



## Cabinet Report

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**Report of:** Executive Director, Communities

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**Report to:** Cabinet

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**Date:** 17<sup>th</sup> September 2014

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**Subject:** Domestic Abuse Procurement

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**Author of Report:** Jo Daykin-Goodall (0114 273 6851)

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**Key Decision:** YES

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**Reason Key Decision:** Expenditure over £500,000

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### Summary:

This report outlines the procurement plan for community based domestic abuse services in Sheffield, which is necessary as current contracts are coming to an end in March 2015. In doing this we are taking the opportunity to find efficiencies so that we can meet increasing demand for domestic abuse services. Demand is increasing (national estimates are that only around 40% of domestic abuse is reported - British Crime Survey) as people are increasingly confident about coming forward and agencies are getting better at identifying people affected by domestic abuse. This is a good thing: it means we can get support to people as early as possible and to those that need it most.

The key change that is being proposed is the consolidation of three contracted areas which are:

- High Risk<sup>1</sup> Domestic Abuse Service (Independent Domestic Violence Advocacy Service – IDVAS)
- Medium and Standard Risk Domestic Abuse Service (Helpline, Outreach

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<sup>1</sup> The agreed response to domestic abuse is to risk assess using the national Domestic Abuse Stalking and Honour Based Violence (DASH) tool to ascertain who is at greatest risk of harm and respond accordingly. The current contracts therefore reflect the different levels of risk.

- and Group work)
- Domestic Abuse Workforce Development Contract
- into two contracted areas as follows:
- High Risk Domestic Abuse Contract including specialist workforce training (e.g. risk assessment, lessons from Domestic Homicide Reviews)
  - Medium and Standard Risk Domestic Abuse Contract including workforce briefings (e.g. domestic abuse awareness, and referral pathways)

It is proposed that the Workforce Development Contract provision is therefore included within the two remaining contracts.

It is proposed that the new contracts are awarded for three years with the option of extending for a further two years depending on need, performance and budgets.

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### **Reasons for Recommendations:**

This re-procurement exercise is necessary for compliance with Council Contract Standing Orders. It is also informed by the Domestic Abuse needs assessment and the performance management of existing contracts over the past year. A Domestic and Sexual Violence and Abuse strategy has recently been developed which recognises the impact of domestic abuse on thousands of people in Sheffield every year, and commits the Council to continuing to provide support services to those affected.

The inclusion of training services in the scope of the two other contracts will enable economies of scale to be exploited. This will help us to limit the increased investment in domestic abuse services next year to just under £70,000 – far less than the actual pressure on services which amounts to around £200,000.

We did consider moving to a single contract for community based domestic abuse services but feel that the proposed arrangements will enable us to ensure adequate focus is both on early intervention and prevention, and meeting the immediate safety needs of people who are in a very high risk, potentially life-threatening situation.

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### **Recommendations:**

It is recommended that:

- Cabinet approves the commissioning and procurement plan for domestic abuse services outlined in the report
- Cabinet delegates authority to the Director of Commissioning (Communities) or their nominated representatives] to take the necessary steps to implement the commissioning and procurement plan for domestic abuse services in consultation with the Director of Commercial Services and the Director of Legal Services, or their nominated representatives.

- Cabinet delegates authority to the Director of Commissioning (Communities) to award the contracts to the successful tenderers.

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**Background Papers: Sheffield Domestic and Sexual Violence and Abuse Strategy 2014-17**

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**Category of Report:        OPEN**

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## Statutory and Council Policy Checklist

<b>Financial Implications</b>
YES Cleared by: Paula Shepherd
<b>Legal Implications</b>
YES Cleared by: Sarah Bennett
<b>Equality of Opportunity Implications</b>
YES Cleared by: Phil Reid
<b>Tackling Health Inequalities Implications</b>
YES
<b>Human Rights Implications</b>
NO
<b>Environmental and Sustainability implications</b>
NO
<b>Economic Impact</b>
NO
<b>Community Safety Implications</b>
YES
<b>Human Resources Implications</b>
NO
<b>Property Implications</b>
NO
<b>Area(s) Affected</b>
All
<b>Relevant Cabinet Portfolio Lead</b>
Councillor Mary Lea, Cabinet Member for Health, Care and Independent Living Councillor Harry Harpham, Cabinet Member for Homes and Neighbourhoods
<b>Relevant Scrutiny Committee</b>
Safer and Stronger Communities
<b>Is the item a matter which is reserved for approval by the City Council?</b>
YES
<b>Press Release</b>
NO

## **REPORT TO CABINET**

### **DOMESTIC ABUSE PROCUREMENT**

#### **1. SUMMARY**

1.1 This report outlines the procurement plan for community based domestic abuse services in Sheffield which is necessary as current contracts are coming to an end in March 2015. In doing this we are taking the opportunity to find efficiencies so that we can meet increasing demand for domestic abuse services. Demand is increasing (national estimates are that only around 40% of domestic abuse is reported - British Crime Survey) as people are increasingly confident about coming forward and agencies are getting better at identifying people affected by domestic abuse. This is a good thing: it means we can get support to people as early as possible and to those that need it most.

The key change that is being proposed is the consolidation of three contracted areas which are:

- High Risk<sup>2</sup> Domestic Abuse Service (Independent Domestic Violence Advocacy Service – IDVAS)
- Medium and Standard Risk Domestic Abuse Service (Helpline, Outreach and Group work)
- Domestic Abuse Workforce Development Contract
- into two contracted areas as follows:
- High Risk Domestic Abuse Contract including specialist workforce training (e.g. risk assessment, lessons from Domestic Homicide Reviews)
- Medium and Standard Risk Domestic Abuse Contract including workforce briefings (e.g. domestic abuse awareness, and referral pathways)

It is proposed that the Workforce Development Contract provision is therefore included within the two remaining contracts.

It is proposed that the new contracts are awarded for three years with the option of extending for a further two years depending on need, performance and budgets.

#### **2. WHAT DOES THIS MEAN FOR SHEFFIELD PEOPLE**

2.1 Demand for community based domestic abuse services is growing in Sheffield and this is to be expected as national estimates (British Crime Survey) are that only around 40% of domestic abuse is reported. The rise in reporting is likely to be due to a range of factors including increased

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<sup>2</sup> The agreed response to domestic abuse is to risk assess using the national Domestic Abuse Stalking and Honour Based Violence (DASH) tool to ascertain who is at greatest risk of harm and respond accordingly. The current contracts therefore reflect the different levels of risk, which are set out in Appendix 1.

confidence in agency responses and public awareness. The re-procurement of existing domestic abuse services provides an opportunity for market testing the current model, encouraging innovative ideas for delivering quality responses, increasing the role of volunteering in the services and meeting rising demand through identification of possible efficiencies.

- 2.2 The intention is that Sheffield will continue to build on the successful work of previous years in ensuring good quality, effective services are available to all victims of domestic and sexual abuse and violence in the city at the point of need. In this difficult economic climate this re-procurement is intended to ensure that services are flexible, responsive and get it 'right first time'.
- 2.3 As is the case currently, services will be designed to be accessible to all Sheffield people who are or have been experiencing domestic abuse who are 16 years or over e.g. women and men from all of Sheffield's diverse communities including those in same sex relationships and including people who are disabled.
- 2.4 As set out below, the commissioning model proposed has been based on data, intelligence and service user feedback.
- 2.5 The overall aim is to get the balance right between providing services for people at high risk of serious harm or even fatal injury, and services that can offer support at an early stage (to people assessed as being at medium and standard risk of serious harm) to prevent a situation becoming worse.
- 2.6 It is also imperative that local agencies have the knowledge and skills to identify people affected by domestic and sexual abuse and violence, including children and young people, and are able to respond and refer appropriately. The city has commissioned a separate Workforce Development contract for several years but it is now felt that there would be benefits to be gained from linking the provision of training and workforce updates directly with the relevant expertise based in the commissioned services, plus it is likely there will be efficiencies to be gained from combining this work with the contracts for support.

### **3. OUTCOME AND SUSTAINABILITY**

- 3.1 Domestic and sexual abuse are areas that are recognised as priorities and areas of rising demand in the city's Joint Strategic Needs Assessment<sup>3</sup> and Joint Strategic Intelligence Assessment. 'Domestic abuse related reported incidents continue to increase year on year, with over 10,000 incidents in 2012/13. [NB 2013/14's total incidents had risen to 11,639] This should not necessarily be interpreted negatively as we know a significant number of incidents go unreported and the rise may be a reflection of increasing public awareness following national and local campaigns alongside improved police

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<sup>3</sup> <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/JSNA/positionstatement.html>

domestic abuse processes<sup>4</sup>.

- 3.2 The rise in reporting can also be attributed to the development of a more robust governance structure following the Strategic Review of Domestic Abuse in 2012. This enabled the development and promotion of a clear pathway to support, and focussed workforce training and briefings on supporting agencies to identify, risk assess and refer people affected by domestic abuse. There has also been greater agency awareness of the issues as a result of domestic homicide reviews conducted in the city since 2011. However Sheffield is still in a phase of identifying the level of domestic abuse and actively seeking cases for intervention particularly in certain communities or groups that we know are underrepresented in terms of reporting - such as new arrivals to the city. Data collection has been problematic in the past but is improving so we are becoming more confident in our estimation of the size of the problem in the city.
- 3.3 It is therefore clear that there is a need to commission for extra capacity to meet this rising demand – there were nearly 600 more referrals than the services were commissioned to respond to in 2013/14. The IDVA service already has extra capacity this year and next thanks to additional funds identified which has enabled an extra FTE IDVA to be recruited this year. However further capacity is still needed. The extra funds required amount to £69,300 in order to boost capacity by another FTE worker per contract. The rising demand is being factored into business planning for 2015/16 and the re-procurement will reflect the available budget following this process. We are working with partners (Office of the Police and Crime Commissioner (OPCC), Clinical Commissioning Group (CCG) etc.) to identify funds external to the Council to support our commissioning. However, we are aware that the funding available may not be sufficient to meet demand and will throughout the re-procurement and through contract management be working closely with providers to manage risk and identify priorities.

## **4. MAIN BODY OF THE REPORT**

### **4.1 Background**

It is estimated that around 16,000<sup>5</sup> adults and 12,000 children are affected by domestic or sexual abuse or violence in Sheffield every year. Women are the majority of victims – reflecting the fact that domestic and sexual violence and abuse remain gender issues in the city and the wider UK. Incidents of domestic and sexual abuse and violence remain under reported and under recorded nationally and locally. Increased reporting levels are therefore likely to indicate that people in the city have greater awareness of and improved confidence in, local services. In Sheffield 26% of the total recorded violent crime is as a result of domestic abuse, and from April 2013 to March 2014 11,639 incidents were reported to the police which is an increase of 1,164 incidents compared to the previous financial year. The estimated cost to

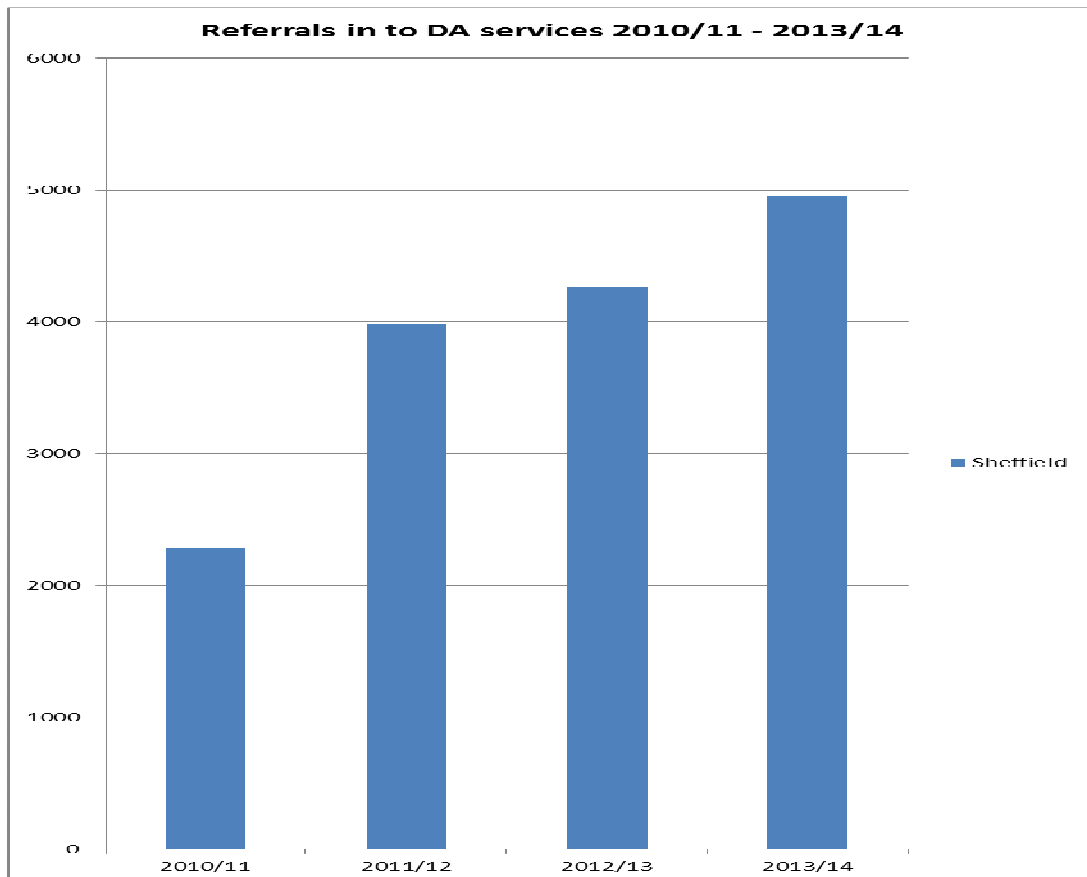
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<sup>4</sup> Ibid

<sup>5</sup> Only a proportion of adult victims report to the police hence this is higher than the Police incidents total

Sheffield of domestic and sexual abuse and violence each year is over £106.5 million. A domestic and sexual abuse needs assessment for the city can be found at: <http://sheffielddact.org.uk/domestic-abuse/domestic-abuse-needs-analysis-2013/>

Commissioned support services have also seen a rise in referrals. 2013/14 saw referrals to the High Risk and Medium and Standard risk services rise to 4965 – up by 699 referrals from the previous year. The trend over recent years is illustrated by the graph below:



#### 4.2 Current Contracts

Sheffield has several services for adults which are jointly commissioned by the Council and other partners. The contracts for the following services are due to expire this year: -

- A High Risk Service (*Independent Domestic Violence Advocacy Service – taking the victim’s voice into the MARAC process*)
- A Medium and Standard Risk Service (*Domestic Abuse Helpline, Outreach Service, structured group work and support groups*)
- Workforce development (*training and briefings to staff to enable them to identify, risk assess and refer people affected by domestic abuse, and offer initial safety planning*)

The specifications for these existing services were redesigned when the



existing contracts were renegotiated with existing providers in 2013 based on waivers of standing orders. Thus this will be the first time the services have been put out to the market by the Council.

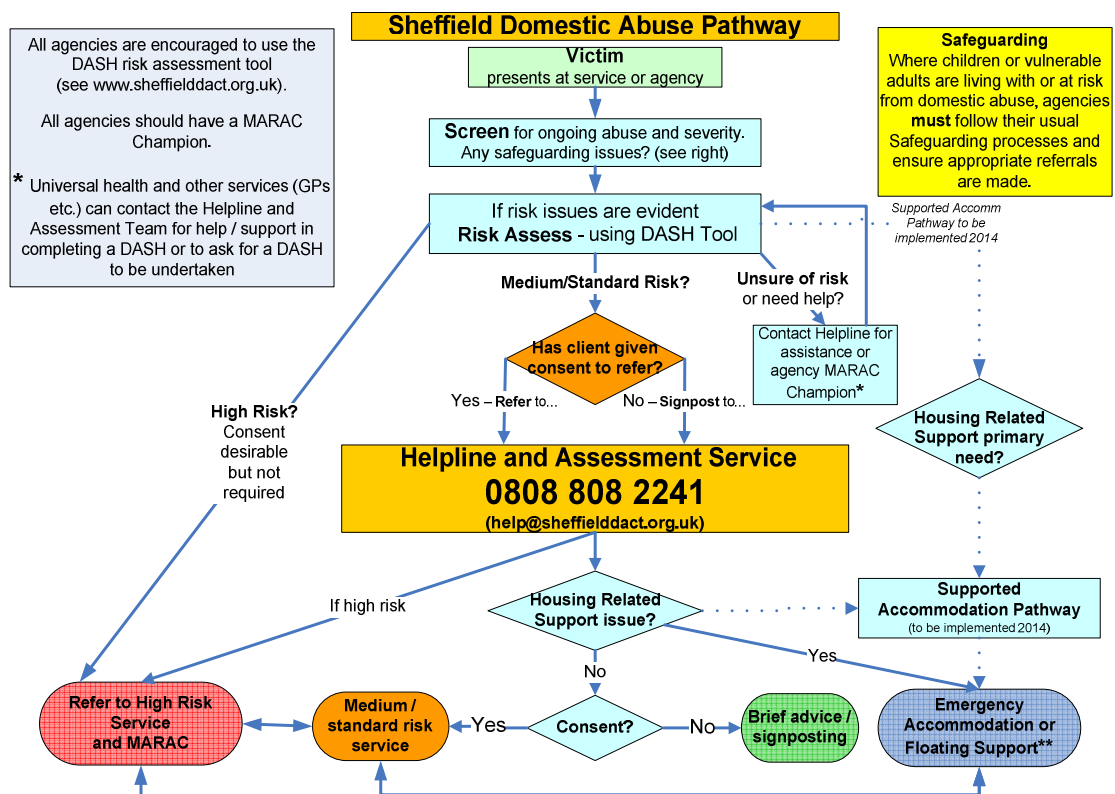
### 4.3 Commissioning and Procurement Plan

#### (a) Principles and drivers informing the commissioning process

The overall aim is to get the balance right between providing services for people at high risk of serious harm or even fatal injury, and services that can offer support at an early stage (to people assessed as being at medium and standard risk of serious harm) to prevent a situation becoming worse.

As well as responding to those most at risk it is also vital that people affected by domestic and sexual violence and abuse are offered information about the options for keeping themselves and their families safe as early as possible.

The services will sit within a commissioned pathway and link with the new Supported Accommodation Pathway in order that there is a smooth transition if people require housing related support (refuge or floating support commissioned by the Housing Independence Service) or when risk levels change. See diagram below:



People who have experienced domestic and sexual abuse and violence also need to be offered support to recover from the medium and long term impact. The services procured will include structured group work programmes and less formal support groups, as well as clear pathways to counselling and other specialist services that may be required.

It is also imperative that local agencies have the knowledge and skills to identify people affected by domestic and sexual abuse and violence, including children and young people, and are able to respond and refer appropriately.

Service users were consulted in October 2013 regarding the development of the Domestic and Sexual Abuse Strategy for the city including the future development of service provision. They were consulted on the procurement plans in early August 2014. We have taken into account their comments in deciding what services we wish to commission so that the services provided are responsive to how local people wish to use domestic abuse services as well as local need and demand for services (see Appendix 2). The Domestic Abuse Provider Consultation Group was consulted in July 2014 but no feedback was received.

Another driver informing the commissioning process has been the need to balance increased demand and increased spending pressures. The rising demand, as outlined above, is being factored into business planning for 2015/16 and the re-procurement will reflect the available budget following this process. Work is also being undertaken with other public sector bodies (Office of the Police and Crime Commissioner (OPCC), Clinical Commissioning Group (CCG) etc.) to identify funds external to the Council to support our commissioning.

The proposals regarding the nature of the contracts to be re-procured (please see below) enable economies of scale to be exploited that will reduce the increased spend necessary to respond to the increase in demand.

If demand continues to increase there is the possibility that the funding available may not be sufficient to meet demand and throughout the re-procurement and through contract management processes built into the contracts the Council will work closely with potential and successful providers to manage risk and identify priorities.

(b) The Proposed Contracts

Our intention is to procure two contracts as follows:

- **High Risk Service** – delivery of an Independent Domestic Violence Advocacy Service plus training to be delivered on Risk Assessment and MARAC, Responding to Adult Survivors of Sexual Violence and Abuse; Forced Marriage, Honour Based Violence and Female Genital Mutilation and briefings on Lessons Learned from Domestic Homicide Reviews. The contract will include targets based on anticipated levels of need based on the levels of high risk cases in the city since the MARAC was established and the current trends in relation to these referrals.

It is hoped that further investment will be identified this year from the Office of the Police and Crime Commissioner that will enable the expansion of the High Risk Contract to include Independent Sexual Violence Advocates for victims of sexual violence. We are in discussion

with the OPCC about this and have been informed by them that we will know if this is the case by autumn 2014.

- **Medium and Standard Risk Service** – delivery of a Helpline, Outreach Support, specific support to Health staff with risk assessment, and Structured Group Work. Plus briefings to staff across the workforce on what is domestic abuse, pathways and referral routes, working with male victims and domestic abuse new starter and volunteer training. The contract will include targets based on anticipated levels of need based on the levels of medium and standard risk cases in the city since 2010 and the current trends in relation to these referrals.

It is proposed that the new contracts are awarded for three years with the option of extending for a further two years depending on need, performance and budgets.

The city has commissioned a separate Workforce Development contract for several years but it is now felt that there would be benefits to be gained from linking the provision of training and workforce updates directly with the relevant expertise based in the commissioned services, plus it is likely there will be efficiencies to be gained from combining this work with the contracts for support.

Going forward we wish to differentiate between training (on specialist areas such as risk assessment) and briefings on referral routes and pathways. It is therefore proposed that where specialist training is required (e.g. on Risk Assessment, Sexual Violence, Forced Marriage / Honour Based Violence etc.) this is delivered as part of the High Risk contract. The Medium and Standard Risk Service will offer practical briefings on pathways and referral routes, plus new starter and volunteer training and working with male victims. The High Risk service will also deliver briefings on lessons learned from Domestic Homicide and Serious Incident Reviews.

The Drug and Alcohol / Domestic Abuse Coordination Team (DACT) of the Council will hold the budget for the services and performance manage the contracts. There is a Domestic Abuse Governance Structure, facilitated by the DACT which involves strategic leads, commissioners, stakeholders, providers and service users. The Domestic Abuse Strategic Board reports to the Safer and Sustainable Communities Partnership Board (the lead body for performance monitoring in relation to violent crime).

#### Contract Values

- (c) The table below sets out the existing contract values and the proposed budget for the procurement process that is currently being considered as part of the Communities budget process:

<b>Contracts</b>	<b>Contract Values 2014/15</b>	<b>Proposed increase 2015/16</b>	<b>Proposed contract values 2015/16</b>
High Risk Contract (IDVAs)	<b>£309,985</b> Includes £20,000 direct to provider that is expected to transfer to OPCC next year	<b>£59,650</b> £34650 for FTE IDVA plus on costs £25,000 for training element	<b>£369,635</b> Includes minimum £20k funding via OPCC
Standard & Medium Risk Contract (Helpline and Outreach)	<b>£337,376</b>	<b>£49,480</b> £34650 for FTE Outreach worker plus on costs £14,830 for workforce briefings and training element	<b>£386,856</b>
Workforce Development Contract	<b>£39,830</b>	Split between 2 contracts above <b>-£39,830</b>	
<b>TOTAL</b>	<b>£687,191</b>	<b>£69,300</b>	<b>£756,491</b>

Based on the figures shown above, over the initial 3 years the value of the High Risk Contract (IDVAs) will be £1,108,905. If the contract was extended for a further 2 years this would take the overall contract value to £1,848,175.

Based on the figures shown above, over the initial 3 years the value of the Standard & Medium Risk Contract (Helpline and Outreach) will be £1,160,568. If the contract was extended for a further 2 years this would take the overall contract value to £1,934,280.

#### The Proposed Procurement Route

The procurement of the High Risk Service and Medium and Standard Risk Service will be conducted as a full one stage tender exercise as agreed with Commercial Services.

- (d) The two contracts will be advertised on YoR Tender as two separate lots within one procurement exercise. A one stage process has been agreed as most suitable (PQQ and ITT are submitted together as a complete bid) as it is unlikely that a high number of non-specialist agencies would bid for the contracts which would necessitate the use of the PQQ stage for shortlisting. As such, PQQs are marked first upon submission by evaluators, however, bidders could only be eliminated at this stage if they were unable to answer satisfactorily one of the 'pass/fail' only questions during the PQQ stage. All bidders who do pass all such questions will be invited to bidder presentation and their full ITT will be marked and evaluated.

**4.4 Financial Implications:** The majority of funds for these contracts are budgeted for within the Sheffield City Council Communities General Fund. A small proportion of funding is currently provided by the OPCC which contributes to the overall commissioning pot (this is likely to increase by a minimum of £20,000 next year as funds that go direct to the provider from central government currently are devolved to localities). The funds for the training / workforce development aspects are provided by the Sheffield Clinical Commissioning Group.

As stated previously in point 3.3 there is a need to commission for extra capacity to meet this rising demand – there were nearly 600 more referrals than the services were commissioned to respond to in 2013/14. The extra funds needed to meet this demand amount to £69,300 in order to boost capacity by one FTE worker per contract. The rising demand and therefore increased cost of the contracts is being factored into business planning for 2015/16 and the re-procurement will reflect the available budget following this process.

There are also positive indications that further funding will be available from the OPCC (in addition to the devolved funds mentioned above) that will enable the expansion of the High Risk Contract to include Independent Sexual Violence Advocates for victims of sexual violence due to the devolvement of other central government funding for work with victims. We are in discussion with the OPCC about both of the potential funding streams and have been informed by them we will know if this is the case by autumn 2014.

If the necessary increase in funding cannot be identified this could result in longer waiting times. The providers will work within specified capacity and this will be finalised prior to the issuing of the contracts –in a situation where funding is not increased contracts will require providers to prioritise medium and high risk referrals, and offer support for shorter periods. However this still carries some risk in that a proportion of cases will escalate in risk level when early intervention could have prevented this, and the effectiveness of the service may be reduced if it is offered for a shorter period.

**4.5 Equality of Opportunity Implications:** An Equality Impact Assessment has been undertaken and re-procurement of domestic abuse community based services will not have any negative impact on groups with protected characteristics.

A woman is the victim in 83% of all incidents reported to the police, and women equate to 95% of all those accessing support. However, we are committed to ensuring that domestic abuse services are not perceived as 'women only' (with the exception of the women's refuges) and that men who need services are aware of them and feel able to access them and this will be addressed in service specifications.

The proportion of Black and Minority Ethnic (BME) people accessing

community domestic abuse support services is around 30% of the total accessing support. These proportions are both higher than the 19% Sheffield BME population and the 15% of reported incidents to the police that have a BME victim. However we are aware that overall figures may mask barriers to accessing support for particular communities and we will ensure that services are promoted to local populations where evidence suggests there is less take up than should be expected.

Less than 1% of those accessing support services are Lesbian, Gay Bisexual or Transgender. Overall these figures suggest that further outreach is needed to promote awareness that services are available to support people affected by domestic abuse regardless of their ethnicity, sexuality or gender. Services commissioned will be required to demonstrate that they are proactively offering support to people affected by domestic abuse in hard to reach communities.

Local voluntary sector providers may be impacted if they are not successful when bidding for the tenders but this is unavoidable due to procurement law / standing orders.

**4.6 Legal implications:** The provision of domestic abuse services in Sheffield is aimed at contributing to the social, and economic, wellbeing of Sheffield residents. The Council has a general power under section 1 of the Localism Act 2011 to act in any way that it sees fit, provided that the activity falls within the law and is in the best interests of their local area.

The proposed contracts outlined in this Report have a value in excess of the threshold for contracts for services (£172,514) in the Public Contracts Regulations 2006 (the 'Regulations') and thus the procurement and contract award processes to be followed in relation to the proposed contracts will be subject to those Regulations. However, health services are Part B Services for the purposes of the Regulations and as such, only some of the requirements of the Regulations will apply.

The Council should also comply with the general EU Treaty principles such as non-discrimination, transparency and proportionality. This will require an open and fair procedure to be adopted.

The procurement process proposed, which also complies with the Council's Contract Standing Orders, should ensure the Council fulfils these legal obligations.

Neither a reference during or after this procurement process to the Regulations or the use of language or terminology common to the Regulations shall require the Council to conduct a fully regulated procurement in accordance with the Regulations.

A change in service provider will have an impact on the staff providing the service and TUPE may apply if a new provider is awarded either of the contracts. It will be suggested to bidders that they consider the potential impact of TUPE and current providers will be required to share information as

appropriate in accordance with their existing contracts and TUPE regulations.

## 5. ALTERNATIVE OPTIONS CONSIDERED

- 5.1 The possibility of merging all three contracts was considered. This was rejected in order to ensure that both High Risk and Medium / Standard Risk client groups are seen as important and given adequate focus by the successful providers. This way we feel certain that providers should be clear about the outcomes we want for both groups of service users.
- 5.2 The option of not procuring domestic abuse services at all was also considered. This was rejected as domestic abuse is recognised as a priority by the Safer and Sustainable Communities Partnership in its Partnership Plan for 2014- 17. Domestic Abuse was identified as a priority as: 'There has been an increase in the number of domestic abuse incidents reported to the Police over the last few years, and an increase in the number of high risk cases referred to the Multi-Agency Risk Assessment Conference (MARAC) over the last year. This reflects greater clarity from professionals and the public on how to access support for domestic abuse. Referral processes between the Police and domestic abuse services are more robust and the availability of the domestic abuse helpline has increased, meaning that victims feel more able to report. Just under a quarter are repeat victims and a quarter have mental health problems....Information about the support services available must widely distributed and those suffering must continue to be supported to be able to safely report it. There are things that all organisations can do to further this, including increasing the wider knowledge of domestic abuse, including an understanding of risk issues, how to report it and how to access support.'<sup>6</sup>
- 5.3 A Domestic and Sexual Violence and Abuse Strategy has also recently been developed for the city which outlines the impact of domestic abuse on people and services in the city. Not procuring domestic abuse services in the city would be counter to the commitment contained in the strategy to 'continue to ensure the **provision of good quality services** that are responsive to local need, and get it right first time. We will do this by:-

*Commissioning efficient and responsive services whose staff can demonstrate understanding of the needs of users, and effectively performance managed*<sup>7</sup>

## 6. REASONS FOR RECOMMENDATIONS

- 6.1 This re-procurement exercise is necessary for compliance with Council standing orders. It is also informed by the Domestic Abuse needs assessment and the performance management of existing contracts over the past year. A

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<sup>6</sup> SSCP Partnership Plan 2014-17 page 13.

<sup>7</sup> Sheffield Domestic and Sexual Abuse and Violence Strategy 2014-17 [www.sheffielddact.org.uk](http://www.sheffielddact.org.uk)

Domestic and Sexual Violence and Abuse strategy has recently been developed which recognises the impact of domestic abuse on thousands of people in Sheffield every year, and commits the Council to continuing to provide support services to those affected.

The inclusion of training services in the scope of the two other contracts will enable economies of scale to be exploited. This will help us to limit the increased investment in domestic abuse services next year to just under £70,000 – far less than the actual pressure on services which amounts to around £200,000.

We did consider moving to a single contract for community based domestic abuse services but feel that the proposed arrangements will enable us to ensure adequate focus is both on early intervention and prevention, and meeting the immediate safety needs of people who are in a very high risk, potentially life-threatening situation.

## **7. RECOMMENDATIONS**

### **7.1 It is recommended that:**

- Cabinet approves the commissioning and procurement plan for domestic abuse services outlined in the report.
- Cabinet delegates authority to the Director of Commissioning (Communities) or their nominated representatives] to take the necessary steps to implement the commissioning and procurement plan for domestic abuse services in consultation with the Director of Commercial Services and the Director of Legal Services, or their nominated representatives.
- Cabinet delegates authority to the Director of Commissioning (Communities) to award the contracts to the successful tenderers.

Author	Jo Daykin-Goodall
Job Title	Head of DACT
Date	22 <sup>nd</sup> July 2014



## Appendix 1

### Risk Definitions in relation to Domestic Abuse

Standard Risk - Current evidence does NOT indicate likelihood of causing serious harm

Medium risk - There are identifiable indicators of risk of serious harm. Perpetrator has potential to cause serious harm but serious harm is unlikely unless there is a change in circumstances

High Risk - There are identifiable indicators of imminent risk of serious harm. Dynamic - an incident could happen at any time and the impact would be serious.

Serious harm - A risk that is life threatening and / or traumatic, and from which recovery, whether physical or psychological, can be expected to be difficult or impossible.

## Appendix 2

### Domestic Abuse Services Procurement Consultation Feedback

#### 1. Provider Consultation Group (PCG)

Prior to submitting the Cabinet Report for decision in September 2014 a consultation process has been carried out on the proposed model for Domestic Abuse Services from 1 April 2015.

A presentation was delivered on Monday 28 July 2014 at the Domestic Abuse 'Provider Consultation Group' which is a bi-monthly meeting of both DA service providers and relevant stakeholders working with these service users on a regular basis.

At the meeting some questions were asked and answered which included the reason behind the chosen model.

The presentation was circulated to the group via e mail after the meeting and all on the distribution list were invited to provide feedback on the model by 5pm on 14 August 2014.

DACT received one e mail addressing the following questions from a member of the PCG on 4 August 2014:

- 1. In the division of the workforce development contract between the HR and M/SR contracts, where will the other courses sit that the provider currently deliver with Sheffield Safeguarding Children Board, which aren't specifically Risk Assessment & MARAC:**
  - **Safeguarding Children & Young People Affected by Domestic Abuse**

- **Young People Affected by Intimate Partner Abuse**
  - **Multi-Agency Refresher Seminars – we presume these will go with the HR contract as that includes lessons from DHR/SIR's?**
2. **Has there been any opportunity for the SSCB Training Manager responsible for the domestic abuse related training, to give her views about where she thinks their training should sit?**
  3. **Will the new accredited course on 'Safeguarding Against Forced Marriage, HBV & FGM' be replacing the existing course currently delivered by SSCB with the current provider, or be commissioned in addition to that training?**
  4. **High Risk Contract – when it says capacity will be based on high risk cases since 2010 – presumably that doesn't mean averaged out over the years!**

**Can we be reassured that the desired capacity will be based on actual referral levels in 2014-15 - we are aware that referrals to MARAC alone increased by two thirds last year over the previous year, and look likely to increase by half again in the current year.**

5. **Is it possible to know how many ISVA's the PCC funding is likely to fund for Sheffield, if that is agreed later this year?**

These questions were answered via e mail on 5 August 2014 as follows:

1. The training referred to within your first question will all be contained in the specification for the high risk service.
2. Yes the SSCB Training Manager has given her views on this.
3. The new accredited course will replace the existing course.
4. Capacity will be based on 2014/15 numbers and will account for upward trends if funds allow. Based on numbers since 2010 refers to the upward trend since then rather than an average number.
5. We can't provide any more information on this as yet as we don't have it ourselves, sorry.

A reminder was sent to all PCG members via e mail on 13 August 2014 reminding them that the deadline for feedback was 5pm on 14 August 2014.

There have been no further communications, questions or feedback about this.

**Outcome** – the specifications will clearly identify which workforce development elements are to be delivered and all existing courses will continue to be commissioned. The relevant elements are being developed in consultation with the Safeguarding Children Board. Capacity will be increased in line with 2014/15 numbers where funds allow and /or efficiencies can be achieved as a result of the procurement process.

## 2. Provider Advisory Group

The consultation slides were e mailed to DACT's Provider Advisory Group which is a group including commissioned and non-commissioned substance misuse treatment and support services. The same deadline was issued of 5pm on 14 August 2014.

There have been no responses to this consultation.

## 3. Domestic Abuse Service User Reference Group

The presentation taken to the Provider Consultation Group was also given to members of the DA Service User Reference Group held on 5 August 2014.

The members of the group were supported to give their feedback by the Domestic Abuse Strategy Manager and the Communities Officer for the DACT.

AH explained about proposed changes including three contracts down to two.

The following feedback was given by those present on the **High Risk Service**:

- Training needs to include young people with a focus on prevention within schools, targeting young men;
- Suggestion of a citizen programme;
- The IDVAS should offer face to face support, at the very least initially to gain trust, and if they did then the SU would be more likely to engage. This would help mainly with hard to reach groups – once a service has engaged with someone it's easier to maintain the contact via telephone;
- IDVA service in the past has focussed too much on the child protection or risk factors with less focus on the emotional support needs of the Service User;
- *'I felt like I was high risk and needed to be managed, once the risk had gone from high to medium the emotional and practical barriers are still there for me'.*
- *'For me, I think they need to have more of a person centred approach when dealing with clients, whilst I understand they are managing risk, I am in emotional turmoil and worried about how I am going to get out of this mess and I felt this wasn't acknowledged'.*
- It would be good to have an information pack to explain what the service offers and what to expect.

- The barriers to fleeing are varied but it would help to have advice on housing, employment, benefits, children, etc.

**Outcome** – the high risk specification has been amended to include a face to face appointment on first referral to the IDVA Service, provision of an information pack about the service and sign posting appropriately to external support agencies for wrap around needs such as housing, employment, benefits and children’s services.

The following feedback was given by the service users present on the **Medium and Standard Risk Service**:

- Training for volunteers needs to continue;
- Use of ex service users as ‘buddies’ to meet and greet and offer some support which would enable paid staff to focus more on their caseloads;
- Need practical support about how to be resilient;
- Current service can be inflexible in that you are allocated a set number of sessions that need to be used consecutively and it would be helpful if you could use your allocated number of sessions when your support needs require them;
- *‘Getting what you need, when you need it, not what the service dictates’;*
- Group work can be challenging at times and it would be good to offer it out of hours.

**Outcome** – The specification will be updated to include support in resilience, the use of ex-service users in supporting current service users and including providers needing to evidence flexibility in approach to delivery of their support sessions, and to offer some structured group work programmes out of office hours.