. A total of 94% of customers said they were able to fit the service around their personal commitments and were therefore able to complete the programme.

78. They are a key partner in Doncaster for Domestic Abuse perpetrators and work closely with a number of other agencies such as social services and the police to address this issue.

79. In terms of support for young people, the following has been undertaken;

- Care Leaver Accommodation Support — option for young people aged 16 to 18 years old to get their own accommodation, they rent on their behalf then when they turn 18 then hand them over to that property.
- Budgeting – work undertaken with young people on package of support hours and assess needs – good outcomes have been achieved from care leavers service.

The University of Sheffield (School of Health and Related Research) are currently evaluating Foundation and will report on their findings in March 2017.

**What are the key challenges for your organisation in delivering services?**

80. They include the following: -

- Intentions of commissioners/longevity of services - it is not clear what will happen to Foundation post March 2017 and this creates a degree of uncertainty within the team. It was reported that retention of staff is often difficult when the organisation doesn't have a clear picture of what will happen to the funding and therefore staff may look to leave for more stability.
- Recruiting and retaining the right level of staff to work with this challenging customer group, with the right level of experience and skills and a salary to reflect the specialist service. Commissioned services often focus on volume rather than quality and more work needs to be done about measuring impact and return on social investment. The organisation is aiming to achieve this with the University evaluation.
- Varied roles and salaries between local organisations, for example, Doncaster Childrens Services Trust are paying for Domestic Abuse Navigators who's role profile appears to require similar skills and experience. This can result in problems with recruitment and a lack of co-ordination between local providers is evident. It was felt that the reward level needs to be more appropriate and for all commissioners to be aware of difficulties of job and how long it takes to change such behaviour. It was added that if the pay level is inconsistent with the market, it makes it difficult to retain staff therefore commissioners need to be more co-ordinated and consistent.
- High turnover of staff in key partner agencies such as Social Services so professionals are not always aware of services available to make referrals. It was reported that it was therefore difficult to keep on top of this as it was time consuming to attend meetings etc.

- Lack of confidence/awareness of other professionals not directly working with domestic abuse on how to deal with issues, challenge behaviour, encourage participation and therefore better training required.
- Information sharing varies between organisations - it was reported that it would help all services if clear information and shared protocols were in place between all partners who were all ultimately working towards the same goal. It was stressed that the work that is being undertaken by the organisation was the outcome even though the work is with the perpetrator. It was commented that in respect of data protection that there is a culture issue that people tend to use it as a first line of defence not to do something, for example, legislation was being used to drive risk averse behaviour. Reference was also made to similar statements made within the Independent Inquiry into Child Sexual Exploitation in Rotherham (1997 – 2013).

**Will your organisation need to change to facilitate effective whole family working, if so what are the challenges?**

81. The following was raised;

- Foundation offer individually focused support packages tailored to the needs of the customer. The focus initially is to work with the customer across all services.
- Foundation already works in partnership with other agencies that support partners and children to ensure support for all the family is in place; and will signpost where relevant. It is a voluntary service but customers are informed at the start of support that they work in partnership with Domestic Abuse Caseworkers and as part of the service, all partners (if applicable) will be offered a support service. This is a combined effort with partners to ensure that support is in place for the whole family.
- Foundation do not see their role as the lead professional but certainly as a member of the team to provide support and advocate for our customers.
- Data Sharing is a key part of being able to effectively work in a coordinated whole family approach. There have been incidences of professionals stating that they can't share data but under the Data Protection Act 1998 can if the purpose is to prevent crime. The organisation views their role being to prevent domestic abuse but challenges are created by varied procedures in other organisations.
- Working with Schools – The organisation would like to undertake more work with schools and with young people at an earlier stage.
- Commissioners looking at volume rather than quality – It was suggested that this pre-supposes you know what you are acquiring and if you are not clear or if you have never purchased such a thing before then more pre discussion is required around what you are buying and what will you do.

It was added that working with perpetrators, it is challenging to identify outcomes for measuring changes in behaviour.

- Funding – It was spoken how there was no indication what will happen after funding ends, and suggested that a county wide approach would be more effective. It was proposed that it would be useful to get partners from within the South Yorkshire region to deliver it with one lead and satellite offices.

**South Yorkshire Police (Protecting Vulnerable People - PVP Unit) – Detective Inspector Karen Hockley – Manager of Safeguarding Adult Team (SAT) for Doncaster and Barnsley**

**What part do you play in the response to Domestic Abuse?**

82. The South Yorkshire Police Safeguarding Adult Team (SAT) structure within Doncaster, is co-located with partners at the Mary Woollett Centre in Doncaster. The SAT supports district Police Officers and staff, with high-risk issues and investigations.
83. The SAT commenced in Doncaster in 2015 and forms part of a Hub, together with Barnsley. In place are 16 Detectives/Trainee Investigators, three Civilian Investigation Officer and two Sergeants that cover the Doncaster area. There are additional resources based in Barnsley. The team provide 7 day week cover between the hours of 0800 hrs and 2200 hrs and there is also a South Yorkshire night cover between 2100hrs and 0500hrs.
84. The SAT terms of reference includes the following;
  - Manage all high-risk domestic abuse cases, including safeguarding and child protection;
  - Domestic Abuse Disclosure Scheme Applications (DADS) and Domestic Violence Protection Orders (DVPO's);
  - Manage high-risk domestic related harassments and non-domestic stalking;
  - Investigate allegations of rape and assault by penetration from victims 18 years old and above;
  - Incidents of Forced Marriage and Honour Based Abuse (HBA);
  - Investigate allegation of human trafficking and modern slavery for purposes of sexual exploitation;
  - Serious and complex investigations where adult safeguarding issues exist and a lack of care/neglect forms a major part of the offence.
85. As part of the discussion, it was acknowledged that the main role of the police was about: -
  - Protection of life, prevention and detection and investigation of crime;

- Early intervention by alerting partner agencies of concerns and DADS/DVPO's;
  - Attendance at case conferences, chairing and attendance at Multi Agency Risk Assessment Conferences (MARAC), safeguarding plans with victims and referrals for perpetrator programmes;
  - Work within specialist crime services;
  - Become involved with other interventions; and
  - Forming action plan with all partners.
86. Members heard that although there were police briefings, multi-agency briefings did not occur. However, it was reported that partnership working and communications were working well. It was acknowledged that there were very clear processes in place, including management meetings to look at domestic arrests. Members were informed that officers on the ground were made aware of serial perpetrators of domestic abuse. It was commented that there were a high rate of victims retracting statements and questioned whether extra support was needed. It was explained that the police are measured on performance although demand can't always be predicted.
87. In respect in getting help, reference was made to contacting the helpline or ultimately ringing 10. It was shared that referrals could be made to any agency depending upon the severity of the case and wishes of the victim. It was viewed that it is important to ensure that staff have access or know about all support agencies for domestic abuse. In relation to emergency accommodation, Members were informed that people are placed in hotels if necessary to ensure that they were kept safe.
88. It was stated that emphasis should be based on early intervention and prevention to avoid missed opportunities as opposed to reactive responses in a crisis.

### **What are the key challenges for your organisation in delivering services?**

89. The following was identified as key challenges;
- Whilst commitment to safeguarding all areas was a priority, challenges in delivering such a service (for example resourcing uniformed officers) had been difficult due to high demands elsewhere (breach of high risk repeats and restraining orders). Other influential factors included officers leaving or not being at work due to sickness, career breaks, being attached onto other enquiries and not being replaced;
  - Communication between agencies to ensure awareness of roles and responsibilities, especially with relatively new initiatives i.e. Growing Futures, Domestic Abuse Navigator's and Foundation. It was advised that these could always be improved and there be a better appreciation of the different roles, responsibilities and restrictions. Finally, it was felt that there could be more consistency when referring to different schemes and organisations;

- Maintaining adequately trained workforce;
- Ensuring that information sharing protocols are in place, especially with non-statutory agencies;
- Encouraging victims to continue with a prosecution to court.
- Responding to changes in service (users/demographics) and victim profiles, for example, Honour Based Abuse/Female Genital Mutilation.

**Will your organisation need to change to facilitate effective whole family working, if so what are the challenges?**

90. The following was identified as key challenges;

- Shared IT Solutions – It was commented that these are required between partners, to record all activity and coordinate to prevent duplication/missed opportunities. It was suggested that benefits would be gained from improved IT solutions that would remove duplication and issues with data sharing. It was added that sharing information was considered not as big as an issue as it once was. It was commented that improved systems could inform people who the Case Worker is etc. In terms of early intervention, better IT solution would help with what opportunities are there before the point the abuse reaches the Police.
- Additional training/awareness would be required for officers and staff. It was commented that it was essential to ensure that workers are skilled up to respond and that this should be undertaken jointly.

**Victim Support – Julie Shaw**

**What part do you play in the response to Domestic Abuse?**

91. Victim Care Unit - The Victim Care Unit is based in Wakefield and receives referrals directly from the police daily via automatic data transfer of all supported crime types. In the previous year we received 1582 referrals of recorded crime incidents relating to domestic violence against residents in Doncaster. They also receive self and other agency referrals. Try to keep that risk at standard, interventions in there quite often there is a housing issue and can help them out.
92. Victim Care Officers attempt to contact all referrals to offer immediate emotional support, complete needs assessments and will complete Domestic Abuse, Stalking and 'Honour' based violence (DASH) risk assessments where appropriate. They will refer high risk onto Multi-Agency Risk Assessment Conference (MARAC), Independent Domestic Violence Advocates (IDVAs) and safeguarding. Standard risk victims identified as needing further support are passed to the Town Centre Community Office to deliver services.
93. Doncaster Branch Community Service - Branch staffs take referrals direct from the public or other agencies and offer a range of interventions which can be just a single contact or ongoing support over a long period of time. Office based in

Waterdale and outreach service in local library, so victims do not have to travel too far.

94. Their services can be broadly split into 5 categories;
1. Emotional Support – Confidential face to face appointments or telephone support allowing victims to talk to someone who is non-judgmental and understands the impact of domestic abuse whilst having knowledge of the Criminal Justice System. Attendance at court.
  2. Practical Support – Target hardening services, assistance in completing Criminal Injuries compensation claims, free provision of security items including security lighting, dummy cameras, and door and window alarms.
  3. Onward Referral – to specialist services such as the refuge, Independent Domestic Violence Advocates (IDVAs), Independent Sexual Violence Advocacy (ISVA) service, DRASACs, vulnerable victims project, Changing Lives and alcohol services.
  4. Advocacy – with the police, housing and health etc.
  5. Information – about Court Justice System, local services, leaflets and signposting.

#### **What are the key challenges for your organisation?**

95. The key challenges include;
- Commissioning, short contracts and uncertainties in funding
  - Loss of commissioned services funding
  - New agencies being commissioned to deliver services. (knowing exactly what these services offer and trusting that they will deliver)
96. Repeat victims and those that don't get to Multi-Agency Risk Assessment Conference (MARAC) – It was stressed that there was a need to work with repeat victims and that as much resources should be put in as possible. It was felt from experience that the work should start at the very first report even if it the victim doesn't appear to be a high risk case. It was observed that everyone deserves the same standard of treatment (although the work of MARAC was acknowledged and respected). It was continued that aftercare with victims was not necessarily being referred back down the process or followed up.
97. Clarification was sought as to how high risk victims were referred to Multi-Agency Risk Assessment Conference (MARAC), and it was explained that every agency can refer to that body. Concern was raised that there was a number of bodies with information of individuals but did not know what to do with it. It was suggested that a simple flow chart/list of contact numbers would be useful.
98. Victims who have been referred a number of times – it was noted that these clients were very reluctant to be engaged with (and have knowledge of how the system works). It was recognised that these clients were very frightened and that further work with them was undertaken to help them.



99. Challenge of short term contracts – It was commented that the organisation was more comfortable referring to agencies with whom they have had a long term relationship.
100. It was explained that Victim Support provide a befriending service – Referrals can be made but not many are. An example was used of working with a female client who suffered from very bad domestic abuse, with whom it had taken 2 years of support. Staff were now confident that this client will not go back to the perpetrator although it was recognised that such support will need to continue as she still has a number of problems that need to be addressed.

**Will your organisation need to change to facilitate effective whole family working, if so what are the challenges?**

101. The organisations services are currently available to family members affected by domestic violence and they have a specialist project to support children and vulnerable victims required to attend court providing support to cope and recover the impact of crime. They would continue to refer on to specialist children's and therapeutic service.
102. An assessment is made on the needs of the whole family, including housing, finances, impact on children, and impact on other family members. Support will be put in place to meet those needs, including referral on or liaising with partners to best meet those needs.
103. In terms of identifying gaps, domestic violence victims have a higher rate of repeat victimisation than any other crime. This is something that everyone needs to work towards to reduce it. It was further added that when a case has been to Multi-Agency Risk Assessment Conference (MARAC) and it is then deemed to have had a significant reduction in risk, support should be referred on (with the victims consent) for continued support to partners who deal with standard risk, who can regularly monitor and needs asses, deliver support with a view to reducing repeat incidents.

**Vesta Ryng – Former Employee of Doncaster Women's Aid**

104. Background - It was explained that before it closed, Women's Aid ran training programmes, an advice service, provided escorts, advocacy and helpline through a whole family approach.
105. In terms of domestic abuse services, it was explained that the Doncaster Women's Aid held an accreditation for domestic abuse and a programme for male victims had also been developed. In terms of an advice helpline there was a Freephone number provided which involved ongoing cases and repeat cases. Doncaster Women's Aid also ran a refuge.
106. It was stated benefits provided by Doncaster Women's Aid included:
- Being part of an extensive network and being trusted.

- Providing co-ordinated services under one roof being delivered on a day-to-day basis (as opposed to different organisations providing different ones separately).
- Provision of certain specialist areas.
- Viewed as being independent, it was commented that some clients preferred to use a non-statutory organisation.
- Members of staff who had long term working histories there.
- Acting as a Member of the Women's Aid Federation of England demonstrating how well services were regulated and audited with access to refuges online and legal updates.

107. During a brief discussion, it was commented that smaller organisations were losing out to larger organisations. It was queried what was the social return on investment within commissioning and how this was evaluated.

## CONCLUSIONS AND RECOMMENDATIONS

108. The Panel's recommendations are therefore that consideration is given to the following: -

### Commissioning

1. **Embedding domestic abuse into all aspects of commissioning where possible.**

**REASON:** It was felt that domestic abuse should be made a part of the Council's commissioning process. It was believed that the Council should take a lead on such an approach with a view that others may follow.

2. **Ensuring that where services are commissioned, qualitative outcomes are the main drivers as well as services being value for money.**

**REASON:** Concern was raised that commissioned services often focused on volume rather than quality and therefore more work was required to look at measuring impact and the return on social investment. Members were informed by Foundation that they were aiming to undertake a University evaluation in the future.

### Referral Process

3. **Reviewing the referral process and the single point of contact for partner organisations and victims of domestic abuse.**

**REASON:** Members were made aware that a number of partners and organisations play a part regarding domestic abuse. Partner representatives stated that Members should be proud of what workers were trying to achieve in Doncaster, particularly with good practice ideas that were now being used elsewhere in the country.

One of the challenges was recognised as there being no effective single point of contact that could expertly deal with a call, signpost appropriately, co-ordinate the process through to the end and provide aftercare to check if it's a reoccurring problem. Members considered different ways this could be achieved such as officers like IDVAs who are knowledgeable in this area, responding to calls based on rota system. Members were of the opinion that not everyone had a clear understanding of which number to ring and felt that there needed to be a simpler operational pathway with no overlaps. It was added that individual partners should take responsibility and ensure that staff members are aware and undertake the necessary training.

It was stated that nationally partners wished to see more referrals from a range of partner agencies. In respect in getting help, reference was made to contacting the helpline or worst case to ring 101.

Some partners stated that due to a high turnover of staff in key partner agencies such as Social Services, professionals were not always aware of

which services were available to make referrals. It was reported that it was therefore difficult to keep on top of approved processes. Members were of the opinion that there were potential overlaps where IDVAs, DACS and DANs were involved with the same family. It was felt that processes needed to be joined together more and duplication reduced.

It was expressed that when a victim is brave enough to seek support, that the response is the right one and information is disseminated in the most appropriate way. It was stressed that every individual who requests advice and discloses domestic abuse should complete a Domestic Abuse, Stalking and 'Honour' based violence (DASH) risk assessment, as this would then feed into important statistics and data) such as those for low to medium cases.

Members also felt that there should be more of an emphasis on early intervention and prevention, how we can do things earlier and avoid missed opportunities as opposed to reactive responses in crisis.

It was felt that more could be done to publicise the domestic abuse number and website (which could have links also to other relevant websites) and include what's available in terms of free training and information to partners and professionals.

4. **Ensuring that the referral pathway is publicised with workers on the peripheries of the Department of Work and Pensions (DWP), being provided with free training on domestic abuse issues and the referral process.**

**REASON:** Members learnt that people need to report domestic abuse with confidence. It was highlighted that there were no referrals from the Department for Work and Pensions as people were not sure where to report to. It was felt that an embedded referral pathway was essential so people can use it with confidence. It was suggested that workers in periphery areas, for example, job centre workers are provided with training, as vulnerable people become attached to such advisers and feel able to share problems.

## **Sharing Information**

5. **Ensure that information is shared within the remit of the Data Protection Act and that all services work towards shared protocols and the same goal.**

**REASON:** Partners reported that it would help all services if clear information and shared protocols were in place between all partners who ultimately worked towards the same goal.

It was commented that in respect of data protection, there was a culture issue where people tended to use it as a first line of defence not to do something and such legislation was seen as being used to drive risk adverse behaviour.

It was added that clients of domestic abuse were sometimes in and out of hospital and many agencies became involved. This resulted in information not being communicated properly and joint services not being effectively provided.

### **Changes in policy**

6. **That all policies ensure that the needs of victims of domestic abuse are responded to immediately.**

**REASON:** It was felt that there was little in place to prioritise domestic abuse victims when setting up new living arrangements which could act as a deterrent. It was believed that it would be useful if more could be done, in particular with Housing Benefits and Council Tax to reach these individuals quicker, more effectively and be less bureaucratic. Concern was raised over the length of time it could take to put in place new arrangements and Members felt that there should be some provision that would identify the claimant when they are a domestic abuse victim. Other areas of concern included the lack of social housing available and good quality private landlords. It was also recognised that finding a bond could create an issue and deter victims from leaving their current situation. It was felt that victims of domestic abuse should be treated as a protected characteristic and that this should be taken into consideration when developing policies.

### **GPs**

7. **The consideration is given to GPs or staff at GPs premises providing further assistance to enable domestic abuse victims to access services.**

**REASON:** When Members listened to stories told by survivors of domestic abuse, they learnt how important GPs could be to them. It became apparent that often victims of domestic abuse had received support from a third party when making the first call to seek support. Members learnt that with one survivor, the referral process had begun during a visit to the doctors who had given her a leaflet that included what number to call. It was explained how the victims daughter called the emergency number herself as her mother would never have made the call without such help. The second victim recalled how difficult it was to make the call to report the abuse and in the end, it was her mother who had also made the call.

It was felt that it would have been easier to report incidents of domestic abuse if there had been a dedicated person at a GP practice to help them make the first phone call. Members heard that there was a Housing Options Officer based in Accident and Emergency who worked and supported individuals presenting or fleeing from domestic abuse.

### **Support Services – Post Domestic Abuse**

8. **After Care - That the provision of aftercare support for low and medium risk victims be reviewed.**

**REASON:** The work of Multi-Agency Risk Assessment Conference (MARAC) was acknowledged and respected. However, the aftercare work with low and medium risk repeat victims and the number of low and medium risk victims that went on to become high risk was raised as a concern. It was observed that everyone deserved the same standard of treatment. It was also stressed that a wider range of statistical information should be kept with information from completed risk assessments being fed into a central system.

It was stressed that there was a need to work with repeat victims and that as many resources as possible should be used. Partners stressed that from experience, work should start at the very first report even if it the victim didn't appear to be a high risk case.

As stated before, in respect of having a single point of contact, concern was raised that there was no one area that co-ordinated the process from beginning to the end and provided aftercare to check if there was a reoccurring problem. It was felt that aftercare could be strengthened to avoid clients returning for further assistance.

9. **Counselling and Therapeutic Services - Review the sufficiency of counselling and therapeutic services currently available and whether it meets the increasing needs of domestic abuse victims and their children.**

**REASON:** Bearing in mind limited resources and budget efficiencies, Members learnt about the increasing demands on counselling and therapeutic services on partners. Concern was therefore raised whether what was available was sufficient to meet these increasing demands.

Members heard about the importance of Early Intervention and Promoting Recovery which aids recovery through therapeutic and educational programmes delivered to help victims recover from the impact of living with domestic abuse. Members also learnt that there was a whole spectrum of need for children and young people, for example, three children at different ages could require different support whether it be therapeutic or support discussions. It was noted that there was currently a waiting list and that very few services provide recovery to children living with domestic abuse and Doncaster was leading with the whole family working approach not just based on parents.

Examples of issues raised by partners included the following;

- Changing Lives – reported that there were 20 referrals per week for counselling and that through the Growing Futures programme 300 to 400 counselling sessions were provided per year.
- Doncaster Rape and Sexual Abuse Counselling Service (DRASACS) reported that there was a waiting list for counselling, although the service provided by Independent Sexual Violence Advisors was more immediate. In relation to Mental Health services, it was acknowledged that this was in high demand.

Members also raised concern regarding how effective services were in addressing where multiple issues are present such as mental health and drug abuse.

## **Networking, Training and Raising Awareness**

### **10. That arrangements for front line workers to meet as regularly as possible are supported, to ensure that training is regularly undertaken and raising awareness is promoted.**

**REASON:** It was noted that partners at management level met regularly, however, front line officers generally worked in isolation and had all had recently just met for the first time. It was heard how meeting in this way had helped for them to discuss issues they faced on a daily basis and assisted with problem solving and general colleague support.

Members also heard how important training was in providing key personnel and frontline services with the correct knowledge and information to be able to signpost and advise effectively. They learnt from the Domestic Abuse Strategy that the delivery of free multi-agency training for workers in all partner agencies was being undertaken to give people skills to recognise and respond to disclosures of domestic abuse.

In respect of raising awareness and better communication, partners raised the following issues:

- Foundation – Felt that there was a lack of confidence/awareness of other professionals not directly working with domestic abuse on how to deal with issues, challenge behaviour, encourage participation and therefore better training required.
- Doncaster Children's Services Trust – Emphasised the need to raise awareness and consult with partner agencies, practitioners, communities and families (adults and children/young people) through changing how agencies think and practice, communications strategy, research.
- South Yorkshire Police – Noted that there could be more effective communication between agencies to ensure awareness and better appreciation of the different roles, responsibilities and restrictions especially with relatively new initiatives. Finally, it was felt that there could be more consistency when referring to different schemes and organisations in place.

### **11. Continuation of partnership events to be held on domestic abuse**

It was felt that this would enhance networking opportunities and raise awareness of what other partners and agencies were doing within this area as discussed under Recommendation 10 above.

## Gaps

- 12. Ensure that gaps in Domestic Abuse services are identified and addressed.**

**REASON:** Members questioned the gaps in service provision that needed support and believed that there were areas of concern with regard to support for men who are suffering from domestic abuse, members of the BME community and victims from vulnerable groups and Members.

Members also raised concerns about the ability for the Council and partners to respond to changes in service (users/demographics) and victim profiles, for example, Honour Based Abuse and Female Genital Mutilation in addition to the above. It was felt that there is a potential role for the voluntary sector as it can be difficult for victims to make contact with a statutory service.

- 13. That consideration is given in respect of funding gaps, as whilst the Council and other partners have signed up to the strategy there are still major funding gaps with many services being at risk now and in the near future.**

It was raised that funding remains to be one of the key challenges with many funding pots being only available sometimes for 12 months and a maximum of 3 year periods. It was felt that this created an ongoing need for funding to be sought and secured. It was recognised that lack of long term secured funding creates a degree of uncertainty within organisations. It was reported by some organisations that retention of staff was often difficult when the organisation doesn't have a clear picture of what will happen to the funding and therefore staff may look to leave for more stability.

It was generally felt that having to secure funding year on year was a challenge. It was stressed that key partners should aim to contribute enabling all bodies to undertake their roles and functions more effectively. It was hoped that more certainty of funding would lead to more time available to work with victims and perpetrators.

## School Involvement

- 14. Ensuring that support be given to the cultural and behavioural changes made from a young age, through strengthening school involvement and building upon the work currently being undertaken.**

**REASON:** Through the Domestic Abuse Strategy - Prevention and Education strand, Members discovered that there was a need to educate people to report incidents to receive support and avoid repeat incidents. It was stressed that there was a change in culture required, particularly in families where domestic abuse had been present throughout a number of generations with education in communities and by schools changing acceptability of the problem.



Members were told about delivery of awareness sessions in schools for teenagers and a programme was being developed for primary age children.

Members recognised that there were various initiatives and programmes already underway such as through Changing Lives engaging with children in schools and delivering a voluntary perpetrator programme. They also heard from organisations that they would like to undertake more work with schools and work with young people at an earlier stage.

### **Elected Members Role**

#### **15. Councillors be provided with a crib sheet and further training to help them report Domestic Violence**

**REASON:** Discussion highlighted that Councillors in attendance were not aware of how to report or recognise domestic violence and that, to assist with their work in communities, required further training and an understanding of the reporting pathway, for example, through a flowchart.

### **Monitoring - Reviewing Recommendations -**

#### **16. That the Panel reviews progress on recommendations and issues raised as part of the 2017/18 workplan.**

**REASON:** The Panel would like a progress report to be within the next 12 months on each of the above recommendations including what impact has been made as a result.

### **Concerns**

#### **17. The Panel also wished to highlight their concern regarding the difficulties in recruiting and retaining good quality frontline staff through addressing issues such as differences in salary.**

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Cabinet Members

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Officers;

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Judith Vickress – Knowledge Hub Team (Safelives)

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Two victims who has been affected by domestic abuse