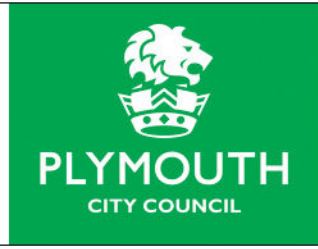


**COMMISSIONING PLAN FOR THE  
PLYMOUTH DOMESTIC ABUSE  
PARTNERSHIP 2012-2019**

People Directorate - Joint Commissioning and Adult Social Care



**Part: I**

## DOCUMENT CONTROL

Version	Date	Author	Change Ref	Pages Affected
Final	29.08.12	Kate Lattimore / Claire Hodgkins		

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CHILDREN'S TRUST BOARD
CHILDREN AND YOUNG PEOPLE'S CLINICAL COMMISSIONING GROUP

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## 1.0 EXECUTIVE SUMMARY

Domestic Abuse is a serious social problem and human rights violation. It is hugely under reported, widespread and has no boundaries, affecting anyone regardless of age, sex, culture, ethnic or religious group, gender, sexuality, disability, income or lifestyle. Domestic abuse has physical, emotional, social and economic consequences. A Home Office report published in 2010 estimated that the cost to Plymouth of domestic abuse was £49 million per annum. However, with good service provision that includes awareness raising and prevention, many people affected by domestic abuse can lead healthier and happier lives.

This commissioning plan:

- Details the prevalence of domestic abuse in Plymouth; the demographics of victims and perpetrators;
- Shows the cost to Plymouth of domestic abuse, including the cost of current service delivery;
- Maps out current services that are delivered that deal with domestic abuse;

And

- Identifies unmet need.

The Plan goes on to make the following recommendations for partners to:

- Commit to funding for a service to focus on supporting those lower risk assessed victims of domestic abuse to raise awareness and prevent escalation of need. Service to be competitively procured during 2012/13.
- Commit to providing funding for the Family Intervention Project.
- Commit to funding for a support and recovery service to work with high and medium risk assessed victims of domestic abuse and their families. Service to be competitively procured during 2012/13.
- Commit to funding the Domestic Abuse Advocacy Project for a further three years.
- Commit to funding for the community perpetrator programme. Service to be competitively procured during 2012/13.
- Contracts to be issued for 3 years with an option to extend for 3 years (it is anticipated that funding for victim support services would reduce over the life of the contract due to increased focus on early intervention and prevention).
- Commit resources to review and build upon:
  - Existing early intervention service provision within the city; this will include a refocus, where appropriate, on dealing with domestic abuse.
  - The work carried out within schools, colleges and the university to promote and educate teenagers and young people on healthy relationships.
  - The current training provision to ensure it is suitable, accessible and affordable for all relevant support providers and agencies, with a view to making recommendations for efficient improvements such as procurement and distribution of e-learning package.
- Make early links with the new Police and Crime Commissioner and the clinical commissioning leads for Health, to highlight gaps in service provision and the need for continued investment to meet the city's vision.

## 2.0 INTRODUCTION

### 2.1 Purpose

The purpose of this Commissioning Plan is to set out the requirements of service delivery necessary to combat the persistent problem of domestic abuse in Plymouth and the harm that it causes victims, their families and wider society.

Information gathered shows that although there has been a decrease in repeat victims, there continues to be a high prevalence of domestic abuse in Plymouth (27% of all violent crime in the City is domestic abuse related, compared to a national figure of 16%). This is despite local investment in preventative and support services and the commitment and work of the members of the Plymouth Domestic Abuse Partnership Board.

Combating the prevalence of domestic abuse requires ongoing investment to allow the continuation of the current victim support recovery model and community perpetrator programme, and increased investment in prevention and early intervention to meet the city's vision and strategic aims.

#### VISION

Reduce domestic abuse and provide quality victim-centred support to victims and families.

#### STRATEGIC AIMS

- Provide support and recovery for victims and their families
- Decrease domestic abuse harm through early intervention
- Decrease re-offending by perpetrators
- Increase workforce capacity to identify and respond to domestic abuse need

### 2.2 Local demographics

The results of the 2011 census are to be released in four tranches. Detailed information regarding Plymouth is currently unavailable; as such data from the 2001 census has been used to inform this Plan.

Census 2001 reported:

- Plymouth currently has a population of 256,700 (2009 Office of National Statistics (ONS) mid year estimate)
- 18.93% of the population is under 16
- Children and young people under 18 account for 22% of the population

Faith - City statistics based on national estimates and local intelligence 2009:

- Christian 68% c. 177,000
- No faith/not given 30% of population
- Muslim/Islam c. 1.7% equating to 4,500
- Hindu, Buddhist and Jewish combined less than 1%

Gender General Statistics:

- Overall 50.7% are women (reflects national figure)

Race:

- 93.4% of the city's population is White (ONS 2007)

- 6.6% are from Black and Minority Ethnic (BME) groups (ONS 2007)
- Plymouth has a rapidly rising BME population which has trebled in the last 10 years and this trend is set to continue
- The largest BME communities are Kurdish Iraqi, 3000; Polish speaking migrant workers, 2700; Indian, 2500; Chinese, 2000; Russian speaking migrant workers, 1500 and Black African, 1,000
- Seventy six languages are known to be spoken in the city, with most requested translations being for Polish, Kurdish, Chinese and Arabic

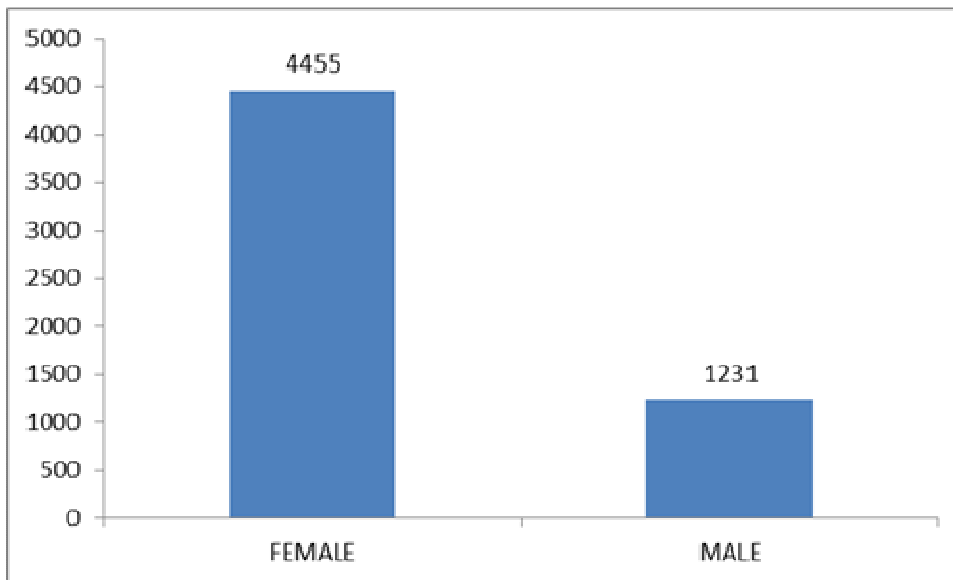
### 2.3 Local demographics and domestic abuse

The graphs below show the past 12 months crime data from the Police.

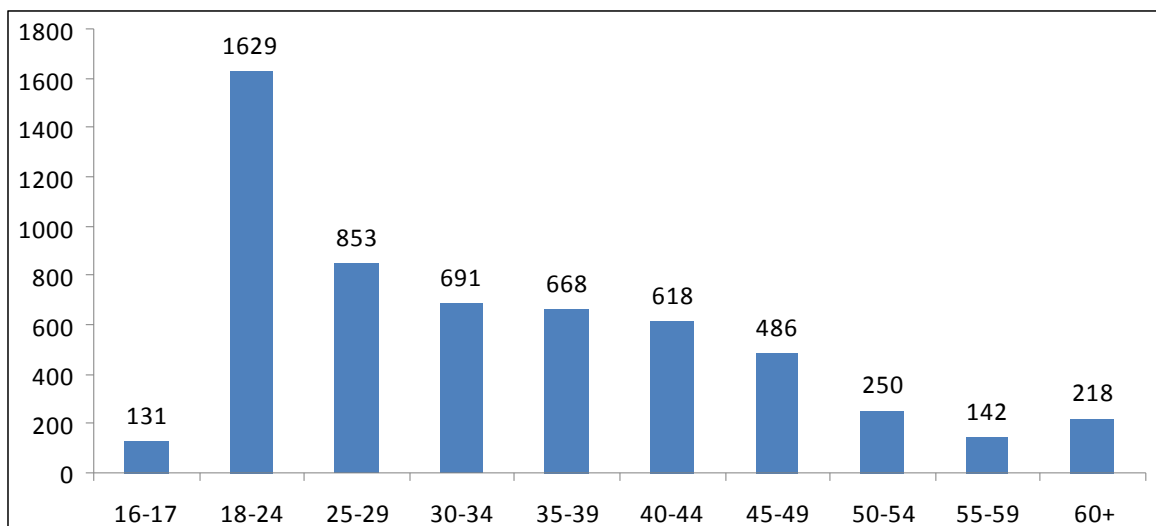
NB. The ACPO (Association of Chief Police Officers) definition of domestic abuse is violence that takes place in an intimate relationship between 2 people age 16 and over. This applies to victims and perpetrators. People under the age of 16, whether victim or perpetrator, would be classified as victim or perpetrator of violent crime.

#### Victims:

##### Sex of victims



##### Age range of victims

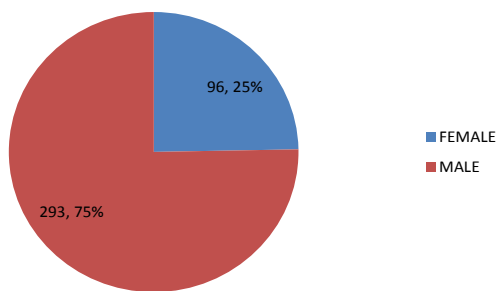


### Victim Ethnicity

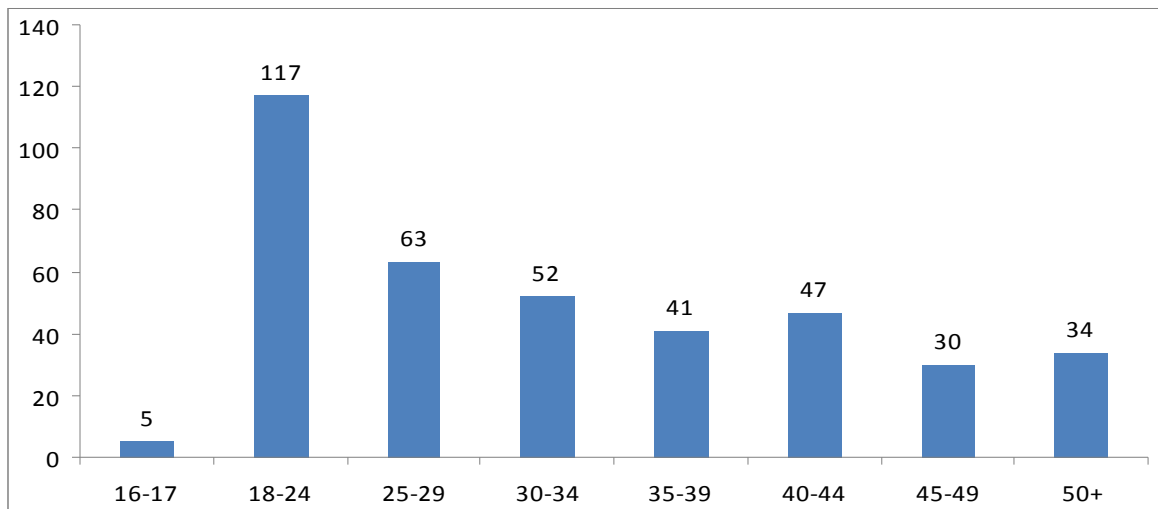
	%
AFRO-CARIBBEAN	1%
ARAB	<1%
ASIAN	<1%
DARK EUROPEAN	<1%
ORIENTAL	<1%
UNKNOWN	2%
WHITE EUROPEAN	95%

### Perpetrators:

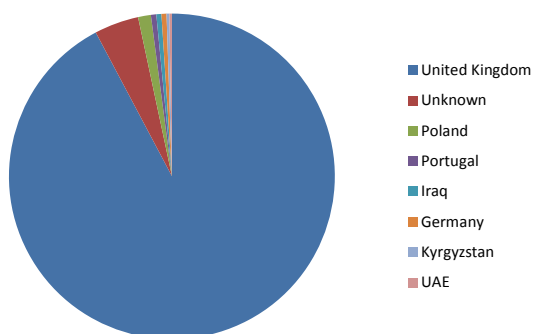
#### Sex of perpetrators



#### Age range of perpetrators



#### Nationality of perpetrators



## **2.4 Prevalence of Domestic Abuse**

### **National Context**

The British Crime Survey (BCS) indicates that domestic violence and abuse is chronically under reported, but research estimates that it:

- Accounts for 17% of all reported crime (Nicolas, Povey, Walker and Kershaw, 2005)
- Accounts for 16% of all violent crime (Home Office, 2008a)
- On average 2 women a week are killed by a male partner or former partner (Home Office, 2008a). (Community Safety Partnerships are now responsible for conducting domestic homicide reviews)
- 40% of all female homicide victims are killed by their current or ex-partner compared with 5% of male homicide victims (Povey, 2005)
- It is the largest cause of morbidity worldwide in women aged 19-44, greater than war, cancer or motor vehicle accidents (Krug et al, 2002)
- About 1 in 4 women and 1 in 6 men have been a victim of domestic violence since the age of 16, though women are more likely to suffer greater injury and be classed as chronic victims (Walby and Allen, 2004).
- 89% of those suffering 4 or more attacks are women (Walby and Allen, 2004)
- One incident of domestic violence is reported to the police every minute (Stanko, 2000)
- It is most likely to result in repeat victimisation and more likely to result in injury than any other type of crime (Home Office, 2008a)
- Abused women are at least 4 times more likely to attempt suicide than women who are not at risk, particularly if recently abused (Golding, 1999)
- Children witness about three quarters of abusive incidents. About half of the children in such families have themselves been badly hit or beaten. Sexual and emotional abuse are also more likely to happen in these families (Royal College of Psychiatrists, 2004)



## PLYMOUTH DATA

Incidence and Prevalence of domestic abuse (From April 2009 to March 2011)

	2009/10	2010/11	2011/12
Total no of crimes for the year*	1702	1752	1716
Total no of incidents for the year* (non-crimes)	6235	4052	4071
Total no of repeat victims*	Not available	2278	1788
% of incidents involving children (i.e. where they are present)*	Not available	35%	38.75%
% Domestic Related Violence with Injury †	27%	27%	27%
Brought to justice outcomes†	Not available	464	357
Those involving drugs and alcohol*	Not available	1928	1725

\* Data taken from Domestic Abuse report 2011/12 provided by the Devon and Cornwall Police

† Data taken from monthly updates provided by the Devon and Cornwall Police

- Although the data demonstrates a persistent high prevalence of domestic abuse it also shows a decrease in repeat victims.
- The British Crime Survey 2008 suggests that only 40 percent of incidents are actually reported which would nearly double the true figure.
- Crimes and incidents involving drugs and alcohol have shown a 10% reduction in numbers (-203). Despite this the recent alcohol needs assessment highlights the continued influence of alcohol as a contributing factor to domestic abuse incidents. Data shows that drugs and alcohol are a contributing factor in 1725 incidents, which equates to 30% of all incidents.
- Analysis shows that domestic related violence is particularly prevalent in areas of high multiple deprivation. Operation Encompass, a Police initiative to provide support where children have been involved in incidents of domestic abuse, operates in schools in a number of neighbourhoods, including Devonport, Stoke and Stonehouse and is to be extended City wide.
- Local demographics show that domestic abuse is increasingly affecting young people with 18-24 being the largest age group for both victims and perpetrators.
- Levels of reporting of incidents have fluctuated. Due to the nature of domestic abuse, increased reporting is viewed positively as it enhances knowledge of domestic abuse in the city.
- The high spike in incident reporting in 2009/10 is due to the drive to meet the Local Area Agreement target that included 3<sup>rd</sup> party reporting.
- Violence remains the most common crime related to domestic abuse and in particular 'other assault' (including ABH and malicious wounding) and common assault. In Plymouth between 1<sup>st</sup> April 2011 and end of March 2012, 27% of all criminal violence with injury was domestic related and 23% of all crime was domestic related. The national figures are 16% and 17% respectively.
- 44% of victims are unemployed (based on all victims where occupation recorded).
- Peak time analysis shows that domestic abuse incidents resulting in violence occur throughout the week. However violence is more likely to occur at the weekend with a higher prevalence between 6pm and midnight.

## Children and Young People

- Domestic abuse is a significant factor in relation to Child Protection issues. As at April 2011 there were 314 children with a child protection plan, 135 of which (30.41%) identify domestic violence as a major issue (Dept for Children's Services, Plymouth City Council). However, it is considered that this figure is under representative of the actual number as national data shows that up to 75% of children on child protection orders are there in part because of concerns over domestic violence in the family.
- The findings of a number of case reviews into deaths of children in Plymouth have identified domestic abuse as a significant factor.
- Police statistics, as above, show that children are present in approximately 36.5% of incidents.
- According to the Munro Report (2010), 69% of high risk adult victims of domestic abuse have children.

## 2.5 Impact of Domestic Abuse

- Women who have suffered domestic violence have approximately twice the level of usage of general medical services and between three and eight times the level of usage of mental health services. The estimated cost (including hospitals, ambulances, GPs and prescriptions) is £1.7bn per annum (Walby, S. (2008). The Cost of Domestic Violence; Women and Equality Unit; London.)
- It is estimated that the cost of treating depression in women who have experienced domestic violence is £10.3m per annum (though this figure is based on data from the early 1990s, so it is likely that the actual figure is higher) (Howarth, E., Stimpson, L., Barran, D. and Robinson, A. (2009) Safety in Numbers: A Multi-Site Evaluation of Independent Domestic Violence Advisor Services.)
- Poor outcomes related to domestic abuse include:
  - 500 women who have experienced domestic violence in the last six months commit suicide every year. Of these, just under 200 attended a hospital for domestic violence on the day they committed suicide (Walby S 2004 The Cost of Domestic Violence).
  - Chronic physical health problems such as irritable bowel syndrome, backache and headaches (Campbell, 2002).
- When added together, a substantial amount of NHS resources are spent on services for victims of violence – an estimated £1.2bn a year for physical injuries and £176m for mental health support. There is limited research in this area, but it seems likely that most of the costs are incurred responding to the physical and mental health impacts of repeat acts of victimisation. (Commissioning Services for Women and Children who have experienced violence or abuse – a guide for Health Commissioners, 2011)
- Children who are exposed to violence and maltreatment at an early age are more likely to become perpetrators of crime, including domestic abuse.
- As many as one in three divorces brought forward in the UK include reference to domestic violence, and of 2,500 families entering mediation around divorce, approximately 75% of parents indicated that domestic violence had occurred during the relationship.
- The cost of violence against women and children runs into billions of pounds. Costs include expenditure on providing public services for the victims, the lost economic output and the human and emotional cost of violence for victims. In monetary terms it costs society £23 billion per annum (Walby, 2004).

- The Home Office published a spread sheet in 2010 that estimated the costs for each local authority area of domestic abuse. Total expenditure for Plymouth including the criminal justice system, civil and legal services, social services, lost economic output, housing and refuge provision and human and emotional costs equated to £49.4 million.
- Devon and Cornwall Constabulary has undertaken analysis to identify costs associated with individual crimes and incidents. Highlighted below is the cost of relevant crime types alongside the cost to Plymouth based on the number of offences recorded. The costing is based on the number of offences recorded between April 2010 and March 2011:

<b>Crime, Disorder or Incident Type</b>	<b>Cost per offence</b>	<b>Total</b>
Rape/ Serious Sexual Assault	£31,458	£10,563,168
Serious Sexual Assault	£31,458	£6,004,658
Domestic Abuse crime	£5,000	£8,790,000
Domestic Abuse incident	£1,440	£5,794,560

## 2.6 Overview of Current Service Area

### Provision within the City

There are a number of services provided in the city for both victims and perpetrators of domestic abuse.

Statutory services, such as Health, Social Care, Housing and the Criminal Justice System, all manage the consequences of domestic abuse as well as providing, in some instances, specialist interventions. These run alongside commissioned services and voluntary sector provision.

Funding is from a variety of sources including the Home Office, charitable funds or from local commissioning activity.

The various services deal with different aspects of abuse and a summary of service provision is detailed below (not exclusive):

<b>Area of domestic abuse</b>	<b>Service</b>	<b>Provider</b>
Victim	Domestic violence unit (DVU)	Police
Perpetrator/Victim	Integrated Domestic Abuse Programme (IDAP) perpetrator programme for men under the supervision of probation and ordered by the family court. Also a women's safety worker who offers support to victims	Probation
Victim	Plymouth Domestic Abuse Service (PDAS details below)	Sanctuary Supported Living
Victim	Sexual assault referral centre (SARC)	Twelve's Company
Victim	Victim support for standard risk assessed victims of domestic related crimes	Victim Support
Victim	Domestic Abuse Advocacy Project (DAAP)	Plymouth City Council (PCC) employed solicitor
Victim	Survivors reference group that works to support and empower other survivors and their children	Survivors Empowering and Educating Domestic Abuse Services (SEEDS)
Victim/Early intervention	Operation Encompass, police and school liaison service to support children who have been present when incident has recently occurred	Plymouth City Council, Police and schools

Victim/prevention	Provision of a crèche and facilities to enable service providers to deliver the freedom programme to parents	Childrens' centres
Victim/Perpetrator	Promise domestic abuse network for female offenders who are victims of domestic abuse; also deliver the Making Change perpetrator service	Stonham Housing Association
Victim/perpetrator	Family Intervention Project	PCC
Perpetrator	Making Change perpetrator programme, for male perpetrators not part of criminal justice system	Devon and Cornwall Probation Trust (DCPT)
Perpetrator	Making Change perpetrator programme, for male perpetrators not part of criminal justice system; programme is only open to families where the children are open to social care as a child in need or with a plan and where domestic abuse has been recognised as a concern	Sanctuary Supported Living and DCPT
Perpetrator	Domestic abuse perpetrator programme	AHIMSA
Workforce development/prevention	Training for all agencies on domestic abuse and child protection	Plymouth Safeguarding Children's Board (PSCB)
Miscellaneous	Liberate: 10 week programme for parents of children on a protection plan where domestic abuse is an issue in the home.	Plymouth City Council in house provision

### **Plymouth Domestic Abuse Service (PDAS)**

PDAS is a jointly commissioned service working holistically with victims/survivors of domestic abuse. It works with victims aged 16+ and their families.

The service consists of different elements, although they may be bridged according to need, and are as follows:

- Risk assessment
- Support, recovery and prevention, including delivery of the Freedom programme, a pattern changing programme aimed preventing the cycle of domestic abuse.
- Support into the women's Refuge (11 units for women and their children) and 13 dispersed units, or 'safe houses' which are adapted social houses with additional security features, located in different parts of the City
- Support through the specialist domestic abuse courts
- Children's service
- Volunteer co-ordinator

The current contract expires 31 March 2013. The service was commissioned in 2008 and is delivered by Sanctuary Supported Living (formally Carr Gomm, which merged with Sanctuary Housing Group in 2012). Its creation brought together what were previously three separate contracts and this integrated support model has been recognised as a significant step forward for the city. The service has also been successful in attracting additional monies including:

- Home Office funding totalling £140k to enhance the IDVA (Independent Domestic Violence Advisor) service and provide support to the MARAC (Multi Agency Risk Assessment Conference) for a 4 year period until 2015
- Comic Relief funding totalling £150,000 for a 3 year period to fund an additional children's worker. This funding comes to an end August 2012.

Due to the high incidence of domestic abuse within Plymouth there has been extremely heavy demand for this service and it generally operates a waiting list. As a result of levels of demand referrals into the service were initially overwhelming. As a consequence the referral criteria were amended in 2009/10 in consultation with the Police, the largest referrer. This has resulted in the Police referring only high or medium risk cases. Standard risk assessed crimes\* are referred to Victim Support. The risk assessment tool used is called DASH (domestic abuse, stalking, harassment and honour based violence - see Annex I for the DASH risk assessment), and is used by all partners in the City. This reduction in referral rates has meant that the service is able to engage better with those clients it works with and achieve more positive outcomes.

The contract also delivers the Making Change Programme to perpetrators of domestic abuse. This is for people not involved in the criminal justice system and where there are children involved open to social care. This element of provision was commissioned in the latter half of 2011/12.

\* Police categorise domestic abuse as either domestic incidents when Police called to attend, but no crime has taken place, or domestic crimes, when Police called to attend and crime has taken place.

Performance and ethnicity data	2008/9	2009/10	2010/11	2011/12
Total referrals	3153	2500	2000	1950
No. contacted	1568	1522	1400	1387
% contacted	50%	61%	70%	71%
No. engaging	522	425	546	925
% engaging	17%	18%	27%	47%
Utilisation	102%	100%	156.8%	144.6%
Service users that moved on from service in a planned way	100%	100%	100%	100%
All white referrals	85%	86%	95%	78%
All Asian referrals	0%	0%	0%	1%
All black referrals	0%	1%	0%	1%
All dual heritage referrals	1%	0%	0%	0%
All Chinese and any other ethnic group referral	14%	13%	5%	8%

**Re-referrals:** The rate of re-referrals for into the PDAS service 2011/12 was 2%. Data prior to this date is unavailable.

## **Waiting List:**

The service operates a waiting list, as follows:

- As of 5<sup>th</sup> September 2011, PDAS had a waiting list of 49 people awaiting assessments and 11 who have been assessed and were awaiting an appointment.
- As of 7<sup>th</sup> March 2012, had a waiting list of 30 referrals waiting for an assessment.
- As of June 2012, had a waiting list of 43 referrals awaiting assessment, average 2-3 weeks waiting time
- Following increase of staffing by 1 and half new posts, the waiting list has reduced considerably, there are now 2 people on waiting list,, with a turn around time of a week

## **Making Change Perpetrator Programme:**

One programme has commenced at time of writing this plan, with 10 participants.

**Current PDAS service user** feed back from surveys recently circulated by the Joint Commissioning Team showed the following:

- Freedom programme highly rated\*\*
- Positive experience of using the (PDAS) service, responsive and prompt
- “My experience of using the service was very positive”
- “Efficient, confidential service with good follow up”

\*\* The Freedom Programme is a ‘pattern changing’ programme for any woman who wishes to learn more about the reality of domestic violence and abuse, abusive and controlling behaviour - usually provided as a 12-week rolling programme.

## **Stakeholders:**

- The Detective Inspector Police lead for domestic abuse in Plymouth fed back the following:

“PDAS should continue to be delivered as one contract as this provides flexibility and resilience across the service areas; it ensures consistency and clean referral pathways without unnecessary bureaucracy, and clarity in respect of information exchange and referral for the police.”

- The PCC Housing Lead fed back:

“Housing relationships with Domestic Abuse services have improved massively since the contracts have been rolled together. It is much clearer for staff to know who to call to discuss issues. We now have staff doing surgeries from the PDAS offices and staff are much clearer on the roles within the service. The contract is not a massive one and covers several roles and from having one contract we have seen added value from how the different parts of the contract are managed.”

As can be seen, the City has a broad scope of services, the main focus being on victim support and recovery at the high end of the risk scale.

## **2.7 Opportunities**

Due to the city’s Domestic Abuse Strategy coming to an end; appointment of a new chair of the Partnership Board and the imminent ending of the PDAS contract, there is an opportunity to review service provision and make recommendations for future service requirements.

Good practice research and local data point to the need for there to be a focus on early intervention and prevention, especially for perpetrators of domestic abuse, alongside provision of services for victims/survivors.

In recent years the focus of most service provision has been on providing appropriate and timely support to victims. This has been played out against a background of the criminalisation of the consequences of domestic violence.

While services and support for victims continues to be key, they must be underpinned by appropriate prevention and early intervention strategies which directly target domestic violence perpetrators and assist and enable them to stop offending. Re-commissioning the community perpetrator programme at the same time as re-investing in a specialist domestic abuse victim service will ensure interventions for both victims and perpetrators.

There is an identified need to increase service capacity for victims so that all levels of need may be met. The PDAS service currently meets the needs of victims risk assessed as medium to high; however the Police are also called to a high number of domestic related disturbances where no crime has been committed. Providing interventions for these lower risk assessed incidents would help to prevent escalation.

Due to the rising numbers of increasingly young victims and perpetrators, there is a need to raise awareness within schools, colleges and the university of healthy relationships. One way of doing this is as part of the Personal, Social, Health and Economic (PSHE) education process. The government is carrying out a review of the non-statutory PHSE, part of which will consider whether elements of it should be made statutory within the basic curriculum, including strengthening the priority given to teaching about relationships; the importance of positive parenting and teaching young people about sexual consent. There are also other government funded agencies that provide information, specifically for teenagers, to raise awareness about healthy relationships and providing them with guidance and steps to follow if they consider themselves to be in abusive relationships. Plymouth can build on this by raising awareness of these programmes and providing investment in services that focus on awareness raising within schools, colleges and the university or changing the focus of existing early intervention services.

Effective training is a key tool in equipping relevant agencies with the skills and knowledge to address domestic abuse. Training in Plymouth is currently provided by the Plymouth Children's Safeguarding Board (PCSB). This training is 'multi-agency', and is targeted at all agencies that work together to safeguard children. There is no charge for agencies in Plymouth to attend if they are members of the PCSB. These include the following: Plymouth City Council, Devon and Cornwall Constabulary, Devon and Cornwall Probation, NHS Plymouth, Plymouth Hospitals NHS Trust and the Strategic Health Authority. The review of service provision for domestic abuse provides an opportunity to review current training needs to ensure that all relevant agencies have access to training on how to understand and deal with domestic abuse.

### **3.0 STRATEGIC CONTEXT**

This project supports the delivery of the following local and national strategic priorities:

#### **LOCAL**

##### **Plymouth Corporate Plan 2012 – 2015: becoming a Co-operative Council**

The project will support the achievement of the following Council commitments:

- Safer Plymouth: reduce crime and keep Plymouth safe; addressing and social behaviour; helping people to feel safe
- Young Plymouth: developing ways to address child poverty; support early intervention programmes to reduce the number of children at risk; encourage engagement and ensure that all children can benefit from educational and other opportunities
- Living Plymouth: improve advice for people who are homeless or in housing need

- Caring Plymouth: support people to stay in their own homes

The project will also support the achievement of the priorities the Council shares with its partners:

- Delivering growth
- Raising aspirations
- Reducing inequalities
- Providing value for communities

### **Strategic Assessment (Crime and Disorder 2011/12), Safe and Strong Strategic Plan Aims, Community Safety Partnership and Plymouth Domestic Abuse Partnership Group**

Domestic Abuse is a 'cross cutting' priority for the city. Key recommendations:

- Plymouth Domestic Abuse Partnership (PDAP) group to be responsible for trying to increase levels of domestic abuse reporting possibly through re-emphasis on 3rd part reporting
- PDAP to ensure activity is driven by performance report currently being developed to ensure operational response to key issues
- PDAP to consider possible rise in domestic abuse among migrant workers, and consider ways in which the group can offer support
- To make Plymouth a safer, lower crime city by reducing levels of re-offending
- Reduce harm from interpersonal violence

### **Plymouth Multi-Agency Domestic Abuse Action Plan 2012-13 - Strategic Aims:**

- Support and recovery for Victims
- Early intervention and Prevention
- Treatment for Perpetrators and Victims
- Workforce development

### **Children's Trust Children and Young Peoples' Plan 2011-14:**

Provide all children with the best possible start to life:

- Provide early support for young people and families with multiple problems, putting an emphasis on hidden harm and domestic abuse.

### **Plymouth Adult Social Care Market Position Statement 2011-2013:**

Ensure a much greater focus on Early Intervention and Prevention, so that people retain and regain independence.

### **Plymouth Housing Plan 2012-17:**

Provide supported housing to meet the needs of the most vulnerable people

### **Strategic Framework for Improving Health in Plymouth (2010/11-2014/15)**

This plan contributes to following priorities identified in the above framework:

- Improve the efficiency and effectiveness of out of hospital services for adults
- Help people to stay healthy



## **NATIONAL**

### **A Call to End Violence against Women and Girls 2010-current:**

- Prevention through engagement with repeat victims
- Safe accommodation and support for those fleeing abuse
- Independent Domestic Violence Advisor service and provide support to the MARAC (Multi Agency Risk Assessment Conference)
- Safety Planning for victims and children
- Working across all agencies to provide a seamless service

### **Commissioning Services for Women and Children who have experienced violence or abuse – a guide for Health Commissioners:**

- It is more cost-effective to prevent or stop violence than it is to deal with the long-term consequences
- Victims of violence or abuse tend to use health services more than average
- Early identification and intervention could be a more effective use of these resources

### **Improving Outcomes and Supporting Transparency, Department of Health, January 2012:**

Tackling domestic abuse as a public health issue is vital for ensuring that some of the most vulnerable people in our society receive the support, understanding and treatment they deserve.

#### **Reducing Child Poverty:**

The recommendations of this commissioning plan will have a positive impact on reducing child poverty.

## **4.0 FUTURE DEMAND**

### **4.1 Predicting Future Demand in Plymouth**

Future demand for services is unlikely to decrease as the PDAS service continues to be fully utilised and holds a waiting list, and Police records demonstrate that incidents and crimes have remained at a similar level.

Domestic abuse is also known to be under reported, with an aim for the increase of its reporting being part of the Safe and Strong Strategic Assessment Recommendations.

The areas in the city most affected are those with the highest deprivation and the current economic climate, with rising unemployment and welfare benefit cuts, may see a rise in domestic abuse.

The PDAS service currently meets the needs of victims of domestic abuse crimes risk assessed as medium to high, domestic abuse crimes assessed as standard risk are referred to Victim Support. The Police are also called to a high number of domestic related disturbances where no crime has been committed, classed as domestic related incidents. As such there is an identified demand for an early intervention and prevention service that intervenes in lower risk assessed incidents to prevent escalation and the need for more costly services to intervene.

The pattern emerging is that this is an issue increasingly affecting younger people, as the highest age range for both victims and perpetrators is 18-24. In an NSPCC study of teenage relationships in 2009, 25% of teenage girls and 18% of teenage boys had experienced some form of physical violence.

The increasing rate of younger aged victims and perpetrators will require a focus on prevention and early intervention. There will need to be a review and building on of current interventions, such as working with schools on educating on healthy relationships and raising awareness of central

government funded information, such as web site and telephone help lines that tackle issues of domestic abuse and healthy relationships.

There are 239 child protection cases per year where domestic violence is a major concern. As at 19 April 2011 there were 314 children and young people subject to a child protection plan in Plymouth, with 444 parental classes (factors leading to plan) cited. Out of the 444 parental classes 135 (30.4%) cited domestic violence, 57 (12.8%) identified alcohol misuse and 46 (10.4%) drug misuse.

The recently commissioned perpetrator service should also be re-procured as while services and support for victims continue to be key, they must also be underpinned by appropriate prevention and intervention strategies which directly target domestic violence perpetrators and assist and enable them to stop offending.

Effective training is a key tool in raising awareness and equipping relevant agencies with the skills and knowledge to address domestic abuse. A review of current training needs should take place to ensure that all agencies and service providers have access to training on how to understand and deal with domestic abuse.

## 5.0 MARKET ANALYSIS

### 5.1 Existing Service Provision

Range of services provided by public sector and third sector providers, arranged by service type:

Service type	Provider	Service	Commissioner or Funder	Contract Value/funding per annum	Exp Date	Description	Is there a future need
Victim support, recovery, prevention	Sanctuary Supported Living	Plymouth Domestic Abuse Service (PDAS)	PCC Adult Social Care	£298,441	March 2013	Please see section 2.6 above for a full description of the service	Yes
			PCC Childrens Services	£60,000			
			Safe and Strong	£102,054			
			Police	£50,000			
Plymouth City Council	Domestic Abuse Advocacy Project (DAAP)	PCC, Community Safety Partnership	£60,000 funded from reward grant	December 2015	Free legal service for those who aren't eligible for legal aid to obtain civil injunctions.	Yes	
Victim Support	Victim Support	Dept of Justice is the main funder of Victim Support, which also receives charitable funding	Information not available	Funding will expire 2014	Provides support to survivors assessed as standard risk in Plymouth.	Yes. Service provider says that the new Police Crime Commissioner will advise about funding once the role is established.	
Twelve's Company	Sexual Assault Referral Centre (SARC)	PCC (Safe & Strong) NHS Plymouth Police 12's Company Home Office	£15,000 £70,000 £75,000 £8,000 £20,000 Total:£188,000	31/3/2013	Sexual Assault Referral centre providing forensic medical examination and support from Independent Sexual Violence Advisors (ISVA's), specially trained workers that provide emotional support as well as	Yes. This service is commissioned by NHS Plymouth which is considering its commissioning	

Service type	Provider	Service	Commissioner or Funder	Contract Value/funding per annum	Exp Date	Description	Is there a future need
				Pro rata DA spend: £71,520		accurate and practical advice to support victims through the legal and criminal justice process.	options
Perpetrator Programmes	Sanctuary Supported Living	Making Change	Children's Service, Early Intervention	£40,000	2013	The Programme is available to families where the children are open to social care as a child in need or with a plan and where domestic abuse has been recognised as a concern	Yes
	Devon and Cornwall Probation Trust (DCPT)	Making Change	PCC Community Safety Partnership/Safe and Strong	£40,000	2013	Making Change perpetrator programme, for male perpetrators not part of criminal justice system	Yes
	Devon and Cornwall Probation Trust (DCPT)	Integrated Domestic Abuse Programme (IDAP)	Ministry of Justice (NOMS) through its contract with Devon and Cornwall Probation Trust (DCPT)	Costs being reviewed.	Ongoing (annually reviewed)	Programme based upon a cognitive behaviour approach and which is accredited by the National Offender Management Service (NOMS). Primarily delivered by Devon & Cornwall Probation Trust (DCPT) to perpetrators of domestic abuse as part of community sentencing, and criminal justice system. (Women's safety worker is an integral part of this service, providing support to victims)	Yes Service provided by DCPT

Service type	Provider	Service	Commissioner or Funder	Contract Value/funding per annum	Exp Date	Description	Is there a future need
	AHIMSA	Domestic abuse Perpetrator Programme with integral Partner Support Service.	Receives funding from the following: Charitable funding grants Gift aid Client fees  Dept for Education; approved providers of domestic violence Contact Activities to Cafcass and the Family Courts.	Total annual budget: approx: £135,000  Per capita funding	On-going  D of E element: 30/03/13	An independent community safety initiative providing specialist assessments and programmes for those who are domestically violent or abusive, and support services for their partners.	AHIMSA informs there is waiting list consistently: between 5-25 referrals waiting at any time.
Criminal Justice	Police	Domestic Violence Unit (DVU)		Approx £350,000, based on salaries	On-going	The Police Domestic Abuse Unit currently comprises a team of Investigators tasked with investigating crimes where the victim is assessed as high risk.  There is also a team of Police 'Risk Assessors' who undertake to provide more detailed risk assessment, safety planning and referral to partner agencies as appropriate.  The Police also manage the Multi Agency Risk Assessment Conference (MARAC)	Yes  Service provided by the Police

Service type	Provider	Service	Commissioner or Funder	Contract Value/funding per annum	Exp Date	Description	Is there a future need
		DCPT	Victim Liaison Officer support for survivors	Moj (NOMS) via DCPT	Not available at present	Ongoing	Service provided by DCPT
Early intervention	Plymouth City Council	Family Intervention Project	Funding for the wider FIP service is via Early Intervention Grant (£400k), PCC general fund and Plymouth Community Homes spot purchase	£30,000 for the domestic abuse worker post	March 2013	Included in the wider FIP service is a permanent full time domestic abuse worker	Yes
	PCC, schools and Police	Operation Encompass	In-house service	Cost of £2,280 absorbed into in-house budget	Ongoing	Training for key adults offered to all schools by PCC educational psychology service.	Yes Service ongoing
	Childrens centres and Sanctuary Supported Living and the Family Intervention Project	Provision of a crèche and facilities to enable service providers to deliver the freedom programme to parents.	PCC	Not specified in Children's Centre contracts, part of PDAS contract	On-going	Freedom Programme is a 'City wide' pattern changing' programme to enable survivors to recognise traits and behaviour of abusers, to support victims' safety planning and to contribute to reducing levels of domestic abuse. Children's Centres provide venue, crèche, and DASH risk assess the participant.	Yes Service ongoing

Service type	Provider	Service	Commissioner or Funder	Contract Value/funding per annum	Exp Date	Description	Is there a future need
Workforce development	Plymouth Safeguarding Children's Board (PSCB)	Training for front line staff	Childrens services	£21,600	On-going	Delivers training for front line staff	Yes Provision ongoing
Miscellaneous	PCC	Liberate	PCC in house service	Two family support workers		10 week programme for parents of children on a protection plan where domestic abuse is an issue in the home.	In house provision ongoing
	Open Door, international language school	Education and social support	PCC Adult Social Care Plus funding from the Skills Funding Agency	£4,000	July 2012	The funding helps to pay towards 'citizenship', social inclusion, human rights related issues, a crèche worker who helps look after the children whilst they are learning.	Yes Future need for service – Adult Social Care small grants process to be explored
	Stonham	Promise Domestic Abuse Network	Home Office - community development and innovation grant	£50,000	March 31 <sup>st</sup> 2013	Deliver a service that includes victims/perpetrators and children affected by DA	Unknown
	Survivors Empowering and Educating Domestic Abuse Services (SEEDS)	SEEDS	Police Fund raising	£1000	Information not available	Survivors reference group that works to support and empower other survivors and their children	Unknown

## Women's Refuge:

In addition to the above service provision, a new women's refuge has recently been developed to meet identified need within the city. In 2006 an assessment deemed the existing women's Refuge as no longer suitable for its purpose. Plymouth City Council, in partnership with a developing Registered Social Landlord (Spectrum), secured funding via the Homes and Communities Agency, PCC owned asset transferred at nominal value, Spectrum private finance and S106 commuted sums. Construction of the Refuge is now completed, and the building will be fully occupied with residents by the end of September 2012. This project has received significant investment of time and financial resources from a range of partners, and its completion is viewed by all as success.

## 6.0 GAP ANALYSIS

There are a wide range of services provided in the city for both victims and perpetrators of domestic abuse (detailed in section 5.1). However gaps in provision have been identified and investment to meet need, combined with ongoing funding in existing services, will enable a shift in the medium to long term of resources from crisis intervention to prevention.

Strategic Objective/Vision	The Gap	Rationale/Evidence
Early intervention and prevention	Planned programme of interventions that are delivered in schools, colleges and the University to raise awareness with teenagers about healthy relationships and signs of abuse	A review of the current activities that are carried out provide evidence of this gap
	Meeting needs of victims of domestic abuse that have been assessed as being of lower risk	The PDAS service currently meets needs of victims DASH risk assessed as medium to high. Domestic abuse crimes assessed as standard risk are referred to Victim support. The police are also called to many domestic related disturbances where no crime has been committed. These are classified as domestic related incidents, and there are very high levels that take place in Plymouth.
Treatment for Perpetrators	Lack of interventions for female perpetrators	Data shows that approximately a quarter of perpetrators are female and currently all support/intervention services relate to males only.
Workforce development	Sufficient training for all front line staff to ensure raised awareness of domestic abuse	Current multi-agency training focuses on domestic abuse and child protection. It is free to attend for all partners of Plymouth Children's Safeguarding Board. There is a need to review current provision with a view to ensuring that suitable training is available to all relevant support providers.



## **7.0 DELIVERING THE VISION - COMMISSIONING PRIORITIES**

### **7.1 The Costs vs. Benefits of investing in Domestic Abuse Intervention Services**

The cost of providing an Independent Domestic Violence Advisor (IDVA) for a high risk victim of domestic abuse is approximately £500 per victim, and the cost per successful outcome (i.e. where all forms of abuse stop) is less than £1000.

The most recent data on the costs and benefits of early intervention in domestic abuse cases are provided by CAADA (Coordinated Action Against Domestic Abuse). A report published by CAADA, Domestic Abuse Saving Lives Saving Money (2010), estimated that the MARAC process saves public services on average £6,000 per case in direct costs (i.e. excluding emotional costs to victims, the costs to employers etc). The NHS receives 20% of this cost saving, with the police and the wider criminal justice system receiving 32% and 40% respectively. Without a MARAC process, the most complex cases can cost £43,000 per annum, and even the lowest risk cases that go to MARACs cost public services £4,000 per annum.

There is anecdotal evidence that other types of local specialist services can be equally cost-effective.

### **7.2 Recommendations**

#### **Support and recovery for victims:**

- Re-commission a specialist domestic abuse service for victims assessed as high or medium risk.
- Joint Commissioning Team to work with the current Solicitor and partners to source funding to ensure continuation of Domestic Abuse Advocacy Project (DAAP) following contract end.

#### **Early Intervention and Prevention:**

- Review current activities delivered within schools, colleges and the University and build on existing interventions as necessary to ensure awareness is raised by promoting healthy relationships and strategies for teenagers and young people to employ if they feel they may be experiencing abuse in their relationships.
- Review current early intervention contracts with a view to re-focusing them to deal with domestic abuse.
- Secure investment to provide services to people who are victims of domestic abuse, assessed as lower risk. The service would work with people to raise awareness of domestic abuse, with a view to prevention of escalation of need.
- Commit to providing funding for the Family Intervention Project.

#### **A Community Perpetrator Programme is commissioned:**

- A programme is commissioned that deals with male and female perpetrators to challenge their beliefs around domestic abuse and violence.

#### **Workforce Development:**

- Review scope and effectiveness of existing training and consider commissioning of e-learning tool.

#### **Developing Partnerships:**

- Make early links with the new Police and Crime Commissioner and the clinical commissioning leads for Health, to highlight gaps in service provision and the need for continued investment to meet the city's vision.

### 7.3 Proposed Service Costs \*

The below table provides an overview of the proposed spend for partners to implement the future vision for domestic abuse services in Plymouth.

**\* Figures are indicative values only. Externally commissioned services will be competitively procured delivering financial efficiencies and maximising value for money.**

It is anticipated that in years 4 – 6 there will be a reduction in investment in support and recovery for victims as a consequence of the focus on early intervention and prevention.

STRATEGIC AREA	SERVICE	FUNDING PARTNER	2013/14 (Yr 1)	2014/15 (Yr 2)	2015/16 (Yr 3)	2016/17 (Yr 4)	2017/18 (Yr 5)	2018/19 (Yr 6)	Total
Support and recovery for victims	Integrated victim support service (externally provided)	Plymouth City Council: Adult Social Care	£258,400	£258,400	£258,400	£218,400	£218,400	£218,400	£1,430,400
		Plymouth City Council: Safe and Strong	£82,000	£82,000	£82,000	£62,000	£62,000	£62,000	£432,000
		Proposed funding from partners	£110,000	£110,000	£110,000	£110,000	£110,000	£110,000	£660,000
		Plymouth City Council: Childrens services	£60,000	£60,000	£60,000	£60,000	£60,000	£60,000	£360,000
	Solicitor (in-house)	Plymouth City Council	Funding in place		Part year funding in place £20,000	£60,000	£60,000	£40,000	£180,000
Early intervention and prevention	Support service to focus on meeting the needs of lower risk assessed victims of domestic abuse (£60,000 would fund 2 IDVA' to support an additional 80 cases per year each) (externally provided)	Plymouth City Council: Adult Social Care	£40,000	£40,000	£40,000	£40,000	£40,000	£40,000	£240,000
		Plymouth City Council: Safe and Strong	£20,000	£20,000	£20,000	£20,000	£20,000	£20,000	£120,000
	Family Intervention Programme (in house)	Plymouth City Council: Childrens services (currently early Intervention Grant)	£400,000	£400,000	£400,000	Ring fence on grant expires – funding to be secured			£1,200,000
Treatment for perpetrators	Perpetrator (externally provided)	Plymouth City Council: Childrens services (currently Early Intervention Grant)	£40,000	£40,000	£40,000	£40,000	£40,000	£40,000	£240,000
		Plymouth City Council: Safe and Strong	£40,000	£40,000	£40,000	£40,000	£40,000	£40,000	£240,000
TOTAL			£1,050,400	£1,050,400	£1,070,400	£650,400	£650,400	£630,400	

## 8.0 COMMISSIONING ACTIVITY

In order to deliver this service model the following Commissioning activities will need to be undertaken.

Service Area	Commissioning Activity	Indicative Timeframe
Support and recovery for victims	Re-commission and competitively tender a holistic support and recovery service for victims assessed as high and medium risk, and their families.	2012 - 2013
	Joint Commissioning Team to work with the current Solicitor and partners to source funding to ensure continuation of Domestic Abuse Advocacy Project (DAAP) following contract end	2014 - 2015
Early intervention and prevention	Review current activities delivered within schools, colleges and the university and build on existing interventions to ensure awareness is raised by promoting healthy relationships and strategies for teenagers and young people to employ if they feel they may be experiencing abuse in their relationships.	2013 - 2014
	Review current early intervention contracts with a view to re-focusing them to deal with domestic abuse	2013 - 2014
	The Family Intervention Project manager is working with partners to secure ongoing funding post March 2013	2012 - 2013
	Commission a service to focus on meeting the needs of lower risk assessed victims of domestic abuse. This service to raise awareness and prevent escalation of need.	2012 - 2013
Community perpetrator programme for perpetrators who are not subject to the criminal justice system	Re-commission and competitively tender a community perpetrator programme	2012 - 2013
Workforce development	Review current delivery of training to ensure that it meets the needs of all front line staff. Consider the commissioning of e-learning programme	2014 - 2015
Developing Partnerships	Make early links with the new Police and Crime Commissioner and the clinical commissioning leads for Health, to highlight gaps in service provision and the need for continued investment to meet the city's vision.	2012

## 9.0 CONCLUSIONS

This commissioning plan sets out the vision for the future commissioning of City Wide domestic abuse services. The key recommendations are for partners to:

- Commit to funding for a service to focus on supporting those lower risk assessed victims of domestic abuse to raise awareness and prevent escalation of need. Service to be competitively procured during 2012/13.
- Commit to providing funding for the Family Intervention Project.
- Commit to funding for a support and recovery service to work with high and medium risk assessed victims of domestic abuse and their families. Service to be competitively procured during 2012/13.
- Commit to funding the Domestic Abuse Advocacy Project for a further three years.
- Commit to funding for the community perpetrator programme. Service to be competitively procured during 2012/13.
- Contracts to be issued for 3 years with an option to extend for 3 years (it is anticipated that funding for victim support services would reduce over the life of the contract due to increased focus on early intervention and prevention)
- Commit resources to review and build upon:
  - Existing early intervention service provision within the city; this will include a refocus, where appropriate, on dealing with domestic abuse
  - The work with in schools, colleges and the university to promote and educate teenagers and young people on healthy relationships.
  - The current training provision to ensure it is suitable, accessible and affordable for all relevant support providers and agencies, with a view to making recommendations for efficient improvements such as procurement and distribution of e-learning package.
- Make early links with the new Police and Crime Commissioner and the clinical commissioning leads for Health, to highlight gaps in service provision and the need for continued investment to meet the city's vision.

ANNEX I

**CAADA-DASH Risk Identification Checklist for use by IDVAs and other non-police agencies<sup>1</sup> for identification of risks when domestic abuse, ‘honour’-based violence and/or stalking are disclosed. Level of risk is determined by scores, i.e.: High risk = 14 and above yes scores; medium risk = 6-13 yes scores; standard risk = 5 and below**

Please explain that the purpose of asking these questions is for the safety and protection of the individual concerned. Tick the box if the factor is present <input checked="" type="checkbox"/> . Please use the comment box at the end of the form to expand on any answer. It is assumed that your main source of information is the victim. If this is <u>not the case</u> please indicate in the right hand column	Yes (tick)	No	Don't Know	State source of info if not the victim e.g. police officer
1. Has the current incident resulted in injury? (Please state what and whether this is the first injury.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are you very frightened? Comment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. What are you afraid of? Is it further injury or violence? (Please give an indication of what you think (name of abuser(s)...) might do and to whom, including children). Comment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Do you feel isolated from family/friends i.e. does (name of abuser(s) ..... ) try to stop you from seeing friends/family/doctor or others? Comment:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are you feeling depressed or having suicidal thoughts?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Have you separated or tried to separate from (name of abuser(s)....) within the past year?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is there conflict over child contact?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

<sup>1</sup> Note: This checklist is consistent with the ACPO endorsed risk assessment model DASH 2009 for the police service.

8. Does (.....) constantly text, call, contact, follow, stalk or harass you? (Please expand to identify what and whether you believe that this is done deliberately to intimidate you? Consider the context and behaviour of what is being done.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Are you pregnant or have you recently had a baby (within the last 18 months)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Is the abuse happening more often?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Is the abuse getting worse?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Does (.....) try to control everything you do and/or are they excessively jealous? (In terms of relationships, who you see, being 'policed at home', telling you what to wear for example. Consider 'honour'-based violence and specify behaviour.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tick box if factor is present. Please use the comment box at the end of the form to expand on any answer.	Yes (tick)	No	Don't Know	State source of info if not the victim
13. Has (.....) ever used weapons or objects to hurt you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Has (.....) ever threatened to kill you or someone else and you believed them? (If yes, tick who.) You <input type="checkbox"/> Children <input type="checkbox"/> Other (please specify) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Has (.....) ever attempted to strangle/choke/suffocate/drown you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Does (.....) do or say things of a sexual nature that make you feel bad or that physically hurt you or someone else? (If someone else, specify who.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Is there any other person who has threatened you or who you are afraid of? (If yes, please specify whom and why. Consider extended family if HBV.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Do you know if (.....) has hurt anyone else? (Please specify whom including the children, siblings or elderly relatives. Consider HBV.) Children <input type="checkbox"/> Another family member <input type="checkbox"/> Someone from a previous relationship <input type="checkbox"/> Other (please specify) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

19. Has (.....) ever mistreated an animal or the family pet?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Are there any financial issues? For example, are you dependent on (.....) for money/have they recently lost their job/other financial issues?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Has (.....) had problems in the past year with drugs (prescription or other), alcohol or mental health leading to problems in leading a normal life? (If yes, please specify which and give relevant details if known.) Drugs <input type="checkbox"/> Alcohol <input type="checkbox"/> Mental Health <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Has (.....) ever threatened or attempted suicide?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Has (.....) ever broken bail/an injunction and/or formal agreement for when they can see you and/or the children? (You may wish to consider this in relation to an ex-partner of the perpetrator if relevant.) Bail conditions <input type="checkbox"/> Non Molestation/Occupation Order <input type="checkbox"/> Child Contact arrangements <input type="checkbox"/> Forced Marriage Protection Order <input type="checkbox"/> Other <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Do you know if (.....) has ever been in trouble with the police or has a criminal history? (If yes, please specify.) DV <input type="checkbox"/> Sexual violence <input type="checkbox"/> Other violence <input type="checkbox"/> Other <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Total 'yes' responses				
<p><b>For consideration by professional:</b> Is there any other relevant information (from victim or professional) which may increase risk levels? Consider victim's situation in relation to disability, substance misuse, mental health issues, cultural/language barriers, 'honour'- based systems, geographic isolation and minimisation. Are they willing to engage with your service? Describe:</p> <p>Consider abuser's occupation/interests - could this give them unique access to weapons? Describe:</p>				

What are the victim's greatest priorities to address their safety?

**Do you believe that there are reasonable grounds for referring this case to MARAC? Yes / No**

If yes, have you made a referral? Yes/No

**Signed:**

**Date:**

**Do you believe that there are risks facing the children in the family? Yes / No**

If yes, please confirm if you have made a referral to safeguard the children: Yes / No

Date referral made .....

**Signed:**

**Date:**

**Name:**