

accountability, transparency, involvement

# 10 questions to ask if you are scrutinising domestic violence

A guide for local authority overview and scrutiny officers and councillors

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#### How to use this guide

This guide has been funded by the Local Government Association, and has been published alongside a Policy Briefing on the same subject. The Policy Briefing sets out the major recent changes in how policy is developed and delivered on domestic abuse at national and local level. This guide translates that into a practical focus on the key matters which scrutiny committees could consider, and questions they might ask in order to investigate more fully exactly what impact local services have.

#### Why scrutinise domestic violence? The value that scrutiny can add

Domestic violence is a complex issue. A large number of partners are involved, which jointly and separately commission a wide range of services from providers – services including advocacy for victims, more general victim support, refuge provision, and support and assistance relating to housing, education and general healthcare (and mental health).

The inherent complexity of the subject matter, and the fact that it cuts across many different conventional policy areas, makes it a topic where scrutiny can add real value. Scrutiny can identify gaps in provision or poor links in cross-partnership relationships – it can attempt to identify and resolve conflicting priorities being worked on by different bodies.

Scrutiny can give a voice to victims. Although doing so is challenging because of the vulnerable position that many victims will be in, some councils have managed to work with local groups to secure the testimonies of victims – and of perpetrators.

Scrutiny can also serve to highlight the issue of domestic violence within councils, and within partnerships. Central funding for domestic violence has been cut drastically in recent years, reflecting cuts to a range of services across the public sector. The move to localised commissioning of victims' services (by Police and Crime Commissioners) presents an opportunity to join up delivery across wider geographical areas, recognising that many victims do not access services in their own authority area. But this requires political commitment and a shared understanding of what's important, what works and what doesn't. Unpicking these difficult questions in something with which scrutiny can assist.

### Things you will need to know in order to ask the questions

- Whether or not there is a Violence Against Women and Girls (VAWG) strategy and how it was developed. Knowing this will be critical to developing an understanding of what local priorities are, and who is responsible for tackling them.
- What level of service provision is in the area and the types of services that they offer (for example, refuge accommodation, outreach services, floating support, etc).
- What the commissioning arrangements are for domestic violence services in the area. From October 2014, commissioning responsibilities for victims' services pass from the Ministry of Justice to Police and Crime Commissioners. Alongside this change, many councils are rethinking the way that they commission services such as refuges – particularly in the context of the availability of civil orders,
- In a more general sense, where the money comes from and where it goes.
   Commissioning arrangements will be an important element of this but there will be wider funding issues which will need to be mapped. This is particular issue when as is the case in many areas many local domestic violence services access funding from a wide variety of different sources.
- Who the key partners are in the local Multi-Agency Risk Assessment Conference (MARAC). Understanding who the key players are in dealing with domestic abuse at an operational level will help to identify which of those partners should be invited to give evidence. Care will also need to be taken to assess how and whether partners involved in the MARAC also engage together on cases which are not regarded as "high risk";
- Understanding the demographics of both victims and perpetrators. Getting an accurate picture early on of the age, ethnicity, social background and broader needs of victims (over time, if possible) will be useful. Importantly, this needs to take two forms the demographics of those, wherever they live, who use local services, and the demographics of those local residents who use all domestic violence services, including those which are out-of-area. In this context it is important to recognise that out-of-area usage is likely to be significant 70% of referrals to refuge services in England are from local authority areas outside of the one in which the service is located. Demographics have a profound impact on how services are provided (they affect, for example, the placement of IDVAs). Demographics can also change over time, meaning that services designed to meet a particular need at one point (and specified through commissioning arrangements) may not be appropriate three or five years later. Third sector organisations are likely to have a significant body of intelligence on these demographic issues to hand;
- Use this information to diagnose the issues. Having a proper understanding of the strength and weaknesses of the services being provided will help to direct questioning. For exactly, this will help to understand if partners are spending money, or providing support, in the wrong way.

# Jargon buster

Many of the words and phrases below are explained in more detail in our Policy Briefing on this subject.

Co-ordinated Action Against Domestic Abuse (CAADA)	National charity focusing on high-risk victims of domestic abuse. Manage a national development programme for MARACs (see below)
Civil order	An order made in the civil courts. A breach of such an order can be a criminal offence.
Domestic Violence Prevention Order (DVPO)	An order applied for by the police in a magistrate's court, which imposes conditions, breach of risk can result in arrest and imprisonment.
Independent Domestic Violence Advocate / Adviser (IDVA)	An individual whose job it is to provide support and advice to victims of domestic violence, and to liaise with other professionals, acting as the victim's advocate in doing so.
Independent Sexual Violence Advocate / Adviser (ISVA)	An individual providing a similar service to that of an IDVA, to those who have been victims of sexual assaults
Joint Health and Wellbeing Strategy (JHWS)	A document defining the priorities of a range of partners (including councils) in relation to health
Joint Strategic Needs Assessment (JSNA)	An assessment of local need which underpins the drafting of the JHWS
Multi-Agency Response Risk Assessment Conference (MARAC)	A regular meeting of representatives of a number of agencies, often but not always chaired by the police, where high-risk victims are discussed and plans put in place to ensure their safety. Discussions are one-off – MARACs have no case-management function
National Service	Women's Aid-drafted standards which help to quality

Standards for Domestic and Sexual Violence (NSSDSV)	assure services, particularly for use in commissioning
Non-molestation order	Civil orders designed to prohibit a person from abusing or harassing a victim. They can also be applied to children under the age of 18.
Occupation order	Civil orders giving a victim exclusive control over a house and preventing a perpetrator from accessing it.
Prevention	A risk-based approach adopted nationwide for tackling domestic violence, with three stages – primary prevention, which is about education within the general population, and secondary and tertiary prevention, which relates to individual cases where a threat of violence or abuse exists.
RESPECT	A UK membership organisation working with perpetrators, male victims and children
Specialist Domestic Violence Court	A system of specialist courts established to improve the experience of the criminal justice system for victims and to increase the prospects of conviction. Usually this involves fast-tracking cases and having them dealt with by specially trained lawyers and judges
Specialist domestic violence services	Generally, services providing refuge-based services (ie services in a residential environment, in a place of safety) and outreach services. These might encompass resettlement, counsellingdrop-in centres, support groups and advocates who can lead victims through the criminal justice system. A third of local authorities provide no such specialist services.
Target hardening	Taking action to make a home more secure. Usually undertaken when a victim has been granted an occupation order, and needs additional security in order to protect against a perpetrator who knows where she is.

Violence Against Women and Girls (VAWG)	The general terminology used by the Government and others in strategies and action plans, of which domestic violence forms part, but which also incorporates issues such as FGM and "honour"-based violence
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#### Who is involved?

The right people need to be asked the right questions in order for scrutiny's input to add value. The potential scope of a review on domestic abuse is very broad. As we point out in our Policy Briefing on this subject, this needs to be borne in mind when planning reviews, because scrutiny practitioners will need to target work at those areas where they can have the most impact.

It is unlikely that resources will exist to conduct reviews into domestic abuse which look in detail at every aspect of the subject. In our Policy Briefing we set out a list which will provide an idea of the range of people who are involved, and who – depending on the detailed subject matter of the review – could be approached to give evidence.

# The ten questions

# **Question 1**

• What sort of needs assessment underpins our action on domestic violence?

The foundation of work on domestic violence should be the understanding of the needs are of women and children who need to be safe. This is particularly important as more services are commissioned rather than provided directly, and as funding cuts compel councils and their partners to think differently about what services are necessary. It is important that this understanding incorporates a recognition that those women and children who use its services may not (and in the case of refuge provision, are likely to be not) local residents. In some cases, councils will need to co-operate with other areas to move victims out of their own area for their own safety.

Information on the prevalence of domestic violence – nationally and locally – is not the same as information on need. A proper assessment of need is based on the aspirations of victims and others who are personally affected by domestic abuse, rather than metrics about volume, throughput and prevalence. This suggests that need will be assessed as a matter of narrative – stories about successful recovery, and of victims being able to take control of their lives, with support. This narrative will often reflect the fact that the needs of victims will change over time. Work will then need to be carried out to translate this need into actions which can be measured and delivered by professionals. However, this approach recognises that need is a personal issue, and that in an operational sense, individual cases will require individual responses.

### Supplementary questions

- How do you engage with victims to understand what their needs are?
- How are the needs of marginalised groups (BME women, LGBT communities) recognised and met (whether or not through specialist domestic violence services)?
- Do decision-makers have a proper understanding of how need translates into action?
- Do partners share a common view of what is important to victims in terms of need?
- Does the needs assessment take account of "invisible" victims (those who do not regularly, or ever, come into contact with the police or A&E, or other crisis services)?

# Question 2

• Do we understand the impact that current services have on the lives of those affected by domestic violence?

Commissioners and service providers need to understand how the money they invest in tackling domestic abuse has an impact. This is particularly important given the large number of partners involved, and the wide range of public services affected.

Some of this evidence can be provided by research carried out at national level. CAADA, for

example, frequently address the issue in the context of their formal support role for IDVAs and MARACs, and Women's Aid carries out an annual survey of domestic violence services across England. The Home Office has also carried out its own research studies. Our Policy Briefing on domestic abuse engages with this national body of research.

Other information will be available locally. Individually and together, partners should know and understand how what they do affects victims, perpetrators, and other affected by domestic violence. This information may be collected as part of a standalone domestic violence or violence against women and girls (VAWG) strategy or it might be integrated within the performance management arrangements for a range of other services – or both approaches might be taken. It is particularly important that partners understand the wider impacts that domestic abuse, and efforts to tackle it, have on services such as the NHS, children's services, housing, education and so on – recognising that tackling domestic abuse is about more than crisis support and/or the criminal justice response to individual instances of abuse.

### Supplementary questions

- Do we have a clear picture of "what works", both locally and nationally?
- How do we benchmark success against others, and how do partners have the confidence that there is a consistent and high quality approach to detecting and tackling domestic violence?
- Have cost-benefit analyses been carried out on interventions?
- Do these analyses, where they have been carried out, take account of the broader social return on investment, and the principles of social value?
- How does this understanding get fed back into the decision-making process?
- Does our work engage with the national service standards developed for domestic violence services by Women's Aid?

### **Question 3**

• What is our provision for people once they are in a place of safety, and how are people supported in safety?

The principle of tertiary prevention (ie, intervention when there is an immediate or significant threat of violence) requires that partners work together to ensure that victims are able to access a place of safety, and that they are subsequently supported to recover from abuse in a supportive environment. Even after a person has been removed from immediate danger, the threat of harm often remains, requiring further work and intervention. Specialist domestic violence services such as refuges and resettlement services will form part of this, as will psychological and practical support – which will often (particularly for high-risk individuals) be led by IDVAs. Some of this work will be led by MARACs (see below).

### Supplementary questions

- Is there a clear pathway (based on risk assessment and the needs of the victim) for victims? How does referral operate?
- To what extent does such needs analysis take account of victims' particular circumstances, such as being part of a BME group or from the LGBT community, which might require specialist support?
- How are medium and low risk situations identified and appropriately managed to ensure that victims can access a place of safety, and be supported to remain safe, even where tertiary prevention measures such as a MARAC are not invoked?
- Is there a similar pathway for how perpetrators will be addressed both immediately following an intervention and in the long term, whether or not criminal justice action is taken?
- Do these pathways take account of the different personal circumstances, and expectations, of victims?
- Do systems exist to support victims as they make reports to the police, and then throughout the criminal justice process?
- What cross-border arrangements are in place to recognise the fact that many of those using our services are from out-of-area (and vice versa)?
- What other support arrangements could be put in place which might make the lives of victims and their families easier post-crisis?

# **Question 4**

• How are perpetrators, and potential perpetrators, addressed in the system at present?

Systems for tackling domestic violence rest on different levels of intervention or prevention based on different levels of need, based on risk. Primary prevention is designed to engage with the population at large (some of whom will be potential perpetrators). This engagement happens mainly through the education system, and is designed to change attitudes to domestic abuse. In the case of secondary and tertiary prevention, perpetrators will be addressed through the criminal justice system, including the probation service. This question is aimed at exploring the extent to which partners are linked up on this activity.

This question is also aimed at ensuring that work involving perpetrators is not inappropriate, in the context of the wider approach to domestic violence. Where a power imbalance exists in a relationship, conventional relationship support – mediation, couples' counselling, and so on – will be inappropriate and may entrench abuse. Professionals will need to recognise where conventional approaches to managing relationship breakdown are not appropriate where domestic abuse is suspected.

### Supplementary questions

• Are primary prevention activities carried out, which seek to engage potential perpetrators through the education system?

- How are schools involved in primary prevention activities, and what is head teachers' awareness of the issues and the need to take action?
- Do we know how effective these interventions are in changing attitudes of young people to domestic abuse, and in reducing its future prevalence? Is there an evaluation system in place?
- Do partners talk to each other about identifying perpetrators against whom action has previously been taken, to monitor their future behaviour with the same, or a different, partner?

# **Question 5**

• How do we provide specialist support for children and young people affected by domestic violence, whether as victims themselves or as witnesses?

Children and young people are disproportionately affected by domestic violence. They are affected both as witnesses to abuse which might be directed at a relative, as victims of the emotional damage this causes, and as direct victims of domestic abuse themselves (ie as victims of teenager relationship abuse, or TRA. Interventions need to be planned to take account of the fact that, where children are involved, their best interests will be paramount. As such, high level strategies will need to emphasise the need for close joint working between the police, other first responders, commissioners and local authority children's services departments. Of particular importance is the need for long-term monitoring of families where domestic abuse is a risk, rather that stop-start interventions in response to crises, which can be particularly traumatic where young people are involved.

### Supplementary questions

- What abuse-prevention strategies are being implemented across the children's sector?
- What services are available to provide 'early intervention' available in the area for children and young people (aged 0- 19)?
- What policies and procedures exist within councils' children's services departments, and their partners, to identify domestic abuse and to deal with disclosures of abuse? What work has been carried out with staff to ensure that they understand what is expected of them? (e.g. Police, educators, health professionals, youth and recreation services).
- How and when do council children's services departments become involved with cases where there is domestic violence? When would the council involve other partners?
- What mechanisms exist to allow children and young people to share their views at different intervals and have these considered?
- How are children's general physical and mental health & education, including negative impacts from the domestic abuse (whether this is teenage relationship abuse they have experienced themselves or abuse of a family member they have witnessed), being managed and supported?
- What specifically-designed therapeutic support is made available to children and young people and how accessible are they?
- Is intelligence about the dangers posed by perpetrators communicated effectively to the

family courts in relation to child contact arrangements?

# **Question 6**

• How do we understand and act on the likelihood that victims of domestic violence are more likely to be prone to substance abuse, and more likely to suffer from mental health problems?

Called the "toxic trio", the links between domestic abuse, substance abuse and mental health problems are well documented – we go into the links in more depth in our Policy Briefing. This question is aimed at giving members the assurance that these links are recognised by decision-makers.

# Supplementary questions

- Does risk assessment take account of victims with multiple, complex needs?
- How are the needs of young people who are affected by domestic violence taken into account when considering potential mental health impacts?
- Do people with these complex needs benefit from particularly intensive intervention and support from an IDVA, and from specialist support services?
- Do the JSNA and JHWS take account of these needs?

# Question 7

• How are individual victims, or likely victims, risk-assessed? How do we know when additional interventions are necessary? How can this be demonstrated, and how can we be sure that risk recognises what victims' needs are?

While scrutiny cannot look at individual cases, or how caseloads are managed at an operational level, councillors can examine the underlying framework of risk management. Effective risk management is central to combating domestic abuse, and the police in particular have been criticised recently for ineffectiveness and inconsistency in how they use their own risk management framework. As such, members need to be able to ask questions to give them the confidence that risk management is well developed, and that individuals understand that the process is more than a tick-box exercise. Risk management must incorporate a proper assessment of the needs of individual victims – recognising that individual victims' needs are likely to be very different depending on their circumstances. A risk management framework which does not take account of this is likely to be ineffective.

### Supplementary questions

• Are partners and commissioners confident that those on the front line (police officers, front-line council staff such as social workers, GPs etc) have the capacity and skills to detect and respond effectively to domestic violence?

- How do partners (individually, and/or through the CSP) monitor and assess how risk is managed and addressed?
- How does the body overseeing the MARAC (see below) keep track of its workload to
  ensure that cases are escalated to it in line with the principles of
  primary/secondary/tertiary prevention?

# **Question 8**

• How do we know that the MARAC in this area is working well?

The organisation Co-ordinated Action Against Domestic Abuse (CAADA) is funded by Government to provide support to MARACs. This support extends to self-evaluation and improvement, and MARAC Development Officers exist to evaluate MARACs' performance and to benchmark them against MARACs in other areas. The Development Officer, and the organisations represented on a MARAC, will have information to hand about MARAC performance which can be used to make judgments about the impact that the MARAC is making more generally.

In a strategic sense, MARACs need to report to a more senior partnership body (which might be a Community Safety Partnership) which is empowered to take responsibility for its development and improvement. It is important that MARACs are able to be overseen in this way, because they are not in themselves "standing" bodies with a case management function, but ad hoc conferences convened to consider individual operational cases.

### Supplementary questions

- Who makes strategic decisions about the MARAC, and who is driving its work forward?
- Do all partners regularly attend the MARAC? Are there frequent absentees?
- Does the MARAC benefit from administrative support?
- Does the MARAC make use of CAADA's Insights service, and other forms of benchmarking, to address its performance and its potential to improve?

# **Question 9**

• To what extent has the use of civil orders changed the way that domestic abuse is dealt with operationally, and how it is commissioned?

There is contention about the use of civil orders – specifically, Domestic Violence Prevention Orders (DVPOs), which are used by the police, and occupation orders and non-molestation orders, which can be applied for directly by victims. Their use can be seen as encouraging victims to stay within their own homes, but it has been criticised as not accounting for the fact that many will still need the support that only a refuge can provide – and that there are risks associated with victims staying in a place where perpetrators know where they are. The increased use of civil orders in recent years has been one of the most significant ways in which

local areas have changed their approach to domestic abuse, and this question is designed to investigate how councils have considered how this change in approach has impacted on needs in a strategic sense, and how the needs of individual victims is assessed at an operational level (at a MARAC or by an IDVA service). This links in to the earlier question about supporting people in safety.

# Supplementary questions

- Are civil orders seen as an alternative, or a supplement, to existing interventions? For example, are they seen as a way to reduce the need for refuge provision?
- How has the use of civil orders (including DVPOs) been integrated into the way that partners assess risk?
- How are the needs of those who are ineligible for legal aid managed in the context of the increased use of these remedies?

# **Question 10**

• Is there enough resilience in the domestic violence service in the area to withstand current budgetary pressures? What are the most appropriate future funding arrangements between commissioners and providers?

The number of IDVAs nationwide is still below the optimum level, and the numbers across the country are dropping. While there is 100% MARAC coverage, the ability of the necessary partners to engage with MARACs is variable. Given the importance of multi-agency working, funding problems experienced by one partner can have a knock-on impact on the whole area. This question is aimed at ensuring that sustainable plans are in place for the future, which recognise this risk and can act on it. This relates to the partnership's approach to strategic commissioning, how strategies owned by individual partners link up on the ground, and how providers are monitored and supported to deliver. It relates back to earlier questions on need and delivery.

# Supplementary questions

- What is the funding situation now for those services covered by the VAWG/domestic abuse strategy (if such a strategy exists)?
- How does this compare with the situation two years ago?
- How does this compare with the projected situation two years hence?
- What steps are being taken to investigate and pursue joint commissioning opportunities, particularly with Police and Crime Commissioners?
- How (if at all) has the funding situation impacted on the IDVA service, and by extension on the ability of the MARAC to effectively assess risk and take action to tackle individual cases?

## **More information**

CfPS has produced a policy briefing on domestic violence which can be accessed at <u>www.cfps.org.uk/policy-and-skills-briefings</u>

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