Suffolk County Council

**Extract from the unconfirmed minutes of the Scrutiny Committee Meeting held on 28 July 2016 at 10:00 am in the Elisabeth Room, Endeavour House, Ipswich.**

Present: Councillors Mary Evans (Chairman), John Field (Vice Chairman), Trevor Beckwith, Peter Beer, Kathy Bole, John Burns, Jessica Fleming, Len Jacklin and David Ritchie.

Also present: Councillors Jenny Antill and Robin Millar

**5. The County Council's role in working with partners to tackle domestic abuse in Suffolk**

The Committee considered a report at Agenda Item 6. The Chairman spoke about the seriousness of the topic for scrutiny, pointing out that domestic abuse was a crime which destroyed families and thrived on fear. The purpose of the meeting was to consider the County Council's role in and contribution to working with partner organisations to deal with this serious problem. She welcomed to the meeting the following external witnesses:

Tim Passmore, Suffolk Police and Crime Commissioner
Sandra Graffham, Communications Manager, Office of the Police and Crime Commissioner
David Cutler, Detective Superintendent, Protecting Vulnerable People, Suffolk Constabulary
Christine Geeson, Operational Manager, Advocacy, Independent Visiting and Mentoring Services, Anglia Care Trust
Sonal Shenai, Head of Consulting, SafeLives
Viv Bickham, Knowledge Hub Advisor, SafeLives

The Chairman also welcomed the following County Council members and officers:

Councillor Robin Millar, Member with Special Responsibility for Stronger Families
Sara Blake, Head of Localities and Partnerships, Public Health and Protection
Nichola Bennett, Adult Safeguarding Operational Manager, Adult and Community Services
Stuart Hudson, Trouble Families Co-ordinator, Children and Young People's Services

At the invitation of the Chairman, Councillor Jenny Antill addressed the Committee in her capacity as former chairman of the Suffolk County Domestic Violence Forum (until June 2015). Paragraphs 9 and 10 of the report at Agenda Item 6 stated that the Police and Crime Panel had considered a report written by Dr Emma Bond of University Campus Suffolk "Understanding domestic abuse in Suffolk: a study of the experiences of survivors". The Panel

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had heard that there appeared to be a reluctance to address the issues highlighted in Dr Bond's report relating to the services provided by the County Council. Councillor Antill explained that the County Council had been asked to respond to the report when it was at a draft stage. She assured the Committee that the findings had been taken very seriously and a response had been prepared by the then Director of Public Health. In the response the Council welcomed the work done by Dr Bond but commented that the report was limited in scope and underestimated the complexity of the issues and, as it stood, should not be taken in isolation.

Councillor Antill acknowledged, however, that the work done by Dr Bond and by the Police and Crime Commissioner had acted a catalyst for change. She welcomed the fact that domestic abuse now came within the remit of the Directorate of Public Health and Protection, and she looked forward to more joint working across the public sector to combat domestic abuse.

Sara Blake presented the report at Agenda Item 6 and outlined the recommendations made in Evidence Set 1 "Domestic Abuse Interim Report February – June 2016". The witnesses were invited to make comments. Committee members had an opportunity to ask questions and comment on what they had heard.

**Recommendation**: The Committee agreed:

a) To thank all those involved in producing the Interim Report on Domestic Abuse, and to commend them on the progress made to date.

b) To highlight the importance of political leadership to champion and be accountable for work to tackle domestic abuse. The Committee noted that this currently sat within the wider remit of the Cabinet Member for Health, and considered, given the breadth of this portfolio and the cross Directorate nature of the work, this did not necessarily need to sit with a Cabinet Member.

c) To recommend to the Cabinet Members for Health, Adult Care and Children's Services, Education and Skills that:-

   i) current expenditure on services to tackle domestic abuse by the County Council should be identified and agreement sought to pooling these monies into a single fund as a first step towards joint commissioning;

   ii) a commitment to longer term funding for commissioning of services to tackle domestic abuse was needed, in order to align commissioning cycles with other agencies;

   iii) the budget for commissioning services to tackle domestic abuse should be protected, to provide greater stability for providers and facilitate improvements in service planning.

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d) To recommend to the Health and Wellbeing Board that:

i) the Board was best placed to provide management and accountability for the multi-agency approach required to tackle domestic abuse in Suffolk. It should therefore undertake this role;

ii) a strategic commissioners group should be established with clear terms of reference and membership, to take responsibility and be accountable for leading on the development of joint commissioning arrangements and overseeing the implementation of the recommendations from the Interim Report. This should include the development of common outcomes/metrics (including "soft" metrics) to enable progress to be measured;

iii) that a Partnership Action Plan should be developed, setting out who would be responsible for taking forward the recommendations in the Interim Report, for agreement by the Health and Wellbeing Board, ideally by November 2016;

iv) in developing the Action Plan, maximum use should be made of the knowledge held by the charity "SafeLives" to help inform this work, including the Lancashire model of triage and data sharing, and the Hertfordshire model of joint commissioning;

v) if long term change in the prevalence and patterns of domestic abuse was to be achieved, the behaviour of perpetrators must be tackled. Best practice from other areas, for instance the Drive Scheme, must be part of this work;

vi) the recommendation of the Interim Report to *"co-ordinate the development of the Suffolk Domestic Abuse Hub with the "One Front Door within the MASH .."*, should be commended.

e) To ask the Member with Special Responsibility for Stronger Families to increase the role of Suffolk Family Focus in tackling domestic abuse, including the strategies in place for supporting families affected by domestic abuse and strategies for tackling the behaviour of perpetrators;

f) To commend the Crime Stoppers campaign in Suffolk, which aimed to raise awareness of the issue of domestic abuse and provided an opportunity for people to report concerns anonymously.

**Reason for recommendation**:

a) Members considered that the report set out clearly the factors affecting the way in which domestic abuse was tackled, as well as the priorities for improvement. They appreciated that the report had been co-produced, with contributions from members of the Suffolk Domestic Abuse Partnership, practitioners, professionals and some victims. Members heard that, from a national perspective, Suffolk could be congratulated on the commitment shown and the progress made over a relatively short period. Examples of evidence of progress included: police officers in Suffolk had already received training about recent legislation on coercive control; community safety now came within the same directorate as Public Health; there was a Multi Agency Safeguarding Hub (MASH); and some



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work had already started on aligning commissioning. The Committee was aware that there were some gaps in provision, but heard that this was typical of the situation across the country.

b) The Committee was aware that a large number of people were involved with tackling domestic abuse, and considered that they needed strong leadership to give focus and keep the subject high on the political agenda.

c) Members were aware that budgets relating to domestic abuse were managed across three different directorates within the County Council, and wished to see the various funds identified and brought together so as to maximise the benefits and avoid duplication of effort. The Committee recognised that such pooling might present some difficulties, but considered that the effort should be made as a first step towards achieving joint commissioning of services across the Suffolk system, which was seen as the best way to use limited resources.

Successful, joint commissioning required a long-term commitment to protected funding and an alignment of commissioning cycles, in order to give participating agencies greater confidence that their plans would come to fruition and their money would be spent to best effect. By contrast, existing services were sometimes hampered by short-term funding plans, and the County Council's spending plans were not aligned with those of other agencies, because it was elected on a different cycle to other authorities.

d)(i) The Committee supported the view expressed in the Interim Report that there were currently no clear governance arrangements for domestic abuse in Suffolk. Members were aware that the Health and Wellbeing Board's remit included: promoting integrated approaches particularly between health, care, the police and the broader public services family; and influencing commissioning plans to encourage integrated approaches. Its membership included representatives of agencies involved in tackling domestic abuse, such as local authorities, clinical commissioning groups, the Police and Crime Commissioner, the Suffolk Constabulary and the Voluntary Sector Congress. Therefore the Board was seen as best placed to take overall responsibility.

d)(ii) The Committee considered it imperative that there should be clarity as to which group was responsible and accountable for taking a strategic approach towards the development of joint commissioning arrangements and for implementing the recommendations in the Interim Report. That group would need to monitor contracts and evaluate the effectiveness of the different services commissioned. In order to do this, service providers needed to be given a clear understanding of what they were required to achieve, in the form of an outcomes framework. This should be common to all contracts to ensure consistency. Members heard that it was not always easy to measure what a 'good' outcome was in relation to domestic abuse, but they recognised that it would be useful to consider qualitative or "soft" measures (such as "sustainable progress") as well as hard statistics (such as the number of referrals received).



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d)(iii) The Committee supported the recommendations in the Interim Report, but accepted that they were broad and needed to be translated as soon as possible into a set of agreed medium- to long-term actions, each one assigned to a responsible lead..

d)(iv) It was evident to the Committee that SafeLives, as a national charity, was a source of very useful expertise and advice. Members wished to see this knowledge and experience used to full effect. In particular, they considered that the Action Plan should reflect learning from other parts of the country. For example, they heard that in Hertfordshire clinical commissioning groups, local authorities and the police had agreed a memorandum of understanding to facilitate joint commissioning, and in Lancashire progress had been made as regards developing a robust database and an effective method of triage.

d)(v) Members wished to highlight the importance of working with perpetrators to modify their behaviour, as this was recognised but not dealt with in detail in the Interim Report. They heard about "Drive", a scheme being piloted by SafeLives in South Wales, Sussex and Essex to challenge the behaviour of perpetrators, and co-ordinate the response they received across all agencies. The Committee wished to see best practice from schemes such as this replicated in Suffolk.

d)(v) The Committee recognised that a domestic abuse "hub" would encourage joint working, provide a single point of contact for all victims, and facilitate consistent data collection/sharing. Members wished to see such a hub aligned with the Suffolk MASH because of the considerable benefits already resulting from the work done by the MASH. This work was to be supported by a new "Single Front Door" project whereby any safeguarding concern would be referred to a single team for Suffolk, who would research the concern and assign a risk rating to each family member.

e) The Committee was aware that Suffolk Family Focus (SFF) had expanded the government's "Troubled Families" programme to include families affected by domestic violence and abuse. Members wished to see SSF playing an even greater role in strengthening and supporting such families, because an underlying theme throughout the discussions was that there was a whole family role and effect. The family focus approach was seen as vital in exposing and identifying abuse within the home. The Committee heard that SFF already worked with perpetrators though its "Caring Dads" programme, but that there was scope for a more joined-up approach with the police.

f) The Committee heard that as part of the national Crime Stoppers initiative, the Police and Crime Commissioner had provided funding for a campaign about domestic abuse in Suffolk, which had received national recognition for its innovative approach.

**Alternative options**: None considered.

**Declarations of interest**: None declared.

**Dispensations**: None noted.

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