

## **NOTICE OF MEETING**

### **TASK & FINISH GROUP - DOMESTIC VIOLENCE**

**Date : WEDNESDAY, 10 DECEMBER 2014**

**Time : 18:00**

**Place : COMMITTEE ROOM 4  
TOWN HALL, LUTON**

<b>Councillors:</b>	<b>Hinkley (Chair)</b>	<b>T. Malik</b>
	<b>Gale</b>	<b>O'Callaghan</b>
	<b>Foord</b>	<b>Sharif</b>
	<b>Knight</b>	

**Quorum: 3 Members**

**Contact Officer:** Angela Fraser (01582 54 6070)

### **EMERGENCY EVACUATION PROCEDURE**

#### **Committee Rooms 1, 2, 4 & Council Chamber:**

Turn left, follow the green emergency exit signs to the main town hall entrance and proceed to the assembly point at St George's Square.

#### **Committee Room 3:**

Proceed straight ahead through the double doors, follow the green emergency exit signs to the main Town Hall entrance and proceed to the assembly point at St George's Square.

# AGENDA

<i>Agenda Item</i>	<i>Subject</i>	<i>Page No.</i>
1	<b>APOLOGIES FOR ABSENCE</b>	
2	<b>MINUTES</b> 2.1 25th September 2014 <b>25th September 2014</b>	4 - 30
3	<b>DISCLOSURES OF INTEREST</b>  Members are reminded that they must disclose both the existence and nature of any disclosable pecuniary interest and any personal interest that they have in any matter to be considered at the meeting unless the interest is a sensitive interest in which event they need not disclose the nature of the interest.  A member with a disclosable pecuniary interest must not further participate in any discussion of, vote on, or take any executive steps in relation to the item of business.  A member with a personal interest, which a member of the public with knowledge of the relevant facts would reasonably regard as so significant that it is likely to prejudice the member's judgment of the public interest, must similarly not participate in any discussion of, vote on, or take any executive steps in relation to the item of business.  Disclosable pecuniary interests and Personal Interests are defined in the Council's Code of Conduct for Members and Co-opted members.	
4	<b>URGENT BUSINESS</b> The Chair to report on any business which is considered to be urgent and which should be discussed at the meeting in accordance with Section 100B(4)(b) of the Local Government Act 1972 and to determine when, during the meeting, any such business should be discussed.  <b>EVIDENCE GATHERING</b>	
5	<b>SERVICE USER RESULT OF THE CONSULTATION - PRESENTATION</b> (Powerpoint Presentation by Michele Marvin, Consultation and Engagement Officer)	
6	<b>Date of Next Meeting</b> Discussion (All) - please bring diaries	

**LOCAL GOVERNMENT ACT 1972, PART VA**

To consider whether to pass a resolution under Regulation 21(1)(b) of the Local Authorities (Executive Arrangements) (Access to Information) (England) Regulations 2000 to exclude the public from the meeting during consideration of the item(s) listed below as it is likely, that if members of the public were present during the transaction of the item(s), exempt information within the meaning of the Paragraph(s) of Part 1 of Schedule 12A to the Local Government Act 1972 indicated next to the item, would be disclosed to them.

## MINUTES OF THE SCRUTINY TASK AND FINISH GROUP: DOMESTIC VIOLENCE

THURSDAY 25<sup>TH</sup> SEPTEMBER 2014 AT 6.00PM

**PRESENT:** Councillors: Hinkley (Chair), Foord, Knight, T. Malik and O'Callaghan

### IN ATTENDANCE:

- Angela Fraser – Democracy & Scrutiny Officer
- Nikki Middleton – Community Safety Partnership Manager

1.	<b>APOLOGIES FOR ABSENCE (REF: 1)</b>	<b>ACTION</b>
	<b>Resolved:</b> That apologies for absence from the meeting was received on behalf of Councillor Sharif	
2.	<b>MINUTES (REF: 2)</b>	
	<b>Resolved:</b> That the minutes of the meeting held on 6 <sup>th</sup> August 2014 be agreed as a true record and the chair be authorised to sign them.	
3.	<b>CHAIR'S UPDATE (REF: 3)</b>	
	None noted.	
4.	<b>Evidence Gathering</b>	
	<b><u>Community Safety Partnership (CSP)</u></b> The following updates on the CSP were made by Nikki Middleton: <ul style="list-style-type: none"><li>• The role of the Community Safety Partnership has reduce from what is was a couple of years ago;</li><li>• The post of the Domestic Abuse Coordinator no longer exists. The CSP manager's role is more strategic with line management responsibility for the MARAC Coordinator, and funding (£15,000) for that post ends next year. The post is fundamental for ensuring high risk domestic abuse victims receive support from the agencies that attend MARAC meetings and for information to be shared;</li><li>• Nationally funding is directed towards high risk victims.</li><li>• Luton's response to victims is good in terms of identifying high risk victims and referring them to MARAC</li><li>• Gaps in service provision were identified in the HMIC report which was published in March this year and was critical of the Police response to victims. The Police have developed an action plan which addresses the concerns raised in the report.</li><li>• The biggest risk faced by the CSP is the government ceasing to fund domestic violence posts.</li><li>• The CSP is currently in the process of securing funding through other avenues such as grants received from London Luton Airport Limited (LLAL), Public Health and Housing for the continuation of domestic violence services.</li><li>• CSP currently receive £20k grant for the MARAC coordinator post from the Home Office which also funds</li></ul>	

	<p>half an IDVA post which is situated in victim support.</p> <ul style="list-style-type: none"> <li>• The CSP recognise there is a funding gap in terms of non-statutory provision for low to medium risk victims of domestic abuse and are reliant upon the voluntary sector to fill that gap.</li> <li>• A small amount of funding is received from LLAL with a vast amount of that money going towards domestic violence provision for high risk victims.</li> <li>• The CSP also funds some voluntary sector services such as: IDVAs and Victim Support to work with low, medium and high risk domestic abuse victims.</li> <li>• Service provision is good for high risk victims but not so good for low/medium risk victims, and can cause confusion and misunderstanding i.e. some DV services are not funded by Luton in Bedford which can cause which the Police assume they are assume that similar services are not funded in Luton.</li> <li>• Victim Support offer a gender natural service to domestic abuse victims</li> <li>• The CSP lead on the development of the Domestic Abuse Strategy for Luton and there is recognition that some areas are not serviced as well for some community groups.</li> <li>• The Partnership has no drive to develop new pieces of work due to capacity issues among staff. For example – developing a White Ribbon initiative in Luton and is similar to the old best value indicator/Green Flag initiative. Some local authorities have become White Ribbon Authorities - which is driven by men who support the campaign. Luton there is not the capacity or resources to drive such a campaign forward and the CSP is unable to get involved in prevention work and can only provide a reactive service.</li> </ul> <p>Achievements of the CSP:</p> <ul style="list-style-type: none"> <li>• Successful in driving down homicide rates to a low level in the Town e.g. none reported since 2011</li> <li>• Good cooperation and coordination of services within the Partnership</li> <li>• Created a Domestic Violence website which is up and running and contains contact details information for agency support</li> <li>• In the process of developing a domestic violence helpline which should be up and running by Christmas and launched in the New Year.</li> </ul> <p>What is not working so well?</p> <ul style="list-style-type: none"> <li>• Limited capacity within the Partnership to drive meetings e.g. HMIC report criticised the lack of engagement within the Partnership</li> </ul>	
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	<p><b>Resolved:</b> (i) That Nikki Middleton be thanked for the oral update.</p> <p>(ii) That Nikki Middleton research the involvement needed for Luton to become a White Ribbon authority and to email the information to Task and Finish Group Members.</p>	
	<p><b><u>Feedback on Schools Evidence</u></b></p> <p>The Democracy and Scrutiny Officer gave an update on a meeting at River Bank Primary School, Bath Road Luton which took place on 15<sup>th</sup> September 2014 and advised that Councillors Hinkley and Sharif met with John Wrigglesworth (Head Teacher), Neghat (Family Worker) and Tara (School Health Education Coordinator).</p> <p>The following points were made:</p> <ul style="list-style-type: none"> <li>• Family workers role is to build trust with parents, which allows parents to open up and discuss personal issues that occur in the home.</li> <li>• Family workers maintain good communications with social services who provide advice to schools on steps to take when a referral are made.</li> <li>• Family workers maintain good communications with local agencies and refer parents where they can receive specialist support and advice.</li> <li>• Primary Schools have different strategies in place to support children with challenging behaviour.</li> <li>• Responses from social services are immediate when referrals are made and schools are kept updated on steps taken.</li> <li>• Responses from the Police is poor with very little feedback and updates and can become a barrier to a child's learning if the school is not made aware of developments.</li> <li>• Family workers maintain a good working relationship is with parents and teachers.</li> <li>• Teachers and teaching assistants are well placed in primary schools to identify changes in a child's behaviour and to relay concerns to family workers.</li> <li>• There are no formal family workers network in place for information sharing with other schools. However, some family workers in feeder schools do communicate on a regular basis and share information.</li> <li>• Family workers are integral in schools to achieve outcomes of children in schools.</li> </ul> <p><b><u>Training in Schools</u></b></p> <ul style="list-style-type: none"> <li>• All staff that work with children in schools including midday supervisors are required to complete the Level 1 Safeguarding training which includes a domestic violence</li> </ul>	

	<p>module.</p> <ul style="list-style-type: none"> <li>Domestic violence is viewed as everyone's responsibility.</li> </ul> <p><b><u>Health Education Coordinator (Tara)</u></b></p> <ul style="list-style-type: none"> <li>The Health Education Coordinator is a new post funded by Public Health for 13 months and is located within the Children and Learning Department</li> <li>The post holder works mainly with the IDVAs at Victim Support and is developing a workshop for teaching staff in high schools to raise awareness in identifying dominating/controlling relationships in young people.</li> <li>The post holder is devising an accredited programme with Victim Support to be linked to the curriculum in high schools to raise awareness of healthy and unhealthy relationships. There will also be a requirement for Schools to have a designated lead person for domestic violence and high schools will also be required to demonstrate how they approach domestic violence in the curriculum</li> <li>An audit of PHSE and Health and Wellbeing lessons is to be carried out and so far only 4 schools have responded. This is a difficult area to monitor/challenge due to the limited powers of local authorities as more services are devolved to Maintained Schools. Much of the work of the locally authority to schools is through influence.</li> </ul> <p><b>Primary Schools</b></p> <ul style="list-style-type: none"> <li>Domestic abuse is not included on the curriculum in primary schools but discussions on wellbeing and things that make child set are held.</li> <li>Primary schools use signing for emotional behaviour techniques which is easier for younger children to explain feelings such as: stress, under pressure or unhappy in a one to one setting.</li> <li>Signing is useful for children with behaviour problems and for those who are not good at articulating themselves.</li> <li>Other useful programmes used are: SEAL (social, emotional aspects of learning) which is linked to the curriculum</li> <li>Primary schools maintain good links with children centres.</li> <li>Statutory instruments which once applied to schools have been removed and the main focus for schools has shifted towards attainment and outcomes.</li> <li>Discussions are held around good/bad relationships which is normally covered in years 5 and 6 and expanded upon in more detail in high schools to include domestic violence.</li> <li>The Health Coordinator is working with social workers to assist with communicating domestic abuse with young children which will be in the form of observing the early year's practitioners at work and giving feedback. The</li> </ul>	
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	<p>object is to equip social workers with the skills to recognise signs of domestic abuse.</p> <ul style="list-style-type: none"> <li>• Primary schools also carry out home visits to assess children in their home environment before starting the foundation level.</li> <li>• Health and Wellbeing Awards – schools to demonstrate how they deliver non-academic information to students</li> <li>• There is currently no educational representative at MARAC</li> </ul>	
5.	<p><b><u>Feedback on Agency Consultation</u></b></p> <p>The Democracy &amp; Scrutiny Officer reported on feedback received from the agency consultation which had taken place during the month of August. She advised that 36 forms had been completed with the majority of respondents from LBC colleagues who provide services for domestic abuse victims. The report is attached as an Appendix to the minutes.</p> <p><b>Resolved:</b> That the report be noted and the main points be feed into the final report.</p>	
6.	<p><b><u>Young People and Service User Consultation</u></b></p> <p>The Democracy and Scrutiny Officer advised that ethical approval had been obtained and that both consultations would be start in October. There were slight teething problems with the young people's consultation and based on suggestions received the questionnaire would be shorter and carried out by staff in education, the youth service and youth offending service.</p> <p>The final report would be presented to the January OSB meeting.</p>	
7.	<p><b><u>Date of the next meeting</u></b></p> <p><b>Resolved:</b> That the next meeting of the Task and Finish Group will be 20<sup>th</sup> November 2014 at 6pm where the results of the service user consultation with women and young people will be presented.</p>	

Meeting ended: 7.05pm



# **Domestic Violence Task and Finish Group Questionnaire for Service Providers**

## **REPORT**

Report produced by: Michele Marvin, Senior Consultation Officer  
Communication and Engagement Team

Contents	Page No
Background	3
Methodology	3
Profile of respondents	3
Do you work with domestic abuse?	4
Who are the services for?	5
Services offered	6
Main barriers to accessing domestic abuse support or services in Luton	7
Where do referrals come from?	9
How well is domestic abuse addressed in Luton?	10
Partnership working in Luton	12
Measuring effectiveness	14
What is working well in Luton?	15
What is not working so well in Luton?	16
Where are there gaps in services?	17
What are the priorities for improvement in Luton?	18
Appendix A : copy of the questionnaire	19

## **Background**

The Luton Overview and Scrutiny Board set up a Domestic Violence Task and Finish Group to look at the level of support the council, its partners and voluntary organisations give to domestic abuse. As part of this review the Task and Finish Group has requested the Council's Consultation and Engagement team to consult with partners, voluntary agencies and colleagues that support victims of domestic abuse.

## **Methodology**

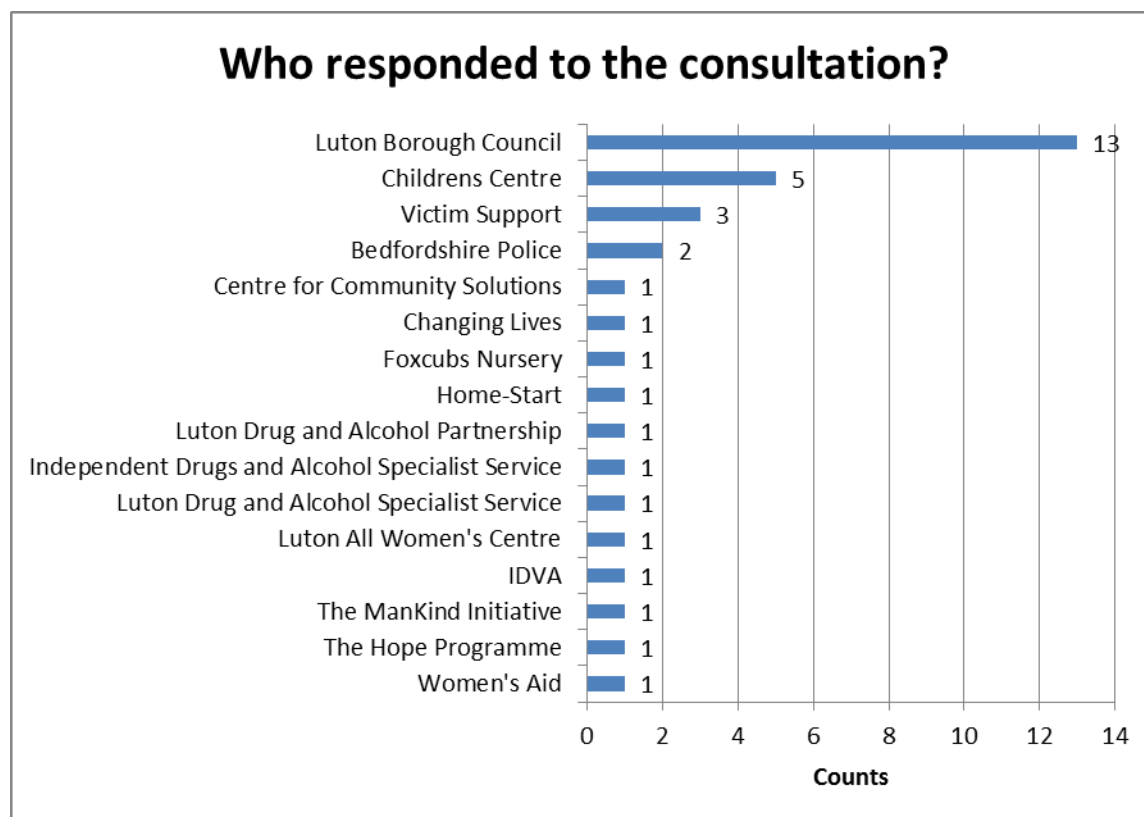
An online survey was designed for partners, voluntary agencies and colleagues to complete who work with domestic abuse, whether this was occasionally or frequently. A copy of the questionnaire is attached as appendix A.

An email with a link to the survey was sent out on 7 August with a survey closing date of Friday 29 August 2014. The consultation was also highlighted through the Council's Intranet.

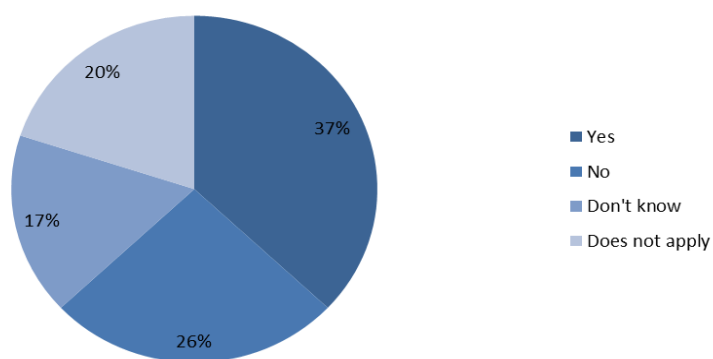
In total 36 completed surveys were returned.

## **Profile of the respondents**

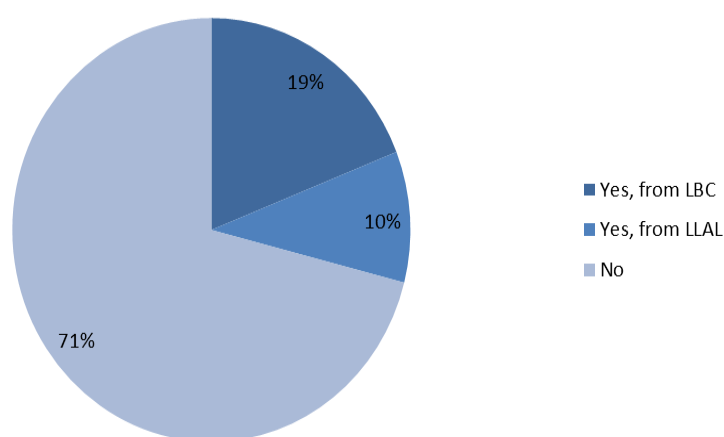
The majority of respondents were Luton Borough Council colleagues who work with domestic abuse.



### Does LBC commission any of the DA your provide?



### Do you receive funding from...?



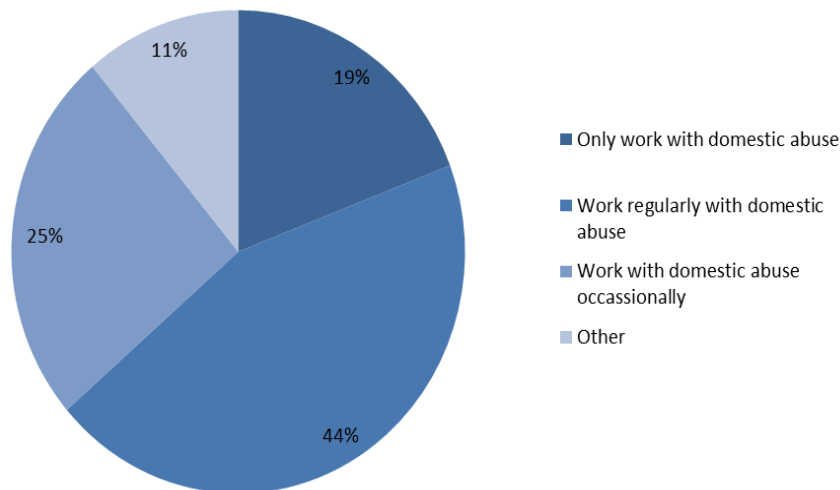
### Do you work with domestic abuse?

The majority of respondents work with domestic abuse regularly (44%), with a further quarter working with domestic abuse occasionally (25%) and about 2 in 10 only working with domestic abuse.

1 in 10 of the respondents did not fit into these three categories such as:

- Working with sexual abuse, although there is a well-researched link to domestic abuse.
- Indirectly, as manager of a team who occasionally work with families where domestic abuse is present.

### Do you work with domestic abuse?



### Who are the services for?

81% of those who responded provide services or support for victims, three quarters for women (75%) and around 6 out of 10 for families (64%).

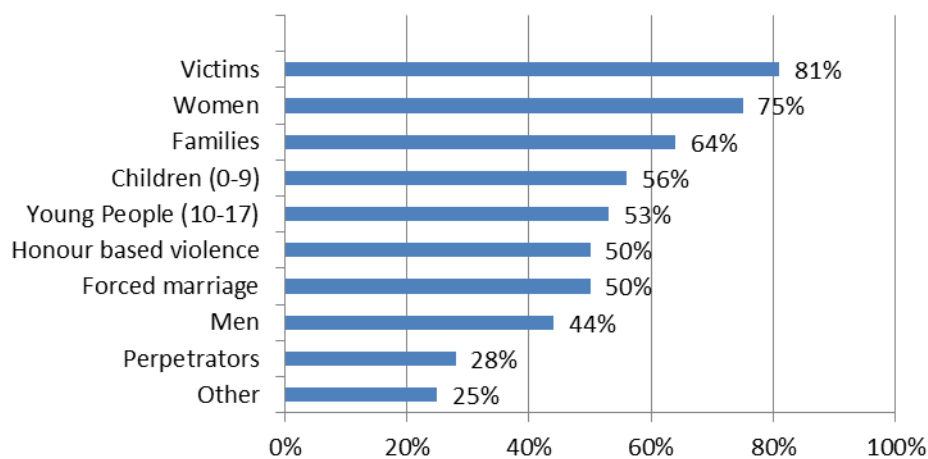
Half of the stakeholders that responded provide services or support for children (56%), young people (53%), honour based violence and forced marriage (50%) and men (44%).

Around 3 in 10 stakeholders who responded also provide services for perpetrators (28%).

Some of the domestic violence services, or support offered, was targeted at:

- Young Women aged 16-25
- Providing advice, guidance and training for workers

### Who are DA services/support for?



Base: 36 respondents

## **Services offered**

The three most common services offered, with more than half of the respondents offering such services were:

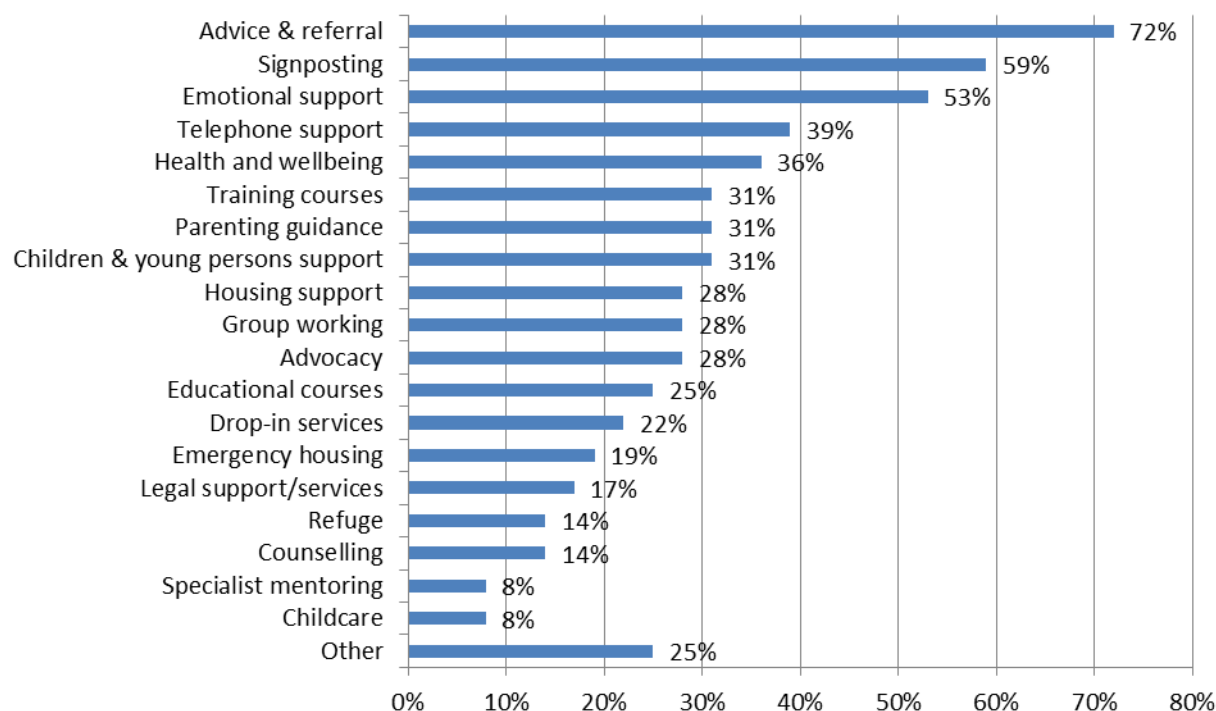
- Advice & referral (72%)
- Signposting (59%)
- Emotional support (53%)

Over a third also provides telephone support (39%) and health and wellbeing services (36%).

Some other services that are offered by the respondents are:

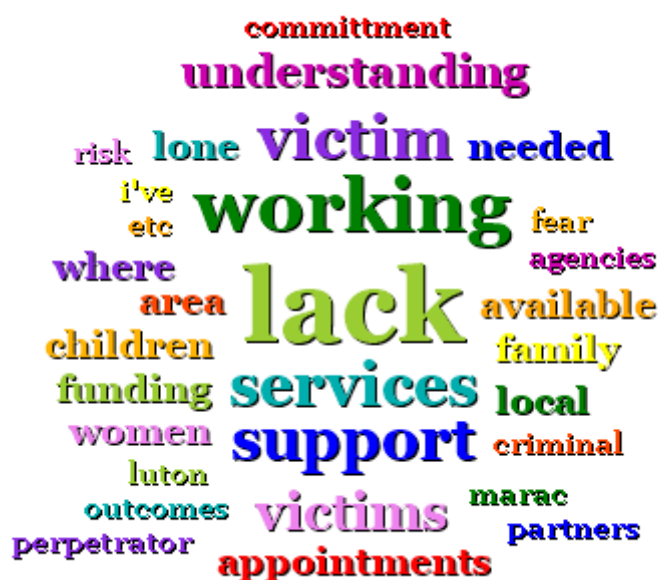
- Support after post sentence of a youth offender and restorative justice
- Helpline
- A rolling Freedom programme delivered in English, Polish and Urdu.
- Action planning to safeguard high risk victims
- Changing Lives programme dealing with issues of stress, anxiety, anger & depression.
- Young Parent protective behaviours 1:1 sessions support parents and children living in hostel accommodation
- Holistic package of support
- Training & employment support
- Parenting programmes
- Drop-in service
- Support for the psychological needs of high risk babies and parents attending a Children's Centre outreach drop-in
- Programme delivered in South Asian community languages
- Raising awareness for professionals and members of the community on issues of domestic abuse, honour based violence, forced marriages, female genital mutilation.
- Social care intervention i.e. Child Protection/ Child in Need
- Drug, alcohol and mental health support, Psycho Social Interventions, Cognitive Behaviour Therapy based work

## What services do you offer?



Base: 36 respondents

## Main barriers to accessing domestic abuse support or services in Luton



Word cloud of most frequently used words – the larger the font, the more often the word has been used

### 1. What is lacking?

- Understanding that domestic abuse is not just physical aggression/violence
- Awareness of what is available
- Partnership working
- Focus on safeguarding

- Shared risk and needs assessment
  - Strategic leadership
  - Funding means that agencies and internal departments are not well enough resourced to make a full commitment to the MARAC. Some partners find it hard to make a basic commitment and others engage on an ad hoc basis, which is far from satisfactory.
  - Access to support
  - Lack of funding to specialist services such as All Women's Centre and Stepping Stones
  - Lack of understanding swift response from police and social care
  - Lack of refuges and lack of support to assist women and children getting there
  - Professionals lack of understanding the complexities of exploitation, drug use & street sex working
  - Lack of shared outcomes across partners
  - Funding for small CVOs
  - Lone working policy – unable to take victims in cars to appointments – why is there no lone working policy for this when other agencies work within Lone Working guidelines safely with chaotic and sometimes violent victims.
  - Capacity and capability to deliver effective services i.e. the practical time needed to support the women from start to finish on these cases – intensive and assertive working is a requisite to better outcomes for the victim & the services working with the victim.
2. For the victims/perpetrator:
    - Victims manage the process rather than a holistic seamless service that fits around the victim
    - Fear of reprisals from perpetrator and family members
    - Loss of control of situation (both victim and perpetrator)
    - Fear of losing children
    - Limited legal / criminal support
    - Communication difficulties
    - Poverty and Power forces people to stay in the harmful relationships
    - Lack of resources to get to safe place, attend appointments back to their local supported area for health, criminal justice, benefit appointments etc. i.e. train fares who will pay for these?
  3. Due to high numbers referrals to and from MARAC can be quite slow therefore delaying the support for the family.
  4. Too many agencies/drop in centres duplicating e.g. Freedom Programme.
  5. Pressure on specialist services.
  6. Services only available after the DA/DV has occurred need to look at more early intervention work such as raising women's confidence and understanding that DA is not acceptable.
  7. Dangerous and violent unknown “under world” perpetrators from other areas



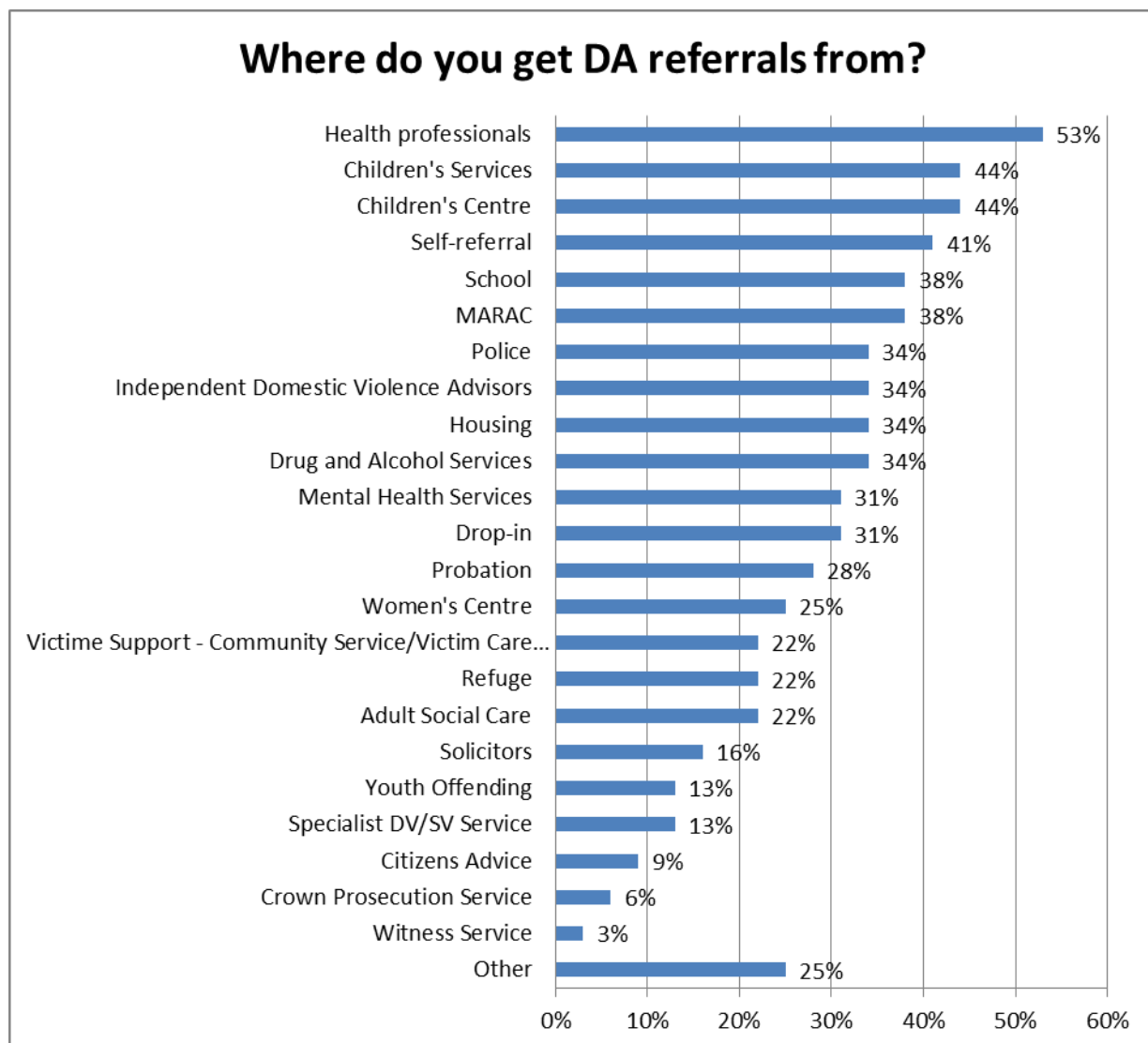
## Where do referrals come from?

The respondents reported that over half of their referrals come from health professionals (53%), however a significant number of referrals also comes from Children's Services (44%), Children's Centres (44%), self-referrals (41%), school (38%) and MARAC (38%).

Around a third of the respondents receive referrals from the Police (34%), IDVAs (34%), Housing (34%), Drug and Alcohol Services (34%), mental health services (31%) and drop-in (31%).

Other referrals, not listed, are received from :

- Sexual Assault Referral Centres
- Other agencies
- Colleges
- Other MARACs
- CAF (Children and Families)
- Early Years Service
- United Kingdom Refuge on Line provision (UKROL)
- Homeless Service / NOAH Enterprise
- Disclosure from families



Based on 32 respondents

### **How well is domestic abuse addressed in Luton?**

Respondents were asked to rate how well they thought domestic abuse was addressed in Luton from various services and agencies.

The services/agencies were broken down in the following categories:

- Criminal justice
- Civil/family justice
- Health services
- Housing
- Employers
- Child focused
- Information/signposting services provided/needed

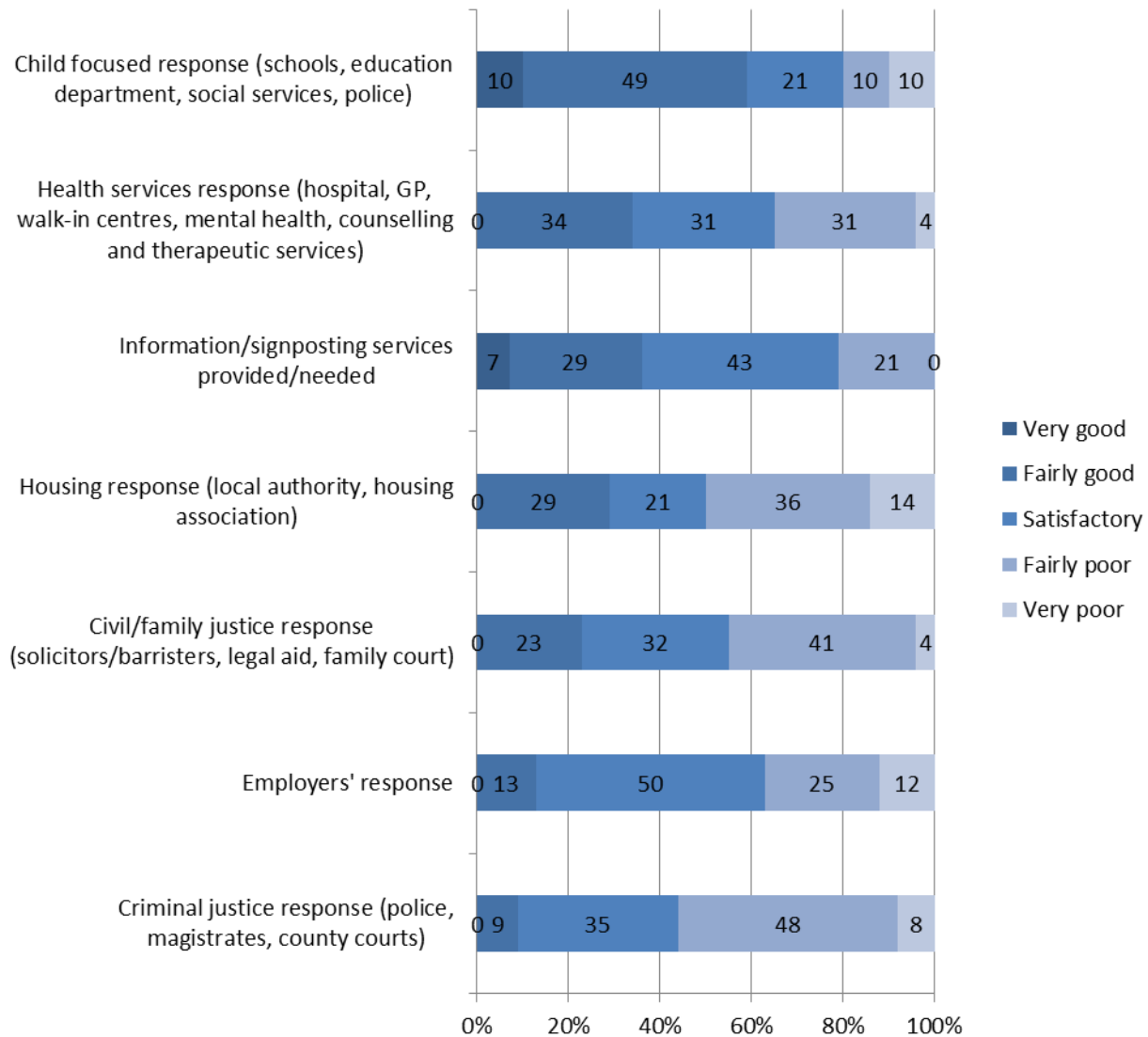
The respondents felt that the child focused response worked best in Luton with 59% saying that this was fairly to very good.

Information and signposting to services that are provided was also rated highly with 36% saying that this is either fairly or very good. In addition, 43% said that this was satisfactory in Luton.

34% felt that the health service response was fairly good, and 31% satisfactory although no-one rated the health service response as very good.

The services and agencies with highest ratings from fairly to very poor were housing (50%), criminal justice (56%) and civil or family justice (44%).

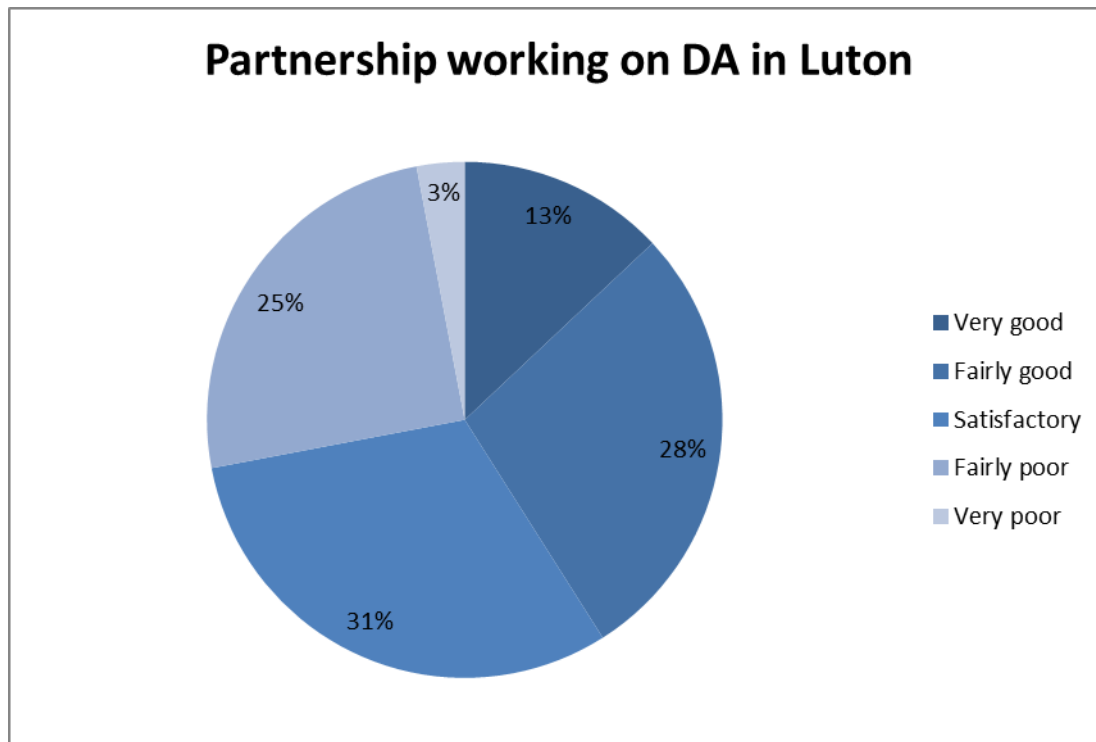
## How well is DA addressed in Luton?



Based on 29 (top bar), 26, 28, 28, 22, 16 and 23 (bottom bar) responses

## **Partnership working in Luton**

Agencies were asked how they would rate partnership working on domestic abuse cases in Luton. 41% of respondents rated partnership working from very to fairly good, 31% rated it as satisfactory and 28% rated it fairly to very poor.



We asked respondents to explain the reasons for the rating given on partnership working.

A number of responses related to MARAC. Most of them were positive, as listed below.

- The MARAC has been assessed by CAADA as a well-run and effective partnership.
- Working relationships with other agencies and multi-agency working seems to work well within Luton. Individual working relationships are good and the MARAC promotes this.
- Where cases have been referred to MARAC, follow-up work, information sharing & partnership working has improved. Our experience of partnership working with IDVAs is very to fairly good, however this support is delayed by the need for a formal referral and the heavy workload of the IDVA service.
- Cases that go to MARAC are co-worked and info shared, however medium risk cases info are not shared so freely.
- MARAC partnership is working well together however need consistent attendance from some services.

Further positive comments about partnership working include:

- There is a really good partnership approach.
- Some areas of the domestic abuse partnership work really well together.
- The training has been excellent.
- It's the scale of families in need of support as opposed to the effort of the professionals involved.
- Much better over the last two years.

However, areas for improvement were clearly identified.

- More support for children who have witnessed domestic violence is needed.
- More resources are needed and particularly in the arena of early help and behaviour change leadership for families.
- Information sharing.
- Attending domestic abuse forums and the Luton Safeguarding Children's Board case review learning events you can see partnership working taking place but some agencies seem unwilling to share information which can prevent partnership working taking place.
- With the initial crisis management of cases partnership working is extremely poor and as an agency we are often left to determine the correct course of action especially where the victim has no recourse to public funds by being referred from one agency to another, where information given is often conflicting. We are often faced with finding accommodation late in the day where funded agencies such as Women's Aid are unable to help due to funding issues.
- In my experience the time delay is an issue. Agencies can pass the buck.
- Better understanding of all services in Luton.
- Lack of knowledge/experience/awareness from some organisations i.e. Social Care both adult and Children's Services.
- There is a lack of Social Care up-dating agencies when a referral is made to them.
- Failure to take a strategic and holistic approach to Violence Against Women and Girls (VAWG).
- The only organisations we work with are those we have worked with before and are familiar with our services. There is no strategic oversight of partnership working to ensure the seamless integration and efficient delivery of services for the benefit of the most disadvantaged groups.
- Mental Health engagement is sometimes lacking.
- Often cases that are discussed at MARAC are not stepped down adequately. Domestic abuse/violence cases that do not meet the thresholds for social care are not stepped down adequately. They need to be stepped down to community support level to monitor and support.
- Need improved partnerships with Police.
- This area of the work needs significant input in order to secure improvement.
- The police and other agencies work well together. It's the courts that let people down

A couple of comments showed that partnership working is not in place for all agencies that responded but showed a willingness to work in partnership with the Council and other agencies.

- We have not completed any partnership working but would be happy to partner with the council.
- I am unaware of how we work in partnership. More information on how we work in partnership would be beneficial.

See here some quotes about what respondents said.

*"The client group that we work with are excluded, stigmatised and professionals make judgements about them or have a lack of understanding of the complexities of the whole situation. They are often treated unfairly & discriminated by services, and we have experienced this first hand whilst we have attended planned/unplanned appointments with the women. Work around perpetrators is currently in place so we can then have access to allow the women to make freer long lasting decisions to a violent life. Mainstream domestic violence services are difficult to engage with for our client group."*

"Recently a parent disclosed to us that she was domestically abused and that she wasn't safe at home. Nobody was willing to take on the referral, other than sending her to the council to declare herself homeless, which wasn't very supportive of the parent who had English as a second language."

### How do you/your agency measure the effectiveness of delivering domestic abuse services?



*Word cloud of most frequently used words – the larger the font, the more often the word has been used*

From the feedback received it appears that most agencies have measure in place to evaluate the effectiveness of their service delivery. The methods used are wide ranging and appear to be tailored to the needs of the organisation and their client.

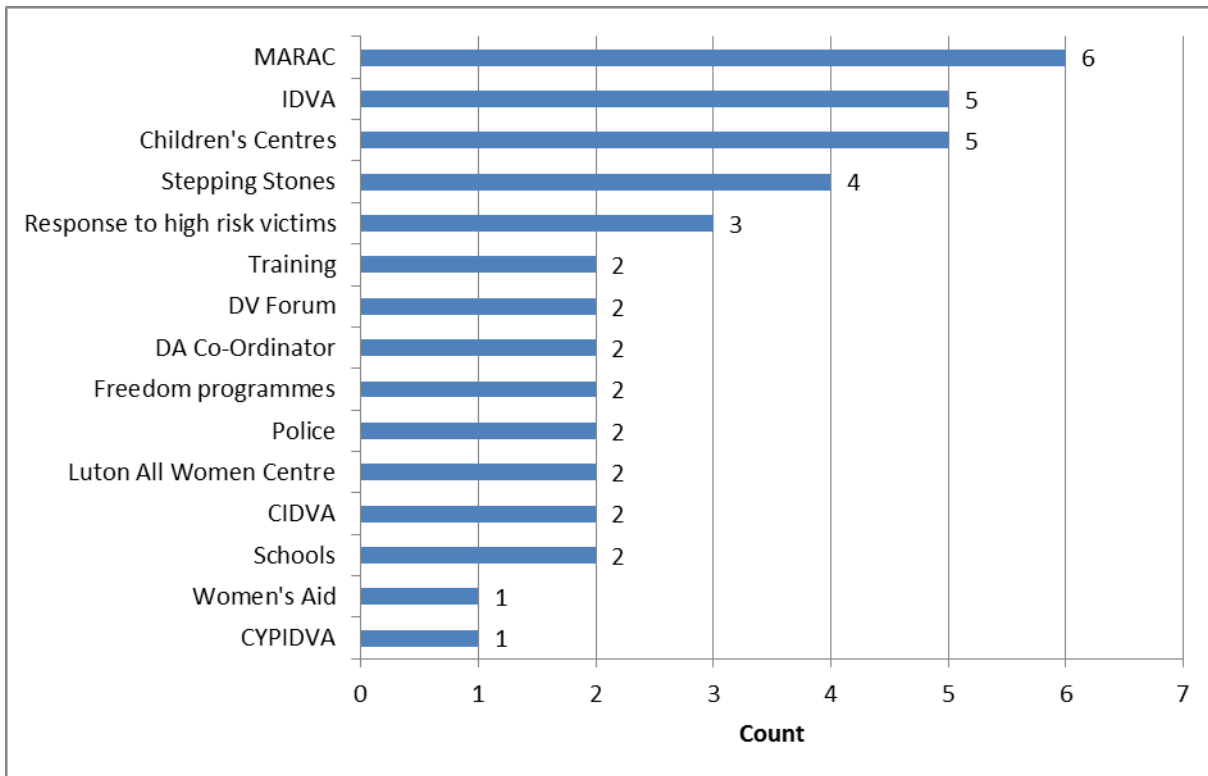
The feedback suggests that there are no common partnership measures in place.

Some of the measures used are listed below.

- Family Star, youth Outcome Star
- Client feedback
- Agency feedback
- CORE outcomes/outcome based data gathering
- National benchmarking
- Through MARAC meetings
- Gathering of statistical information and reporting for in-house or statutory purposes
- Inspections
- Self-assessments, quality assurance measures
- Impact evaluation
- Case files
- Evaluation of training programmes
- Tracking, including long term (e.g. children's progress, social-economic status, education, work etc.)

- Quality Awards, local awards
- Edinburgh Wellbeing Scale

### **Thinking about Luton's current provision of domestic abuse services, what is working well in Luton?**



MARAC was clearly seen as a positive partnership in dealing with domestic abuse in Luton, as were the Independent Domestic Abuse Advisors and the Children's Centre.

See here some quotes about what respondents regarded as working well in Luton.

*"For children's centres the referrals coming in has been a vast improvement."*

*"We have excellent specialist services for very vulnerable families such as stepping stones and Luton All Women Centre"*

*"Luton BC do provide a lot of training for their own staff and out of house training in regards to domestic violence"*

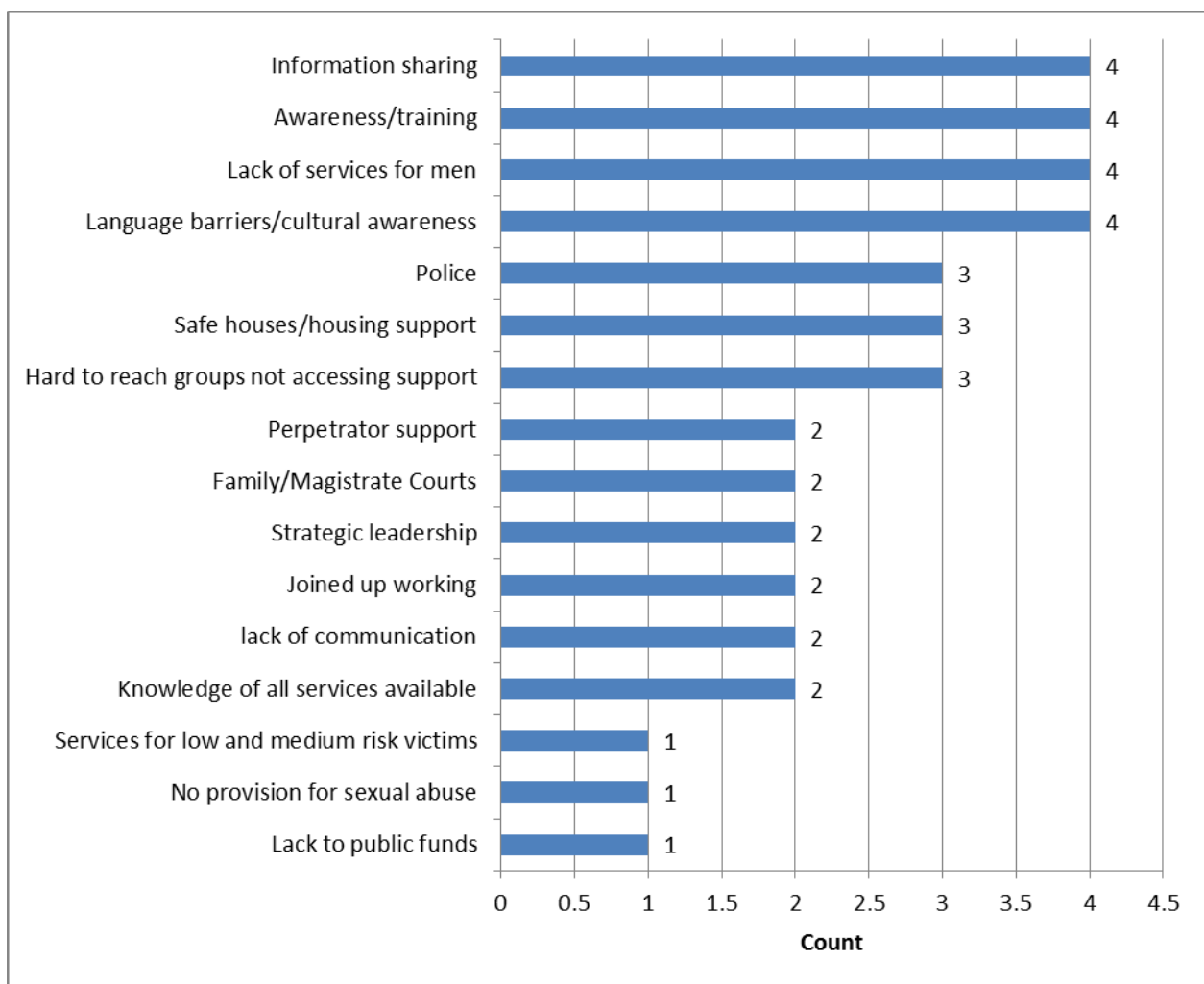
*"Links between the Police and Social Care are improving"*

*"Following the Stronger Families Conference in December 2013 we have started receiving referrals from Housing Associations."*

*"There seems to be a good range of services for those at highest risk (women and children)."*

*"Passionate workers"*

**Thinking about Luton's current provision of domestic abuse services, what is not working so well in Luton?**



See here some quotes about what respondents regarded as not working very well in Luton.

*"Lack of knowledge re size of issue in Luton e.g. no stats from key organisations published."*

*"It is not always clear who are the best people to signpost to in Luton."*

*"There are various gaps in services for diverse and hard to reach groups (LGBT, Gypsy Roman Travellers, Men etc.)"*

*"Lack of professionals who can work with victims who are not White British."*

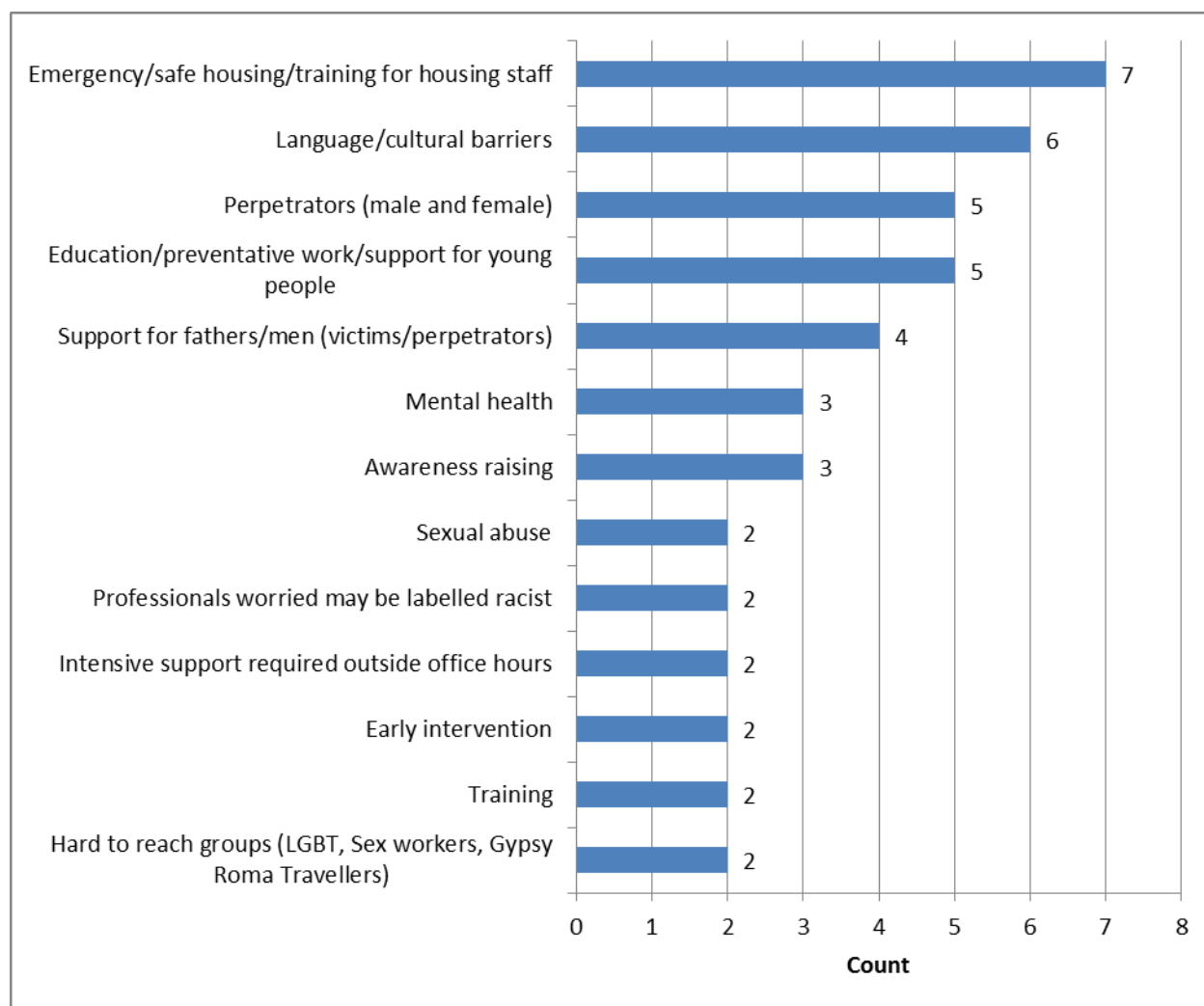
*"Police data not always kept and Police referrals to MARAC not always done."*

*"Learning across all Luton schools to prevent domestic abuse from being seen as acceptable and normal among children and young people."*

*"Use of hostels for emergency accommodation for those fleeing domestic abuse."*



## Where in your experience are there gaps in services for issues relating to domestic abuse in Luton?



See here some quotes about what respondents regarded as not working very well in Luton.

*"Where is the work with LGBT perpetrators and victims? Nothing for female perpetrators and male victims? No preventative work with young people around healthy relationships and early warning signs?."*

*"Our clients need extended support and find it difficult to fit into 9-5 support initially."*

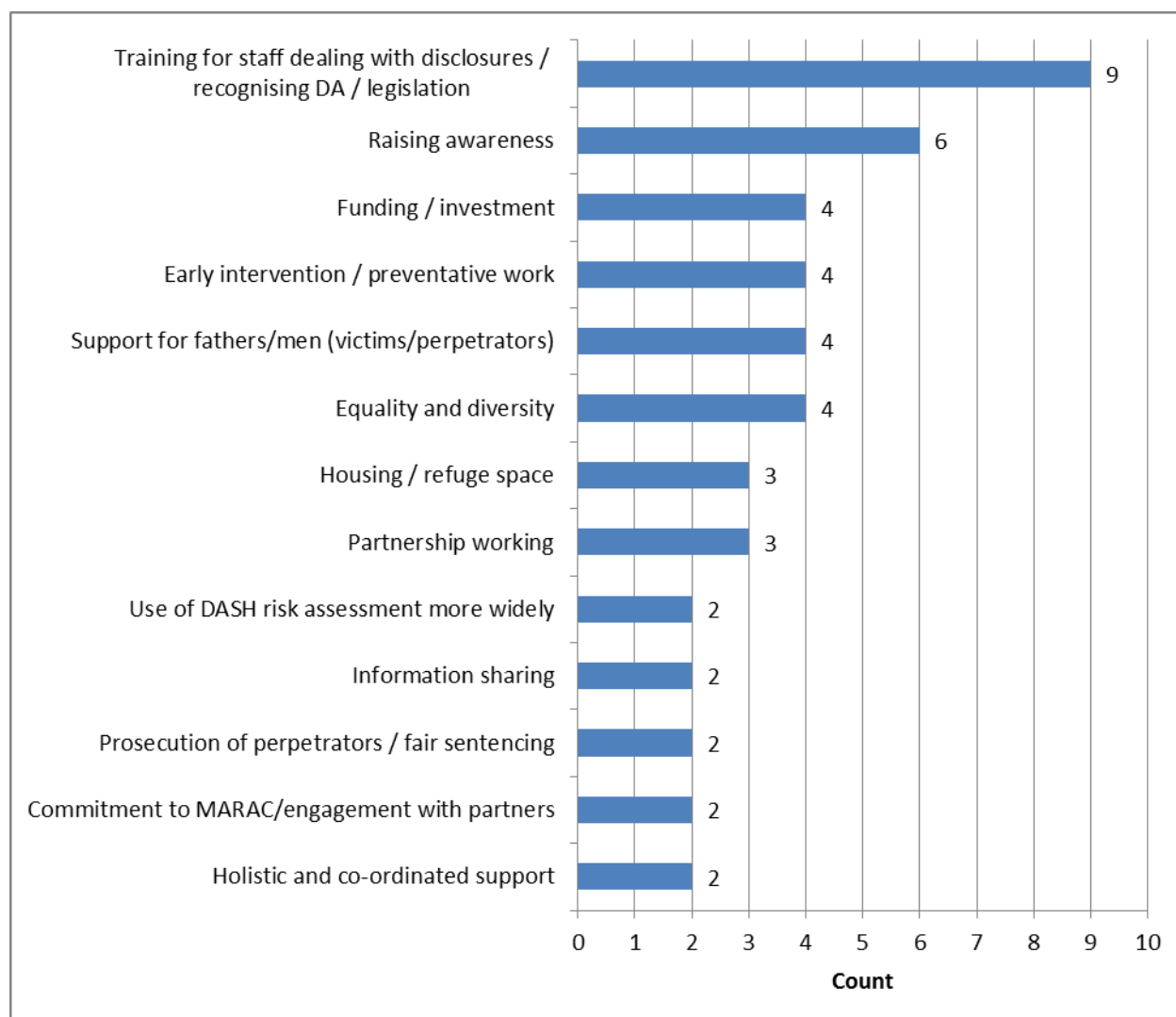
*"Housing – training in this department and a general understanding of the problems facing victims of domestic abuse is not widely understood by staff, although some housing officers are very good."*

*"Freedom type programmes in community languages."*

*"Education is needed and the support from the Asian communities, not tiptoeing around the issue in fear of being accused of being racist or ignorant, which has been happening for years."*

*"Emergency housing, out of hours services, bail places for domestic violence perpetrators. Not enough Police resources to deal with the amount of cases coming in on a daily basis."*

**In your opinion, what are the priorities for improvement when addressing domestic abuse in Luton?**



See here some quotes about what respondents regarded as priorities for improvement in Luton.

*"More could be done in Luton to stimulate education and activity around the topic of making abuse and abusive behaviour unacceptable e.g. White Ribbon Campaign – men against violence, early intervention with children under the age of 5."*

*Raise awareness of domestic violence across all agencies and provide training, including for Police and Social Care."*

*"Increased funding for existing services in order that service provision can be extended e.g. an overnight emergency hostel provision managed in the same way that existing Refuge provision is managed."*

*"Some small changes amongst professional teams could have a massive impact on many individuals and their families e.g. preparing health visitors to recognise domestic violence, completion of DASH risk assessments etc."*

*"There is a significant need for culturally responsive and mother tongue services."*



## Domestic Violence Task and Finish Group Questionnaire for Service Providers

The Luton Overview and Scrutiny Board set up a Domestic Violence Task and Finish Group to look at the level of support the council, its partners and voluntary organisations give to domestic abuse. As part of this review the Task and Finish Group has requested we consult with partners and voluntary agencies that support victims of domestic abuse.

Your views are important as they will form part of the final report and recommendations to the Council's Executive.

Please complete this online survey and submit your response before Friday 29 August 2014.

If you have any questions about the review or this questionnaire, please contact Michele Marvin at [michele.marvin@luton.gov.uk](mailto:michele.marvin@luton.gov.uk) or 01582 547099.

**Q1 Please provide your name, the name of your organisation and contact details. We may contact you to follow up on any of the information you have provided.**

Your name .....	<input type="text"/>
Your job title.....	<input type="text"/>
Name of the organisation <i>(if applicable)</i> .....	<input type="text"/>
Contact phone number.....	<input type="text"/>
Email address .....	<input type="text"/>

**Q2 In your role, do you ...? Please ✓ one box only**

- ☐ Only work with domestic abuse  
☐ work regulary with domestic abuse  
☐ work with domestic abuse occassionally  
☐ Other

Other, please specify

**Q3 Who do you provide domestic abuse support/services for? Please ✓ all that apply**

- |                                                 |                                                |
|-------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> Women                  | <input type="checkbox"/> Victims               |
| <input type="checkbox"/> Men                    | <input type="checkbox"/> Perpetrators          |
| <input type="checkbox"/> Children (0 - 9)       | <input type="checkbox"/> Forced marriage       |
| <input type="checkbox"/> Young people (10 - 17) | <input type="checkbox"/> Honour based violence |
| <input type="checkbox"/> Families               | <input type="checkbox"/> Other                 |

Other, please specify

**Q4** What services do you offer in relation to domestic abuse? Please ✓ all that apply

- |                                                           |                                                 |
|-----------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Advice & referral                | <input type="checkbox"/> Health and wellbeing   |
| <input type="checkbox"/> Advocacy                         | <input type="checkbox"/> Housing support        |
| <input type="checkbox"/> Childcare                        | <input type="checkbox"/> Legal support/services |
| <input type="checkbox"/> Children & Young Persons Support | <input type="checkbox"/> Parenting guidance     |
| <input type="checkbox"/> Counselling                      | <input type="checkbox"/> Refuge                 |
| <input type="checkbox"/> Drop-in services                 | <input type="checkbox"/> Signposting            |
| <input type="checkbox"/> Educational courses              | <input type="checkbox"/> Specialist mentoring   |
| <input type="checkbox"/> Emergency housing                | <input type="checkbox"/> Telephone support      |
| <input type="checkbox"/> Emotional support                | <input type="checkbox"/> Training courses       |
| <input type="checkbox"/> Group working                    | <input type="checkbox"/> Other                  |

**Other, please specify**

**Q5** In your experience, what are the main barriers to accessing domestic abuse support or services? Please write in the box.

**Q6** Does Luton Borough Council commission any of the domestic abuse services you/your organisation provide(s)? Please ✓ 1 box only

- ☐ Yes  
☐ No  
☐ Don't know

**Q7** Do you receive funding from Luton Borough Council or London Luton Airport Limited (LLAL) for delivering domestic abuse services? Please ✓ all that apply

- ☐ Yes, from Luton Borough Council  
☐ Yes, from LLAL  
☐ No

**Q8**

**Where do you get domestic abuse referrals from? Please ✓ all that apply**

- |                                                                 |                                                                              |
|-----------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> Adult Social Care                      | <input type="checkbox"/> Police                                              |
| <input type="checkbox"/> Children Centre                        | <input type="checkbox"/> Probation                                           |
| <input type="checkbox"/> Children's Services                    | <input type="checkbox"/> Refuge                                              |
| <input type="checkbox"/> Citizens Advice                        | <input type="checkbox"/> School                                              |
| <input type="checkbox"/> Crown Prosecution Service              | <input type="checkbox"/> Self-referral                                       |
| <input type="checkbox"/> Drop-in                                | <input type="checkbox"/> Solicitors                                          |
| <input type="checkbox"/> Drug and Alcohol Services              | <input type="checkbox"/> Specialist DV/SV Service                            |
| <input type="checkbox"/> Health professionals                   | <input type="checkbox"/> Victim Support - Community Service/Victim Care Unit |
| <input type="checkbox"/> Housing                                | <input type="checkbox"/> Witness Service                                     |
| <input type="checkbox"/> Independent Domestic Violence Advisors | <input type="checkbox"/> Women's Centre                                      |
| <input type="checkbox"/> MARAC                                  | <input type="checkbox"/> Youth Offending                                     |
| <input type="checkbox"/> Mental Health Services                 | <input type="checkbox"/> Other                                               |

**Other, please specify**

**Q9**

**How well would you say domestic abuse is addressed in Luton from the following services/agencies? Please ✓ 1 box per row**

	Very good	Fairly good	Satisfactory	Fairly poor	Very poor	Don't know
Criminal justice response (police, magistrates, county courts)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Civil/family justice response (solicitors/barristers, legal aid, family court)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health services response (hospital, GP, Walk-in centres, mental health, counselling and therapeutic services)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housing response (local authority, housing association)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employers' response	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child focused response (schools, education department, social services, police etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information/signposting services provided/needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q10** Overall, how would you rate partnership working on domestic abuse cases in Luton? *Please ✓ 1 box only*

- ☐ Very good  
☐ Fairly good  
☐ Satisfactory  
☐ Fairly poor  
☐ Very poor

***Please explain your answer***

**Q11** How do you/your agency measure the effectiveness of delivering domestic abuse services? *Please write in the box below*

**Q12** Thinking about Luton's current provision of domestic abuse services, what is working well in Luton? *Please write in the box below*

**Q13** Thinking about Luton's current provision of domestic abuse services, what is not working so well in Luton? *Please write in the box below*

**Q14** Where in your experience are there gaps in services for issues relating to domestic abuse? *Please write in the box below*

**Q15** In your opinion, what are the priorities for improvement when addressing domestic abuse? *Please write in the box below*