

Report to: STRATEGIC COMMISSIONING BOARD

Date: 25 August 2021

Executive Member: Cllr Eleanor Wills – Executive Member Adult Social Care and Population Health

Reporting Officer: Jeanelle de Gruchy, Director of Population Health
Emma Varnam, Assistant Director of Operations and Neighbourhoods

Subject: DOMESTIC ABUSE ACT FUNDING PROPOSAL

Report Summary: This report sets out the commissioning intentions around domestic abuse services in Tameside in light of new funding available this year.

TMBC has been awarded a further £547,627 in grant funding to meet new duties under the Domestic Abuse Act 2021. This funding must be spent during 2021/22 on ‘support within safe accommodation’ for victims of domestic abuse and their children and expenditure related with complying with the new duties.

There was no advance notification of the amount the council was due to receive before this financial year and the funding was released under the stipulation that the money would be spent following the statutory domestic abuse needs assessment. Therefore, this funding was not included in the 21/22 budget. This funding is recurrent and the grant determination for future years will follow the annual Spending Review.

As a result, TMBC has £1,274,445 available to spend on domestic abuse in this financial year (2021/22). Of this, £656,818 is already committed to providing our core commissioned offer, support in safe accommodation and outreach services.

We propose the remaining £617,627 is spent meeting gaps highlighted in the statutory needs assessment. Primarily:

- Better availability of support within Safe Accommodation
- Workforce development, training and practice improvement
- Developing a local perpetrator response
- Piloting innovative approaches with Children and Young People that use violence
- Outreach services in the community and health settings for victim-survivors of Domestic Abuse
- System wide data improvement project to ensure we can discharge our duties under the Domestic Abuse Act 2021

There will be a further spending proposal once the grant amount for 2022/23 is determined pending the Spending Review in Autumn 2021.

Recommendations: That Strategic Commissioning Board be recommended to approve domestic abuse spending in 2021/22 as follows:

Jointly commissioned Bridges contract	£	506,818
Domestic Abuse Act grant funding (safe accommodation only)	£	547,627

GMCA funding for Domestic Abuse roles	£	70,000
Covid-19 funds	£	30,000
Population Health and Children's Services CHIDVA funds	£	120,000
Total 2021/22 funding for Domestic Abuse	£	1,274,445
<i>Funding committed 2021/22 to date</i>		
Bridges contract - outreach	£	335,090
Bridges contract - safe accommodation duty	£	291,728
Covid-19 additional IDVA	£	30,000
Total 2021/22 committed for Domestic Abuse	£	656,818
Total 2021/22 funds still available	£	617,627
<i>Proposed further spend 2021/22</i>		
Support in safe accommodation	£	255,899
Domestic Abuse transformation activity	£	291,728
GMCA funded IDVA posts	£	70,000
Total 2021/22 proposed further spend for Domestic Abuse	£	617,627
Total spend on Domestic Abuse 2021/22 if permission granted	£	1,274,445

Financial Implications:

(Authorised by the statutory Section 151 Officer & Chief Finance Officer)

Budget Allocation (if Investment Decision)	Annual Budget £1.3m
CCG or TMBC Budget Allocation	Council
Integrated Commissioning Fund Section – S75, Aligned, In-Collaboration	Section 75
Decision Body – SCB, Executive Cabinet, CCG Governing Body	SCB
Value For Money Implications – e.g. Savings Deliverable, Expenditure Avoidance, Benchmark Comparisons	
<p>The financial implications in this report is to move resources within community safety (opps and neighbourhood) and pool within population health, whilst also being asked to commit to a further £617k of cost as part of the Domestic Abuse Programme. This additional cost is matched via the additional grant income outlined in the MOU. Of this, £256k is restricted as part of the Domestic Abuse Act to provide Enhanced sanctuary scheme and Dispersed accommodation support offer. There is a risk that these in particular go over the 6 months remaining in 21/22 and options may need to be considered to carry forward to 22/23. Not agreeing to support would avoid costs of £617k, but would mean TMBC fail its obligations as part of the Domestic Abuse Bill and Grant funding may be withdrawn.</p>	
Additional Comments	
<p>TMBC have been awarded a further £547,627 in grant funding to meet new duties under the Domestic Abuse Act 2021 for safe accommodation and must be spent in 2021/22. This is in</p>	

addition to recurrent funding in place, taking the total resource to £1.3m to meet the Domestic Abuse bill. STAR have been involved and contract plans and proposals are outlined in section 3.2 to support this programme.

**Legal Implications:
(Authorised by the
Borough Solicitor)**

The Domestic Abuse Act 2021 covers a wide range of issues with the aim of transforming the current response to domestic abuse. Key facts can be found here: [Domestic Abuse Act 2021: overarching factsheet - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/92421/domestic-abuse-act-2021-overarching-factsheet.pdf) The Act establishes a statutory definition of domestic abuse, emphasising that domestic abuse is not just physical violence, but can also be emotional, controlling or coercive, and economic abuse.

The act also places a duty on local authorities in England to provide accommodation based support to victims of domestic abuse and their children in refuges and other safe accommodation.

The project officers must ensure that the advice from STaR as set out in the main body of the report is complied with to ensure that the procurement processes are compliant both in terms of legislation and internal procedures and Standing Orders.

There are some significant obligations placed on the Council and it would be useful to ensure that members generally have access to regular briefings and access to any frontline training as appropriate. Additionally future reports will be required in relation to member oversight, performance monitoring and allocation of budget to address priorities particularly as the act requires that the Council produces an annual report. It will be particularly key for integrated partnership working as evidence shows that more than 50% of abuse victims make their first report to health workers.

How do proposals align with Health & Wellbeing Strategy?

The proposals align with the Starting Well, Living Well and Developing Well programmes for action as the services offered are inclusive of all ages and groups across Tameside

How do proposals align with Locality Plan?

The service is consistent with the following priority transformation programmes:

- Enabling self-care
- Locality-based services

How do proposals align with the Commissioning Strategy?

The service contributes to the Commissioning Strategy by:

- Supporting our most vulnerable residents
- Empowering citizens and communities
- Commission for the 'whole person'

Recommendations / views of the Health and Care Advisory Group:

n/a

Public and Patient Implications:

Part of this proposal is to upskill frontline staff across the police, homelessness, social care and health sectors, which were identified in the recent domestic abuse needs assessment. This will improve the identification of domestic abuse, and therefore the services that victim-survivors in Tameside receive. Additionally, it will provide additional resources to better meet the needs of victim-survivors in Tameside including allowing victim-survivors and their children to

stay safe in their homes and have a specialist accommodation offer that is accessible for male victims, those with more complex needs, those that are not suitable for refuge and victim-survivors who have larger families.

Quality Implications:

Tameside Metropolitan Borough Council is subject to the duty of Best Value under the Local Government Act 1999, which requires it to achieve continuous improvement in the delivery of its functions, having regard to a combination of economy, efficiency and effectiveness

How do the proposals help to reduce health inequalities?

Evidence suggests that certain groups are disproportionately affected by domestic abuse such as women and children, which is directly addressed in some of the proposed areas of work. This will help to tackle the inequalities that women and children face around domestic abuse.

What are the Equality and Diversity implications?

The proposal will not affect protected characteristic group(s) within the Equality Act.

The commissioned domestic abuse service is available to Adults regardless of ethnicity, gender, sexual orientation, religious belief, gender re-assignment, pregnancy/maternity, and marriage/ civil and partnership.

What are the safeguarding implications?

This will support the multi-agency approach to managing risk around domestic abuse, enhancing our safeguarding approach by equipping staff with specialist training on identifying domestic abuse and practical support for working with perpetrators of domestic abuse.

What are the Information Governance implications? Has a privacy impact assessment been conducted?

There are no information governance implications within this report therefore a privacy impact assessment has not been carried out.

N/A

Risk Management:

The purchasers will work closely with all external providers to manage and minimise any risk of provider failure consistent with the provider's contingency plan

Access to Information:

The background papers relating to this report can be inspected by contacting Samantha Jury-Dada, Strategic Domestic Abuse Manager



Telephone: 07968473106



e-mail: Samantha.jury-dada@tameside.gov.uk

1. INTRODUCTION

- 1.1 The Domestic Abuse Act 2021 (Domestic Abuse Act) has resulted in new duties for local authorities. This includes establishing a local Domestic Abuse partnership board, a statutory duty to conduct a domestic abuse needs assessment and new duties to provide support in safe accommodation for victims of domestic abuse and their children.
- 1.2 TMBC was awarded £547,627 in grant funding in April 2021 to meet our new duties according to the new Act.
- 1.3 This funding is recurrent and future grant determinations decided in the Spending Review each year. As soon as the Spending Review is announced in 2021, there will be a report for 22/23 spend on Domestic Abuse presented to the Strategic Commissioning Board.
- 1.4 In April 2021 TMBC signed a memorandum of understanding on how this additional funding would be spent, as an uplift of funding to support victims of domestic abuse in Tameside.
- 1.5 It was stipulated that this funding should be allocated after a local statutory domestic abuse needs assessment had taken place. Guidance on how to conduct this was released in April 2021. Following the release of the Domestic Abuse needs assessment guidance, TMBC ran a tender exercise for an external Domestic Abuse Needs Assessment and the domestic abuse charity AVA (Against violence and abuse) was awarded the contract. The Domestic Abuse Act needs assessment was completed in June 2021.
- 1.6 This report is seeking permission around the proposed commissioning intentions, which will enable us to spend the Domestic Abuse Act grant funding and to create a Domestic Abuse Transformation Fund to improve outcomes for victims of domestic abuse in Tameside.

2. DOMESTIC ABUSE ACT FUNDING – SUPPORT WITHIN SAFE ACCOMODATION 2021/22

- 2.1 We have received £547,627 to meet our new duties under the Domestic Abuse Act 2021.
- 2.2 Bridges is the provider of our domestic abuse services in Tameside; we have a core contract that is jointly commissioned by Community Safety, Population Health and Children's Services.
- 2.3 Through the Bridges offer and existing contract variations, we currently have £291,728 allocated in 21/22 spending for 'support within safe accommodation'. This funds the following staff in our local refuge:
 - 2x Customer Support Workers
 - 1x Senior Support Worker
 - 2x Night Workers
 - 1x Senior Child Support Worker
 - 1x Children and Young Person Worker
 - 3x CHIDVA
- 2.4 Table 1: Bridges contract, spend break down 21/22:

Bridges Commissioned provision 21/22 to date	Amount (£)
Support in safe accommodation	£291,728
Outreach offer	£335,090
Total	£626,818

- 2.5 We propose the £291,728 already allocated from TMBC existing funds to 'providing support in safe accommodation' is transferred into a new cost centre, to fund wider domestic abuse improvement activity (section 6) and that this funding is replaced using the Domestic Abuse Act grant funding (total of £547,627).
- 2.6 We propose the remaining funding from our new allocation to meet the Domestic Abuse Act duties (£255,899) is used to provide support in safe accommodation and enabling the local authority to discharge its' new duties as per the requirements of the grant determination.
- 2.7 Table 2: Funding committed and proposed (2021/22)

<i>Funding Sources for Domestic Abuse in 2021/22</i>		
Jointly commissioned Bridges contract	£	506,818
Domestic Abuse Act grant funding (safe accommodation only)	£	547,627
GMCA funding for Domestic Abuse roles	£	70,000
Covid-19 funds	£	30,000
Population Health and Children's Services CHIDVA funds	£	120,000
Total 2021/22 funding for Domestic Abuse	£	1,274,445
<i>Funding <u>committed</u> 2021/22 to date</i>		
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Bridges contract - safe accommodation duty	£	335,090
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<i><u>Proposed</u> further spend 2021/22</i>		
Support in safe accommodation	£	255,899
Domestic Abuse transformation activity	£	291,728
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- 2.8 We recommend that any remaining underspend of the Domestic Abuse Act grant funding is committed to discharging our new duties under the Domestic Abuse Act 2021.

3. OVERVIEW OF PROPOSED SPEND – DOMESTIC ABUSE COMMISSIONING INTENTIONS 2021/22

- 3.1 We propose £617,627 is committed to meeting gaps highlighted in the statutory Domestic Abuse Needs Assessment and fulfilling our new duties under the Domestic Abuse Act 2021.
- 3.2 Table 5: Proposed additional spend 2021/22 on domestic abuse:

Domestic abuse outreach and transformation		
<i>Provision</i>	<i>Amount</i>	<i>Contract type (advice from STAR)</i>
Domestic Abuse training and workforce development programme (multi-disciplinary)	£100,000	Tender – 3 quotes via the Chest
Perpetrator needs assessment and tailored approach	£20,000	Tender – 3 quotes
Pilot – interventions for children that use violence against parents and carers	£100,000	Direct contract award to TLC (2/3 Home Office funded)
Working with perpetrators training for CSC and ASC frontline staff	£15,000	Tender – 3 quotes
Domestic abuse support uplift for Bridges (only if increased demand due to perpetrator work)	£15,000	Contract variation (Bridges, Jigsaw Support)
Target hardening pilot using new technologies to support prosecutions (2 years)	£20,000	No contract, direct purchase
A&E IDVA (12 months)	£21,000	Contract variation (Bridges, Jigsaw Support)
Medium risk IDVA (GMCA funded)	£30,000	Contract variation (Bridges, Jigsaw Support)
INS Keyworker (GMCA funded)	£40,000	Contract variation (Bridges, Jigsaw Support)
Domestic Abuse Act Funding (restricted)		
<i>Provision</i>	<i>Amount</i>	<i>Contract type</i>
Enhanced sanctuary scheme (12 months)	£110,000	Contract variation (Bridges, Jigsaw Support)
Dispersed accommodation support offer (6 months)	£100,000	Contract variation (Bridges, Jigsaw Support)
System-wide data project to support future needs assessment	£40,000	Tender – 3 quotes via the Chest
Discretionary domestic abuse fund	£6,627	Budget
Total	£617,627	

3.3 The following sections explain the commissioning approach and details of each of these proposals in detail.

4. DOMESTIC ABUSE PROPOSED SPEND 21/22 – COMMISSIONING AND PROCUREMENT OVERVIEW

4.1 The proposals within this document require commissioning and procurement activity. Therefore, we have sought advice from STAR procurement on all proposed commissioning and procurement activity. Procurement methods will align to the council's financial regulations procedures and guidance.

4.2 Bridges is currently commissioned to provide our specialist domestic abuse service, via a core contract with Jigsaw Support. This contract is in place between 1 April 2019 to 31 March 2024 and has a value of £2,694,090.

4.3 The proposed total variations within this report represents a 12.4% increase in the Bridges contract value. Alongside existing approved variations to the Bridges contract since 1st April 2019, the proposed variations in this report would bring the total contract variation to 19.8% of the total contract value, which is within the 50% variation threshold allowed within the

contract term. Advice from STAR procurement is that these variations are an acceptable level and would be managed via existing contract arrangements with our commissioning officers.

4.4 There is one proposed direct contract award within this report, which is to TLC, for the value of £100,000. This is for the programme of work for children that use violence against parents/carers. We are seeking permission for direct award rather than run a competitive procurement exercise. This is because:

- TLC already provide this intervention in 5 pilot sites in Greater Manchester
- TLC submitted the bid to the Home Office on behalf of GMCA for all perpetrator and children interventions
- TLC are the only provider for this specific intervention that we know of
- As an existing provider of this intervention, TLC will be able to provide this support without delay due to procurement exercises and project set up
- We will ensure that we are receiving value for money through outcome monitoring and contract management with commissioning officers

4.5 Within this report, there are 4 other proposals that require procurement. On the advice of STAR, we will run a competitive procurement exercise appropriate to the value of each of the contracts. All will require 3 quotes and the contracts will be managed by TMBC commissioning officers (further detail in Table 5). The four projects that will require procurement are:

- System-wide data project to support future needs assessment (£40,000)
- Domestic Abuse training and workforce development programme (multi-disciplinary) (£100,000)
- Perpetrator needs assessment and tailored approach (£20,000)
- Working with perpetrators training for CSC and ASC frontline staff (£15,000)

5. DOMESTIC ABUSE ACT FUNDING (SAFE ACCOMODATION DUTY) – ENHANCED SANCTUARY SCHEME 12 MONTHS

5.1 The majority of victim-survivors of domestic abuse do not require specialist domestic abuse accommodation, nor are they made homeless, however we have no current offer to support individuals to stay in their own homes.

5.2 We propose improving our offer for victim-survivors to enable them to stay in their own homes safely, and prevent victim-survivors becoming homeless. Victim-survivors have told us through the Domestic Abuse Needs Assessment the importance of being able to stay local, access their support networks and retain their employment.

5.3 We already have Sanctuary (Target Hardening) equipment, purchased by Community Safety in 20/21 and we are not permitted to spend the Domestic Abuse Act funds on Target Hardening devices. However, we want to create an enhanced Sanctuary Scheme offer, which provides a domestic abuse support element while making the home practically safe for victims of domestic abuse.

5.4 The Domestic Abuse Needs Assessment recommended that TMBC increases resources available so that Sanctuary measures can be deployed more quickly to support victim-survivors.

5.5 We are seeking permission to award £110,000 to Bridges for three Sanctuary Scheme workers for a 12 month period. These staff will fit the Sanctuary equipment, provide safety planning advice and signpost into other existing services. We expect with a fully staffed service, that there will be a significant number of referrals from partners such as GMP.

5.6 Following advice from STAR, the funding will be transferred to Jigsaw Support, who provide the Bridges service via a variation of the existing contract. This contract will be managed by

commissioning officers.

6. DOMESTIC ABUSE ACT FUNDING (SAFE ACCOMODATION DUTY) – DISPERSED ACCOMODATION OFFER 6 MONTHS

- 6.1 Our existing contract with Bridges has the provision for a specialist domestic abuse offer for those that are not able to use refuge, this is called 'dispersed accommodation'. This offer is suitable for male victims of domestic abuse, those with additional needs or disabilities, those with larger families and those for whom communal living in refuge is not suitable.
- 6.2 In 2019/20 there were 44 adults and 58 children that were refused refuge accommodation in Tameside. The reasons for the refusals were that; the location was too close to the perpetrator (19); there was no suitable space (35); the refuge could not manage client needs (9); Domestic abuse was not the presenting reason (5); and the individual had no recourse to public funds (2).
- 6.3 A dispersed accommodation offer based on the 'housing first' model would allow us to provide support in safe accommodation for a larger cohort of victim survivors. It would provide an offer of support within safe accommodation for the majority of those who were refused refuge in 2019/20.
- 6.4 The current provision within the core contract with Bridges allows dispersed units to be used where available. However, without the additional floating specialist domestic abuse support – this offer does not support victim-survivors appropriately and therefore this element of the contract is not being fully utilised and we are not meeting our duty to provide support within safe accommodation through this element of the contract.
- 6.5 On preliminary investigations, we estimate that up to 50 households are currently in dispersed units across Tameside that would be eligible for this support offer. We believe with an improvement in identification of domestic abuse victims as part of the workforce development work (section 8) that this number will increase.
- 6.6 We are seeking permission to award Bridges up to £100,000 for the remainder of the 2021/22 financial year to provide floating support services to victims of domestic abuse that require specialist accommodation through our dispersed offer.
- 6.7 The offer commissioned through Bridges will have parity with our refuge provision in terms of the level of support victim-survivors receive, therefore, we will be meeting our new duties to provide support in safe accommodation.
- 6.8 Following advice from STAR, the funding will be transferred to Jigsaw Support, who provide the Bridges service via a variation of the existing contract. This contract will be managed by commissioning officers.
- 6.9 Evidence of throughput, caseloads and support requirements will be reviewed and proposals for 2022/23 support will be based on levels demand for this new offer.

7. DOMESTIC ABUSE ACT FUNDING (SAFE ACCOMODATION DUTY) – DATA PROJECT

- 7.1 We have new statutory duties to conduct a needs assessment on domestic abuse. The AVA needs assessment (June 2021), identified a significant number of data recommendations. Indeed, 54% of the total recommendations were relating to data improvements that are required.
- 7.2 The Domestic Abuse Act 2021 requires us to keep up to date, relevant data and for the

Domestic Abuse Partnership Board to scrutinise that information and make decisions based on the information we collect. The council has a requirement under the new duties to review data pertaining to the needs assessment annually.

- 7.3 In order to run the domestic abuse needs assessment on an annual basis and understand the needs of our adult and child victim-survivor population we require specialist support to:
- Liaise with staff across health, social care, criminal justice and third sector providers
 - Harmonise data collection across the system
 - Create a Domestic Abuse dashboard for adult victim-survivors
 - Create a Domestic Abuse dashboard for CYP victim-survivors
 - Work with partners on the data recommendations from Domestic Abuse Needs Assessment to ensure we are compliant with our new duties
- 7.4 We are seeking permission to spend up to £40,000 on a data consultancy project to meet our new duties and ensure future compliance with the new Act.
- 7.5 Following advice from STAR, we will run a competitive tender process for this work by seeking direct quotes. We will transfer the funds to the successful applicant and the contract will be managed by commissioning officers.

8. DOMESTIC ABUSE TRANSFORMATION FUND 2021/22

- 8.1 We already have £291,728 committed in Community Safety and Population Health budgets in 21/22 as part of our core contract with Bridges to provide 'support within safe accommodation' through refuge provision.
- 8.2 TMBC received £547,627 in grant funding for new duties relating to the Domestic Abuse Act 2021, this includes a duty to provide support within safe accommodation. Therefore, we are proposing that we use the Domestic Abuse Act grant funding to offset already committed spend.
- 8.3 We are seeking permission to use the committed spend to create a Domestic Abuse Transformation fund for 21/22 which can be spent on improving the domestic abuse response in Tameside, which unlike the grant, will not be limited to 'support within safe accommodation'.
- 8.4 We are seeking permission for this cost centre to be within Population Health, with the Strategic Domestic Abuse Manager, which has been agreed by Senior Officers within Population Health and Operations and Neighbourhoods.

9. DOMESTIC ABUSE TRANSFORMATION FUND – WORKFORCE DEVELOPMENT

- 9.1 In January 2021 a workforce survey was conducted by the Strategic Domestic Abuse Manager of frontline professionals across health, social care, homelessness and criminal justice. The survey gathered feedback on:
- Attitudes and beliefs about domestic abuse
 - Training and support requirements
 - Professional responsibility on domestic abuse
 - HR and workplace practice on Domestic Abuse
- 9.2 There were gaps in professionals understanding of domestic abuse, particularly around the dynamics of domestic abuse, coercion and control and identifying primary perpetrators. It was recommended that more regular, blended (online and in-person) training is made available for frontline staff. There were particular training needs highlighted for GMP, Homelessness and Adult Social Care.

9.3 When we asked Victim-Survivors what was important to them from professionals they said; being believed; having a good understanding of violence and abuse; being provided with information of how to seek support and being clear on confidentiality and information sharing. Unfortunately, the Domestic Abuse Needs Assessment highlighted significant gaps across these areas in most frontline services.

9.4 In the Domestic Abuse Needs Assessment there were a significant number of recommendations regarding the training and upskilling of the workforce in Tameside on Domestic Abus. The following were advised in order to improve outcomes and practice on domestic abuse:

- All frontline staff to receive training on understanding race, ethnicity and identity to better understand and support a range of ethnic groups of adult and child victim-survivors
- Local practitioners should be upskilled on the impact of financial and economic abuse
- Housing and homelessness staff to receive training on how to identify victim-survivors
- Housing and homelessness staff to be trained on the MARAC process and how to engage in local safeguarding procedures
- GPs, reception staff and those who work in GP practices should be given training on identification of current and historic domestic abuse
- Training and support should be provided for triage and reception staff at A&E on how to enquire about domestic abuse
- Mental health practitioners should receive domestic abuse training to understand how victim-survivors are limited by perpetrators to receive support for mental health needs
- Adult social care workers should understand domestic abuse, including financial abuse and should be able to provide goal oriented work for these clients
- Additional training is required on the identification of victim survivors within ASC
- Professional development and training should be offered to staff in adult social care on the identification of perpetrators on domestic abuse
- Training and guidance for adult social care staff on safe and effective working with couples where there is domestic abuse and on how to manage perpetrators

9.5 We are seeking permission for a £100,000 workforce development programme on domestic abuse which is multi-disciplinary and targeted at the workforce gaps identified in the Domestic Abuse needs assessment and workforce survey 2021. The programme is ambitious, however we hope to prioritise the following:

Table 6: Priority staffing groups for workforce development activity

Service area	Roles	Staffing #
Primary Care	GP/registrars/locums	190
Housing	THA staff	10
Community Safety	Homelessness staff	10
	Offender staff	6
Children's Services	CiN and CP social workers	92
	Complex safeguarding	7
	ISCAN	8
	Early Help	107
	Early Years	28
	Youth Justice	15
Adult Social Care	Integrated Urgent Care Team	54
	Neighbourhood teams	111
	Shared Lives	5
	Mental Health workers	50
Policing	GMP officers	50
Total		743

9.6 We are seeking permission for £15,000 to commission a specialist provider to support social

work practice on working with perpetrators of domestic abuse in social work interventions, assessments and practice – as identified in the Domestic Abuse Needs assessment and workforce survey 2021. This would impact at least 400 frontline social care workers, with a plan to prioritise working with managers and identifying key areas of improvement through supervision and quality assurance activity throughout the year.

- 9.7 Following advice from STAR, we will run a competitive tender process for both programmes of work and transfer the funds to the successful applicant. The contract will be managed by commissioning officers.

10. DOMESTIC ABUSE TRANSFORMATION FUND – PERPETRATOR NEEDS ASSESSMENT AND APPROACH

- 10.1 In Tameside, we have no commissioned offer for those who perpetrate domestic abuse. The only programme of work is court mandated through probation, Building Better Relationships.

- 10.2 The 2019 Peer Review and 2021 Domestic Abuse Needs Assessment highlights that in Tameside we require a more consistent approach to managing and responding to perpetrators.

- 10.3 In the workforce survey, when frontline staff were asked what they needed in order to support victims of domestic abuse better – the most common response was having a perpetrator approach.

- 10.4 We know from data collected through our commissioned services that we have some unmet needs around perpetrators. When victim-survivors were asked what those needs were they said:

- Substance misuse
- Mental health
- Housing
- Parenting and relationships
- Wider health needs

- 10.5 However, as a system we do not collect enough information about perpetrators to make an informed and evidence-based decision on a future perpetrator approach. This was a key recommendation in the Domestic Abuse Needs Assessment.

- 10.6 We seek permission to commission a specialist provider to conduct a needs assessment on perpetrators, identify best practice and design a model for working with perpetrators in Tameside for £20,000. This will result in commissioning recommendations for 2022/23.

- 10.7 Following advice from STAR, we will run a competitive tender process for this work by seeking direct quotes and transfer the funds to the successful applicant. This contract will be managed by commissioning officers.

11. DOMESTIC ABUSE TRANSFORMATION FUND – CHILDREN THAT USE VIOLENCE TOWARDS PARENTS AND CARERS 21/22

- 11.1 We have been offered an opportunity to submit a bid to the Home Office via GMCA to pilot programmes that are targeted at children that use violence against their parent or carer.

- 11.2 There is an existing pilot in 5 boroughs in Greater Manchester run by TLC that works with young people between the ages of 10 and 16 years old. In Tameside, we have identified through our needs assessment, engagement with frontline staff in Early Help and the CHIDVA service that there is a gap in our offer for this cohort of children.

- 11.3 The proposal for Tameside is to target three cohorts of children with this programme:
- Referrals from multi-agency partners, including children that use violence against parents identified through Youth Justice police notifications
 - Children at the Edge of Care
 - Children that are looked after and are at risk of placement breakdown
- 11.4 This will align with and further enhance our already well established Early Help and specialist Edge of Care services adding real value in terms of capacity and expertise to support this cohort of children and families.
- 11.5 As of August 2 2021, we have been notified that our bid has been successful. As a result, 225 children and their families in Tameside will be supported through this project over a 12-month period. We believe this programme would be able to demonstrate in-year cost-avoidance for Children's Services as placement costs are a significant challenge for the borough, as is demand for Children's Services.
- 11.6 The Home Office will provide 2/3 match funding for the proposal, we are expected to fund the remaining 1/3. We are seeking permission to spend £100,000 on this pilot.
- 11.7 Following advice from STAR the funding will be transferred to TLC as a direct award. We are not proposing a competitive route for this work as TLC are the existing provider of this pilot in Greater Manchester, they led and submitted the bid on behalf of GMCA and are the only provider of this work. An additional benefit is that as an existing provider, they will be able to begin the work with young people and their families in Tameside quickly, which would not be the case if we were required to complete a competitive procurement exercise. We will ensure we are receiving value for money through outcome monitoring and contract management by our commissioning officers.

12. DOMESTIC ABUSE TRANSFORMATION FUND – TARGET HARDENING TRIAL 2 YEAR PILOT (2021/22 IN-YEAR SPEND)

- 12.1 The majority of domestic abuse victims supported by specialist services in Tameside continue to live in their own homes. However, we know that for many victim-survivors of abuse home is not a safe place.
- 12.2 Our Domestic Abuse Needs assessment identified that we should increase the use of Sanctuary (target hardening) devices in order to improve our offer for victim-survivors that do not become homeless or access specialist support services such as refuge.
- 12.3 Community Safety has invested in a number of devices that enable target hardening, which are located within the Women and Families centre and the CSU. This includes:
- Window alarms
 - Door wedge alarms
 - Key ring alarms
 - Door chimes
 - Pink panic alarms
 - Light timers
 - Spy holes
 - Padlocks
 - Dome CCTV cameras
 - Security lights
 - Letterbox restrictors
- 12.4 Innovative approaches to Sanctuary have been trialled in local authorities elsewhere, with impressive outcomes for victim-survivors and criminal justice agencies. For example, Smart

Water has been used in South Yorkshire, West Mercia and Sheffield. The forensic marking system was used to protect victims of domestic abuse by linking perpetrators to the scene of the crime – in South Yorkshire they found a 69% reduction in reported incidents and a 94% reduction in harm from those incidents reported.

12.5 We seek permission to create a £20,000 fund to trial innovative technology in our Sanctuary offer to improve criminal justice outcomes, protect victim-survivors from further abuse and hold perpetrators accountable for their actions.

12.6 This funding is capital and will be used to purchase equipment via the established routes.

13. DOMESTIC ABUSE TRANSFORMATION FUND – A&E IDVA 12 MONTHS

13.1 In the SafeLives report 'Getting it right first time', 23% of victims at high risk of harm and 1 in 10 victims at medium-risk went to Accident and Emergency (A&E). AVA estimate that there are nearly 20,000 attendances at Tameside A&E by victims of domestic abuse, and there is no current data to suggest that these victim-survivors are being identified and supported appropriately.

13.2 In Tameside, our suicide rate among the female population is higher than 2/3 of the statistical neighbours and national average. SafeLives research that victims that attended A&E are more likely to have been suicidal or to have self-harmed and a pilot of an A&E IDVA at St Mary's in Manchester found that the victims they supported through this intervention had more complex needs.

13.3 In the Tameside Domestic Abuse Needs Assessment the lack of investment in domestic abuse interventions in health settings was highlighted as an area of risk in the system. The report also contained testimony from two victim survivors who had felt failed by the lack of identification of their domestic abuse in A&E; one who attended A&E for serious sexual and physical violence and the other who attended A&E in a state of mental health crisis due to the domestic abuse in his relationship.

13.4 The Domestic Abuse Needs Assessment recommended that training and support should be provided for triage and reception staff at A&E on how to enquire about domestic abuse and that an A&E IDVA pilot of routine enquiry should be trialled at Tameside Emergency Department.

13.5 We seek permission to spend £21,000 of the Domestic Abuse Transformation fund on piloting an A&E IDVA for 12 months. The remaining £19,000 will be funded by the CCG.

13.6 Evidence on the success of this pilot will be used to inform our future domestic abuse commissioning and our core offer.

13.7 Following advice from STAR, the funding will be transferred to Jigsaw Support, who provide the Bridges service via a variation of the existing contract. This contract will be managed by commissioning officers.

14. DOMESTIC ABUSE TRANSFORMATION FUND – BRIDGES UPLIFT

14.1 In this report, we recommend that there are a number of programmes of work and pilots which we expect will increase the numbers of victim-survivors that we identify in Tameside and require specialist support.

14.2 The council is also running a number interventions with potential perpetrators in the homelessness service and in the substance misuse service. We anticipate that with an

increased awareness of domestic abuse, and a more targeted approach towards identifying perpetrators that we may see a rise in demand for our outreach services run by Bridges.

- 14.3 We seek permission to award up to £20,000 in uplift funding, if there is evidence to suggest that the domestic abuse transformation activity results in an unmanageable level of demand for Bridges.
- 14.4 The funding would be transferred to Jigsaw Support, who provide the Bridges service via a variation of the existing contract. This contract will be managed by commissioning officers.

15. GMCA FUNDED POSTS – 2X IDVA (12 MONTHS)

- 15.1 TMBC has been awarded £70,000 in funding from GMCA for the provision of two IDVA posts:
- INS Keyworker - £40,000
 - Medium risk IDVA - £30,000
- 15.2 50% of the funding for the INS worker was given to Community Safety in April 2021 with the remaining amount due to be transferred in September 2021.
- 15.3 The medium risk IDVA funding has been transferred to Community Safety by GMCA.
- 15.4 We seek permission to award Bridges £70,000 for these two 12 month posts, as stipulated in the grant determination from GMCA.
- 15.5 Following advice from STAR, this funding will be transferred to Jigsaw Support, who provide the Bridges service via a variation of the existing contract. This contract will be managed by commissioning officers.

16. UNDERSPEND – DISCRETIONARY FUND FOR DOMESTIC ABUSE

- 16.1 There is a current underspend of £6,627. We seek permission to use any domestic abuse underspend to create a discretionary fund to support the local authority to discharge its' duties relating to the Domestic Abuse Act 2021, including activity to support the new statutory governance around domestic abuse to have a Domestic Abuse Partnership Board.
- 16.2 We recommend that this discretionary fund is allocated to Population Health with the Strategic Domestic Abuse Manager.

17. RECOMMENDATIONS

- 17.1 As set out at the front of the report.

APPENDIX – DOMESTIC ABUSE WORKFORCE SURVEY 2021 – SUMMARY SLIDES

Summary

Attitudes and Beliefs

Attitudes about domestic abuse are on the whole positive, areas for improved understanding is regarding 'grey areas', the power dynamics of domestic abuse and coercion and control.

Key statistics:

- **Most professionals were confident in their understanding of domestic abuse and felt it was important for their role.**
- **The number of professionals in Tameside that agreed there were lots of false allegations of domestic abuse was nearly equal to those that disagreed.** This includes 65% of the police officers that participated in the survey, who agreed or strongly agreed that there were a lot of false accusations of domestic abuse. This is a problematic myth about domestic abuse and we need to challenge these beliefs.
- **61% of participants believe that if both partners have been violent, they are both victims of domestic abuse** – this is despite our understanding of the dynamics of power and control in an abusive relationship and how violence can be exhibited by victims of abuse in retaliation.

Training

More regular, facilitated training is required to improve professionals understanding of domestic abuse.

Key statistics:

- **Only 28% of people had received recent training in the last 3 – 6 months.**
- **Half of participants had this training in person.** 36% completed an e-learning module on domestic abuse and 14% had a virtual training session
- **Most professionals felt that the training was up to date and relevant (59%).**

Summary

Practice

There needs to be better information for professionals about how to access specialist domestic abuse interventions locally – particularly around safe housing options.

Key statistics:

- **93% of professionals felt that they understood their obligations in regard to domestic abuse**
- **30% of professionals were not aware of refuge provision in Tameside or how to access it.** This was prevalent among GMP, midwifery and homelessness staff.
- Staff felt that having a **perpetrator intervention was the biggest gap** to be addressed in order to help them to support victim-survivors in Tameside

Our workplace

There is scope for better communication around HR policies, rights for victims at work and disclosures in the workplace – especially as a large number of professionals would disclose abuse to their manager.

Key statistics:

- **74% of professionals felt that domestic abuse would be handled appropriately by their employer.** An officer from GMP and a social worker in Adult Social Care did not believe that DA would be handled correctly in the workplace. Those that were unsure were from Tameside and Glossop CCG midwifery, GMP and social care.
- When asked who they would disclose abuse to if they were a victim, their Manager came second to Friends and Family.
- **Only 41% were aware of their organisations domestic abuse policy, despite all of the main employers of these professionals having one.**

Conclusion and Next Steps

Key learning:

- Attitudes about domestic abuse are on the whole positive, areas for improved understanding is regarding 'grey areas', the power dynamics of domestic abuse and coercion and control
- More regular, facilitated training is required to improve professionals understanding of domestic abuse
- There needs to be better information for professionals about how to access specialist domestic abuse interventions locally – particularly around housing options.
- There is scope for better communication around HR policies, rights for victims at work and disclosures in the workplace – especially as a large number of professionals would disclose abuse to their manager.
- The services with the most opportunity for improvement in practice are GMP, Homelessness and Adult Social Care

Next Steps:

- Report to be circulated to Steering Group
- It is recommended that Steering group members consider the findings of report with their service and workforce development leads
- Working group to be established which will include HR and practice development leads (e.g. Principle Social Workers) to create proposal for workforce development plan to go to Steering Group in September 2021

Context and methodology

The AVA team have worked hard to provide you with usable data from a range of sources:

- Published local data
- National data set
- Survivor Survey and Interviews
- Semi-structured interviews and focus groups with staff

Overarching Recommendation on data collection:

Consistent demographic data categories and additional data sources for the DA Dashboard to get a system-wide view of DA.

Key findings | Survivor feedback

- Survivors felt that there was a **shortage of housing and appropriate housing advice**
- Survivors identified **high levels of mental health need**, and yet difficulties accessing mental health support.
- Survivors reported **high rates of emotional abuse and coercive control**. In response to questioning around needs for improvement, survivors highlighted a better understanding around emotional abuse from professionals and society .
- Survivors highlighted the **impact of financial and economic abuse**, specifically the stress caused and additional hardship where debt is incurred during abuse.
- Survivors reported **higher than average rates of turning to the police** and/or criminal justice professionals for support around abuse. This is suggestive of **a high level of survivors reaching a crisis point**, and a potential lack of early intervention.
- Survivors reported the need for **better follow up and aftercare to deal with post-separation abuse**.

Key findings | Areas of good practice

Throughout the report we have highlighted local excellence in provision of services for domestic abuse victim-survivors

- Strong existing **multi-agency partnerships** – MARAC and MASH
- **Local service offers**
- **Community asset based and neighbourhood approach**
- **Attachment focused provision**
- Dedicated support for Children through the **CHIDVA service**
- Free, age appropriate, locally designed **healthy relationships and domestic abuse prevention resources** available to all schools

Key findings | Housing and homelessness

- 107/757 homelessness applications were due to DA – 48 of these individuals had children but **no records kept on the numbers of children**
- **No demographic detail available** for the residents making homelessness applications (significant data gap)
- Housing in Tameside deemed affordable but **survivors faced difficulties accessing the private rental sector**
- **No data kept on the tenancies of survivors** at point of entry (despite new duties)
- **Unsafe use of temporary accommodation** for victim survivors – no risk assessments for friends and family
- **Requirement for stringent outcome and impact monitoring of housing services going forward**

Key findings | Adult Social Care

- **Just 3 cases of domestic abuse in last return**, significantly low considering the older population, mental health needs and substance misuse needs
 - **No demographic data is reviewed locally about protected characteristics of those requiring ASC support**
 - Adult safeguarding practices should be reviewed to contribute to **leadership on suicide prevention locally**
 - Key areas for **workforce development** with staff:
 - Managing DA with couples who are still together
 - Improve understanding of service offer
 - Integrated working with ASC and other agencies
- ["Was your social worker helpful?"] "Not really, they appear to be, but you can't talk to them, they never get back you. I think the social workers only wear one hat. They do not know about housing or benefits, there's loads of work that they do but and that but they do not know about domestic abuse".*

Key findings | Health

- **Health a significant area for development in terms of identifying domestic abuse victims, signposting and referring and supporting longer term recovery.**
- There are potentially 20,000 attendances at A&E each year of victim-survivors who are currently missed
- General Practice is dealing with high levels of mental health need and yet **no routine enquiry** into domestic abuse
- 10,000 IAPT referrals are made each year for residents but **no screening for trauma or domestic abuse**
- **No demographic data collected from health on domestic abuse victim-survivors (adult and child) or perpetrators**
- **Suicide prevention strategies, action plans and KPIs should include domestic abuse** and the coroners office should be invited to be part of domestic abuse partnerships

"There is a lack of mental health support available both short and long term. I have PTSD and can not access the therapy I need in Tameside via Pennine Care/Healthy Minds so pay privately which is not an option for all."

Key findings | Police

- Despite higher than average records of recorded **crime as much as half of domestic abuse in Tameside might be unseen and uncounted**
- Survivors report **inconsistent approaches from the police** with many people channelled into a civil route rather than a criminal route (particularly if there are protected characteristics) with police rather than victims making decisions on prosecution success
- **MARAC data shows under representation in the following categories – older victims, B&ME victims, disabled victims and those with substance use issues**
- **MARAC should create better information capture and record keeping on perpetrators particularly around demographics**

Key findings | Children's Services

- Feedback on CSC is that the **non-abusive parent is often held accountable for change** and not the perpetrator
- **Demographic data** on CYP engaged in services not available
- **No data on which children are being supported with a history of DA** across Early Help services, YOT and the Family Nurse Partnership
- CYP are now legally recognised as victims in their own right therefore:
 - We will need a **dashboard on DA & CYP**
 - We need to monitor the **potential impact on social work practice** and care proceedings
 - There are consequences of **'victims protecting victims'**

"I get a lot of frustration from my clients when CSC are involved 'I feel like all these restrictions are on me, I won't have a drink, I won't go out with my friends, I won't leave my kids adults who don't have a police check' and he's walking around with nothing."
Bridges key worker interview

Key findings | Substance Misuse

- Tameside sits above both its statistical neighbours, and the national average, in relation to individuals in contact with both mental health and substance misuse services.
- Tameside sits significantly above the national average in regards to admission episodes for mental behavioural disorders due to use of alcohol.
- High levels and strong service offer hasn't resulted in high levels at MARAC
- DA Score card demonstrates completion rates but no analysis on who has completed - perpetrators or victim-survivors, there is no disaggregation on sex, age or other protected characteristics.
- Lack of local understanding on the needs of children living with parents who are accessing support for their substance

Key findings | Perpetrators

- From the data we did have regarding perpetrators, primary needs included: mental health (and the link between suicide and suicidal ideation) and substance misuse.
- There was a lack of consistent data capture on perpetrators, particularly high harm and serial perpetrators - this was of particular concern to children's services, MARAC participants and specialist services
- Early help and Midwifery safeguarding noted the younger ages of perpetration
- There is a need for workforce development and training on the identification of primary perpetrators as a key outcome to building victim and child safety

"You never really know if someone is a victim not a perpetrator. We have done work with both victim and the perpetrator in the service. We split them between workers, that is hard."

Needs assessment | Key opportunities

- Support for staff to identify domestic abuse
- Community champions as part of the preventative approach
- Campaigns and awareness raising
- Specialist health interventions
- Mental health buy-in and support
- Perpetrator approach – substance misuse and mental health
- Supporting people to be safe at home
- Support in safe accommodation

And finally...Data, a huge task ahead!