

DONCASTER DOMESTIC ABUSE STRATEGY 2017-2021

“Protecting and supporting victims; holding abusers to account through support and challenge; help for children and young people through prevention and recovery”

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Forward

Domestic abuse is one of the biggest challenges we face as a partnership. We know so much about the dreadful effects it has on individuals, their families and the wider community. We work hard to respond appropriately and effectively to reports of domestic abuse, and over the last three years we have significantly improved our response, and are starting to see the positive impact of the work we are doing.

But we also know that a great deal of abuse is never reported to the police or other services. We hear many families explain that abusive behaviour is perceived as normal for them. We see the evidence of abusive behaviour in relationships between young teenagers. High risk cases in Doncaster continue to be higher than average, and we have had two Domestic Homicides since our last strategy in 2012.

So three years on from our strategic review of Domestic Abuse, and the resulting strategy, I'm in no doubt that we now need to build on this, reflect on what has worked, and identify our priorities for the coming years.

Our strategy development day in October 2015 brought together all the key partners to do just that, and this new strategy for 2017-21 is the result.

Our agreed vision and philosophy of practice is to develop our whole family approach and integrated partnership working, as this is the most effective way to ensure that families receive the support and protection they need.

This strategy will detail how we want everyone who works with families who may experience domestic abuse to work together. It sets clear expectations and a course of action which we believe will make a difference. Bridging the gap between strategy and practice is crucial to empowering and supporting people to change their lives.

Our Partnership's commitment to protecting and supporting families experiencing domestic abuse recognises that we must also work with perpetrators to support them to change their behaviour, and at the same time work to change the culture of acceptance of abuse, through education and public awareness, and so enable earlier intervention.

The whole family approach is working, and we need to ensure we maximise our resources, eradicate any duplication, respond to the gaps we have identified, and improve our understanding of what works through focusing on outcomes. We recognise that the real experts in what works are the people who have experienced using the services we provide, and one of the key planks of our new strategy is that we want to provide the opportunity for service users to participate in the planning, commissioning and delivery of services.

We are committed to challenging the acceptance of abuse, recognising it is an issue across the county, nationally and internationally. There may be opportunities to work with our colleagues in a wider partnership to tackle aspects of this shared priority at a county or regional level. Equally we understand that front line services need to be accessible for our residents, and that victims are listened to and their needs responded to the first time they tell someone about their abuse.

Domestic abuse is everyone's business, and it's essential that we work together in a coordinated way ensuring that everyone understands what domestic abuse is, knows how to respond to it, and where to get support if they need it.

Likewise we know that domestic abuse isn't isolated as a single issue in family's lives, in many cases it is coupled with mental ill health, substance misuse and other complicating factors including the effects of poverty and disadvantage. However domestic abuse can happen anywhere as it has many forms from physical to emotional abuse and coercive control and can affect anyone.

Doncaster continues to go through considerable change in difficult circumstances. We recognise the competing priorities faced by agencies but never before has coming together in partnership been more important to tackle the significant issues resulting from and associated with domestic abuse. I believe we can be proud of the achievements made in recent years and this new strategy renews our dedication and commitment to working together to tackle domestic abuse.

I'm therefore delighted to commend this four year strategy as the Chair of the Safer Stronger Doncaster Partnership and the Doncaster Domestic Abuse Chief Officers' Group.

Chief Superintendent Tim Innes

Chair of Safer Stronger Doncaster Partnership

1.0 Introduction

This partnership strategy reflects the coordinated response to domestic abuse in Doncaster, led by the Safer Stronger Doncaster Partnership. One of the most important aspects of responding effectively to domestic abuse is that it cannot be achieved by any single agency operating in isolation. This strategy therefore sets out a 'call to action' and an agreed way of working with adult victims, perpetrators of domestic abuse and with any child or young person living in a household or with the consequences of domestic abuse.

Families¹ have a wide range of needs and may be experiencing a number of issues which contribute to, or initiate the domestic abuse. The response therefore needs to be tailored to the needs of individual families and may involve a range of professionals from both statutory and voluntary organisations working together. This presents a challenge of avoiding duplication, maximising the use of resources, and ensuring consistency of service. It also requires a shared vision and shared philosophy of practice.

This strategy therefore seeks to focus our commissioning arrangements and provision of services, and sets out how we will further improve our response to domestic abuse over the coming years.

Two supplementary documents which are being produced to support the delivery of the strategy and services for Domestic Abuse are:

- A financial and sustainability plan
- A workforce development plan with an agreed competency framework for practitioners

1.1 Our Strategic Vision

“In Doncaster people no longer experience Domestic Abuse”

Our vision, agreed by Partners at our Strategy Development Day (Oct 2015), is aspirational and is for a Doncaster where domestic violence and abuse is recognised as unacceptable, and people live safe and happy lives free from abuse.

Anyone experiencing domestic abuse, whether being abused, being the abuser or witnessing abuse within the home environment, has access to the support they need at the time they need it, to be safe and recover, or address their behaviour.

In fulfilling this vision families should be seen as equal partners with professionals supporting them; whether this is a rapid response to protect victims or to challenge unacceptable harmful behaviour from perpetrators.

¹ Families in the context of this strategy is anyone living with or affected by domestic abuse, which may or may not include children under the age of 18yrs old (24yrs SEND).

Children and young people have a right² to have their voice heard with an entitlement to information which assists them to participate and engage with services that support their needs.

We continue to work in an environment of rapid change which means that we have to constantly look at new ways of working with new models for investment, integrated commissioning and delivery of services. We have worked in an integrated way and ‘think family’ approach for a number of years through the MARAC, IDVA service and Domestic Abuse Caseworkers, as well as Stronger Families³ and more recently through Growing Futures⁴ to name a few.

This way of working will be strengthened through:

- the increased use of the early help assessment with support through the Early Help Hub
- better information sharing for more complex cases through the Multi-agency Safeguarding Hub (MASH) and Adult Safeguarding arrangements
- working practice focused on agreed shared outcomes

However, to make further gains and maximise the use of precious resources, we need to improve the use of our collective intelligence through:

- effective use of data,
- listening to staff working with families and in the community and also
- hearing what victims (adults and children) and perpetrators tell us.

This will enable us to understand needs more fully; provide a better understanding of families’ vulnerability or behaviours and thereby target resources more effectively where they are needed most.

2.0 The National Context

2.1 Definition of Domestic Abuse

In March 2013⁵ the Government announced a shared definition for domestic abuse which is

“Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse:

² United Nations Convention on the Rights of the Child 1989

³ Doncaster’s response to Troubled Families agenda

⁴ Growing Futures is Doncaster’s DfE Innovation funded project to transform mainstream social work and family support practice to support long term recovery for children from domestic abuse.

⁵ <https://www.gov.uk/government/publications/new-government-domestic-violence-and-abuse-definition>

- psychological
- physical
- sexual
- financial
- emotional

“Controlling behaviour is defined as a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

“Coercive behaviour is defined as an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.”

This definition, which is not a legal definition, includes so called ‘honour’ based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

2.2 National Research⁶

Contemporary academic research about the nature and types of domestic abuse are continually developing with evidence from practice constantly evolving and informing our knowledge and understanding. Unfortunately, there is no collective academic agreement on these typologies and the complexities of domestic abuse. This can lead to practice being determined by differing philosophy and standpoints which conflict.

Despite this, research is informing policy and in turn is reflected in Doncaster’s local provision. This includes:

- Response to domestic abuse incidents taking account of multiple incidents as a potential pattern of abuse, rather than investigating single incidents in isolation
- Increased focus on teenage relationships and the support needed for young people experiencing abuse in their intimate relationships
- Teen to parent abuse which recognises that this form of abuse is likely to involve a pattern of behaviour that can include physical violence and coercive control, and a parent can find it difficult to access support tailored to their family’s needs. In this situation young people are often seen as perpetrators rather than as vulnerable people, and this needs to change.
- The impact of domestic abuse on the adult victim and on children – even once they have achieved safety – is often severe and long-lasting.

⁶ See ‘Research references’ Appendix 4

- Perpetrator services need to proactively identify risks posed by perpetrators to victims and identify other forms of behaviour that are wider than their intimate relationship, including criminal activity and abuse in the community.

Research also indicates that responses to domestic abuse need to be informed by assessment which identifies risk to victims and the type of abuse in individual families.

These are identified as:

- Intimate partner terrorism – which is mainly present in abusive relationships between heterosexual couples, and follows the gendered model of domestic abuse (i.e. a male perpetrator controlling a female victim), which leads to severe injury and chronic impact for the victim, both mentally and physically
- Violent resistance (also known as co responsive abuse) – which occurs when a victim of domestic abuse responds violently to their abuser in direct response to the abuse s/he is suffering
- Situational couples' violence - where arguments escalate to aggression and physical violence, and the arguments may be attributable to or fuelled by external factors (e.g. alcohol misuse).

2.3 The National Strategy for Domestic Abuse

The national strategy '*Ending Violence against Women and Girls Strategy 2016 – 2020*⁷ although focused on women and girls, the Government is clear that abuse happens to men and boys as well, and that the definition and responses available apply regardless of gender.

Over the last five years the Government has introduced a range of new tools to support agencies to protect victims of abuse and manage perpetrators effectively, including:

- Domestic Violence Protection Notices and Orders
- Domestic Violence Disclosure Scheme (Clare's Law)
- Forced Marriage (Anti-social behaviour, Crime and Policing Act 2014)
- Female Genital Mutilation (Serious Crime Act 2015)
- Modern Slavery Act (2015)
- Controlling or coercive behaviour in intimate or familial relationships (Serious Crime Act 2015)

The key messages within the national strategy are:

⁷https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/505961/VAWG_Strategy_2016-2020.pdf

- The prevalence of domestic abuse and sexual violence since 2010 has dropped and total prosecutions for VAWG offences have reached the highest levels ever recorded
- That sustained progress will only be made if national and local agencies and the community work together to prevent domestic abuse in the first place.
- The key pillars of the approach – prevention, provision of services, partnership working and pursuing perpetrators remain relevant from the 2010 strategy.
- There is a need to break the intergenerational consequences of abuse
- A need to tackle the multiple needs and disadvantage associated with, or the consequence of domestic abuse, such as substance misuse; homelessness; offending behaviour; gang involvement; prostitution or mental ill health.
- Local commissioners to deliver a secure future for rape support centres, refuge and FGM and Forced Marriage Units, whilst all services move to an early intervention and prevention approach as the norm, not only a crisis response.

2.4 Wider legislation and policy for working with families

There have been a number of legislative changes and areas of policy re-focus since our last domestic abuse strategy that are remodelling the way we think and work with adults; children and young people and with families. These include:

- The Health and Social Care Act 2012⁸
- The Care Act 2014⁹
- Children and Families Act 2014¹⁰
- Working Together to Safeguard Children (WTG) 2015¹¹

Individually they have brought specific requirements for local delivery, for example:

- The Health and Wellbeing Board to lead the development of a local Joint Strategic Needs Assessment to understand the current and future health and social care needs of local communities (Health and Social Care Act 2012)
- Adult Safeguarding Board to lead a multi-agency local adult safeguarding system that seeks to prevent abuse and neglect and stop it quickly when it happens (The Care Act 2014)
- Confirming responsibilities on partners for inter-agency working and co-operation to safeguard and promote the welfare of children through the Local Safeguarding Children Board (WTG 2015)

2.5 What this means for our local Domestic Abuse Strategy

⁸ http://www.legislation.gov.uk/ukpga/2012/7/pdfs/ukpga_20120007_en.pdf

⁹ <http://www.legislation.gov.uk/ukpga/2014/23/part/1/crossheading/safeguarding-adults-at-risk-of-abuse-or-neglect/enacted>

¹⁰ <http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>

¹¹ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf

Collectively the national agenda has moved from a risk led approach that had the effect of focusing resources on the highest risk cases or most vulnerable victims, to an approach which now also prioritises prevention and early intervention. It seeks to meet the needs of the whole family earlier and in so doing reduce the risk of escalation and serious harm in the longer term.

It challenges partners to assess risks and concerns together recognising that multiple needs require a collective response. It also requires an understanding of the interrelationships within families and the communities and culture in which they live. The statutory duties to co-operate and to work collectively, across sectors and agencies with families are evident. There is an expectation that services for adults, children, young people and the community take a whole family integrated approach to address vulnerability; support those most at risk and challenge behaviour that impacts on positive outcomes now and into the future.

This requires partners; especially those with commissioning responsibilities, to ensure their organisational plans derive from the Joint Strategic Needs Assessment (JSNA) to provide help earlier and focus resources on evidence informed practice and research.

The key points that have informed our local strategy and action plan are:

- **Reduction of prevalence through:**
 - Early intervention by all agencies
 - Education
 - Culture change
 - Opportunities for victims to seek help safely
 - Effective perpetrator interventions
 - Assessment and response to multiple needs
- **Increased reporting through:**
 - Police response
 - Confidence in criminal justice system
 - Improved understanding of violence and abuse incl. Coercive control
 - Bystander programmes¹²
- **Increased prosecutions and convictions through:**
 - Evidence led prosecutions
 - Enhanced support through the criminal justice system for victims
 - Effective use of new technologies
- **Reduction of re-offending and breaches of orders through:**
 - Effective perpetrator interventions
 - Integrated family approach
 - Effective sanctions for breaches

¹² Bystander programmes are initiatives to empower people to challenge unacceptable behaviour and intervene safely if needed

3.0 Doncaster's Context

Domestic and sexual abuse has been a key priority for the Safer Stronger Doncaster Partnership (SSDP) since 2010. In 2012 an independent review of Doncaster Domestic Abuse Services by the NSPCC and KAFKA UK led to a new Domestic Abuse Strategy for 2012 - 2015 being launched.

In 2013 it was agreed that since not all sexual abuse occurs in the context of a relationship, it was important not to merge the two, and a stronger focus on Sexual Abuse was needed. A separate Sexual Abuse Theme Group was established, a strategic review of Sexual Violence and Abuse was carried out and a separate strategy on Sexual Violence and Abuse developed.

The Partnership have agreed in developing this new Domestic Abuse Strategy for 2017 to 2021 that a separate strategy is still required for sexual violence and abuse which maintains an equal and specific focus on these issues.

This Domestic Abuse Strategy is therefore focused on domestic abuse alone, which includes sexual abuse in intimate domestic relationships in line with the national definition.

3.1 Our Achievements

In developing this new strategy we have reviewed the work of the partners to learn what has worked and to recognise the achievements made from 2012 to 2015. Some of these achievements are illustrated through 'quotes' and feedback from service users

- **Commissioned new support services for victims** including the refuge which is consistently fully occupied, 8 dispersed housing units and floating support service which has supported 146 families.
 - ✓ "This place has helped me stand up on my own two feet"
 - ✓ "I can meet or speak with staff when I need support"
 - ✓ "The door is always open"
- **Established a new team of Domestic Abuse Caseworkers** in 2014 within the Council, working with Stronger Families service to support victims of domestic abuse who are not at high risk, including a worker based at the hospital and two working directly with GPs. Caseworkers have supported 936 clients since the team was established.
 - ✓ 'great news! the social worker has closed case. So pleased. I feel like we've got a new start and you really kept me going even when I didn't think I'd ever get to this day.'

- ✓ 'there was nothing like this when I was being abused years ago. You just had to cope on your own. I wish I'd had someone like you to talk to.' (clients mother)
 - ✓ 'not had a drink for a month! No way would I have gone to DDAS without you that first time.'
 - ✓ 'get keys for new house next week. Can't believe how much difference it made you coming to housing with me.'
- **Developed and commissioned a new service to support perpetrators of abuse** to change their behaviour – Foundation4Change was established in July 2014 and has worked with 152 people to change their abusive behaviour with a 21% reduction in police call outs in respect of their clients, and 96% of service users saying they would recommend the programme.
 - ✓ the 'effects on children' module had been *"very emotional"* as for the first time they realised what effect their behaviour was potentially having on their children
 - ✓ *"my wife is a lot happier" and "my relationship with my child has improved so much after doing this course"*.
 - ✓ one customer specifically commented that is what they needed (to be challenged) as without that challenge they would stop making progress towards changing their thought processes.
 - ✓ One customer had gained a lot from the alcohol module, as this was a part of their life they were trying to change (they had identified alcohol abuse as a main contributing factor to their domestic abuse).
- **Delivered a multi-agency prevention and education programme** to promote the message to our communities and young people in schools that domestic abuse is not acceptable.
- **Developed and piloted an innovative programme to work with young people who are abusive to their parents.** The "Getting On" programme through joint working between the Youth Offending Service, Community Safety and Stronger Families, which is now being rolled out by the Doncaster Children's Services Trust through Growing Futures.
- **Implemented a workforce development plan and trained 2000 staff** in all agencies to identify and respond effectively to domestic abuse
- **Established a Domestic Abuse Hub, with Police and IDVAs co-located.** Together with the police restructure we have enhanced the service for high risk victims through joint working and improved communication concerning criminal cases. This is also part of the Multi Agency Safeguarding Hub (MASH) which brings together a wider range of safeguarding professionals under one roof.

- **Restructured the South Yorkshire Police response to domestic incidents** which has streamlined the way cases are managed, from initial report, to risk assessment, investigation and prosecution of offenders.
- **Targeted the offenders most at risk of causing serious harm** and managed them proactively using an Integrated Offender Management approach through joint working with Police and Probation officers.
- **Reviewed and streamlined our Multi-agency Risk Assessment Conference** and taken over its administration from South Yorkshire Police. 631 high risk cases have been managed by the MARAC in the 12 months to 31/3/16
- **Used the new Domestic Violence Protection Notices and Orders** to enable families to stay safely in their home rather than having to leave to escape an abuser. Our Safe and Secure service, managed by St Leger Homes, provides for a quick and effective response which ensures the security of property.

3.2 What we know about domestic abuse locally

To build on these achievements we have also reviewed our data and other local intelligence to understand the current position and new baseline. We will use this baseline to improve the collection and analysis of data to measure progress and the impact of this strategy.

Full detail of the local data and intelligence available is in Appendix 2.

3.2.1 Local data and intelligence

The most accessible data for domestic abuse is through:

- Domestic Homicide Reviews (DHR)
- South Yorkshire Police recorded incidents;
- High risk cases reviewed at MARAC;
- Information available from Doncaster Children's Services Trust case management data and through Stronger Families casework.

A summary of this local intelligence highlights:

- The 4 local domestic abuse homicide reviews since 2011 tell us:

- Domestic abuse needs to be seen as a safeguarding issue by the wider workforce, who, in turn, need to be trained to ask the correct questions and respond appropriately
 - The workforce needs training to identify different forms of domestic abuse
 - Health practitioners need to screen for domestic abuse beyond the focus of their scheduled activity and need to recognise the links between domestic abuse, mental health and substance misuse
 - Victims of domestic abuse who may not be accessing services, e.g. older victims, need to be aware how to access help and support
 - The wider family and services did not recognise that men could be victims.
 - In situations where couples separated the victims thought they would now be safe without recognising the potential escalation of violence and the danger they could still be in.
- Police data shows an increase in incidents since 2006/7 with a flattening trend line over the last 3 years. This is in contrast to South Yorkshire region where incidents continue to increase. This could suggest that some of the early interventions introduced through the last strategy are beginning to work.
 - MARAC data over the last 3 years show:
 - The numbers of high risk cases referred are well above the average against both regional and national figures and SafeLives benchmark.
 - The number of children affected has increased to over 800 in each of the last 2 years
 - Although there has been a reduction of cases over the period the percentage of repeat cases remain higher than regional and national figures. This could be due to a greater reduction of cases overall with the number of repeat referrals being maintained.
 - The percentages of cases of victims with protective characteristics (BME; LGBT; Disability) are all below the regional and national figures and SafeLives recommended range against demographic information.
 - The number of male victims is similar to regional and national. However the number of young people referred saw a sharp increase in 2014 although this reduced last year
 - There is a disproportionately higher level of referrals from the Police than other partners against both regional and national figures.

The MARAC data would suggest that Doncaster has a far higher number of high risk cases than other areas, while also maintaining a significant number of repeat referrals of difficult cases. It could also suggest that there is a greater awareness with the public about domestic abuse through campaigns, although reported incident have reduced slightly.

The data shows that there may be a lack of understanding about intimate partner abuse and a general acceptance of cultural norms within some communities and some relationships leading to a lack of assessment and response.

Likewise risk assessment does not appear to be routine with some partners being reliant on Police to respond. This lack of routine assessment by services is a significant concern as some high risk cases could be missed with earlier interventions not deployed to support which are standard and medium risk.

- Children's Social Care data and Stronger Families information show:
 - Domestic abuse is the most frequently recorded concern being present in 39% of assessments which may be affecting 1,880 children. This has been consistent over a number of years
 - These cases also show multiple needs with a significant proportion having a range of two to four other concerns present and a number of families with five or more concern factors detailing highly complex needs.
 - These needs and concerns continue to be parental drug and alcohol misuse, mental ill-health with an increasing number with some form of learning need or disability. There is also evidence of some of these concerns identified in children and young people within the family, including abuse towards parents.
 - Families display and suffer other factors including: poverty, parental ability, housing and finance issues and poor general health and emotional wellbeing.

The finding from this data is not a surprise and shows a recurrent trend which could lead to an acceptance that this is a normal part of life for some families. It isn't normal and although protection and specialist services can do much to support families to recover in the short term there is a need for greater engagement of wider family services. This includes prevention through education and services that promote health and wellbeing.

3.2.2 What do local people say?

There are many examples of client satisfaction with some services. However, we have limited information through wider public consultation.

In summary what we do know is:

- While some adults recognise domestic abuse is a problem and unacceptable they see this as a private matter and an accepted part of life. This also extends to acceptance of aggressive behaviour in the community which in part, is fuelled by misuse of alcohol and drugs.

- In contrast although children and young people recognise domestic abuse is an aspect of many of their lives or their friends' lives, they want to change this but are not sure how to.
- Staff members delivering local services express the need to assess risk sooner and respond more effectively through collective effort with the whole family. They state there should be greater understanding of what works with individual family members including direct work with children. Many staff express a lack of confidence in working with perpetrators as well as not seeing this as their job.

3.2.3 The cost of domestic abuse

There is a real and quantifiable cost which impacts on service providers. This is in terms of the length of time and intensity of provision required to promote recovery and build resilience where domestic abuse is identified at relatively high levels of risk.

Using national figures:

- It is estimated that 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.
- Estimates for Doncaster show for high risk cases to MARAC the cost to services for adults is over £13m and will exceed this by the year 2020 if the rate continues or increases
- Earlier intervention could reduce High Risk case costs by £4m if services assess need earlier and intervene
- The overall wider public cost of domestic abuse in all cases for Doncaster is estimated to be over £121 million
- The cost of support for children and young people known to children's social care is calculated at £7.5m in cases where domestic abuse is a factor, along with other factors
- In high risk cases the wider human and emotional cost for adult victims in Doncaster could be three times the cost of services

3.3 Where we are now and implications for the future

Progress has been made, but families in Doncaster continue to experience significantly higher levels of domestic abuse compared with neighbouring local authorities and against national figures and benchmarks. Domestic abuse presents at relatively high levels of concern through Children's Social Care, or referral to MARAC as high risk mainly through Police responses.

Headway has been made to identify domestic abuse earlier through the Stronger Families agenda¹³ with the expanded criteria which includes domestic abuse as a concern factor for support.

¹³ Stronger Families is the Doncaster response to the Government's Troubled Families programme.

We are also seeing signs of early identification through early help assessments logged through the Early Help Hub for families with children. However, this has not yet become routine practice through all services for all people.

Until 2015, most of the service responses to domestic abuse focused on either victims or perpetrators, and not the effect on children and young people in the family. Doncaster Children's Services Trust has secured £3m of DfE Innovation funding (April 2015 to Dec 2016) to address this gap in provision. This project is known as Growing Futures¹⁴ and is developing new therapeutic practice and innovative ways of thinking and working with families alongside mainstream services. We are eager to learn from this work and look to sustain practice where this is shown to work. The aim is to address the long term harm caused by domestic abuse, which can emerge in new relationships and future generations through continued acceptance of *"that's just the way life is"*.

Doncaster has also committed to working differently with perpetrators of abuse. Our last strategy introduced our innovative work with perpetrators, from the voluntary Foundation 4 Change Service, to the use of Integrated Offender Management with our highest risk offenders. We are developing this work through our focus on the whole family, and by identifying abusive behaviour earlier we can support people to change before serious harm is done. However, if perpetrators resist support they must face the consequences of their actions.

Our experience in the last two years, through our programme and whole family working show that many abusers have experienced trauma and abuse in their own lives. Therefore punitive actions alone make little difference other than entrench attitudes which continue to present in abusive behaviour in both existing relationships, including transference of behaviours to their children, or in new relationships. Our experience also shows that many families want to stay together but just want the abuse to stop.

For these reasons we are committed to supporting people who are behaving abusively to understand their life experience, appreciate what abusive behaviour is, and how it affects their partner and any children, and to learn how to change their behaviour and live without abuse.

We are committed to equality and diversity and recognise that domestic abuse has specific gender and cultural issues, as well as additional vulnerabilities for people with disabilities, or who are older or younger than the average victim profile. However we need to do more to understand and respond in specific situations, differentiating support for specific needs and circumstances. The attitude towards women and girls generally requires a specific focus and in some cases protection from physical mutilation. In addition gender and traditional roles in some

¹⁴ Growing Futures is a partnership approach lead by Doncaster Children's Services Trust to transform practice with families to reduce emotional harm from domestic abuse and support recovery in the short and long term

communities should not maintain inherent inequality which harbours potential abuse, including forced marriage of either girls or boys.

Much of the national policy and research resonates with the local picture. A strategy to tackle domestic abuse in all its forms therefore requires a whole system and whole place approach through;

- a shared philosophy and common practice through a whole family approach
- Commissioning which requires services to co-operate with a knowledge and understanding of multiple needs and operate in a complex environment.
- direct action with the people who live and work in Doncaster on domestic abuse and on wider issues such as drugs and alcohol misuse; homelessness; anti-social behaviour; active citizenship and community well-being.

4.0 What we want to achieve and how we will do it

Our collective intelligence through national research and policy, local achievements and what we currently know has developed a clear picture of the future and objectives we want to achieve and how we need to work together to deliver them.

As partners it is essential that we share a common purpose and work towards joint outcomes that meet the needs of all victims of domestic abuse, including children and young people who suffer harm due to their experience within their family home.

This strategy sets out our strategic outcomes and outcomes, based on a whole family approach through integrated working. It also challenges us to take a whole place approach to some common issues which continue to inhibit long term and sustained change.

Our approach provides the most effective model of identifying vulnerabilities and supporting adults and children and young people who may have complex needs. We intend to make sure this happens in a safe and coordinated manner with families with both victims and perpetrators.

4.1 Strategic Outcomes and Key Objectives toward 2021

Our outcomes and objectives have been developed taking into consideration the national strategy to end domestic abuse, specifically: Preventing violence and abuse; Provision of services and Pursuing perpetrators¹⁵. Government's explanation of Partnership Working and our own local aspirations are threaded throughout the strategy to develop a culture of thinking and working differently to fulfil our mutual goals.

¹⁵ Ending Violence against Women and Girls Strategy 2016-2020 (March 2016)

4.1.1 Outcome 1 - Communities and families no longer accept or experience domestic abuse

Objectives:

- Provide education to children and young people so they know abusive forms of behaviour are not acceptable and they are equipped to make healthier relationship choices in the future
- Increase the visibility and communication of domestic abuse and gender inequality with the public to challenge the social and cultural norms and attitudes that perpetuate acceptance and inequality.
- Influence and support the development of policies and procedures in all workplaces to support organisations to act responsibly for the wellbeing of their employees.
- Equip stakeholders¹⁶ to identify and challenge the acceptance of domestic abuse and violence in families and whole communities.
- Increase confidence amongst victims including children and young people to report incidents of domestic abuse as early as possible and know their voice will be heard and responded to.

4.1.2 Outcome 2 - Families who are vulnerable to or experience domestic abuse are identified earlier and receive effective support to stay safe; reduce repeat victimisation and recover.

Objectives:

- Identify families vulnerable to domestic abuse or identify actual abuse, assess the level of risk and the impact this has, act swiftly to safeguard and protect all victims.
- Improve the quality and use of data, research and local intelligence across the partnership to inform commissioning and target resources more effectively and efficiently to address levels of need and risk.
- Provide the workforce in contact with those who may be affected by domestic abuse with the knowledge and skills to increase their understanding and identification of risks to respond to individual needs and behaviours within a family.
- Provide a range of services to support the holistic needs and recovery of victims which are appropriate to their age, gender, and ability or other circumstances (e.g. physical, legal, cultural, social, or emotional wellbeing).
- Improve the response to victims from professionals so they are effectively supported and protected from the first time they seek help, extending this to their family to promote resilience and recovery
- Ensure an effective and efficient multi agency response through MARAC for those victims who are at greatest risk and in need of immediate protection, but offers choice to support short and longer term recovery.

4.1.3 Outcome 3 - People who use abusive behaviour are challenged and provided with effective support to change or face the consequences of their actions.

¹⁶ Stakeholders are defined as any person living or working in Doncaster

Objectives:

- Identify abusers at an earlier stage in their offending behaviour so they understand the consequences of their actions before they come into contact with the criminal justice system and are motivated and supported to change their behaviour
- Utilise the various Criminal and Civil Justice options including new legislation (coercive control) to protect the safety of victims, bring offenders to justice, and protect children and young adults in need of care and protection.
- Build on the Integrated Offender Management Approach and improve working practice between MARAC and MAPPA to manage risk, disrupt offending behaviour and ensure that offenders including serial perpetrators face the consequences of their actions

Our outcomes and objectives are clear with specific actions to address these in the 2016/2017 action plan. This action plan will be reviewed annually along with the performance scorecard to measure progress (Appendix 3).

5.0 Our Finances and Resources

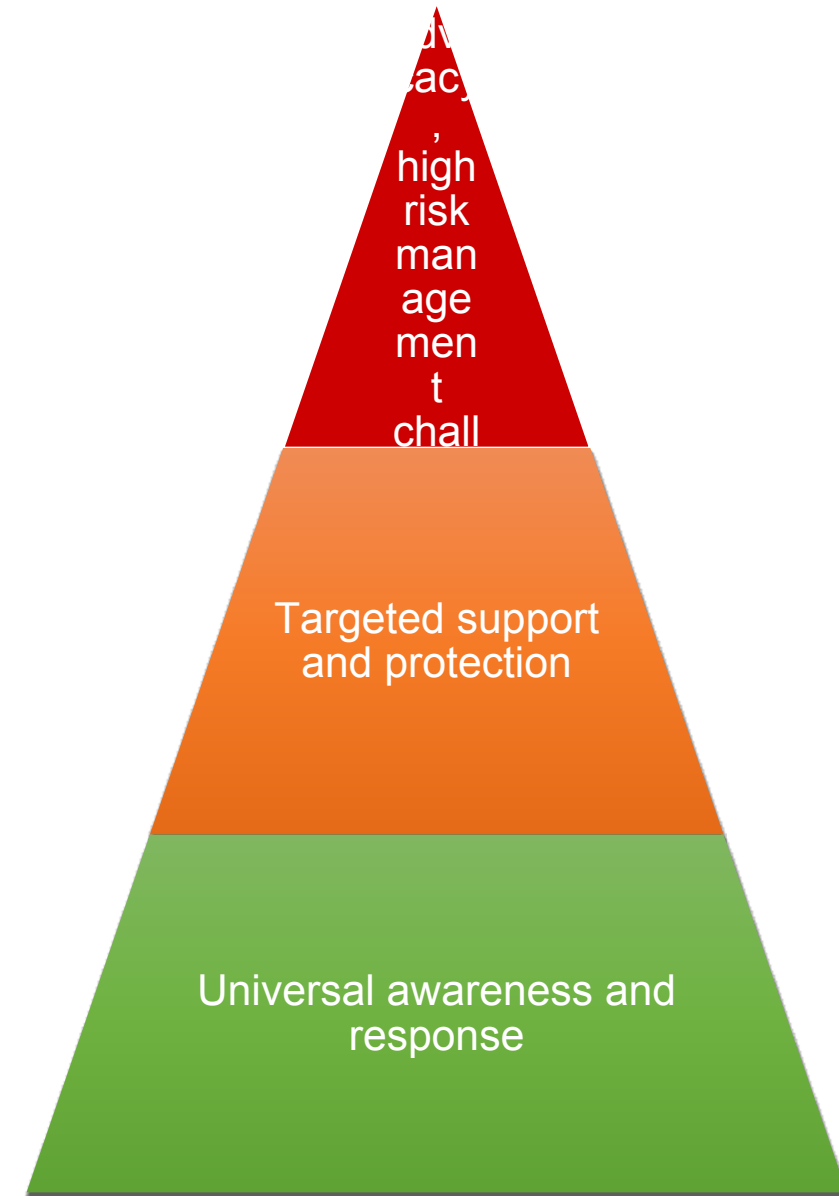
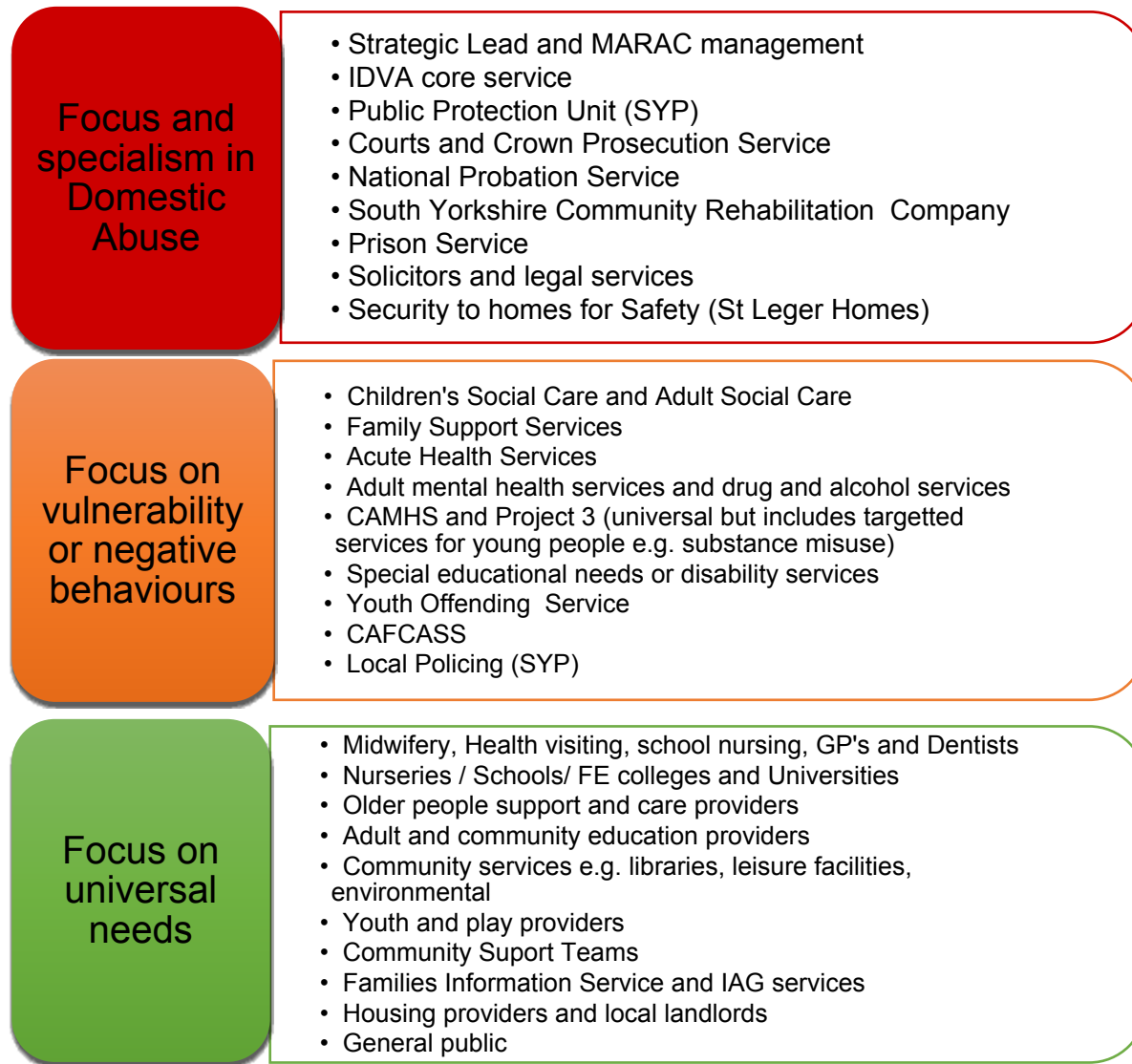
We have a clear understanding of the services we expect to focus on the immediate response to risk from perpetrators and the short and longer term recovery for victims. We also know the universal¹⁷ services that we expect to have awareness of abuse and respond appropriately following assessment.

The first diagram shows the focus of core funded mainstream services, along with other local support when domestic abuse is suspected or identified at whatever level of risk. It should be noted that each service at whatever level will work together as part of a team with the family to address individual needs and behaviours. All services will maintain a focus on the rights of families to access universal services such as schools, health services and community services, while providing any targeted or specialist intervention or support.

The second diagram details additional services which are currently available but have short term funding. The ambition is to move away from short term funding so these additional targeted and specialist services become mainstream.

¹⁷ Universal Services are those who support basic needs or requirements to live a happy, healthy, sociable and prosperous life. They include education, health and community services.

Core funded mainstream services and other local support



Additional Domestic Abuse Services (Individually funded)

Direct work with families Key: W = women; G&B – girls and boys; YP = young people	Adult victims	Perpetrators	Children and Young People
Independent Domestic Violence Advisor additional capacity (DMBC) specialist workers who support 'high risk' victims/survivors of domestic abuse	x		
Domestic Abuse Case Workers (DMBC) supporting medium/standard risk victims. Some work with couples on healthy relationships	x		
Young Persons Violence Adviser (DMBC)	x		x (YP)
Domestic Abuse Navigators (DCST) specialist work with the whole family to support victim and child recovery and challenge perpetrators to support change in behaviour	x	x	x
Refuge and floating Support (Riverside)	x		x
Foundation UK - Custody suite support and Working Towards Change & Foundation for Change programmes		x	
Changing lives (victim programmes)	x (W)		x (G&B)
Specialist Mental Health and Drug and Alcohol Workers (DCST & ADS)	x	x	x
Domestic Abuse help line (Riverside)	x	x	x

In addition there are:

- services which are independently funded and delivered by the voluntary and community sector; private organisations; not for profit organisations and charities
- programmes that have domestic abuse as criteria or focus for support e.g. Stronger Families Programme (funded until 2020 subject to performance)

6.0 Governance and how partners will work together

6.1 Governance of the Strategy

This Strategy is owned by the Safer Stronger Doncaster Partnership (SSDP) on behalf of Team Doncaster. The SSDP Board has the strategic lead for Domestic Abuse, including conducting domestic homicide reviews, MARAC, contracting support services and partnership working at strategic and operational levels, including collaboration with service users.

This Strategy and the annual delivery plans will be led collectively by the Domestic Abuse Chief Officer Group holding lead officers and partner agencies to account for its implementation and for the impact of service delivery (Appendix 4).

The Domestic Abuse Theme Group will be tasked by the Chief Officer Group (COG) to support the delivery of the strategy and to produce bi-monthly performance reports which the COG will monitor and report directly to the SSDP

6.2 Working with other Strategic Boards

The Chief Officer Group do not intend to replicate the work undertaken by other Boards but this strategy does provide the context and approach from which commissioning and service delivery should be driven for Domestic Abuse and where there are multiple needs. This approach supports the priorities of a number of other Strategic Boards with the intention to maximise impact through joint leadership.

Health and Well Being Board	Theme 3 – Area of Focus on Families ¹⁸ The Stronger Families Programme is delivered – one of the six eligibility criteria is Domestic Abuse Agencies identify families, assessing them holistically, monitoring progress against identified needs, working with whole families and implementing the 5 family intervention principles through a lead professional model
Children and Families Board	Doncaster Children, Young People & Families Plan 2011 – 2016 ¹⁹ Outcome 1: Children and young people are healthy and have a sense of wellbeing Outcome 3: Children and young people are free (and feel free) from harm

¹⁸ Doncaster Health and Wellbeing Strategy 2016-2021

¹⁹ Interim Plan 2015 – 2016

Children Safeguarding Board	Strategic Priority 3 Doncaster has effective arrangements for responding to key safeguarding risks.... promoting early identification & support to prevent escalation of risk to keep children safe
Adult Safeguarding Board	Strategic Objective 3 ²⁰ Key deliverable 3.1 Develop a Safeguarding Adults Preventative Strategy that outlines Doncaster’s approach to preventing adults at risk from abuse
Enterprising Doncaster Board.	Significant impact on business through lost time due to impact of Domestic Abuse (DA). Contributing to changing the culture, getting businesses to adopt a DA policy for their staff. Getting the message out that DA is not acceptable.

At times the Domestic Abuse Chief Officer Group will identify complex problems or poor outcomes within the arena of Domestic Abuse and related issues. Under these circumstances there will be discussion between the Chair/s of relevant Boards to agree how this work will be progressed under a joint agreement. This will be determined by their respective priorities and responsibilities or statutory duties. This may result in joint commissioning arrangements but will be led by one strategic board to avoid confusion or duplication of effort

Bi-monthly performance reports and outcomes of any reviews will also be circulated to other Boards for information and comment and to ensure Domestic Abuse is aligned with any specific priorities and work programmes across Doncaster.

6.3 Individual Partner responsibility and accountability

The SSDP through the Chief Officer Group will provide leadership to improve the outcomes and well-being of adult victims, children and young people affected by domestic abuse; alongside challenging and holding to account perpetrators of abuse.

However, it is the responsibility of individual partners to evidence the work they do to improve performance and measure the impact of their service provision through their own governance or contractual arrangements.

In the majority of circumstances partners are able to achieve this through the intelligence and analysis available through the JSNA and JSIA, in addition to their own service level information to respond to presenting needs.

²⁰ Doncaster Safeguarding Adults Partnership Board Strategic Objectives 2013-16 – Revised 10.6.14

Individual partners will therefore continue to focus on specific key performance areas for which they are responsible, but agree to work to common objectives and approach through this strategy.

The agreed ways of working and guiding principles to support this work are detailed in section 6.4

6.4 A Common approach and philosophy of practice

In addition to the objectives detailed in section 4.1 is a philosophy of practice and model of working that needs to be embedded across Doncaster for both direct work with families and as a partnership.

6.4.1 Whole Family and Integrated Working

A whole family approach and integrated working provide the most effective model of identifying vulnerabilities and supporting families who need help or protection.

There is strong evidence that practice which promotes a ‘think family’ approach is effective in promoting health and wellbeing and helps tackle some of the most complex problems in family life. However this includes domestic abuse even if the perpetrator has left the family home, but remains in contact with the victim or children, or moves on to a new relationship and family. This need to be undertaken in a manner that does not escalate risk or collude with perpetrators.

Whole family and integrated working are inextricably linked as one worker²¹; even if they take a holistic view of a family’s needs is unlikely to make an impact and sustained improvement if other agencies do not work with them to achieve shared outcomes.

The key ingredients to achieving a successful whole family approach are when services for adults and children, where children are involved, share a common purpose and share information; there are clear lines of accountability but have shared assessments; and multi-agency working takes account of all the family’s needs

In addition, tailoring evidence based services to the diverse and different needs of individual family members, with the support from a lead practitioner²² who builds trust and empowers them to take control provides the best chance of success.

Families should also have multiple access points for help and support and every worker in Doncaster irrespective of which agency or organisation they work for across children’s and adults’ or services for the community should have the

²¹ Workers are defined as any person paid to work with adults or children in any capacity from universal to specialist services. This includes staff from public or private organisations or the VCS.

²² A Lead Practitioner is any worker from the range of practitioners who are in contact with a family and are best placed to co-ordinate services around a particular child/young person or adults needs.

opportunity to identify and assess the risk of domestic abuse. Doncaster will capitalise on these assets across the partnership to strengthen our joined up support.

6.4.2 Shared Principles

The following guiding principles and agreed ways of working have been developed to support a risk led approach and longer term recovery.

- 1) Listen to the voice of adult victims and child or young person to understand their journey and life experience to engaging them in the design and delivery of services they need.
- 2) Whole family working through knowledge and understanding of their holistic needs and the community in which they live.
- 3) Strengths based approach to working with families and communities recognising their skills, knowledge and experience when developing action plans.
- 4) Early intervention and prevention approaches to working that respond more quickly to risks, vulnerability and prevent escalation
- 5) Focus and emphasis on reducing the impact of parental / adult vulnerabilities and behaviour to promote better outcomes and safeguard children and young people
- 6) Involve the workforce and individual workers in understanding needs and issues of working with adult victims, children and young people and perpetrators to inform practice and service delivery
- 7) Deliver evidence and research based practice that is focused on outcomes and learning from what works including innovative practice.
- 8) Joint commissioning through pool budgets or shared resources to understand needs, support planning, deliver services and measure impact.

6.5 Partnership response to complex issues, poor outcomes or performance

As a partnership we know that a strong collaborative approach is vital to seeing sustained impact on domestic abuse. We need to understand some problems in more depth and formulate a joint response. Many indicators are linked together and therefore a focus on one alone will have no real impact in the longer term if the root causes are not commonly understood and addressed in combination.

For this reason the Chief Officer Group will concentrate its efforts by identify each year one or two priorities for a 'deep dive' review on which to target its combined resources. This will follow an annual review of the outcomes through the action plan or performance scorecard which could lead to a focus on:

- a specific outcome area; or
- a focus on a combination of indicators, or

- a theme that promotes a culture of working that leads to sustained and consistent practice across a number of organisations

6.5.1 How priorities will be identified for 'Deep Dive' review

It is vital that all partners understand the complexity of some issues and challenges of delivering on some outcomes. It is therefore important that the decision making of any 'deep dive' reviews to address some issues are open and transparent and inclusive of all partners. It is important that the focus is on the issue or poor outcome rather than individual partners and therefore the method and practice should reflect this approach.

Collectively the Chief Officer Group will identify annually one or two key issues that they want to address which could be identified through data or other intelligence. There will be a clear rationale why this is important and what the outcome of the review is seeking to achieve.

Any decision for a deep dive review will take account of, but not be limited to:

- Strategic fit – national, regional or Borough wide
- Impact on the population
- Long term trend or future impact of a poor outcome
- Resource implications
- Agency and named lead

The practice of reviews will take account of the guiding principles and agreed ways of working in Section 6.4.2. A methodology will be agreed appropriate to the type of review. The partnership has used Outcome Based Accountability (OBA) to date where data can be used to project trend.

7.0 How Partners will measure progress and success

The Partnership agrees that tackling Domestic Abuse is a shared priority for all agencies and in order to achieve value for money, it is important that we quality assure the work we do both in terms of the individual service user's experience, but also the overall effectiveness of services. We are innovative in our approach and look forward to the Government's publication of the National Statement of Expectations, against which we can benchmark our provision.

In support of this there are a number of different ways the partnership will measure progress and the impact of the strategy.

7.1 Annual Action Plan

This Strategy has an action plan to progress the objectives and work towards the outcomes detailed in section 4.1. This will be reviewed throughout the year by the Chief Officer Group with an annual report detailing progress and the impact this has made. This annual review will determine the following years plan.

Where there is concern over progress in an area of practice or outcome the partnership may decide on a 'deep dive' review to understand the issue in more detail and help overcome any challenges or barriers identified.

7.2 Progress of Performance Indicators

Annually the partnership will formally review the Performance Scorecard (Appendix 3) to monitor improvement. This review may identify areas where improvement has slowed or the trend causes concern. The partnership will discuss with the lead partner who has responsibility for these specific indicators their plans for improvement with the intention to provide support to change the current or trend position.

It may be that the partnership identifies this area of work for 'Deep Dive' review

7.3 How services work together and have confidence in their work

Section 6.4 identifies how partners will work together and although it is not for the partnership to monitor individual partner's performance beyond agreed scorecard indicators the Chief Officer Group will use some key measures to understand how partners are working together. Initially these will be:

1. An increase in Early Help Assessments and Stronger Families eligibility – use and impact for domestic abuse.
2. Increase in the percentage of referrals to MARAC from other partners using the current baseline of 23%
3. Increase in access and take up of training across partners to work with:
 - a) children and young people suffering domestic abuse and
 - b) working with perpetrators

The partnership may identify further measures in coming years. Where measures identify concerns for the Chief Officer Group this could lead to a 'Deep Dive' review to support and overcome any challenges that partners face, both individually and collectively.

7.0 Annual Action Plan 2017/2018

Attached as appendices

9.0 Abbreviations

SYP	South Yorkshire Police
DAC	Domestic Abuse Caseworker
CAMHS	Child and Adolescent Mental Health Services
CAFCASS	Children and Family Court Advisory and Support Service
FE College	Further Educational College
IAG	Information, Advice and Guidance
DMBC	Doncaster Metropolitan Borough Council
DCST	Doncaster Children's Service Trust
ADS	Adult Drug Service
SSDP	Safer Stronger Doncaster Partnership
MARAC	Multi-agency Risk Assessment Conference
IDVA	Independent Domestic Violence Advocate
COG	Chief Officer Group
DA	Domestic Abuse
JSNA	Joint Strategic Needs Assessment
JSIA	Joint Strategic Intelligence Assessment
OBA	Outcome Based Accountability
MASH	Multi-agency Safeguarding Hub
FGM	Female Genital Mutilation
VAWG	Violence Against Women and Girls
DHR	Domestic Homicide Review
NSPCC	National Society for the Protection and Prevention of Cruelty to Children.
KAFKA	Kafka Brigade UK & Ireland Limited
DDAS	Doncaster Drug and Alcohol Services
LGBT	Lesbian, Gay, Bisexual and Transgender
BME	Black and Minority ethnic
DFE	Department of Education

MAPPA	Multi agency Public Protection Arrangement
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10.0 Appendices

Appendix 1 References to Research

Appendix 2 What we know about Domestic Abuse locally

Appendix 3 Doncaster Partner Agency Performance Scorecard

Appendix 4 Domestic Abuse Chief Officer Group Members

Appendix 5 Growing Futures cost estimate references

- <http://www.safelives.org.uk/sites/default/files/resources/Getting%20it%20right%20first%20time%20-%20complete%20report.pdf>
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1.0 Data and local Intelligence

Currently the information available to the partnership relating to domestic abuse is data from South Yorkshire Police; the Multi Agency Risk Assessment Conferences (MARAC) and Doncaster Children’s Services Trust for children known to children’s social care. This data is a useful and important baseline for this new strategy which will be used to measure progress over the next 4 years.

1.1 South Yorkshire Police data²³

Police data shows over the last 3 years a flattening trend line (Figure 1). This is in contrast to South Yorkshire region where incidents continue to increase (Figure 2).

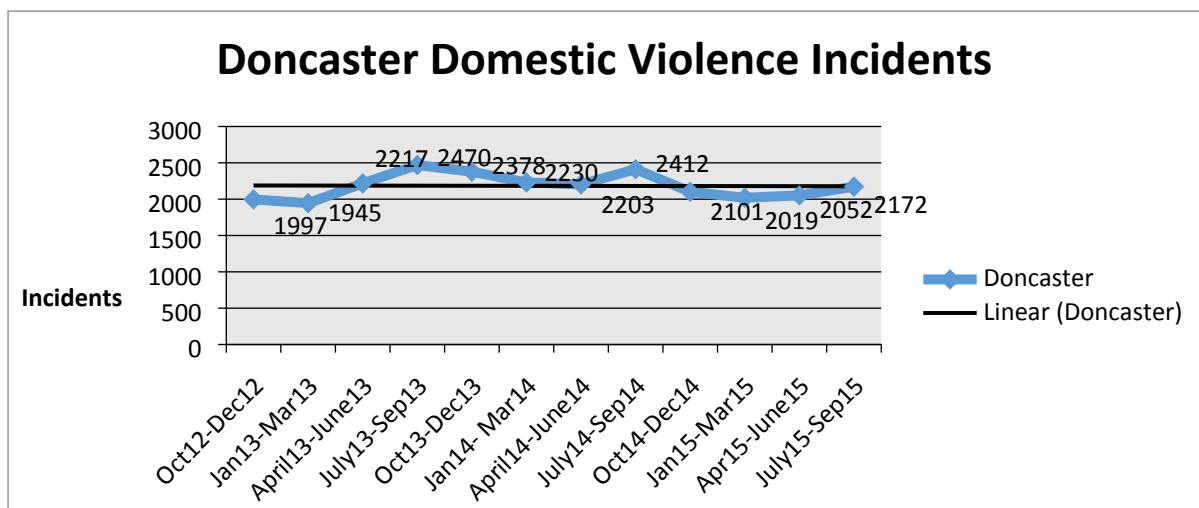


Figure 1

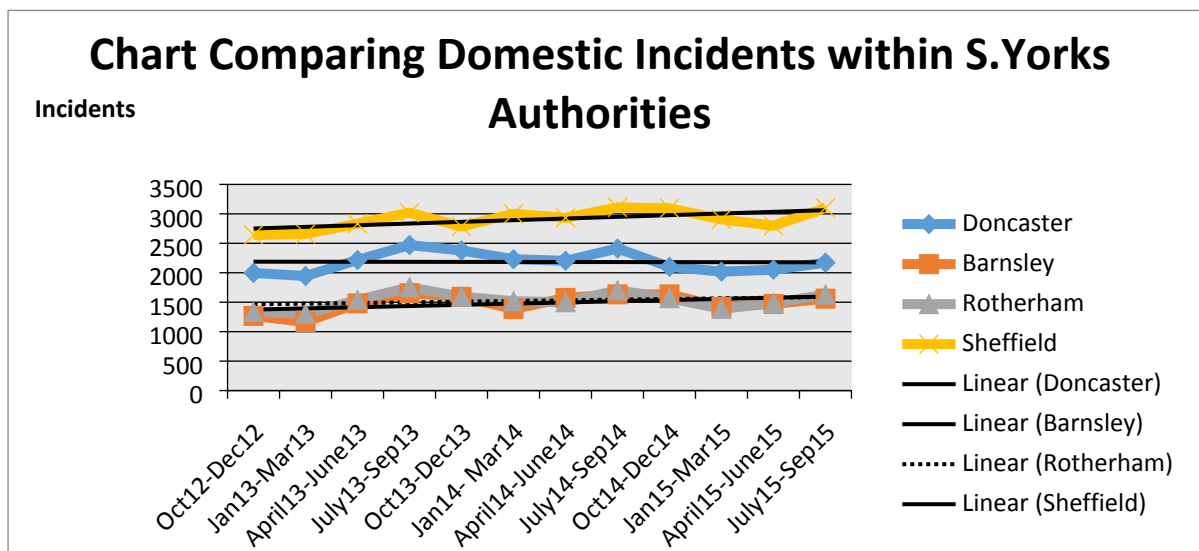


Figure 2

²³ SYP data Oct 2012 to Sept 2015

A review of previous year's data prior to the introduction of new intervention services and practice show a year on year increase in Doncaster with a greater rate of increase than our neighbouring authorities (Figure 3).

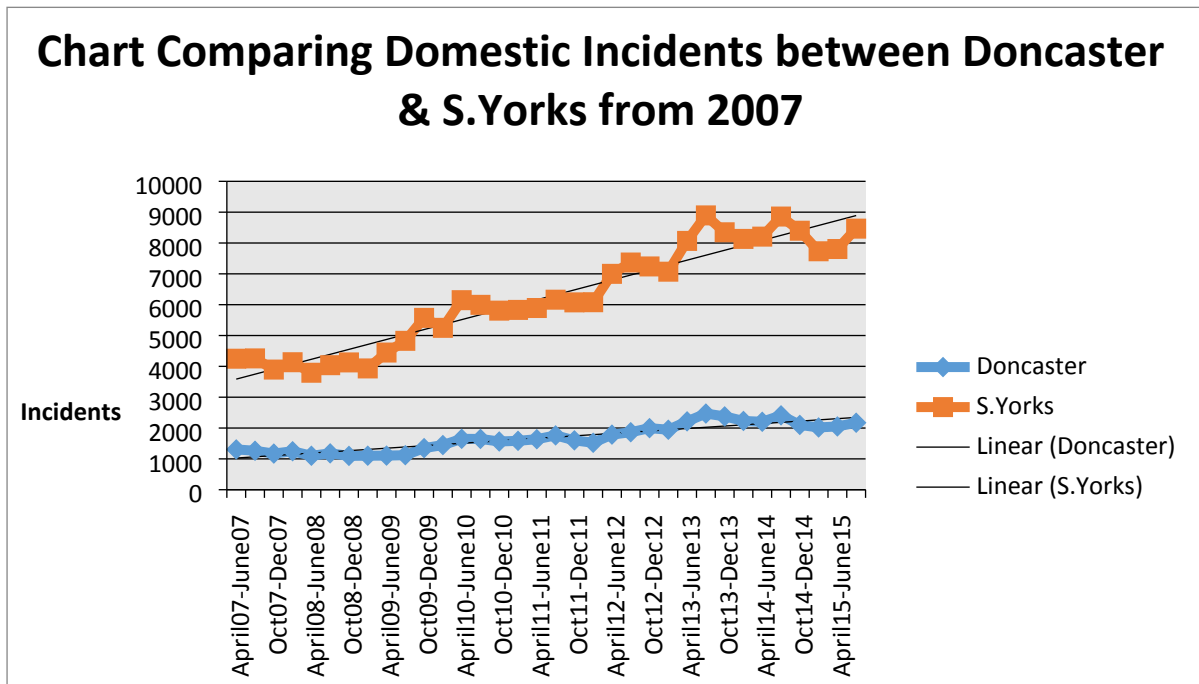


Figure 3

1.2 Multi Agency Risk Assessment Conferences (MARAC) data²⁴

Analysis of this data in Figure 4 shows:

- The number of cases discussed at MARAC in Doncaster is high with an average 169 more victim cases discussed per annum above the 500 recommended by SafeLives²⁵
- This equates to a 3 year average of 54 cases for every 10,000 population against a South Yorkshire Police (SYP) Force area population of 43/10,000; SafeLives recommended 39/10,000 and national average of 30/10,000
- In the cases at discussed the numbers of children in these households peaked in 2014 at 890 from 652 in 2013 and although this has reduced in 2015 remained at over 800 children
- The SafeLives recommended range of repeat cases at MARAC is 28% to 40%. In Doncaster repeat cases are at the top of this range with a 3 year average of 39% against a SYP average of 31% and nationally 25%. In 2015 the repeat cases peaked at 43%.

²⁴ MARAC data Jan 2013 to Dec 2015

²⁵ SafeLives are a national charity dedicated to ending domestic abuse

- In the 3 groups identified of victims with protected characteristics²⁶ (BME; LGBT; Disability), Doncaster's figures are all below the SafeLives recommended; SYP and national levels
- The number of male victims referred to MARAC over the 3 years, is similar to SYP and national figures and was within the lower range of 4% to 10% recommended by SafeLives for 2013 and 2014, although this dropped to 3.80% in 2015.
- Victims aged 16-17 years old referred to MARAC have increased since 2013 from 5 to 8 in 2015 although there was a peak of 19 in 2014

²⁶ Equality Act 2010

MARAC Data (January 2013 to December 2015)

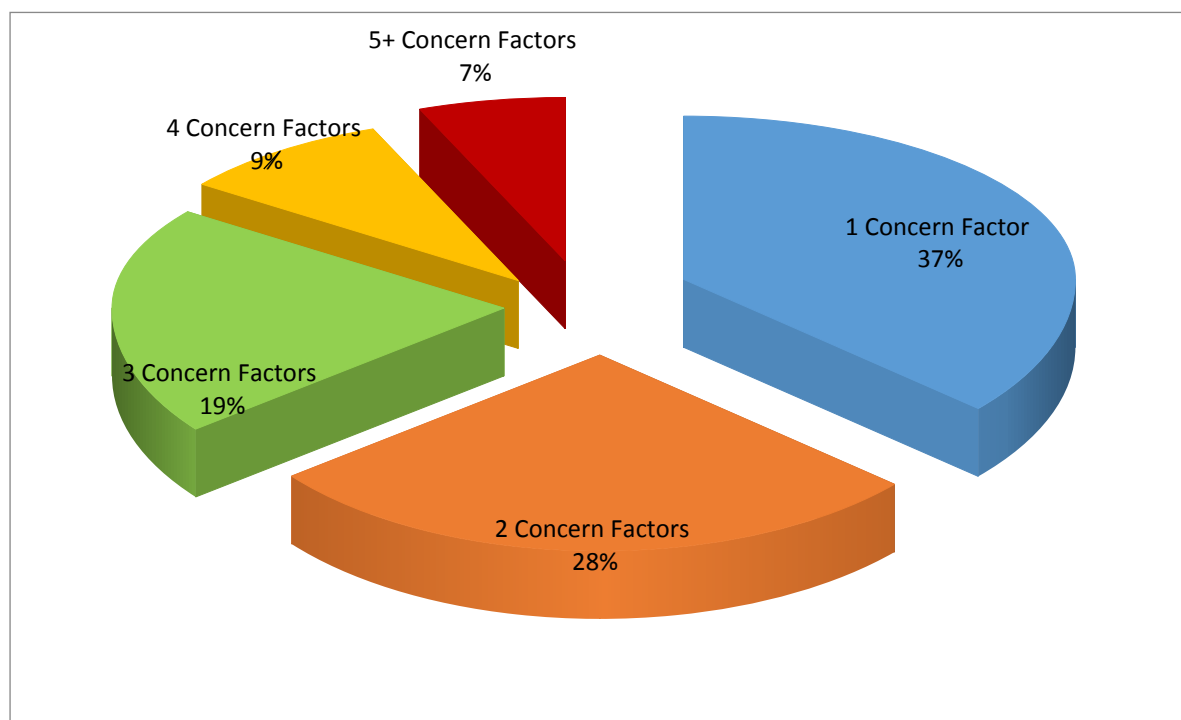
Indicator	National figure	Most similar force group	SafeLives recommends	Police force area	Doncaster			
	3 year ave.	3 year ave.		3 year ave.	3 year ave.	2013	2014	2015
Cases discussed	74045	16572	-	2377	669	631	746	631
Recommended cases	98683	10283	N/A	2240	500	500	500	500
Cases per 10,000 population	30	39	40	43	54	51	60	51
Children in household	94438	22131	N/A	2787	782	652	890	804
Year on year change in cases	12%	6%	N/A	7%	11%	26%	23%	-15%
Repeat cases	25%	27%	28% - 40%	31%	39%	35%	38%	43%
BME	15%	10%	12%	11%	8%	7.60%	6.60%	9.00%
LGBT	1%	1%	5%+	1%	1%	0.60%	1.10%	0.60%
Disability	4%	3%	17%	1%	0%	1.10%	0.30%	0.00%
Males	4%	5%	4% - 10%	4%	5%	5.50%	4.60%	3.80%
Victims aged 16-17	914	277	-	47	11	5	19	8
Cases where victims aged 16-17	1%	2%	-	3%	3%	4.50%	2.60%	1.30%
Police referrals	62%	66%	60% - 75%	66%	82%	84%	86%	77%
Referrals from partner agencies	38%	34%	25% - 40%	34%	18%	16%	14%	23%

Figure 4

1.3 Children's Social Care data²⁷

An analysis of assessments carried out by Doncaster Children's Trust presents a picture of the kinds of multiple and complex needs that often accompany each other for families in need of support.

The chart shows the proportion of families with 1 or more concern factor from 4,859 Child and Family Assessments recorded. 40% of these assessments are still open cases within Children's Social Care.



Of all child and family assessments completed (4,859) by Doncaster Children's Services Trust Workers in 2015/16 Parental Domestic Violence was the most frequently recorded concern factor in 39% (1,880) of these. Of these,

- 28% (532) also had a concern factor of parental alcohol misuse
- 31% (592) also had a concern factor of parental mental health
- 25% (471) also had a concern factor of parental drugs misuse
- 2% (30) also had a concern factor of a learning disability

The next most frequent was parental mental health which featured in 22% (1,108) of all initial assessments completed. Of these,

- 50% (555) also had a concern factor of parental domestic violence
- 27% (294) also had a concern factor of parental alcohol misuse
- 27% (294) also had a concern factor of parental drugs misuse
- 5% (51) also had a concern factor of a learning disability

²⁷ DCST data April 2015 to March 2016

1.4 Doncaster Stronger Families Programme

The Stronger Families Programme has domestic abuse as one of the 6 criteria for eligibility for support. An analysis of services working with these families' shows a much wider range of needs present in the families. Below is a list of additional issues affecting families which need to be planned when responding to need.

- Engagement with universal services
- Emotional Wellbeing
- Housing
- Finance
- Health
- Employment and training
- Parenting ability
- Children's behaviour at home and progress in school or nursery
- Safeguarding

It is clear that families who suffer domestic abuse suffer both in the short and longer term with a number families having multiple factors present which impact on parenting or carer capacity and family functioning.

2.0 Consultation and what people say

2.1 What some adults and children and young people say

A significant part of delivering this strategy is through earlier intervention and supporting the development of healthier relationships for future generations to come. There is currently no significant local data or research to understand what children and young people think is a healthy relationship or their attitude to domestic abuse. The only research available which asks children and young people in Doncaster their opinion is through the health and wellbeing survey²⁸ which explores their health beliefs and behaviours. Although this is a valuable survey and offers some insight to sexual relationships, conclusions relating to healthy relationships or potentially abusive relationships cannot be drawn

Through the Growing Futures Innovation programme four focus groups were convened by OPCIT Research²⁹. Two of these focus groups were with young people to understand their current understanding of domestic abuse. Participants were aware of domestic abuse, with some living in households and experiencing it first-hand. In contrast to the 2 adult focus group participants who felt domestic abuse in a relationship was a private matter, young people said that it was unacceptable, although they didn't know what to do about it.

²⁸ The Doncaster Children and Young People's Health and Wellbeing survey 2015 (Primary and Secondary age pupil reports)

²⁹ OPCIT Research are Growing Futures DfE funded external evaluators

In response to young people’s OPCIT Research have been commissioned to work with Club Doncaster Foundation to research with young people why domestic abuse is spatially acute in the area and what young people want to do about this. Results from this research will be available in December 2016 and will be used to inform this strategy

2.2 What Domestic Abuse and Family Services say...

In developing this strategy, we have consulted with stakeholders working with adults, children and young people who have been affected by domestic abuse. It is clear they want us to:

- Speed up the identification of domestic abuse and ensure victims and their families receive earlier help
- Provide proactive support to the whole family in the round, not just individual family members in isolation – ensuring that the right intervention from the right professional is available, including perpetrators of abuse.
- Understand and meet the needs of victims of domestic abuse, working towards long term recovery and independence
- Ensure better evaluation of what works to make families safe, and keep them safe
- Listen to victims experiencing abuse, learning from their experiences and capture the full costs of late intervention

3.0 The financial cost of domestic abuse

There is a very real cost which impacts on service providers in terms of the length and intensity of provision required to promote recovery and build resilience where domestic abuse is identified at relatively high levels of risk.

To estimate the costs for Doncaster we have used national figures to calculate the actual and potential implications for partners and families.

Doncaster’s Population³⁰	304,185
• Women and girls age 15 to 59 years	approx. 90,200
• National figures estimate that 30% of women and girls will have experienced an incident of abuse or sexual assault, each year In Doncaster this could be.	27,060
• Estimates for actual domestic abuse ³¹ based on population figures for each year in Doncaster this could be	9,384

³⁰ ONS estimated residential population mid 2014

³¹ <http://crimereduction.homeoffice.gov.uk/domesticviolence/domesticviolence072.htm>

	Estimated costs ³²	By 2020 estimates (inflation at 2.9% per year BoE)
Victim costs per person (physical and mental health; criminal justice and others incl. Housing, employment and civil legal) ³³		
• High Risk	£20,000	£22,425
• Medium and Standard Risk	£13,100	£15,585
MARAC cases (High Risk) 3 year ave. ³⁴ 669 @ £20,000 =	£13,380,000	£15,002,325
All other Cases 8,715 @ 13,900 =	£121,138,500	£135,823,275
Children's Social Care costs ³⁵ and numbers of children ³⁶ per category where domestic abuse is a concern factor with other needs:		
Children in Need 329 @ £3,243	£1,066,947	£1,120,294
Child Protection Plan 202 @ £4,270	£862,540	£905,667
Children in Care 93 @ £59,984	£5,578,512	£5,857,437
Total	£7,507,999	£7,883,398

Frequently, victims of domestic abuse who receive support after a number of attempts to access services are likely to display mental health and other complicating factors which impact on their other relationships, including any children in the family. National estimates calculate the human and emotional costs for adult victims to be 3 times the cost of services.

³² See 'Cost Estimates and references' section for detail

³³ SafeLives Saving Lives, Saving Money – MARAC and high risk domestic abuse,

³⁴ Doncaster MARAC data Yrs. Jan 13 to Dec 2015

³⁵ Growing Futures Innovation Bid March 2015 with inflationary increase

³⁶ DCST March 2016

SAMPLE

Key Measure	Awareness and rate of Domestic Abuse across Doncaster	Lead Agency	Lead Officer	Report Frequency	Target	Target Date	Baseline Source	RA G
	Number of professionals accessed Domestic Abuse training	DMBC Community Safety	Sandra Norburn	Quarterly				
	Number of professionals accessed Domestic Abuse awareness sessions	DMBC Community Safety	Sandra Norburn	Quarterly				
	Number of young people accessed the Domestic Abuse Advocacy Programme	DMBC Community Safety	Sandra Norburn	Quarterly				
	Number of children and young people accessed the Domestic Abuse awareness sessions through PSHE	Public Health	Steve Presley	Quarterly				
	Number of cases reviewed by MARAC	South Yorkshire Police	Karen Taylor	Quarterly	Reduce to 500		SYP	
	Number of children in cases reviewed by MARAC	South Yorkshire Police	Karen Taylor	Quarterly			SYP	
	Number of repeat cases reviewed by MARAC	South Yorkshire Police	Karen Taylor	Quarterly	Reduce by 25%, to 236		SYP	
	% of repeat cases reviewed by MARAC	South Yorkshire Police	Karen Taylor	Quarterly	Reduce by 25%, to 30%		SYP	
	The rate of repeat victimisation of domestic abuse across the borough	South Yorkshire Police	Karen Taylor	Quarterly			SYP	
	Number of victims / families in refuge accommodation	Riverside		Quarterly				
	Total number of all domestic incidents non-crime and crime	South Yorkshire Police	Karen Taylor	Quarterly			SYP	
	% of domestic incidents non-crime & crime where there have been children present	South Yorkshire Police	Karen Taylor	Quarterly			SYP	
	Number of domestic incidents non-crime	South Yorkshire Police	Karen Taylor	Quarterly			SYP	
Number of domestic incidents crime	South Yorkshire Police	Karen Taylor	Quarterly			SYP		

Key Measure

MARAC referrals	Lead Agency	Lead Officer	Report Frequency	Target	Target Date	Baseline Source	RA G
MARAC referrals from South Yorkshire Police	South Yorkshire Police	Karen Taylor	Quarterly			SYP	
MARAC referrals from A&E	South Yorkshire Police	Karen Taylor	Quarterly				
MARAC referrals from RDaSH	South Yorkshire Police	Karen Taylor	Quarterly				
MARAC referrals from GP's	South Yorkshire Police	Karen Taylor	Quarterly				
MARAC referrals from Adult Mental Health Service	South Yorkshire Police	Karen Taylor	Quarterly				
MARAC referrals from Housing	South Yorkshire Police	Karen Taylor	Quarterly				
MARAC referrals from Children's Social Care	South Yorkshire Police	Karen Taylor	Quarterly				
MARAC referrals from Community Local Authority Early Help Services including Stronger Families	South Yorkshire Police	Karen Taylor	Quarterly				
MARAC referrals from other agencies	South Yorkshire Police	Karen Taylor	Quarterly			SYP	
Referrals & Domestic Abuse Cases	Lead Agency	Lead Officer	Report Frequency	Target	Target Date	Baseline Source	RA G
Number of restraining orders	South Yorkshire Police		Quarterly				
Number of DVPN issued	South Yorkshire Police		Quarterly				
Number of DVPO issued	South Yorkshire Police		Quarterly				
Referrals & Domestic Abuse Cases	Lead Agency	Lead Officer	Report Frequency	Target	Target Date	Baseline Source	RA G
Number of referrals received (IDVA'S)	DMBC Community Safety	Sandra Norburn	Quarterly			DMBC	
% of referrals received with children (IDVA'S)	DMBC Community Safety	Sandra Norburn	Quarterly			DMBC	
% of repeat referrals from previous year (IDVA'S)	DMBC Community Safety	Sandra Norburn	Quarterly			DMBC	
% of repeat referrals received with children (IDVA'S)	DMBC Community Safety	Sandra Norburn	Quarterly			DMBC	
% of 'repeat repeat' referrals (IDVA'S)	DMBC Community Safety	Sandra Norburn	Quarterly			DMBC	

% of 'repeat repeat' referrals received with children (IDVA'S)	DMBC Community Safety	Sandra Norbur n	Quarterly			DMBC	Green
Number of referrals received (DAC's)	DMBC Community Safety	Sandra Norbur n	Quarterly			DMBC	Red
% of referrals received with children (DAC's)	DMBC Community Safety	Sandra Norbur n	Quarterly			DMBC	Yellow
% of repeat referrals (DAC's)	DMBC Community Safety	Sandra Norbur n	Quarterly			DMBC	Green
% of repeat referrals received with children (DAC's)	DMBC Community Safety	Sandra Norbur n	Quarterly			DMBC	Green
% of 'repeat repeat' referrals (DAC's)	DMBC Community Safety	Sandra Norbur n	Quarterly			DMBC	Green
% of 'repeat repeat' referrals received with children (DAC's)	DMBC Community Safety	Sandra Norbur n	Quarterly			DMBC	Green
% of referrals in Referral & Response where Domestic Abuse is a factor	Doncaster Children's Services Trust	Claire Harris	Quarterly	Reduce by 30%, to 42%		DCST LL	Green
% of 'repeat' referrals in Referral & Response in the last 12 months	Doncaster Children's Services Trust	Claire Harris	Quarterly	Reduce by 30%, to 21%		DCST LL	Green
% of 'repeat' referrals in Referral & Response in the last 12 months where Domestic Abuse is a factor	Doncaster Children's Services Trust	Claire Harris	Quarterly	Reduce by 30%, to 20.8%		DCST LL	Green
Total Number of Children in Need	Doncaster Children's Services Trust	Claire Harris	Quarterly	Reduce by 135, to 1,219		DCST LL	Red
% of Children in Need where there is a Single Assessment and Domestic Abuse is a factor	Doncaster Children's Services Trust	Claire Harris	Quarterly	Reduce by 10%, to 40.3%		DCST LL	Green
Total Number of Children on Protection Plan	Doncaster Children's Services Trust	Claire Harris	Quarterly			DCST LL	Red
% of Children on Protection where there is a Single Assessment and Domestic Abuse is a factor	Doncaster Children's Services Trust	Claire Harris	Quarterly			DCST LL	Yellow
Total Number of Children Looked After	Doncaster Children's Services Trust	Claire Harris	Quarterly	Reduce by 5 to 15, to 474 to 484		DCST LL	Red
% of Children Looked After where there is a single assessment and Domestic Abuse is a factor	Doncaster Children's Services Trust	Claire Harris	Quarterly	Reduce by 1% to 3%, to 37.7% to 38.5%		DCST LL	Green

	% of Children referred to Early Help where Domestic Abuse is a presenting issue	Doncaster Children's Services Trust	Claire Harris	Quarterly			DCST EHM	
	Perpetrator Outcomes	Lead Agency	Lead Officer	Report Frequency	Target	Target Date	Baseline Source	RAG
	Number of restraining orders issued to perpetrators	South Yorkshire Police		Quarterly				
	Number of DVPN issued to perpetrators	South Yorkshire Police		Quarterly				
	Number of DVPO issued to perpetrators	South Yorkshire Police		Quarterly				
	Number of perpetrators referred to 'Foundation for Change' for programme	Foundation for Change	Nikeisha Braggar	Quarterly				
	% of repeat referrals referred for 'Foundation for Change' for programme	Foundation for Change	Nikeisha Braggar	Quarterly				
	% of referred perpetrators accessing 'Foundation for Change' for programme	Foundation for Change	Nikeisha Braggar	Quarterly				
	% of referred perpetrators completed 'Foundation for Change' for programme	Foundation for Change	Nikeisha Braggar	Quarterly				
	Number of perpetrators referred to 'Community Rehab Team' for 'Building Better Relationships' programme	Community Rehab Team	Joan Cox	Quarterly				
	% of repeat referrals referred for 'Building Better Relationships' programme	Community Rehab Team	Joan Cox	Quarterly				
	% of referred perpetrators accessing 'Community Rehab Team' for 'Building Better Relationships' programme	Community Rehab Team	Joan Cox	Quarterly				
	% of referred perpetrators completed 'Community Rehab Team' for 'Building Better Relationships' programme	Community Rehab Team	Joan Cox	Quarterly				
	Number of perpetrators referred to 'Community Rehab Team' for 'Respectful Relations' programme	Community Rehab Team	Joan Cox	Quarterly				
	% of repeat referrals referred for 'Respectful Relations' programme	Community Rehab Team	Joan Cox	Quarterly				
	% of referred perpetrators accessing 'Community Rehab Team' for 'Respectful Relations' programme	Community Rehab Team	Joan Cox	Quarterly				
	% of referred perpetrators completed 'Community Rehab Team' for 'Respectful Relations' programme	Community Rehab Team	Joan Cox	Quarterly				
	Perpetrator & Victim Profiles	Lead Agency	Lead Officer	Report Frequency	Target	Target Date	Baseline Source	RAG

	Number of Perpetrators causing harm aged 17 and below referred to MARAC	South Yorkshire Police	Karen Taylor	Quarterly			SYP	Green
	% of victims referred to MARAC aged 16-18	South Yorkshire Police	Karen Taylor	Quarterly	Reduce to 2.1%		SYP	Green
	% of male victims referred to MARAC	South Yorkshire Police	Karen Taylor	Quarterly	Recommendation 4 - 10%		SYP	Red
	% of BME victims referred to MARAC	South Yorkshire Police	Karen Taylor	Quarterly	Recommendation 12%		SYP	Green
	% of LGBT victims referred to MARAC	South Yorkshire Police	Karen Taylor	Quarterly	Recommendation 5%+		SYP	Red
	% of victims with a disability referred to MARAC	South Yorkshire Police	Karen Taylor	Quarterly	Recommendation 17%		SYP	Red
	% of victims with mental or physical ill health referred to MARAC	South Yorkshire Police		Quarterly				

Domestic Abuse Chief Officer Group Members

Appendix 4

Name	Designation	Agency
Chief Supt Tim Innes	Chair	South Yorkshire Police
Markye Turvey	Deputy Director	Community Rehabilitation Company (CRC)
Andrew Russell	Chief Nurse	Doncaster CCG
Helen Conroy	Head of Service	Public Health
Suzannah Cookson	Head of Quality and Designated Nurse for Safeguarding and LAC	Doncaster CCG
Sarah Sansoa	Commissioning Manager	DMBC Commissioning
Karen Johnson	Assistant Director	DMBC Communities
Bill Hotchkiss	Head of Service	DMBC Community Safety
Sandra Norburn	Dom and Sexual Abuse Theme Lead	DMBC Community Safety
Sarah Mainwaring	Head of Probation	National Probation Service (NPS)
Jackie Wilson	Director of Quality Performance and Innovation	Doncaster Children's Services Trust (DCST)
Phil Hayden	Programme Manager Growing Futures	Doncaster Children's Services Trust (DCST)
Riana Nelson	Assistant Director	DMBC Children's Commissioning

1. £2,832 (2010) or **£3,243** (2014) [3.4% average inflation per year over the period] (Holmes L, McDermid S, Soper J, Sempik J and Ward H, (2010) *'Extension of the cost calculator to include cost calculations for all children in need'*, Centre for Child and Family Research (CCFR), Loughborough University)
2. £3,728 (2010) or **£4,270** (2014) [3.4% average inflation per year over the period] (Holmes L, McDermid S, Soper J, Sempik J and Ward H, (2010) *'Extension of the cost calculator to include cost calculations for all children in need'*, Centre for Child and Family Research (CCFR), Loughborough University)
3. £36,524 (13/14 Children's Services Estimates England, Chartered Institute of Public Finance and Accounting). These costs can often be much higher e.g. a standard residential placement costs £2,100 - £4,450 p.w. or £109,200 - £231,400 p.a. in Doncaster the actual cost is **£59,984**
4. *SFR36_2013_LA Tables*
5. Berridge D., Biehal N., Henry L.(2012) *Living in Children's residential homes*, DfE
6. *Children's Homes data pack* (2014), DfE
7. Walby S (2009), *'The Cost of Domestic Violence: Up-date 2009'* Lancaster University)
8. SafeLives Saving Lives, Saving Money – MARAC and high risk domestic abuse 2015 <http://www.caada.org.uk/policy-evidence/policy-and-research-library>
9. Smith, K., Osborne, S., Lau, I., & Britton, A. (2012). *Homicides, firearm offences and intimate partner violence 2010/ 2011: Supplementary volume 2 to Crime in England and Wales*. London.)
10. Bank of England Inflation Calculator is used throughout the report to adjust costs for inflation.