



Domestic Violence and Abuse Breakthrough Project

Annual Report December 2017

Foreword

Leeds City Council has established 8 breakthrough projects to support its ambition to be a compassionate city and have a strong economy. The breakthrough projects are designed to identify new ways of working within the council and with our partners to achieve the best outcomes for the city.



The Domestic Violence Breakthrough Project works with communities and services to further develop a coordinated response and integrated approach to domestic violence for the benefit of the people of Leeds. The human and financial impact of domestic violence and abuse to victims, families and communities is huge and features in the lives of many children, including those children the council needs to take into care. In addition to the harm and disruption to individual lives, the costs to public services and economic output are also widely recognised. Leeds has a history of working well and innovatively to address domestic violence and we have built on existing work with both current and new partners to further develop this.

This report covers progress between October 2016 and September 2017. Over this 12 months, we have made significant progress in some key areas resulting in better services for victims, more options available to perpetrators and increased support and protection for children. In this report, we show how feedback from service users, communities and partner agencies has informed our approach and helped work delivered over the last year make a positive difference to people in Leeds.

Cllr Lisa Mulherin,

Executive Board Member for Children and Families and Chair of the Domestic Violence Breakthrough Project.

The outcome we are seeking to achieve is:

People in Leeds can lead safer, healthier and happier lives and are free from the risks, threats and harms associated with Domestic Violence and Abuse.

Our **Shared Priorities** are:

*Changing attitudes and perceptions
(individuals and communities)*

*Supporting victims
(adults, children and families)*

*Challenging behaviours
(working with perpetrators)*

*Enabling Effective Change
(workforce & organisational response)*

Breakthrough Approaches

To make a step change in responding to domestic violence will require us to adopt the following approaches:

- Working together to develop a joined up and co-ordinated response;
- Working at scale, ensuring messages reach a significant proportion of our citizens and workforce;
- Transforming the way we work with families; embedding restorative and family focussed approaches throughout the workforce;
- Developing and implementing earlier and innovative interventions;
- Working with new partners and communities to extend reach and influence.

Domestic Violence and Abuse: Facts and Figures

- **19,591** domestic incidents were reported to the police in the 12 months to September 2017
- **44.5%** of those included a repeat victim (8,719 domestic incidents)
- **31.8%** were verbal incidents (6,228 domestic incidents)
- **47.0%** were incidents of violence (9,211 domestic incidents)
- **26%** (approx.) of referrals to CSWS every month have DV as the primary reason for referral
- **20.8%** involved male victims (3,746 male domestic incident victims)
- **30.6%** of incidents reported to the police had children (5,991 domestic incidents identified 'children present')
- Police in Leeds receive an average of **53** domestic violence and abuse calls every day
- **65%** (approx.) of babies under age of 1 year entering care had domestic violence as a factor (2017)
- **76.7%** involved female victims (13,781 female domestic incident victims)
- The numbers of victims who are self-reporting in the 12 months to Sept 2017 have increased with **5,972** domestic incidents identified as 'victim self-reported'.
- Domestic abuse costs the UK an estimated **£1.9 billion** in lost economic output every year.

Domestic Violence Snapshot Count

The 2016 Snapshot Count took place throughout the 16 Days of Action between the 25th November (the UN International Day of Elimination of Violence against Women) and the 10th December (International Human Rights Day). Statutory, voluntary and community sector organisations were asked to provide information about domestic violence disclosures to their service, the aim being to provide information on the scale and diverse nature of the service contacts.

Over the 16 days, 780 contacts were recorded by the police and 325 contacts were recorded by Leeds City Council, GP surgeries, the West Yorkshire CRC and other support providers.

During the count in 2015, 14 domestic violence referrals were made to Children's Services. In contrast, this year's count showed 221 referrals which is an average of 20 per day.

What Have We Achieved over the Last Year?

The Front Door Safeguarding Hub (FDSH) involves over 15 agencies coming together on a daily basis to share information, co-ordinate and plan responses in high risk cases of domestic violence. This includes high risk incidents attended by the Police in the previous 24 hours and high risk MARAC* referrals from a range of agencies.

A daily partnership meeting is a central element of the initiative. The focus of the meeting is to manage risk and co-ordinate appropriate support. Duplication and multiple contacts with victims are also minimised through this approach. Clear action plans are set with actions relating to victims, children and perpetrators. Since the FDSH was established as a key element of the DV Breakthrough Project, we have seen a **58% increase** in cases coming to the daily domestic violence meetings. This has been as a result of increased reporting but also due to the partnership arrangements enabling better identification of high risk incidents and increasing awareness across the partnership; leading to increased referrals. Over the last year, we have seen referrals from a broader range of agencies than had been the case previously; meaning more victims being supported by the partnership.

School Notifications

As part of the FDSH arrangements, schools now receive information at the beginning of the school day of any instance involving one of their pupils having been present at an incident of domestic violence the police have attended. Between April 2016 and March 2017, 4531 notifications have been completed to schools.

Feedback continues to demonstrate how useful schools are finding this information; which enables them to better support the child both immediately after an incident and in the longer term in whatever way is appropriate. In recognition of the benefit of this to Leeds, we are now supporting colleagues to roll out the process across West Yorkshire.



GP Notifications

A similar process was introduced in September 2016 where Clinical Commissioning Group (CCG) staff at the FDSH notify GPs of concerns for all victims identified at the daily domestic violence meetings. Since this was established, over **2976** notifications to GPs have been made. We have also seen an increase in referrals to the daily meeting from GPs. An audit of these notifications have enabled the CCG Safeguarding Team to identify the GP Practices who have a high incidence of patients subject to or at risk of Domestic Violence and Abuse incidents. The CCG Safeguarding Team are working with Safer Leeds to promote services to these areas and plan to offer bespoke training for each GP practice.

Case Study

A female patient with mental health difficulties who rarely sees her GP called for an urgent appointment for a problem with her eye. The GP realised the woman had a MARAC* high risk flag. Her son was the alleged perpetrator. The GP saw her for the eye problem then sensitively introduced a conversation and offered advice on domestic violence services. The patient agreed to see the Social Prescriber, who works at the surgery, for more support.

*Multi-Agency Risk Assessment Conference

Front Door Safeguarding Hub Data (April 2016 to March 2017)

- | | |
|---|---------------------------------------|
| ➤ 255 Meetings | ➤ 2881 Female Victims |
| ➤ 2248 High Risk Cases | ➤ 249 Male Victims |
| ➤ 882 Medium Cases | ➤ 243 Female Perpetrators |
| ➤ 2248 MARAC referrals April 2016 to March 2017 | ➤ 2860 Male Perpetrators |
| ➤ 168 Pregnant Victims | ➤ 2832 Children were in the household |

FDSH Case Study

A number of repeat cases come to the front door as a result of complex issues and ongoing violence. Work is ongoing to identify how to improve our responses to these situation but the ongoing sharing of information, pro-active engagement and joint working at the FDSH already demonstrates better outcomes for individuals and families, as shown in the case study below.

Diane and Geoff were in an off on relationship and both had a range of complex issues; including drug and alcohol misuse and physical and mental health difficulties.

They first became known to the FDSH following an incident in early 2017 where Diane was reported as assaulting Geoff. With information shared at the meeting it became clear that there were risk concerns about both parties and they were highlighted as high risk.

Action plans were put in place, but due to the complex nature of the issues facing Diane and Geoff there were a number of further incidents where it became clear that Diane was primarily the victim and Geoff the protagonist of domestic violence. There were 7 repeat MARAC discussions over the next few months and agencies worked together to support them both and reduce the risks of further incidents.

Through information shared via the FDSH, Probation were able to make better informed sentencing proposals that addressed the risk Geoff posed; this included Community Orders to engage in drug and alcohol treatment- which he is now doing. Geoff has also been supported to secure a property and Probation have also expedited his attendance at a domestic violence programme (Building Better Relationships).

Through pro-active work Diane also engaged effectively with Leeds Domestic Violence Service and Forward Leeds for the first time in a number of years. Diane's GP was alerted to the situation in order to be able to provide additional support.

A range of safety measures for Diane were put in place by the police, housing and fire and rescue services. Diane has reported that she now feels safer and more secure as a result of what has been put

Locality Working

Following a successful pilot in the Armley area, the roll out of localised responses to standard and medium risk incidents is taking place. The Armley pilot involved four weekly multi-agency meetings looking at cases reported to the police with victims' consent. This resulted in safety plans being developed for local families boosted by training with local services and community development work in the area.

During the pilot, Armley was the only ward to see a slight decrease in the rate of repeat incidents of domestic violence. In addition, all agencies taking part in the Armley pilot were surveyed about their perceptions of the model and 100% felt it had been beneficial.

The 2gether cluster (Chapelton and Harehills) has subsequently established a case conference meeting and the Morley and Rothwell clusters have come together to implement a case conference for their two areas. A package of additional community development work will be delivered in these clusters. 187 cases have been discussed in the last 12 months from October 2016 to September 2017 (73 in Armley; 36 in Morley/Rothwell and 78 in 2gether).

Locality Based DV Response Case Study

A married couple, Jas and Sunny, had a 5 month old child and were residing in the UK on Sunny's visa living with Sunny's family.

There were daily domestic violence incidents between the couple with Sunny being verbally and physically abusive towards Jas in the presence of their child. Sunny also regularly woke the child up from sleep and threatened to snatch him. Sunny was described as having undiagnosed mental health difficulties and was taking medication from India in relation to this. He was also misusing alcohol and Cannabis. Jas wanted to leave but had no recourse to public funds and therefore no means of financial support to do this.

The Children's Centre worked with Jas and liaised with Leeds Domestic Violence Services (LDVS), who were already involved. The locality case conference led to joint work with the Children's Centre, LDVS, and Children's Social Work Services and through this, Jas was supported to access refuge provision.

This was a positive outcome. As a result of the localised multi-agency meeting, professionals worked together, communicated effectively and supported the victim to prioritise her own and her child's safety. Jas has since expressed her gratitude and highlighted that she is feeling a lot happier and settled away from the family home. She is being supported with immigration issues and making long term plans for re-housing.

Specialist Domestic Violence Services

Following a commissioning review in 2016, the council launched a new contract on 1st April 2017 to support women and men experiencing domestic violence. The new service is fully integrated with all elements of support delivered by **Leeds Domestic Violence Services (LDVS)**, a consortium of Leeds Women's Aid incorporating HALT, Behind Closed Doors and Women's Health Matters. This integration of services offers flexibility for clients who can move between support options as their circumstances, risk levels and needs change. Services include:

- ➔ 24 helpline to victims and professionals;
- ➔ Emergency short stay accommodation for those who need urgent refuge accommodation;
- ➔ Independent Domestic Violence Advocates (IDVAs) for clients at high risk, safety planning, advice on legal remedies and support with navigating criminal and civil justice systems;
- ➔ drop-ins for people who prefer informal support;
- ➔ community outreach and group work;
- ➔ Resettlement service to support those moving on from emergency accommodation and clients who require a planned move to ensure their safety.

LDVS is a key partner at the Front Door Safeguarding Hub and attends the daily MARAC meeting. They also support locality based case conference style meetings to promote better outcomes for clients

The new service has a focus on

reaching communities who face barriers when seeking help to ensure that those victims who are particularly isolated and vulnerable receive help. This focus was informed by learning from Domestic Homicide Reviews in Leeds which showed that many victims of domestic homicide experienced coercive control and were stopped from accessing help by the perpetrator.

Feedback from service users

"The service made me realise that what I had been putting up with was not okay and not acceptable. It was comforting to know that someone was there to listen to and sympathise with me but also give a very honest and professional opinion. Knowing that I wasn't alone and that I had support helped me get through what I can honestly say has been the hardest time of my life."
(LDVS Service User)

"When things were happening to me I felt alone and when this service got in touch and was there every step of the way for me I felt I could cope with everything I was going through."
(LDVS Service User)



Leeds Domestic Violence Services: IDVA Case Study

Sophie was referred to LDVS after she experienced sexual violence and was supporting criminal proceedings. When she met her partner, Tom, they both had mental health issues. Sophie was very vulnerable, took medication and had support from a Community Psychiatric Nurse. Sophie used cannabis and Tom was alcohol dependent. Sophie's children were in local authority care.

Tom was charged with rape and LDVS supported her over a 2 year period whilst her case progressed through the criminal justice process which included several adjourned trials. In addition to providing support through court, the IDVA* also worked alongside both mental health services and substance misuse services to ensure that Sophie was supported to re-establish relationships with friends and family and keeping safe at home; this involved co-creation of a full safety plan.

The trial went ahead in early 2017 and with the support of the IDVA, Sophie attended the trial and gave evidence via video link, however Tom was found not guilty.

During the 2 years, Sophie disclosed that she had reported some historic allegations against a previous ex-partner, Dan, which pre-dated the abuse from Tom. Dan was charged in relation to these offences and a trial was listed. The IDVA worked alongside the police to ensure Sophie had support to give evidence at a second rape trial; which was particularly important given her experience of the previous trial. At one point, the IDVA had to report a Breach of Bail directly to the police on Sophie's behalf and give a statement to that effect.

The IDVA provided extensive support leading up to the second trial which secured Sophie's attendance and she was able to give evidence. Dan was found guilty by the jury. The IDVA made a request to court for a Restraining Order to protect Sophie from further abuse.

Sophie said: *"I am very happy with all the help and support provided over the last 2 years, I am extremely grateful. Without this support from you I would not have attended the second trial to give evidence. I can't believe I was believed, I didn't expect this".*

*IDVA – an Independent Domestic Violence Advisor

Health Services and Prestigious Nomination for British Medical Award

Our Routine Enquiry work with GPs attracted a nomination for the esteemed British Medical Journal Award. On 5th May, colleagues from Safer Leeds and the Clinical Commissioning Group Partnership attended an award ceremony in London to celebrate the nomination and promote the rollout of the Leeds model to the rest of the country. Leeds were the 'Runners-Up - Primary Care Team of the Year' for Domestic Abuse Screening in General Practice at Moorfield House Surgery, Garforth.

Of the 124 GP practices in Leeds, 16 are now undertaking Routine Enquiry and a further 18 have expressed interest – some of these already have training dates planned out.

LCC, NHS England and the CCG are working together on planning a conference in March/April 2018. This will be funded by NHS England and aims to help and support health agencies across the North to implement the Leeds model and celebrate the success of the roll out of Routine Enquiry in Leeds.



Research shows that victims are much more likely to disclose domestic violence if they are sensitively asked direct questions about it. Routine Enquiry has been delivered in Midwifery and Health Visiting in Leeds for many years alongside a comprehensive training programme. With support and training, Moorfield House Surgery in Garforth began asking all women seen alone in GP consultations, new patient registration meetings, annual health checks, routine smears and during blood tests, about domestic violence.



A short film was produced to use as a resource to help clinical staff understand Routine Enquiry. A domestic violence template on the GP's computer also prompts them to ask the domestic violence question and signpost or refer accordingly. An evaluation showed this had resulted in significant disclosures of domestic violence with 18% of women who were asked, disclosing current or historical experiences of domestic violence. Since the pilot was introduced, the rate of self-reporting to the police in this area has increased by 47%, the highest rate of increase of any area in the city.

Patient feedback on routine enquiry

"I think this is a good starting point and am really pleased you are asking this....Maybe women will go away and think about it & feel safer to come back and talk to you"



GP Feedback on the Pilot

"Since we started Routine Enquiry (RE) 2 years ago, there has been a definite cultural change in our attitude, awareness and approach to tackling domestic abuse and violence. We have created an environment where patients' awareness has increased and staff are trained to identify the signs. The whole clinical team feel confident 'asking the question'. As a GP, I have become more confident about digging deeper and realise that patients experiencing domestic violence often need to be asked several times before disclosing. A recent audit in our practice found 1008 patients had been asked, with 119 recent/historical abuse disclosures equating to 38 current victims. This highlights that, in our patient population, approximately 15% of women are or have been victims".

Case Study from the GP

A 28 year old woman attended the practice with recurrent gynaecological problems. She became pregnant and reported she was increasingly anxious, depressed and stressed about her husband's behaviour but denied any domestic abuse. After discussion, she was commenced on antidepressants and her mood settled once the baby was delivered. She subsequently presented 12 months later with a further pregnancy and episode of anxiety and depression. After being asked the question twice, she disclosed she was experiencing emotional abuse. After talking this through, she said she felt incredibly supported by the practice and with further support, she discussed her concerns with her husband. He then agreed to seek help for his OCD/Anxiety/depression and was started on antidepressants. The GP reports that, were this practice not undertaking Routine Enquiry, they believe the patient would have never have disclosed or engaged her husband to seek help.

This is an example of both the victim and perpetrator being helped by Routine Enquiry. It is useful to remember that learning from many Domestic Homicide Reviews indicates that professionals can overlook emotional abuse and underestimate the risk to victims when there is an absence of physical violence. In this case, the GP's interventions were well informed.



Workforce Development in Health

Health professionals are often among the first people to hear disclosures of domestic violence and abuse. It is therefore extremely important that they are knowledgeable and skilled in recognising signs, assessing risk and delivering interventions. Our domestic violence workforce development programme involves training midwives; Health Visitors; mental health professionals; Safeguarding Leads; A&E staff, paramedics and Sexual Health practitioners.



Planning Session for Health Practitioners

An event was held in May, bringing together health professionals to discuss opportunities to develop the health economy responses to domestic violence and abuse. Around 55 people attended the half -day session with a number of suggestions being made, many of which are currently being followed up including:

- Rolling out routine enquiry training to all GPs, dentists and opticians;
- Professional peer support/mentors for domestic violence;
- More training around Forced Marriage and Honour Based Abuse;
- Identifying and reaching out to groups of people who don't engage with current/traditional services;
- Having a counsellor embedded within GP practices;
- Staff wearing badges to encourage people to speak about domestic violence.

Feedback from Health Professionals

"This is one of the best training courses I've attended. Really relevant and useful to my practice" (Health Worker)

"I attended an incident following this Continue Professional Development event where many of the DASH/MARAC risk factors were present which helped inform my practice" (Paramedic)



Responses to Children

Living with domestic violence can cause significant harm to children. Our children's services in Leeds are continually developing a culture whereby domestic violence is understood and the workforce are confident and able to offer a high quality response to families. Services are underpinned by a restorative, holistic approach; engaging with the whole family including victims, children and perpetrators of domestic violence.

Children's Centres

All 58 Children's Centres have attained the Domestic Violence Quality Mark and an evaluation showed a positive impact on staff in relation to their understanding of domestic violence issues, how to assess risk and respond to those families who are affected. Centres report that it has helped build successful partnerships with a range of agencies and, most importantly, raised the profile of domestic violence in their centre, enabling families to seek the support they need.

Support to families can include welfare support, safety planning, access to groups or parenting programmes to reduce social isolation and promoting access to nursery provision and counselling.

Some centres offer venues for the delivery of the Caring Dads programme and a Father Inclusive Practice training programme has been developed and included working with families where there is a known perpetrator and supporting male victims of domestic abuse.

Work in Clusters

Restorative Early Support (RES) Teams are being established to work flexibly with existing services to offer help to families with high needs. The first RES Team is now up and running in the East area of the city. A specialist domestic violence Families First worker is seconded to support the team and partners to improve outcomes for families where domestic violence is present. A huge part of this role is to skill up and support the workforce which includes supporting case discussions, signposting, completion of risk assessments and referrals to MARAC.

There has also been a joint approach in the team and with partners to support the Leeds 16 Days of Action. The team have worked with local voluntary and community sector providers in the area, as well as the area committee, to offer activities on each of the 16 days. These include a sponsored walk; 2 days of free workshops for professionals on specific vulnerable groups and a number of White Ribbon activities with local faith settings.

Family Group Conferencing (FGC)

Since 2015, the FGC service has been taking an average of 4 referrals daily directly from the Front Door Safeguarding Hub. The starting point is that every child's family affected by these issues has the right to an independent offer of an FGC. Face to face meetings with families explore whether a FGC would be helpful and safety plans ensure there is no further victimisation throughout the FGC process. This has been implemented successfully and feedback from families has been overwhelmingly positive.

Families First

Domestic violence is one of the key criteria of the national Troubled Families programme. In Leeds, this is known as Families First. The Families First programme links closely with the Front Door Safeguarding Hub to identify all cases risk assessed as standard and medium without crime and, where consent has been given, to support through the appropriate Cluster's Targeted Services Leader and Children's Centres so every family involved will be offered Early Help support.

Latest statistics on the Families First expanded programme (up to the end of October 2017):

- Domestic violence was an issue in 3624 families.
- Sustained and significant outcomes have been achieved for 1276 families with domestic violence flagged as an issue



Case Study

A Children's Centre received a referral from a Social Worker. The family consisted of mum, dad and two sons aged 2 and 4 years of age. The children were on a Child Protection Plan (CPP) for emotional abuse, risk of physical harm and dad's use of cannabis. Dad was asked to leave the family home.

Both parents had been in the care system where they met and started a relationship. They had had little in the way of support networks and neither parent had experience of how to deal with conflict.

The centre worked with both parents looking at domestic violence and its impact, triggers, and how to deal with conflict. Both mum and dad engaged well with the sessions and started to understand the consequences of domestic violence. Due to the work the couple had undertaken with the centre, dad was able to return to the family home. He stopped using cannabis and was successful in finding employment which helped raise his confidence. Three years later, they have had another 2 children and there have been no further reports of domestic violence.

Work with Perpetrators

Caring Dads

Caring Dads is a group work programme based in Children's Services and works with men who have behaved abusively towards their children and partners. The programme focuses on child led parenting and helps men address issues affecting their behaviour. This could include exploring their own relationships with their fathers, managing emotions, parenting and rebuilding trust with family members. Caring Dads also deliver ground breaking work to engage black and minority ethnic men and offer follow up support to men through peer support programmes. Between October 2016 and September 2017, the service assessed 70 men, 20 men of whom attended at least 13 sessions of the 17 week programme. Between them, these men had 57 children.

The Caring Dads Programme originates from Canada. Leeds has worked closely with the programme owners to establish itself as the first and only city outside London to officially train Caring Dads Facilitators.

Feedback from this training includes:

"By far the best training I have experienced. I have learnt so much that I can put into practice in my role at work and also at home as a parent, so much to reflect on, I feel so much more confident in delivering the next group"

"Perfectly delivered and really inspiring. Was a fantastic four days and I know the whole group feels the same. Really appreciate the quality of the training thanks so much can't wait to have the opportunity to put it all into practice as a facilitator"

Case Study

Jordan was referred to Caring Dads as a result of regular domestic incidents which often took place when the children were present. Before he started the programme, a non-molestation order was in place forbidding him to enter the family home until he completed some work to address his behaviour. Jordan had alcohol issues, struggled to manage disagreements and did not recognise how conflict in the family home was affecting his children.

Jordan attended 13 of 17 sessions and began to recognise the effects of his behaviour on his children, particularly on his 7 month old who he had previously thought would be unaffected due to her young age. Throughout the programme, he began to understand the fear and confusion arguments could cause to his children and partner. He began to address his alcohol issues and learned about 'fair arguing'. He also began talking about his partner positively, praising her and talking about how supportive she had been over the years.

During a post programme home visit, Jordan reflected on his time at the group and felt it had made an enormous impact on him and his family. He describes his experience below:

"Caring Dads has helped me turn everything around. I can't recommend it highly enough. I was initially wary and quiet, but by the end I felt safe in talking openly about everything that had happened. I'm now working and it is going well. My partner has also been getting support, too, (from the Together Women project) and we both committed to changing. We never go to sleep on an argument, never raise our voices. That was an eye opener attending the group, and it made me feel how lucky I am with my family. Things couldn't be more different. We can't risk being violent around the children any more, and this was our last attempt at being together, so we need to make it work".

Courts and Criminal Justice

The last year has seen significant change in the way cases are listed and dealt with at Court. Transforming Summary Justice, a national initiative aiming to reform the way that criminal cases are handled in the magistrate's courts to create a swifter system, with reduced delays and fewer hearings, was introduced into the Leeds Domestic Abuse Court in April 2016. Those cases where the defendant is not pleading guilty are first listed for a NGAP court (Not Guilty Anticipated Plea Court). The NGAP court allows for all of the evidence to be reviewed and considered prior to trial. Every front line officer has now been provided with body worn video. This new process allows for this footage to be available and played at the NGAP hearing; increasing the number of defendants who plead guilty.

This process has meant that, once presented with all of the evidence, 40% of defendants plead guilty at the NGAP court, meaning a trial is avoided and the victim does not need to give evidence in court. Of those cases that do go to court, they are heard in a much quicker time frame.

To date in 2017 the revised process has avoided 167 trials and therefore avoided 167 victims having to give evidence at court.

Integrated Offender Management (IOM)

Perpetrators are selected onto the integrated offender management teams via referrals from the Front Door Safeguarding Hub.

There are currently 94 offenders within the IOM Domestic Violence cohort, each of which has a designated Police Constable as their Offender Manager. Each individual has a personalised Intervention plan which is designed in partnership with probation and third sector colleagues. The plans include measures to support people in achieving change such as drug/ alcohol and housing interventions alongside actions to deter repeat offending.

The Offender Managers work closely with the police Safeguarding team to promote safety of victims.

Choices

Choices is a West Yorkshire programme funded by the Police and Crime Commissioner and delivered by Change, Grow, Live (CGL). They work with perpetrators of domestic abuse offering one to one and small group intervention alongside a structured group programme. Staff work with perpetrators to better understand the causes and impact of their behaviour and explore alternative coping strategies. They support low and medium risk perpetrators aged 16 years plus and as well as their victims. In the last 12 months, Choices supported 423 people in total; 337 of those were male and 86 were female.

The service is supported by Together Women Project, who provide support to ensure positive outcomes for the victim and their family, giving the victim a voice and addressing their support needs.

Communities Getting Involved

Local communities often know about domestic violence occurring way before any services and can be well placed to intervene and support victims and families at an early point. Community events can provide a good opportunity to promote domestic violence awareness and signpost people to services. A great example of this was an event organised by a group of hairdressers called the Heart for Hairdressers, a charitable organisation promoting positive responses to women facing domestic abuse, mental illness and Female Genital Mutilation. The event was organised as a result of many African hairdressers reporting a high number of clients who disclosed domestic violence and was successful in raising awareness of the services available to help their clients.



Work with Equality Hubs

Engaging with our Equality Hubs has helped us identify unmet need, gaps in provision and ways to improve access to help for some of our most disadvantaged and vulnerable communities.

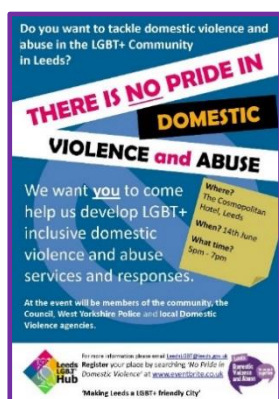
Migrant Communities

An OBA event was held in March focusing on domestic violence in migrant communities'. This was organised in partnership with the Migrant Communities Hub and was attended by over 60 participants. Speakers gave compelling presentations about the many issues facing migrant communities. The event resulted in a range of agreed actions and strong links have been developed between the domestic violence sector and the Leeds Migration Partnership to improve joint working and referral pathways. Work being undertaken includes:

- Quality marking 5 key organisations working with migrant communities
- Delivering training to members of the Refugee Forum
- Consulting further with women from migrant communities
- Establishing links between LDVS and the Leeds Migration Partnership to improve referral pathways and inter-agency protocols around issues such as victims with no recourse to public funds
- Strengthening partnership work between the Front Door Safeguarding Hub and the Leeds Migration Partnership.

LGBT+ Community Hub

An event was held in June to bring together people from the LGBT+ communities and representatives from key organisations to explore how services could improve responses to LGBT+ communities affected by domestic violence and abuse. Domestic Homicide Reviews nationally have identified gaps in such provision as well as significant under-reporting by these groups. The LGBT+ Mapping Project has also identified the issue of services' lack of inclusivity for LGBT+ communities. Around 40 people attended the event and the information gleaned will inform a November LGBT+ OBA to discuss service provision; access and inclusion and effective support. The LCC LGBT+ Staff Network is also engaged in this work. A follow up event will be held in January 2018



16 Days of Action & White Ribbon Campaign

The Leeds 16 Days of Action was established in 1999 to promote the International Day for the Elimination of Violence against Women. This runs from 25th November to 10 December (Human Rights Day). The 16 Days is a time to galvanize action to end violence against women and girls around the world. Our Leeds 16 Days of Action in 2016 included radio interviews on Fever FM, a libraries



campaign to promote books on domestic violence, social media newsfeeds and activities in schools.

#WhiteRibbonLeeds

This year's campaign focuses on coercive control with a wide range of activities planned across the city. These include domestic violence blogs; a poster campaign utilising the big screen in Millennium Square, GP's surgeries and library screens and a 'Tell Someone' call to action on social media.

The White Ribbon Campaign also takes place on 25th November and engages men in activities that challenge violence against women and creates a space for positive, healthy ways of being a man. LCC has achieved White Ribbon Status which means we have been assessed and rated as a city which is successful in securing support from men tackle domestic violence and abuse.

In our last Leeds White Ribbon Campaign in 2016, 45 of our Domestic Violence Ambassadors supported the campaign; over 1500 people took the White Ribbon pledge and our Twitter reach was 110,000 on White Ribbon Day, trending 4th nationally on Twitter.

This year, we have a range of exciting activities planned including a White Ribbon Team bus performing 'flash-mob' style short sketches around the theme of coercive control; White Ribbon stickers in coffee shops; 'selfie boards' for men and boys to take White Ribbon pledges; and support from Leeds United Football Club, Leeds Rhinos and other local celebrities.

Both campaigns sparked conversation across England and even reached Canada and Australia!



The Leeds Domestic Violence Quality Mark

We're continuing to make domestic violence and abuse everybody's business.

People affected by domestic violence seek help from all kinds of organisations so it is important that all front line staff have a good understanding of the issue. The Quality Mark equips staff with the skills to deliver sensitive responses to those disclosing and seeking help. Staff receive bespoke training, help with developing policies and guidelines and linked into MARAC and other domestic violence initiatives.

Organisations awarded the Quality Mark tell us they have a much better understanding of domestic violence issues, feel more confident and better equipped to respond to both staff and service users who are affected. The Quality Mark process has helped organisations develop effective policies and guidelines and consistent, robust responses to service users.

"We are proud to have been awarded the DV Quality Mark. We advertise this on our website, posters and on materials in our office, giving clear messages to our service users that they can discuss any domestic violence issues with us. Staff are confident in discussing domestic violence and supporting clients"
(BHA, Skyline)

How do we check the Quality Mark Standards are Right?

We asked women who had experienced domestic violence what was important to them when accessing services.

Overwhelmingly, they said the kind of welcome they received and the warmth and empathy displayed by staff were key to their trusting the service and disclosing their stories. The Quality Mark service standards were adapted in response to this.

This last year has seen the introduction of the Quality Mark into the business sector with 2 key organisations, Mears and Keepmoat, successfully being awarded the Quality Mark.

Case Study from LCC Adults and Health Directorate

The Domestic Violence Quality Mark has significantly raised awareness of domestic violence amongst staff. We have introduced a full day mandatory training session to equip them with the skills to identify, respond and refer to specialist support services. The implementation of routine enquiry has resulted in more vulnerable individuals disclosing domestic violence. The Quality Mark has promoted joint working between agencies. In one case, a Social Worker and a GP had concerns about an elderly woman with mental health difficulties experiencing abuse from her partner. Mental Health Professionals, including a Community Nurse and Psychiatrist, had struggled to talk to the woman without her partner being present. We arranged for the Social Worker to be present in the GP consultation and both professionals were able to ask directly about domestic violence in a safe environment and advise on the support available.
(LCC, Adults & Health)

Between October 2016 and September 2017, 20 agencies attained the Quality Mark.

Basis
yorkshire

BarcaLeeds



Leeds
CITY COUNCIL

St Anne's
Community Services

in partnership with
BHA for equality
in health
and social care

FORWARD
LEEDS
INSPIRING CHANGE



together women

The Market Place
Here to listen, here to help, today's young people

Keepmoat
Regeneration
ENGIE

140 YEARS
LJWB
POSITIVELY CHANGING LIVES

JOANNA
PROJECT

Home
Start
Support and friendship
for families

FEEL
GOOD
FACTOR
...a health and wellbeing organisation

MEARS

TOUCHSTONE
Inspiring communities, transforming lives

GIPSIL

Womens Health Matters

SPACE2



Staff from Keepmoat after attaining the DV Quality Mark

Workforce Development and Training

Between October 2016 and September 2017, Safer Leeds delivered **90 training sessions to 1554 practitioners** to promote a skilled, confident and empathetic workforce. Sessions have included MARAC briefings; Domestic Homicide Review lessons learned briefings; customised training to **GPs, A & E staff, Midwives, Health Visitors, Medical Students and Mental Health Practitioners**; bespoke training for the **Youth Offending Service, Housing Leeds, Forward Leeds and Adult Social Care**.

Evaluation shows the difference training makes to practice. In the last 12 months, **93% of participants surveyed said our training helped them improve their practice to 'a great extent'** with feedback including:

"Will enable me to better explain to parents and discuss with them the impact on children and on their parenting capacity" (Children's Services Life Long Learning workshop)

"The MARAC briefing will help me with a particular family I am working with"

"Thank you for the MARAC training yesterday. It was brilliant!"

(MARAC Briefing participant)

"I will think about how to phrase questions and approach those involved without apportioning blame and leading them to shut down" (Signpost)

"During the training I identified 3 people on my caseload that DV & A training related to. I was able to take notes to apply to these cases and add knowledge to my practice" (Adult Social Care)

"The 30 Second Guides on Domestic Homicide Reviews are brilliant!" (Adult Safeguarding)

City Wide Domestic Violence Ambassadors Network

Domestic Violence Ambassadors continue to provide a vital role in spreading the word, making domestic violence and abuse everybody's business!

The Ambassadors Network has grown to a total of over 60 members from a range of council and external agencies and continually attracts new members.

Trained Ambassadors act as points of contact for their colleagues and service users; encouraging quality conversations, disseminating information and signposting people to places of support and help. They also support our domestic violence campaigns and initiatives.

Following training sessions, our Ambassadors have told us they feel they have the understanding to confidently signpost people to appropriate organisations for support.



"I've been able to direct customers to service providers through my team by using the Leeds DV site" **(Domestic Violence Ambassador)**

Last May, around 20 Ambassadors delivered a 'City Centre Sweep' which involved visiting over 120 restaurants, clubs and bars in the city centre to disseminate domestic violence and abuse information such as posters, help cards and branded pens and to secure interest in the work around domestic violence. They were universally welcomed and the majority of city centre venues (including the First Direct Arena) agreed to display posters and help cards.

Information about the Domestic Violence Breakthrough Programme is now included in the LCC Induction Fairs to inspire new employees to become Domestic Violence Ambassadors. The message reaches every single person starting work with the local authority and promotes the council as a place where conversations about domestic violence are embraced. One participant described their induction experience as:

"I'm so impressed LCC have included domestic violence in their induction as it reaches staff right across all the directorates. I've worked in 32 boroughs and I've never been inducted like this"
(New LCC Staff Member)

"The training delivered was invaluable in ensuring that the HR Domestic Violence Ambassadors have a good understanding of the challenges in recognising signs domestic violence in staff and where to seek help. This information will make us more confident in our roles." **(LCC, HR Business Partner)**

Investment in Innovation and Good Practice

Department of Communities and Local Government Funding

In December 2016, Leeds successfully secured **£4633,000** to lead on work to improve accommodation based support for domestic violence and abuse across West Yorkshire. Leeds is the lead partner in a consortium with Bradford, Calderdale, Wakefield and Kirklees. The work is underway and focusing on:

- Improving security to 50 properties across West Yorkshire
- Increasing bed spaces by 15 properties to accommodate up to 30 families;
- Bringing 15 new refuge bed spaces on line;
- Improving available advice for victims with no recourse to public funds;
- Training 800 practitioners;
- Providing specialist staff to services to enhance knowledge and skills around mental health, substance misuse and BME / migrant communities;
- Rolling out the Leeds Domestic Violence Quality Mark across West Yorkshire

Home Office Violence against Women and Girls Funding

Leeds, along with the other 4 Local Authorities in West Yorkshire, are partners in a successful bid, led by the Police and Crime Commissioner, to the Home Office Violence against Women and Girls Fund. £600,000 was awarded over 2 years. This will enable the testing of new interventions including working with women in prison who have been victims of violence and developing a new team within West Yorkshire Police to increase and develop the use of Domestic Violence Protection Orders and Notices. This team will be based in Safer Leeds and will work closely with the Domestic Violence Team and the Front Door Safeguarding Hub.



What will we be doing over the Next Year?

- ➔ Developing processes for improving our responses to repeat and complex cases
- ➔ Undertaking further work with Equality Hubs to improve access to services for all Leeds communities
- ➔ Supporting domestic violence responses through the development of the Restorative Early Start Teams.
- ➔ Working with NHS England and the CCG to help and support health agencies across the North to implement the Leeds Routine Enquiry model in GP surgeries
- ➔ Extending the Quality Mark to more private sector companies
- ➔ Rolling out good practice and learning from Leeds across West Yorkshire
- ➔ Continuing to make improvements to criminal justice responses
- ➔ Supporting the establishment of a Domestic Violence Problem Solving Court for Families
- ➔ Developing work on early intervention, community engagement and social isolation
- ➔ Increasing options available for perpetrators to get help



