

23 July 2013

Agenda Item: 6

REPORT OF SERVICE DIRECTOR POLICY PLANNING AND CORPORATE SERVICES

DOMESTIC VIOLENCE AND ABUSE UPDATE 2013

Purpose of the Report

1. To outline the key areas of work being undertaken in response to domestic violence and abuse in Nottinghamshire.

Information and Advice

- 2. Addressing domestic violence is a top priority for the Safer Nottinghamshire Board (SNB) and the Nottinghamshire Police and Crime Commissioner (NPCC). Nottinghamshire County Council works with its SNB partners to deliver greater prevention and protection from domestic violence, quality provision to support the victims of domestic violence and effective criminal justice to reduce re-offending. This agenda is supported by all departments of the Council and directly involves Human Resources, Adult Social Care, Public Health, Children's Social Care, Education, Early Years, Youth Offending and Targeted Support as well as Community Safety. Sexual violence will be the subject of a further report to this committee in September; however the two issues are very closely related and several initiatives have developed to address both sexual and domestic violence.
- 3. Specialist support services for the victims/survivors of domestic violence and specialist training and education services are delivered by third sector organisations commissioned or grant aided by NCC and other funding bodies. In 2012 the NCC commissioning and grant aid arrangements for domestic violence were revised to achieve greater accountability and effectiveness, also clearer pathways for referrals and access to services. NCC funded services include:
 - Women's Refuges
 - Free 24 hour domestic and sexual violence helpline
 - Local access points, outreach and support for women at risk
 - Outreach and support for children who have experienced domestic violence
 - Support for male victims/survivors
 - Link workers in Children's Social Care
 - Independent Domestic Violence Advocates (IDVAs) for high risk
 - Healthy relationships education
 - Training and professional support for staff

There is an agreed data set of outcomes linked to each of these funding arrangements. Contracts are due for review in 2015.

- 4. The SNB has nominated John Robinson, Chief Executive at Gedling BC, to be its Domestic Violence Champion. The Champion works closely with the Community Safety Team to develop links between county wide community safety partners, and local partnerships (CSPs). This collaboration has enabled SNB to achieve agreement and clarity about commissioning arrangements, domestic homicide reviews, and performance management.
- 5. The SNB has a devised a performance framework to measure the outcomes of the various interventions and initiatives undertaken. Numerical performance targets have been kept to a minimum. Instead a range of indicators are used to monitor the impact of interventions, and all agencies are using service user feedback to drive improvement and effectiveness. Volume increases in reported domestic abuse can be a measure of both success and failure:
 - success because the crime is no longer hidden and can be addressed and
 - failure because we did not prevent it happening in the first place

Partners have agreed an overall aim to increase the reporting of domestic violence and abuse, but to reduce repeat criminalisation. At its best, this will reduce overall crime levels because agencies intervene sooner and implement safety measures and criminal procedures earlier. See Appendix below for the Performance Table

6. The Safer Nottinghamshire Board has produced a Domestic and Sexual Violence Action Plan outlining the actions it plans to carry out in the current year in order to achieve its objectives. Details of the initiatives included in the plan and directly involving NCC departments follow.

7. Work with Children and Families

All recent evidence demonstrates that children can be profoundly affected by adult domestic abuse and are at risk themselves of both physical and psychological harm if violence is taking place in the home. Practitioners in all agencies are trained to refer children known to be at risk to Children's Social Care for a safeguarding assessment. More than 100 children are identified every month in Nottinghamshire as being at risk from domestic violence. In the most severe cases, where parents are unable to escape this violence, children may be removed from parental care.

Children's Centres are well-placed to intervene with families as soon as concerns are identified. Family Support Workers link with specialist workers from Womens Aid to deliver support programmes for parents and children and encourage victims to protect themselves and to report criminal activity to the police. Children and young people are referred to specialist children's outreach for individual or group work support to help with recovery and understanding after experiencing domestic abuse. Women can access "The Freedom Programme" which promotes the notion of "survivor" rather than "victim" and helps women to develop their self esteem and an understanding of gender based violence.

Nottinghamshire Joint Access Teams (JATs) regularly discuss children and young people who have been affected by domestic violence. Here, information can be shared between the various agencies involved with the family (including school), and specialist help requested where necessary. In partnership with the Police and the MASH¹, community safety officers are exploring ways to alert schools at an earlier stage about domestic violence affecting pupils.

Prevention needs to begin as early as possible, while children are first learning about relationships and are becoming aware of the differences between their own and other families. Age appropriate Healthy Relationship Education in schools, supported by this Committee with funding in June, teaches the importance of respect and trust and the importance of "telling" about abuse so that someone can help them and their family.

8. Work with Teenagers at risk

This group includes both potential victims and potential perpetrators of domestic abuse. Evidence quoted in the June 18th Community Safety Committee Report² shows that one third of young people between 13 and 18 have already experienced abuse in intimate relationships and that this is even more common amongst young people from deprived backgrounds. There is also growing evidence of abuse and violence towards parents and carers from their own teenage children, and evidence of teenagers subject to forced marriage by their families and potentially subject to honour-based violence if they refuse. All these issues are largely hidden from both the safeguarding agencies and the criminal justice system, however they impact heavily on family and community life now and into the future.

There is increasing focus on these teenagers at risk in Nottinghamshire, and recognition that the above issues need specialist intervention in addition to the usual domestic violence arrangements. The developing approach includes:

- statutory and voluntary intervention from the NCC Targeted Support and Youth Justice Service, with specialist training available for staff
- awareness raising with third sector agencies that work with young people and ethnic minorities to encourage earlier identification and referral
- secondary school healthy relationship programmes that teach young people how to make safe choices and seek help when they need it
- "Dragons' Den" challenge in Ashfield Schools to raise awareness of healthy relationships and create a range of promotional material that will encourage teenagers who are experiencing abuse to seek help
- targeted work by "Supporting Families" workers that have been trained to support families where young people are abusing their carers

New in 2013 will be some specialist support work, hosted within existing victim services, but targeted at teenagers at risk, to encourage disclosure and help-seeking.

9. Initiatives within Health

¹ Multi-Agency Safeguarding Hub

² Healthy Relationships Education for young people June 2013 C S Committee Papers

Nationally the NHS spends £1.73b a year on health care needs arising from domestic violence³. The figure for Nottinghamshire is approximately £21m. (Neither of these figures includes the cost of long term mental health treatment which is known to be accessed by significant numbers of domestic abuse survivors). Information sharing between health agencies and criminal justice agencies is essential to ensure that each has the full picture of the violence and its impact. Various initiatives and developments are now in place to support information sharing and appropriate referral:

- there are specialist nurses in both the Queen's Medical Centre and Kings Mill Hospital emergency departments who conduct risk assessments and signpost patients to the appropriate agencies. They also deliver training to other staff in the hospital
- supported by the NCC Public Health and Community Safety Teams, Doctors in General Practice in Mansfield and Ashfield are linking with existing Multi Agency Risk Assessment Conference (MARAC) information sharing processes for high risk cases (see para 10) and are funding specialist Identification and Referral to Improve Safety (IRIS) workers to support people who disclose incidents to their GP. This will be extended to General Practitioner practices in other Clinical Commissioning Group areas over a three year period if funds are agreed.
- Nottinghamshire Healthcare Trust has delivered an extensive staff training programme in the last 2 years bringing practice improvements across the Trust and referral pathways for specialist support. This training has included community mental health, health visiting and acute mental health hospital wards. Staff are now trained to "ask the question" about domestic violence. This follows feedback from survivors who say that they need a prompt to encourage disclosure and indicate that the practitioner is interested in helping them

10 <u>Multi Agency Risk Assessment Conference (MARAC)⁴</u> - information sharing <u>arrangements for high risk cases</u>

Nottinghamshire County Council is jointly responsible with Nottinghamshire Police for coordinating and chairing the MARAC meetings. Using a national model supported by the Home Office, partners agreed to use a common risk assessment and refer all high risk cases to multi-agency MARAC meeting where representatives from key agencies agree how best to support victims and prevent further abuse. Information is shared on a "need to know" basis using strict protocols to protect personal information. The focus on high risk means that where resources are stretched, these cases receive the most attention. Each victim is assigned a support worker known as an IDVA (Independent Domestic Violence Advocate)⁵ who represents them in the meeting and co-ordinates the implementation of the safety measures agreed. IDVA/MARAC services nationally have been evaluated and show that the intensive support and clear pathways created by MARAC deliver value for money and good outcomes for victims⁶.

11 Medium Risk Support

Both the Police and Crime Commissioner and some community safety partnerships have identified additional funding to support victims who are classed as "medium risk" and are suffering many repeat incidents of domestic violence. The individuals concerned may be experiencing a number of complex issues and be unwilling or unable to engage with

³ Sylvia Walby The Cost Of Domestic Violence Update 2009

⁴ Multi-Agency Risk Assessment Conference

⁵ Independent Domestic Violence Advocate

⁶ A Place of greater Safety CAADA 2012

support services in the way they are usually provided, so require more intensive or personalised support. The medium risk workers will share information about their interventions with other practitioners at District Vulnerable People's Panels. This initiative will be evaluated professionally by one of the university departments.

12. Domestic Homicide Reviews (DHR)

Since April 2011, community safety partnerships have been required to review cases of homicide where the victim is killed by a partner, former partner, or family member. Six reviews have been undertaken in Nottinghamshire. Two are outstanding at the present time. All have brought insight and learning to the partnership which inform many of the developments above. The following have been part of DHR recommendations:

- Engagement and training for doctors in general practice
- Better links to schools about domestic incidents affecting pupils
- Additional focus on medium risk victims
- Awareness Training in a variety of agencies

Other Options Considered

12. Men and Domestic Violence

Services for male victims are available from Victim Support and the Nottinghamshire Domestic Violence Forum. Refuge places for men are available in nearby counties if required but there is only one programme available for this group. It is the Integrated Domestic Abuse Programme delivered by Probation, and accessed by convicted offenders when this has been specifically mandated by the Courts. Agencies working with known male perpetrators pre-conviction would like to be able to refer men to a voluntary programme that addresses behaviour and supports change at a much earlier stage. SNB partners are exploring ways to develop and fund this kind of work but no additional funding is currently available to do this. As a first step, practitioners are trained in ways of working that do not collude with their clients' excuses for abuse and to challenge their assumptions about women and their own male identity.

13 Female Perpetrators

Despite the high numbers of male victims reporting domestic abuse (20%) there are only small numbers of female offenders. This because these reported incidents are relatively mild or concern male perpetrators abusing other males. Training is available to assist practitioners to work with female perpetrators and there is no demand for a specific programme for this group.

Reason/s for Recommendation/s

14. Members are asked to note the report and request further details if these are needed.

Statutory and Policy Implications

15. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

1) Members are asked to note this report

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For any enquiries about this report please contact: Rachel Adams <u>rachel.adams@nottscc.gov.uk</u> 0115 9772015

Constitutional Comments

As this report is for noting only no constitutional comments are required.

Background Papers and Published Documents

None

Electoral Division(s) and Member(s) Affected

All

Domestic and Sexual Violence Performance Table Nottinghamshire 2013/14

| | Domestic Violence Objective | Proposed Measure | Baseline County | Target | Rationale/ Comment |
|---|---|---|--|--|---|
| 1 | Raise awareness/increase confidence to report domestic violence | Increase the number of incidents reported to the police | Unique victims 9141 | 2.86% increase 9387 | Based % female popn Also monitor male victims currently 21% total |
| | | Reduce the number of incidents a victim waits before disclosure | | | Cannot set a baseline at this stage |
| | | Number of calls to Nottinghamshire Helpline giving Notts location | 2012-13 2554 calls | Proxy measure only | |
| 2 | Reduce repeat victimisation of domestic violence | Reduce geographical repeat victimisation. Crimes within 12 months at the same address | 2012-13 19.83% | Overall reduction 2% in current year | PCC target 5% over 3 years |
| 3 | Ensure victims are effectively protected against re-victimisation and supported to recover from domestic violence | Victim satisfaction with timeliness and effectiveness of Police response | Police started satisfaction survey in April 2013 | Quality measure | Results available September 2013 |
| | | Victim feedback/quality assurance of DV Services | Survivor focus groups | Quality measure | Results available September 2013 |

| Prevention, early intervention and reduction in re-offending | | | | | | | |
|--|---|---|---|---------------------------------|---|--|--|
| | Domestic Violence Objective | Proposed Measure | Baseline | Target | Rationale/ Comment | | |
| 4 | Reduce the volume and severity of domestic violence | Reduce domestic violence recorded crime | 2012-13 4024 offences | Overall 3% reduction | | | |
| | | Proportion of incidents categorised high/medium/ standard | 2012-13 High 11.8% Medium 28.4% Standard 58.7% | Proxy measure | Reduce High Increase Standard | | |
| | | Number and proportion of incidents that become 'crimed' | 2011-12 45.3% 2012-13 40.8% | Proxy measure | | | |
| 5 | Promote and develop positive and healthy relationships to prevent domestic violence happening in the first place | | 2012-13 data being collected | Output Proxy measure | Looking for increase year on year – heavily dependent on funding Further work on impact over time is required | | |
| 6 | Bring perpetrators to justice and reduce re- offending | Increase sanction detections Includes Restorative Justice, Cautions | 2012-13 2230 55.4% | Proxy measure | Current performance good by national standards | | |
| | | Increase number of sanction detections resulting in a charge | 2012-13 45.9% | Proxy Measure | | | |
| | | Increase number of successful prosecutions | 2012-13 1256 74% | | Performance below national average | | |
| | | Reduce DSV re-offending | | | Awaiting baseline | | |
| 7 | Reduce sexual violence offences | Monitor numbers of serious sexual offences ie rape and sexual assault | No baseline for 12- 13 due to changes in definition | Monitor only for the time being | Reporting level very low so reduction may not be a positive outcome | | |