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## AGENDA

<b>Committee</b>	COMMUNITY & ADULT SERVICES SCRUTINY COMMITTEE
<b>Date and Time of Meeting</b>	WEDNESDAY, 6 JUNE 2018, 4.30 PM
<b>Venue</b>	COMMITTEE ROOM 4 - COUNTY HALL
<b>Membership</b>	Councillor McGarry (Chair) Councillors Ahmed, Carter, Ebrahim, Goddard, Jenkins, Kelloway, Lent and Molik

*Time approx.*

### 1 Appointment of Chairperson & Committee Membership

The Council at its meeting held on 24 May 2018 appointed Councillor Mary McGarry as Chair and the following Members to this Committee:

Councillor Ali Ahmed, Councillor Asghar Ali, Councillor Joe Carter, Councillor Saeed Ebrahim, Councillor Susan Goddard, Councillor Shaun Jenkins, Councillor Kathryn Kelloway, Councillor Sue Lent.

### 2 Terms of Reference

To scrutinise, measure and actively promote improvement in the Council's performance in the provision of services and compliance with Council policies, aims and objectives in the area of community and adult services, including:

- Public and Private Housing
- Disabled Facilities Grants
- Community Safety
- Neighbourhood Renewal and Communities Next
- Advice & Benefit
- Consumer Protection
- Older Persons Strategy

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- Adult Social Care
- Community Care Services
- Mental Health & Physical Disabilities
- Commissioning Strategy
- Health Partnership

To assess the impact of partnerships with and resources and services provided by external organisations including the Welsh Government, joint local government services, Welsh Government Sponsored Public Bodies and quasi-departmental non-governmental bodies and health services on the effectiveness of Council service delivery.

To report to an appropriate Cabinet or Council meeting on its findings and to make recommendations on measures which may enhance Council performance and service delivery in this area.

To be the Council's Crime and Disorder Committee as required by the Police and Justice Act 2006 and any re-enactment or modification thereof; and as full delegate of the Council to exercise all the powers and functions permitted under that Act.

### **3 Apologies for Absence**

To receive apologies for absence.

### **4 Declarations of Interest**

To be made at the start of the agenda item in question, in accordance with the Members' Code of Conduct.

### **5 Minutes (Pages 5 - 12)**

To approve as a correct record the minutes of the meeting held on 16 May 2018.

### **6 Cardiff and Vale of Glamorgan Regional Violence against Women, Domestic Abuse and Sexual Violence Strategy 2018 - 2023 (Pages 13 - 118)**

4.35 pm

- a) Councillor Susan Elsmore (Cabinet Member – Social Care, Health & Well-Being) will be invited to make a statement.
- b) Sarah McGill (Corporate Director for People and Communities), will be in attendance to give a presentation and answer Members' questions

- 7 Carers - Assessments & Engagement (Pages 119 - 122)** 5.15 pm
- a) Councillor Susan Elsmore (Cabinet Member – Social Care, Health & Well-Being) will be invited to make a statement.
  - b) Sarah McGill (Corporate Director for People and Communities) and Sue Schelewa (Operational Manager, Locality Services) will be in attendance to give a presentation and answer Members' questions
- 8 Annual Report 2017/18 (Pages 123 - 148)** 5.45 pm
- a) Alison Jones, Principal Scrutiny Officer, will introduce the report.
  - b) Questions from the Committee
- 9 Way Forward** 6.00 pm
- 10 Date of next meeting**
- The next meeting of the Community & Adult Services Scrutiny Committee is scheduled for 4 July 2018 at 4.30pm in Committee Room 3, County Hall, Cardiff.

**Davina Fiore**

**Director Governance & Legal Services**

Date: Thursday, 31 May 2018

Contact: Andrea Redmond, 02920 872434, a.redmond@cardiff.gov.uk

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## COMMUNITY &amp; ADULT SERVICES SCRUTINY COMMITTEE

16 MAY 2018

Present: Councillor McGarry(Chairperson)  
Councillors Ahmed, Asghar Ali, Carter, Kelloway and Lent

## 63 : APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Goddard.  
Councillor Jenkins had previously advised that he would be 30 minutes late attending.  
Councillor Lent had advised that she would be late attending due to another meeting over running.

## 64 : DECLARATIONS OF INTEREST

None received.

## 65 : MINUTES

The minutes of the meeting held on 18 April 2018 were agreed as a correct record and signed by the Chairperson.

## 66 : SOCIAL SERVICES/ADULT SERVICES DIRECTORATE BUSINESS PLAN

The Chairperson welcomed Councillor Susan Elsmore (Cabinet Member – Social Care, Health & Well-Being), Councillor Lynda Thorne (Cabinet Member – Housing & Communities) and Sarah McGill (Corporate Director for People and Communities) to the meeting.

The Chairperson invited Councillor Susan Elsmore to make a statement in which she said was pleased to introduce this report which showed an important emphasis on delivery and how the Council is putting words into action. It was noted that Social Services was now part of the new People and Communities Directorate, the Cabinet Member was pleased to see the great work undertaken on empowering people to remain independent in their own homes for as long as possible, reducing reliance on intensive interventions and accelerating safe hospital discharge. The Cabinet Member also noted the work undertaken on Assisted Living and Day Opportunities providing support and respite for carers. Members were advised of the Cabinet Member's recent visit to Minehead Road and encouraged Members to visit to see the affirmative work there. Finally, the Cabinet Member reiterated her commitment to consolidating the City's status as a Dementia Friendly City.

Members were provided with a presentation on the Social Services/Adult Services Directorate Business Plan after which the Chairperson invited questions and comments from Members.

- Members considered that it was a positive document but the challenges section was short and asked if the document was as robust as it could be. Members noted there was no mention of the challenges a new directorate

would face, such as keeping up savings, stretching targets etc. and wondered of there was an overly positive spin on a complex area. The Cabinet Member stated that it was fair to say that since 2015 they had been transparent in their information, including when things were not going well. The Cabinet Member added that it was the first time in a generation that Adult Services had an underspend and she wanted to formally recognise and pay tribute to the work of the former Assistant Director of Adult Services Amanda Phillips in achieving this. It was noted that lots of areas were in progress, there are a lot of things to report, the service area wanted to provide the best services and stretch targets with realism and support for the staff. The Corporate Director added that there were 2 delivery plans in the overall directorate and there are areas for development across the directorate and therefore there is a chance of duplication, i.e. Complaints should feature in the plan and this can be worked on as transparency was needed. Areas of challenge mainly around process would be highlighted going forward. Members were advised that this plan reflects the huge journey that Adult Services has been on and the approach so far has had huge beneficial impact on outcomes.

- Members referred to risks, and noted that co-dependencies rely on partners to deliver. Members asked if there was confidence that these partners were in place and wouldn't hold up the process. The Cabinet Member for Social Care, Health & Well-Being noted that engagement does already take place and gave the example of housing and health and social care, stating that relations are so much better than they were and the Regional Partnership Board is driving integration. The Cabinet Member for Housing & Communities added that she had recently attended a Regional Partnership Board meeting and was very impressed by the way partners are working together and the plans that are in place, however it takes longer to see what differences these plans make to people's lives.
- Members made reference to mitigation of risk in relation to carer/family breakdown. Officers advised that they would ensure support is given to carers, including grandparents; not just assessing needs of individuals but also family networks, providing support and respite care.
- Members discussed savings and the fragility of the Domiciliary Care market. Officers stated that a few years ago the market was in control and the prices were huge, the service had done fantastic work, the system now allocates care placements, there are 63 providers, the competitive element is there and the number of care packages are reducing; it is a much better position than in the past.
- Members noted that the loss of Amanda Phillips had left a gap and there is still a huge issue of vacancies with social workers. Members asked how Cardiff compared to Welsh average figures and what were the consequences of Cardiff not meeting its 18% target. The Cabinet Member stated that there was a time when the reputation in Cardiff was not great, now the reputation is climbing all the time, people are talking about Cardiff in a very different way. Officers added that there are some vacancies particularly lower level social workers, but there was a target to develop a comprehensive recruitment and

retention strategy which was ongoing, and this could be shared with Committee.

- Members asked in relation to the Community Services Review, why there was slow progress with Community Mental Health and asked for more information about pilots. The Cabinet Member stressed the importance of the service and that they wanted to ensure that the Vale of Glamorgan is implemented effectively, learn from them and undergo an appropriate pilot in Cardiff. It was added that it was a learning culture, it was better to take longer to implement it and do it better so the service was fit for the citizens.
- Members referred to the Red risk 'Marketplace is not able to meet the care and support needs of the population' and were advised that it is about getting the right models of care to meet the needs of the citizens.
- Members discussed residential care and asked about contingency plans if there are concerns. The Cabinet Member explained that now it was mainly people in their last 12 months of life that were going into nursing homes, this was down to the success of people being independent in their homes for longer. Officers added that the development of the Older Persons Housing Strategy and Independent Living provided more resilience going forward. The target would be kept as Red as it was reliant on more mixed accommodation going forward.
- Members asked if the Child Sexual Exploitation Strategy would be extended to Adults and renamed and were advised that it would.
- Members asked if it would cover all forms of sexual exploitation and were advised that Officers would come back to them on this.

AGREED – That the Chairperson on behalf of the Committee writes to the Cabinet Member conveying the observations of the Committee when discussing the way forward.

## 67 : WINTER PRESSURES - REPORT OF SERVICES ACROSS PEOPLE & COMMUNITIES

The Chairperson welcomed Councillor Susan Elsmore (Cabinet Member – Social Care, Health & Well-Being), Councillor Lynda Thorne (Cabinet Member – Housing & Communities), Sarah McGill (Corporate Director for People and Communities), Lisa Wood (Operational Manager, Locality Services - First Contact & Assessment) and Jane Thomas (Assistant Director, Housing & Communities) to the meeting.

The Chairperson invited Councillor Susan Elsmore to make a statement in which she said that she was pleased to introduce the item, as Committee had previously stated they wished to focus their efforts especially since the snow events over the Winter and how services fared. There was now positive partnership working in place, and there had been effective responses to the recent Winter pressures, including officers across the Council and members of the public supporting doctors and nurses enabling them to get to work in the most severe weather.

The Chairperson invited Councillor Lynda Thorne to make a statement in which she said Cardiff has excellent provision for Rough Sleepers and Homelessness. The Cabinet Member added that she was very proud of the outreach teams and the work they did over the winter months, including providing support for those rough sleepers who refused to come into accommodation; 240 rough sleepers were brought into accommodation over the Winter.

Members were provided with a presentation on Winter Pressures after which the Chairperson invited questions and comments from Members.

- Councillor Elsmore wished to pay tribute to the staff in the Lisa Wood's team based at Llandough Hospital for their enthusiasm in their work which they undertook in complex and challenging situations.
- Members noted the incredible work that had been carried out across the Directorate. With reference to rough sleepers and the 13 who chose not to go into accommodation, Members asked what the rationale was behind this and whether their reasons had been analysed. Officers explained that the 13 people had been offered a variety of accommodation types and they just didn't want to take up the offer, the reasons were varied and complex.
- Members referred to winter accommodation and noted that people who may have taken up this accommodation have to leave during the daytime and could be back on the streets in the summer months when it come to the phased ending of the winter accommodation. Members asked if there was an argument for investment in summer accommodation. Officers explained that there are day centres open including one at the Huggard Centre, stating that it was important to provide support along with accommodation. Officers added that there are schemes such as Housing First, which had brought in 4 people, but this was a very complex area and the people involved have very complex needs and reasons.
- Members asked how much work goes into planning for the winter months. Officers explained that they have years of experience in preparing for the winter months but currently levels are high, however there was always enough space for every rough sleeper if they chose to accept it.
- Members noted that the Delayed Transfer of Care figures were very impressive but noted that there were various different sets of data provided. Officers explained that they provide data to Welsh Government from across Health Boards so when they send it, it is a snap shot of the situation that day.
- Members asked if there was ever a dispute of responsibility such as whether the care needed was social care, palliative care etc. Officers stated that cases such as this would be very low, they don't often have disputes as responsibility is taken. There is a good relationship between partners and they meet regularly, this was the only way to get credibility.

AGREED – That the Chairperson on behalf of the Committee writes to the Cabinet Member conveying the observations of the Committee when discussing the way forward.



## 68 : BUILDING RESILIENT COMMUNITIES THROUGH THE FURTHER DEVELOPMENT OF COMMUNITY HUBS

The Chairperson welcomed Councillor Lynda Thorne (Cabinet Member – Housing & Communities), Sarah McGill (Corporate Director for People and Communities) and Jane Thomas (Assistant Director, Housing & Communities) to the meeting.

The Chairperson invited Councillor Lynda Thorne to make a statement in which she said that this was an exciting proposal built on the previous commitment given to protect libraries; the proposal also enables the protection of some library buildings. The Cabinet Member emphasised the importance the Hubs bring to the community and also help to prevent loneliness and isolation. The Cabinet Member added that she had a very positive meeting with friends groups from Whitchurch and Rhiwbina.

Members were provided with a presentation on Building Resilient Communities through the further development of Community Hubs, after which the Chairperson invited questions and comments from Members.

- Members noted that hubs across the city provided different services and asked what the plans for consistency were. Officers explained that they weren't aiming for consistency, they wanted to provide services that are right for the area and the example of Llanishen hub being housed in the police station was given stating that for the services needed in the area that location works well. The Cabinet Member added that hubs all do different events and have a different focus, there was no one size fits all, it was important to look at the demographic, undertake consultation and provide what is right for the area; mapping is important to not duplicate what is already provided.
- Members asked for more information about librarian and assistant librarian posts being lost. Officers explained that in relation to library standards, what Cardiff had previously performed poorly on was the qualifications of its staff, this qualification had now been introduced so staff will be well trained. The grades of staff has not come down but they are expected to do more and a wider range of activity.
- Members emphasised the importance of community engagement in what services are delivered and officers provided assurances of their key commitment to that.
- Members could see the correlation between Hub provision and the Welsh Government Resilient Community agenda and asked what the Council's definition of a resilient community was. Officers stated that they have had several conversations in different settings about this but essentially it is about getting people to do more for themselves, the inclusion officers will have a key role here. Officers added that it was about a strength based approach, look at the strengths and what makes people resilient going forward.
- Members asked if Officers considered that hub provision was just as important in the North of the City as the rest of the City and was essential to the community. The Cabinet Member agreed it was and stated that the proposal

being brought forward showed the commitment to that, noting that needs are different but need to be addressed.

- Members asked for a guarantee that libraries will become hubs and were assured that they would.
- Members noted that the Cabinet Report stated that Capital Programme funding had been approved for Butetown but no other Capital funds were shown. Officers stated that investment in buildings would certainly be needed, the position of available resources was difficult, it was important to identify grant opportunities, and some buildings may enable development opportunities and redelivery of hubs in other buildings. There was more work to be done, any proposal would be subject to a future Cabinet Report if change of use of a building was required. The Cabinet Member added that she had seen factory built units in London where there were flats built on top of community facilities and this was another possibility.
- Members asked about the funding for the Inclusion Officers and were advised that they would be funded from the Communities First Legacy Grant which was around £500k. There were also Health and Wellbeing grants from that legacy grant which would be city wide.
- Members noted the confirmation of job losses and asked why this was the case if services were increasing and whether staff affected could be retrained. Officers advised that there would be around £200k of staff savings, which was not very many posts, those affected would be redeployed where possible. There are a number of staff who want to take voluntary severance and there are also vacancies that would not be filled, Members were assured there were not very many people being displaced.
- Members referred to Central Library and asked if staff efficiencies would impact on current library stock/book space, or if current stock and book space was at risk to enable more community use. Officers stated that they are not envisaging a decrease in books but there may be a change to the layout whereby books will flow through the building and services are provided throughout the building rather than in one area. There would also be an increase in digital and electronic media to meet demand.
- Members referred to Penylan library where part of the building is run by a company and asked how this would work if it became a well-being hub. Officers stated that they would work with them to use the space creatively.

AGREED – That the Chairperson on behalf of the Committee writes to the Cabinet Member conveying the observations of the Committee when discussing the way forward.

## 69 : HOMELESSNESS & HOUSING NEED STRATEGY DEVELOPMENT

The Chairperson welcomed Councillor Lynda Thorne (Cabinet Member – Housing & Communities), Sarah McGill (Corporate Director for People and Communities) and Jane Thomas (Assistant Director, Housing & Communities) to the meeting.

Members were provided with a presentation on Homelessness & Housing Need Strategy Development after which the Chairperson invited questions and comments from Members.

- Members asked about the correlation between private landlords leaving the market and the introduction of Rent Smart Wales. Officers stated that they did not know this was the case, questions needed to be asked, landlords so fill in a form when they evict a tenant but not much detail is given. There were also issues such as the level of housing rent had been frozen and it was increasingly complicated to get benefits, therefore more and more landlords were selling their properties and leaving the market altogether.
- Members asked if there were any examples of longer term Dry/Wet residential settings with intensive support in Wales as the Compass project only covered a very small percentage. Officers explained that there was a lot of provision, including 50 beds for Wet residential settings, this was specific accommodation for those people who did not want to give up their addiction. The Compass project was a complex scheme providing intensive support and officers were looking at intensive targeted support for hostels too. Officers added that it was important to have a range of accommodation types to offer people as sometimes it is not appropriate to house people in flats for example, straight from the street; there were pilots ongoing with this currently which could be expanded at a later date.
- Members asked if there was any information on why parents and friends are withdrawing help and people are presenting as homeless. Officers explained that it could be overcrowding issues but they did need to look more at why this is happening. Officers were concerned that the Policy could be driving people to present as homeless to get housing and this needed to be addressed.
- Members asked what support was available for family breakdowns and to help families become more resilient. Officers explained the Craft scheme which had been hugely successful, which supports families with people with alcohol and substance misuse, stating that evidence shows that more people are able to kick their habit with the support of their family. Officers considered there needed to be more links with Doctors too and added that there were a variety of schemes out there but there needed to be an audit of them and they should be brought together. Officers added that there was also the issue of Adverse Childhood experiences and preventative activity/early intervention even if someone had not reached the stage for a normal trigger for intervention.
- Members noted that rough sleeping seems more visible then ever and asked if the ambition to end rough sleeping was a realistic one. Officers stated that the teams had been told they have until the end of the year to end it but realistically more people will keep coming onto the streets even if all the ones currently rough sleeping are housed.
- Members noted that currently it seems like a different type of homelessness with more substance abuse and more people refusing help and asked how this could be combatted. Officers explained that people have the choice to not

take the offer of help. Officers agreed that it used to be mainly alcohol dependent people but now substance abuse far outweighs alcohol, this made it very challenging as they are influenced by the substance misuse when making their decisions.

- Members asked if every rough sleeper in the City had been offered support even if they rejected it and have any requested service that couldn't be met. Officers explained that rough sleepers from out of County were different but they would attempt to reconnect them or offer help with bonds etc. All rough sleepers had been offered accommodation of some sort but not always a range of accommodation types. Officers added it was important to catch people at the right time to make sure they have the help they need.
- Members asked if there was any help available for people to buy their own homes and were advised that there are low cost ownership schemes and Welsh Government schemes too, and considered these needed to be publicised more.

AGREED – That the Chairperson on behalf of the Committee writes to the Cabinet Member conveying the observations of the Committee when discussing the way forward.

70 : DATE OF NEXT MEETING

6<sup>th</sup> June 2018 at 4.30pm.

**CYNGOR CAERDYDD  
CARDIFF COUNCIL**

**COMMUNITY & ADULT SERVICES SCRUTINY COMMITTEE**

**6 JUNE 2018**

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**CARDIFF AND VALE OF GLAMORGAN VIOLENCE AGAINST WOMEN,  
DOMESTIC ABUSE AND SEXUAL VIOLENCE STRATEGY 2018-2023**

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**Purpose of Report**

1. This report provides the Committee with background information to enable Members to carry out pre-decision scrutiny of the draft proposals for “**Cardiff And Vale Of Glamorgan Violence Against Women, Domestic Abuse And Sexual Violence (VAWDASV) Strategy 2018-2023**” prior to its consideration by the Cabinet at its meeting on the 14 June 2018.
2. A copy of the draft Cabinet Report is attached at **Appendix A**, which in turn contains the Strategy document at **Appendix 1** and EIA at **Appendix 2**.

**Background**

3. The Violence against Women, Domestic Abuse and Sexual Violence Act (Wales) 2015 laid out a requirement for local authorities and health boards to jointly prepare regional strategies to tackle this issue.
4. Welsh Government has also required a move to regional working on VAWDASV in terms of a national approach towards regional funding and commissioning. Cardiff and the Vale of Glamorgan have agreed to operate as a region for this purpose due to a shared health board footprint, natural travel to work patterns, service access migrations for residents across the area, and the pre-existence of

a number of regional services and policies. This includes Cardiff Council acting as the regional 'banker' for managing Welsh Government funding for specialist services.

5. Cardiff Council has recently commissioned a comprehensive specialist service for female victims and their children to deliver a One Stop Shop for all contact and referrals, a range of accommodation-based support and community-based support services. Cardiff Council is also working with the Vale of Glamorgan and Bridgend Councils to explore a similarly specialist service for male victims.

## Issues

6. The regional VAWDASV strategy recognises that anyone (women, men, children and young people) can experience and be affected by VAWDASV. It addresses violence and abuse directed towards women, men, girls and boys and violence and abuse perpetrated by men and women. It acknowledges that it can happen in any relationship regardless of sex, age, ethnicity, gender, sexuality, disability, religion or belief, income, geography or lifestyle. However it is acknowledged that women and girls are disproportionately affected by domestic abuse, rape and sexual violence, sexual exploitation (including through the sex industry), modern day slavery, forced marriage, female genital mutilation, child sexual exploitation and abuse, stalking and sexual harassment.
7. The Strategy attached at **Appendix 1** sets out in detail the following:
  - **Overview** - Definition (*pages 5-6*); Framework (*page 7*); Vision and Aims (*page 7*); Regional Partners (*Page 7*)
  - **Legislative & Strategic Context** – World; UK; Wales; Cardiff & Vale of Glamorgan Region (*Page 8*)
  - Links with other **Legislation and Policies** (*Pages 8-11*)
  - **Scope** (*Page 11*)

Page 8 of the Strategy sets out an overarching **Vision**, which is:

***People who live, work and visit Cardiff and the Vale of Glamorgan have the opportunity to live positive, independent lives without being affected by violence and abuse.***

The Strategy document then sets out in detail 5 high level **Aims**, as follows:

- ***Aim 1 – Prepare***
- ***Aim 2 – Pursue***
- ***Aim 3 – Prevent***
- ***Aim 4 – Protect***
- ***Aim 5 – Support***

8. Contained within the Strategy document at ***Appendix 1***, under each of the above Aims are details of how they will be developed and implemented. In addition, the Strategy contains a raft of ***“We Will” Commitments***. A detailed action plan is being developed with partners to take forward all the commitments set out in the Strategy.
9. For Members’ consideration, set out below is a summary of information (as set out at ***Appendix 1***) under each of the aims. If Members require further information on any of the “We Will” commitments, they are requested to refer to the appropriate page numbers listed against each commitment.

**AIM 1 – PREPARE (pages 14-20 at Appendix 1)**

Overarching Message - Improve strategic planning and commissioning of VAWDASV services through a more coordinated partnership approach across the region.

Sub-headings/Details - Regional Overview; Needs Assessment; Regional Working; Governance; Available Specialist Services; Wider Collaboration; Survivor Engagement; Equality & Diversity

“We Will” Commitments

- Continually improve data collection methods to better inform ongoing needs assessment (*page 15*)
- Implement and continually review governance arrangements including membership, to ensure they remain fit for purpose (*page 16*)
- Actively assist with embedding a whole systems approach across the region (*page 18*)
- Actively seek engagement and input from victims and survivors that represent all crime types and protected characteristics (*page 19*)

**AIM 2 – PURSUE (*pages 22-28 at Appendix 1*)**

Overarching Message - Address perpetrators of VAWDASV by improving intelligence sharing across services and the use of legal powers to disrupt and convict.

Sub-headings/Details - Criminal Justice Response; Integrated Offender Management; Working with Perpetrators; Restorative Justice; Safe use of Technology; Encouraging Victims to Report

“We Will” Commitments

- Increase the number of positive outcomes for victims (*page 23*)
- Enhance the monitoring of the outcomes of cases appearing before Magistrates and Crown courts (*page 23*)
- Trial and evaluate the MATAC Intervention for perpetrators of domestic abuse (*page 25*)
- Improve monitoring and reporting of perpetrator programmes/interventions (*page 27*)



- Consider early intervention options for those concerned about their behaviour (page 27)  
Explore options for delivering a range of community perpetrator interventions (page 27)
- Continually review the guidance and approach to the use of restorative practice for victims of VAWDASV (page 27)
- Deliver local campaigns to highlight safe use of technology (page 28)
- Encourage and assist more victims to seek criminal sanctions and civil remedies (page 28)

### **AIM 3 – PREVENT (pages 30-49 at Appendix 1)**

Overarching Message - Pro-actively address negative attitudes and behaviours that have the potential to result in VAWDASV, recognising this as everyone's business.

Sub-Headings/Details - Educational Settings; National Training Framework; Early Intervention; Sexual Violence; Stalking; Honour Based Violence/ Forced Marriage; Female Genital Mutilation; Health Based IDVA; Night Time Economy; Sex Workers; Trafficking and Modern Slavery; Adverse Child Experiences; IRIS; Formal Reviews; White Ribbon Campaign

#### "We Will" Commitments

- Continue to promote and monitor education-based activities across the region to include 'hard to reach' children (page 30)
- Give support to all higher and further education establishments to have a consistent and visible approach to tackling VAWDASV and in managing disclosures (page 33)
- Liaise with the Judicial College to ensure Magistrates are trained in VAWDASV awareness and sentencing guidelines (page 35)
- Implement the regional training plan to ensure all staff are trained in accordance with the National Training Framework (page 35)

- Prioritise funding for early intervention services that prevent all forms of VAWDASV (*page 38*)
- Implement the Ask Me Ambassador pilot in Cardiff and share the learning (*page 38*)
- Provide a male ISVA at the SARC (*page 39*)
- Work with the South Wales Police & Crime Commissioner to gain a greater understanding of sexual harassment (*page 39*)
- Raise awareness of consent at all opportunities (*page 39*)
- Improve awareness of stalking and promote the practical steps to reporting (*page 40*)
- Improve understanding of how forced marriage affects individuals with protected characteristics (*page 41*)
- Increase FGM referrals from schools (*page 41*)
- Assist with implementing the actions from the 'Delivering a Safe and Welcoming Night Time Economy' strategy (*page 43*)
- Raise awareness across the region of the issues faced by sex workers (*page 43*)
- Review the effectiveness of the Ty Tarian scheme to inform future service delivery (*page 43*)
- Widen the reach of the Human Trafficking awareness module through the National Training Framework (*page 44*)
- Support Public Health Wales to move from a position of understanding the ACE research to understanding what a positive and effective response looks like (*page 45*)
- Develop close working arrangements between the Early Help Front Door services and specialist VAWDASV services (*page 46*)
- Remain committed to mainstreaming the IRIS model across all GP surgeries in the region (*page 46*)
- Ensure that the learning from all formal service reviews including DHRs is reflected in service delivery and is shared widely (*page 48*)
- Implement any Welsh Government policy changes arising from its review of DHR processes (*page 48*)
- Implement the White Ribbon Action Plan across the region (*page 49*)

- Continue to advocate for a White Ribbon Wales (*page 49*)

#### **AIM 4 – PROTECT (*pages 51-59 at Appendix 1*)**

Overarching Message - Improve the multi-agency response and support to all victims and their children regardless of risk level and needs.

Sub-Headings/ Details - Clare’s Law/ Sarah’s Law Disclosures; Notices and Orders; Safeguarding; Cardiff Multi-Agency Safeguarding Hub; Managing VAWDASV PPNs; Multi-Agency Risk Assessment Conference (MARAC); Housing-Related Support; Specialist Courts; Workplace Policies; Target Hardening

#### “We Will” Commitments

- Further promote Disclosure Schemes at all available opportunities (*page 51*)
- Improve the use of Notices and Orders across the region (*page 52*)
- Work with partners to ensure continuous improvement of the MASH (*page 53*)
- Closely monitor the specialist service response to PPNs (*page 53*)
- Improve the quality of MARAC referrals across the region (*page 55*)
- Review the findings of the research into the future of MARAC and consider any impact on existing processes (*page 55*)
- Continually monitor the use of crisis/ emergency accommodation to ensure provision for those who need it most (*page 56*)
- Assess the impact of welfare reform changes and the Renting Homes Act on specialist accommodation for victims (*page 56*)
- Better support victims through the criminal and civil justice processes (*page 57*)
- Work with campaigners to strengthen victims voices across all courts (*page 57*)
- Develop and adopt revised VAWDASV workplace policies and encourage **all** partners to do the same (*page 59*)
- Adopt the requirement for contractors to develop workplace policies through commissioning and procurement arrangements (*page 59*)

- Ensure contractors are aware of the issues and understand referral pathways (page 59)
- Review the availability of target hardening options and develop a regional approach (page 59)

### **AIM 5 – SUPPORT (pages 61-68 at Appendix 1)**

Overarching Message - Ensure that innovative, flexible and evidence-based services are available to meet the needs of victims experiencing any form of VAWDASV.

Sub-Headings/ Details - Research; Independent Advocates; Children & Young People; Family Interventions; People from a BME Background; Gypsy & Traveller Communities; Male Victims; LGBTQ+ Victims; Sexual Assault Referral Centre; Older People; Complex Needs/Toxic Trio; Sex Workers; Adults at Risk

#### “We Will” Commitments

- Actively participate in a range of meaningful research projects to broaden understanding and improve services (page 61)
- Consider extending positive male role models to children and young people experiencing other types of violence and abuse (page 63)
- Research and consider family intervention models for future service delivery (page 63)
- Review the pilot FGM clinic’s effectiveness (page 64)
- Raise awareness of available support services to the Gypsy and Traveller communities (page 64)
- Commission a specialist male victim service with wider regional partners (page 65)
- Strengthen links with specialist LGBTQ+ organisations to improve services and increase reporting (page 65)
- Ensure services are responsive to LGBTQ+ victims (page 65)
- Embed the new Hub SARC model for victims of sexual violence across South East Wales (page 66)

- Work with the Regional Safeguarding Adults Board to develop policies and training for those working with older victims of VAWDASV (*page 66*)
- Ensure health and social care professionals consider and address how complex needs impact on adults and children (*page 67*)
- Explore new ways to identify, protect and safeguard sex workers and the communities affected (*page 68*)
- Review the findings of the 'Beyond the Gaze' research (*page 68*)

10. A communications plan is also under development to ensure that key messages to the public and professionals are timely and consistent across the region. All partners are committed to disseminating messages and targeted awareness raising campaigns via a variety of means to establish the greatest reach and awareness.

11. As a result of the new regional approach to this issue, the governance arrangements are being amended to reflect both the distinct local issues but also the wider responsibility for joint working where this is feasible. The issue of VAWDASV will continue to report into the Public Service Board via the Community Safety Partnership reporting arrangements that are also currently being revised.

12. The purpose of the report is to approve the Cardiff and Vale of Glamorgan Violence against Women, Domestic Abuse and Sexual Violence Strategy 2018-2023 as set out at **Appendix 1**.

### **Way Forward**

13. At this meeting, Councillor Susan Elsmore (Cabinet Member for Social Care, Health & Wellbeing) will be invited to make a statement. Sarah McGill (Corporate Director, People and Communities) will be in attendance to provide Members with a presentation on the proposals and answer Members' questions.

14. Pre-decision scrutiny aims to inform the Cabinet's decisions by making evidence based recommendations. Scrutiny Members are advised to:

- i) look at the information provided in the report to Cabinet to see if this is sufficient to enable the Cabinet to make an informed decision;
- ii) check the financial implications section of the Cabinet report to be aware of the advice given;
- iii) check the legal implications section of the Cabinet report to be aware of the advice given;
- iv) check the recommendations to Cabinet to see if these are appropriate.

15. Members will then be able to decide what comments, observations or recommendations they wish to pass on to the Cabinet for their consideration prior to making their decisions on the 14 June 2018.

### **Legal Implications**

16. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

## **Financial Implications**

17. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

## **RECOMMENDATIONS**

The Committee is recommended to:

- i. consider the information set out in **Appendix A** to this report;
- ii. consider the information provided in the presentation to this meeting;
- iii. decide whether it wishes to relay any comments or observations to the Cabinet at its meeting on the 14 June 2018; and decide the way forward with regard to any further scrutiny of this issue.

**DAVINA FIORE**

**Director of Governance and Legal Services**

**31 May 2018**

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**THIS REPORT MUST BE ACCOMPANIED BY THE  
REPORT AUTHORISATION FORM 4.C.214**

**CITY OF CARDIFF COUNCIL  
CYNGOR DINAS CAERDYDD**

**CABINET MEETING: xx June 2018**

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**CARDIFF AND VALE OF GLAMORGAN VIOLENCE AGAINST  
WOMEN, DOMESTIC ABUSE AND SEXUAL VIOLENCE  
STRATEGY 2018-2023**

**REPORT OF DIRECTOR**

**AGENDA ITEM:**

---

**PORTFOLIO:** Social Care, Health and Wellbeing

**Reason for this Report**

1. To seek approval of the Cardiff and Vale of Glamorgan Violence against Women, Domestic Abuse and Sexual Violence Strategy 2018-2023 attached at **Appendix 1**.

**Background**

2. Violence against women, domestic abuse and sexual violence is a fundamental violation of human rights, and both a cause and consequence of inequality. Tackling violence against women, domestic abuse and sexual violence (VAWDASV) has far-reaching consequences for women, men, children, families, communities and society as a whole. Tackling these enduring social problems requires a distinct and proportionate approach to all victims and perpetrators in order that everyone can live fear free in safe, equal and violence-free communities.
3. The Violence against Women, Domestic Abuse and Sexual Violence Act (Wales) 2015 laid out a requirement for local authorities and health boards to jointly prepare regional strategies to tackle this issue.
4. Welsh Government has also required a move to regional working on VAWDASV in terms of a national approach towards regional funding and commissioning. Cardiff and the Vale of Glamorgan have agreed to operate as a region for this purpose due to a shared health board footprint, natural travel to work patterns, service access migrations for residents across the area, and the pre-existence of a number of regional services and policies. This includes Cardiff Council acting as the regional 'banker' for managing Welsh Government funding for specialist services.

5. Cardiff Council has recently commissioned a comprehensive specialist service for female victims and their children to deliver a One Stop Shop for all contact and referrals, a range of accommodation-based support and community-based support services. Cardiff Council is also working with the Vale of Glamorgan and Bridgend Councils to explore a similarly specialist service for male victims.

## **Issues**

6. The regional VAWDASV strategy recognises that anyone (women, men, children and young people) can experience and be affected by VAWDASV. It addresses violence and abuse directed towards women, men, girls and boys and violence and abuse perpetrated by men and women. It acknowledges that it can happen in any relationship regardless of sex, age, ethnicity, gender, sexuality, disability, religion or belief, income, geography or lifestyle. However it is acknowledged that women and girls are disproportionately affected by domestic abuse, rape and sexual violence, sexual exploitation (including through the sex industry), modern day slavery, forced marriage, female genital mutilation, child sexual exploitation and abuse, stalking and sexual harassment.
7. Within the Violence against Women, Domestic Abuse and Sexual Violence Act (Wales) 2015, there is a requirement for local authorities and their partners to improve the public sector response to this issue, including re-commissioning services to ensure they are fit for purpose. There is also a need to be smarter with available funding as no additional resources have been identified to support these new duties.
8. The regional strategy is required to have regard to the national Violence Against Women, Domestic Abuse and Sexual Violence Strategy 2016-2021, specifically its objectives for:
  - i. Arrangements for the prevention of violence against women, domestic abuse and sexual violence.
  - ii. Arrangements for the protection of victims of violence against women, domestic abuse and sexual violence.
  - iii. Support for people affected by violence against women, domestic abuse and sexual violence.
9. In recognising the national strategic direction, this regional strategy sets out an overarching vision and high level aims as follows:

### ***Vision***

People who live, work and visit Cardiff and the Vale of Glamorgan have the opportunity to live positive, independent lives without being affected by violence and abuse.

### ***Aims***

#### Aim 1 - PREPARE

Improve strategic planning and commissioning of VAWDASV services through a more coordinated partnership approach across the region.

#### Aim 2 - PURSUE

Address perpetrators of VAWDASV by improving intelligence sharing across services and the use of legal powers to disrupt and convict.

#### Aim 3 - PREVENT

Pro-actively address negative attitudes and behaviours that have the potential to result in VAWDASV, recognising this as everyone's business.

#### Aim 4 - PROTECT

Improve the multi-agency response and support to all victims and their children regardless of risk level and needs.

#### Aim 5 - SUPPORT

Ensure that innovative, flexible and evidence-based services are available to meet the needs of victims experiencing any form of VAWDASV.

#### ***“We Will” Commitments***

10. To support these aims a large number of actions have been identified as “We Will” commitments. A detailed action plan is being developed with partners to take forward all the commitments set out in the Strategy.
11. A communications plan is also under development to ensure that key messages to the public and professionals are timely and consistent across the region. All partners are committed to disseminating messages and targeted awareness raising campaigns via a variety of means to establish the greatest reach and awareness.
12. As a result of the new regional approach to this issue, the governance arrangements are being amended to reflect both the distinct local issues but also the wider responsibility for joint working where this is feasible. The issue of VAWDASV will continue to report into the Public Service Board via the Community Safety Partnership reporting arrangements that are also currently being revised.

#### **Consultation & Equality Impact Assessment**

13. A number of key partners took part in the development of the strategy; a Regional Strategy Development Group was established, comprising senior officers from both Cardiff and Vale of Glamorgan Councils, Health, each of South Wales Police's Basic Command Units, Officers representing the South Wales Police and Crime Commissioner and both the Cardiff and Vale Domestic and Sexual Abuse Coordinators. The Group was responsible for developing the vision and aims and detailing the scope and structure of the document. The chapter on Pursue was felt to be an important factor in acknowledging that there would not be

any victims without perpetrators, and tackling this issue was just as important as protecting and supporting victims.

14. The Regional Strategy Development Group was fortunate to have two representatives from the Welsh Women's Aid's SEEdS project (Survivors Empowering and Educating Services) join them. Input from survivors in this way has been extremely beneficial and influential in shaping the direction of the strategy document and in helping to sharpen its contents.
15. The strategy was circulated widely for consultation on 19<sup>th</sup> March for 8 weeks. A 'strategy on a page' version was circulated alongside the full document so that staff within partner organisations could get a sense of what was being addressed. A further version of the 'strategy on a page' was produced for the public and circulated via Facebook and Twitter.
16. The strategy was presented for pre-scrutiny to the Council's Community and Adult Services Scrutiny Committee on 6<sup>th</sup> June, along with a list of consultees and comments received.
17. An Equality Impact Assessment has been undertaken; a copy of the EIA can be found at **Appendix 2**.

#### **Reason for Recommendations**

18. To comply with the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 regions are required to develop their strategies and arrange for them to be published by the end of May 2018.
19. The Cardiff and Vale of Glamorgan Violence against Women, Domestic Abuse and Sexual Violence Strategy 2018-2023 will ensure that the Council works collaboratively with other relevant partners and stakeholders to address VAWDASV.

#### **Financial Implications**

20. The regional strategy sets out a number of targets and actions which will need to be met from existing Council revenue and capital budgets as well as any approved grant allocations.

#### **Legal Implications (including Equality Impact Assessment where appropriate)**

21. The Welsh Government must prepare a national strategy for the purposes of the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015. Local authorities and health boards must in turn jointly prepare local strategies.
22. A local strategy must—
  - (a) specify objectives which the local authority and the Local Health Board consider will, if achieved, contribute to the pursuit of the purpose of this Act;

- (b) specify the periods of time within which the local authority and the Local Health Board propose to achieve the specified objectives;
- (c) identify the actions the local authority and the Local Health Board propose to take to achieve the specified objectives.

- 23. Further detail about the requirements of the Act appears in the text of this Report.
- 24. The Strategy is intended to cover the years May 2018 – May 2023 and must be reviewed no later than May 2023.
- 25. The Council has to satisfy its public sector duties under the Equalities Act 2010 (including specific Welsh public sector duties). Pursuant to these legal duties Councils must, in making decisions, have due regard to the need to (1) eliminate unlawful discrimination, (2) advance equality of opportunity and (3) foster good relations on the basis of protected characteristics.

Protected characteristics are:

- i. Age
  - ii. Gender reassignment
  - iii. Sex
  - iv. Race – including ethnic or national origin, colour or nationality
  - v. Disability
  - vi. Pregnancy and maternity
  - vii. Marriage and civil partnership
  - viii. Sexual orientation
  - ix. Religion or belief – including lack of belief
- 26. The decision on whether to adopt the Strategy in accordance with the recommendation in this report has to be made in the context of the Council's Equality Act public sector duties. An Equality Impact Assessment has been undertaken to ensure that the Council has properly understood and assessed the potential impacts of the proposal in terms of equality so that it can ensure that it is making proportionate and rational decisions having due regard to its public sector equality duty.

## **RECOMMENDATION**

- 1. To approve the Cardiff and Vale of Glamorgan Violence against Women, Domestic Abuse and Sexual Violence Strategy 2018-2023 as set out at Appendix 1.

**SARAH MCGILL**

**Date**

*The following appendices are attached:*

Appendix 1: The Cardiff and Vale of Glamorgan Violence against Women, Domestic Abuse and Sexual Violence Strategy 2018-2023

Appendix 2: Equality Impact Assessment

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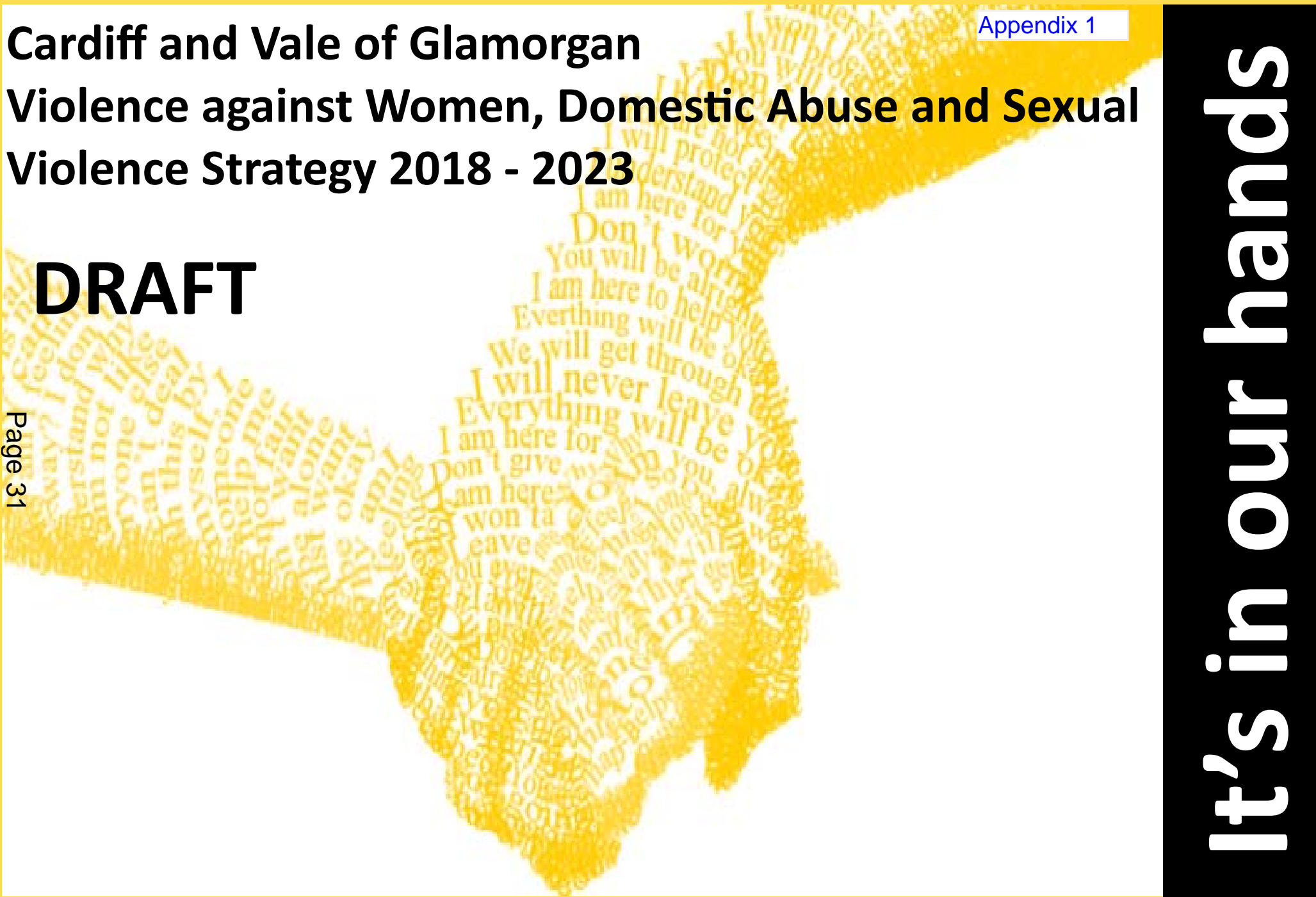
# Cardiff and Vale of Glamorgan Violence against Women, Domestic Abuse and Sexual Violence Strategy 2018 - 2023

Appendix 1

# DRAFT

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**It's in our hands**



# Statutory Partners



Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board



Cwmni Adsefydlu Cymunedol  
**Cymru  
Wales**  
Community Rehabilitation Company



Gwasgthraclir gan / Operated by Working Links

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**Comislynydd yr Heddlu a Throseddau  
Police and Crime Commissioner**

**South Wales  
Fire and Rescue Service**



Gwasanaeth Tân ac Achub  
**De Cymru**

**National  
Probation  
Service**





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## Third Sector Partners



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## Introduction

Violence against women is a violation of human rights and both a cause and consequence of inequality between women and men. It happens to women of all classes, cultures and backgrounds. It happens to women because they are women and they are disproportionately impacted by all forms of violence. Tackling violence against women, domestic abuse and sexual violence (VAWDASV) has far-reaching consequences for families, children, communities and society as a whole and requires a distinct and proportionate approach by public bodies in Wales.

This strategy does not disregard violence and abuse directed towards men and boys, or violence and abuse perpetrated by women. This strategy recognises that whilst anyone (women, men, children and young people) can experience and be affected, it is women and girls who are disproportionately affected by domestic abuse, rape and sexual violence, sexual exploitation (including through the sex industry), modern day slavery, forced marriage, female genital mutilation, child sexual exploitation and abuse, stalking and sexual harassment. This can happen in any relationship regardless of sex, age, ethnicity, gender, sexuality, disability, religion or belief, income, geography or lifestyle.

## Definition

The United Nations Declaration on the Elimination of **Violence against Women** defines this as:



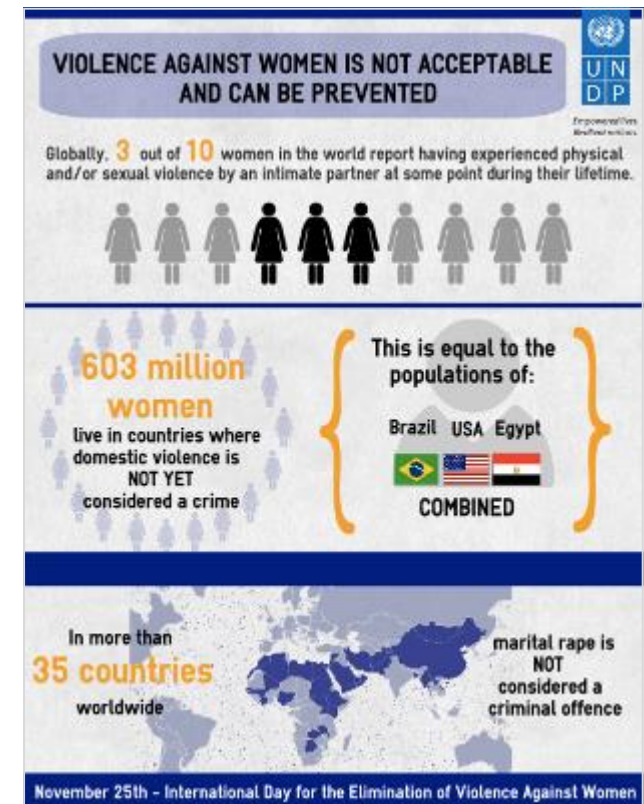
“all acts of gender-based violence that result in, or are likely to result in, physical, sexual, psychological or economic harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.”

This encompasses, but is not limited to:

- ⇒ Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation;
- ⇒ Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution;
- ⇒ Physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

The multi-agency statutory partners (outlined on p.2) responsible for this strategy have agreed to adopt the widest definition, acknowledging that not all abuse is perpetrated within intimate partner or familial relationships, but can also be committed by strangers (e.g. stalking).

It is also acknowledged that some forms of abuse disproportionately affect those with protected characteristics. Issues of gender identity (including transgender), race, religion, culture, disability and sexuality can exacerbate vulnerability and can also shape attitudes and behaviours within relationships from both the victim's and the perpetrator's perspectives.



## WHAT ABOUT MEN?

This is a question that is always asked at public engagement events and in training sessions. All partners in the region know that men can also be victims of domestic abuse, sexual assault, forced marriage, trafficking and honour based violence and have acknowledged this throughout the strategy and continue to highlight this at all public events and staff training. The VAWDASV Act addresses domestic abuse and sexual violence perpetrated against all people in Wales, while recognising that women and girls are disproportionately impacted by much of the violence and abuse covered by the Act. This strategy aligns itself with the Act by recognising that, for this reason, a gender-responsive approach is required.

Partners working across Cardiff and the Vale recognise that more work is needed to support male victims of domestic and sexual violence, both in terms of recognising abuse when it occurs and in accessing appropriate services for support. Work is required to ensure that our communities recognise that violence and abuse perpetrated by anyone is unacceptable and does not have a place in our society. With our specialist partners, we will continue to address any gaps whilst continuing to support services that are already in place, targeting additional resources where there is greatest need. The views of victims will be integral to this. Finally, this strategy champions the Welsh Government Live Fear Free Helpline which provides information and advice for everyone affected by violence against women, domestic abuse and sexual violence and anticipate an increase in the number of male victims contacting this service for information, advice and support.

Sebastian's Story (taken from ManKind Initiative:)

Problems began in Sebastian's relationship with his partner once they started living together and she became pregnant. He is 6ft and his partner is 5ft 3 inches. After suffering months of violent abuse, he decided he could take no more and decided he should leave but his partner threatened that if he left he would never see his son again. His partner's abuse has been increasing and over the last four years, he has been assaulted ten times, receiving black eyes, being constantly spat at and recently he had a chair thrown at him with such force that it shattered on him. He is not allowed to go to bed before his partner – if he does she comes in and turns all the lights on and begins shouting at him to prevent him from getting to sleep. He in the end had to leave; he has kept a diary, taken photographs and told friends. He is now in touch with his solicitors regarding custody of his son.

## Victim or Survivor?

The words 'victim' and 'survivor' have very different connotations. Being a 'victim' can imply helplessness and pity, being trapped and having something done to you that you are not in control of, which might not adequately describe some people's experiences of VAWDASV. However, the term 'survivor' recognises that people are able to take control of their own lives; it implies progression over stagnancy, and many choose it because it serves as a term of empowerment. Some people exclusively use the term 'survivor' over 'victim', and vice versa. People are not either 'survivors' or 'victims' because it's equally possible to be both, depending on the context of the experience.

However, for simplicity and clarity to a wide-ranging audience, this strategy has used the term 'victim' to refer to those that have recently, or are currently experiencing VAWDASV and for those who are not aware or accepting that what they are experiencing is abuse.

'Survivor' is used to refer to those that have overcome their abusive situations, whether as a result of their own actions and/or following engagement with statutory or other support services.

### Survivor Psalm

I have been victimized.

I was in a fight that was  
not a fair fight.

I did not ask for the fight.  
I lost.

There is no shame in losing  
such fights.

I have reached the stage of  
survivor and am no longer a  
slave of victim status.

I look back with sadness  
rather than hate.

I look forward with hope  
rather than despair.

I may never forget, but I need  
not constantly remember.

I was a victim.

I am a survivor.

*I think both words have their place in the journey. But for me having broken free it was important I was classed as a survivor. I believe people shouldn't be looked down upon if they identify themselves as a victim rather than survivor. SW Survivor*

## Framework

This regional Strategy sets out how all partners will shape and deliver responses to all forms of violence against women, domestic abuse and sexual violence across the region.

It sets out a number of ambitious activities to be undertaken over the next 5 years. These are listed as 'We Will' commitments throughout the document and are summarised in the accompanying action plan. These actions will be continually monitored with partners to inform a report of progress to be published each year. This will ensure that the Strategy remains focused and relevant. A number of abbreviation and acronyms have been used throughout—please refer to the glossary of terms.

## Vision and Aims

### Vision:

People who live, work, study in and visit Cardiff and the Vale of Glamorgan have the opportunity to live positive, independent lives without being affected by violence and abuse.

The Strategy has been developed in a time of challenges: new legislative duties on statutory bodies, continuing austerity leading to unprecedented budget cuts and an increasing demand for services. Recognising these challenges, 5 key aims have been identified:

### Aim 1 - PREPARE

Improve strategic planning and commissioning of VAWDASV services through a more coordinated partnership approach across the region.

### Aim 2 - PURSUE

Address perpetrators of VAWDASV by improving intelligence sharing across services and the use of legal powers to disrupt and convict.

### Aim 3 - PREVENT

Pro-actively address negative attitudes and behaviours that have the potential to result in VAWDASV, recognising this as everyone's business.

### Aim 4 - PROTECT

Improve the multi-agency response and support to all victims and their children regardless of risk level and needs.

### Aim 5 - SUPPORT

Ensure that innovative, flexible and evidence-based services are available to meet the needs of victims experiencing any form of VAWDASV.

These aims reflect the requirements of the Welsh Government national strategy (see next page) to address the prevention, protection and support of victims and also the efforts required to pursue those responsible. Each of these aims will be addressed in a separate chapter, although it is acknowledged that many issues cut across a number of strands.

## Regional Partners

This strategy has been developed with the cooperation and collaboration of the following statutory partners across the region :

- ⇒ Cardiff Council
- ⇒ Vale of Glamorgan Council
- ⇒ Cardiff and Vale University Health Board
- ⇒ South Wales Police
- ⇒ South Wales Police and Crime Commissioner
- ⇒ National Probation Service
- ⇒ Community Rehabilitation Company
- ⇒ Welsh Ambulance Services NHS Trust
- ⇒ South Wales Fire and Rescue Service
- ⇒ Velindre NHS Trust

Third sector partners throughout the region have been involved in the development of this strategy as key stakeholders in the delivery of the frontline response to victims and are listed on p.4.

Most importantly, this strategy has been developed with the input and insights of survivors of VAWDASV, predominantly through the Welsh Women's Aid SEEdS (Survivors Empowering and Educating Services) project, and their contribution is gratefully acknowledged.



*"When women thrive, all of society benefits, and succeeding generations are given a better start in life."* Kofi Annan

## Legislative and Strategic Context

### World:

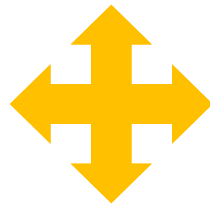
This issue has been acknowledged by the Council of Europe, in the form of the Council of Europe Convention on preventing and combating violence against women and domestic violence. The Convention was adopted by the Council of Europe on 7 April 2011 and came into force on 1 August 2014. The UK Government signed the Convention on 8 June 2012 but has yet to ratify it, however there is overwhelming support to do so soon. Also there is recognition from the United Nations, in the form of their Declaration on the Elimination of Violence against Women, and most recently in the UN Sustainable Development Goals 2030.

### Wales:

The purpose of the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 is to improve prevention, protection and support for people affected. The resulting national strategy provides the leadership and direction which will promote consistency and best practice in the way in which violence against women, domestic abuse and sexual violence is prioritised and tackled across Wales, with the aim of “creating a Wales that we all want to live in, now and in the future, a Wales where everybody is able to live fear-free in safe, equal, violence free relationships and communities.”

### UK:

The UK Government ‘Ending Violence Against Women and Girls Strategy 2016-2020’ builds on a number of initiatives including: the introduction of a new offence of controlling or coercive behaviour, the Modern Slavery Act, Domestic Violence Protection Orders (DVPOs) under the Crime and Security Act 2010, the Domestic Violence Disclosure Scheme (DVDS), FGM Protection Orders under the Female Genital Mutilation Act 2003 and an FGM mandatory reporting duty inserted into the 2003 Act by the Serious Crime Act 2015, and strengthening measures to manage people who commit sexual offences or those who pose a risk of sexual harm.



### Cardiff and Vale of Glamorgan Region:

The Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 placed a number of duties on local authorities and statutory organisations to develop regional strategies, comply with the National Training Framework, including a duty to Ask and Act, and to ensure that this agenda is referenced across Education services. This regional Strategy therefore identifies how these duties are being be tackled in the region and how it will support the national strategy to prevent, protect and support those affected by VAWDASV.

## TIMELINE OF RECENT KEY DOCUMENTS

VAWDASV Wales Strategy 2016
Ending Violence Against Women and Girls Strategy 2016-2020
Wellbeing of Future Generations (Wales) Act 2015
VAWDASV (Wales) Act 2015
Serious Crime Act 2015
Modern Slavery Act 2015
Social Services and Wellbeing (Wales) Act 2014
Istanbul Convention (Convention on preventing and combating violence against women and domestic violence) 2014
NICE Public Health Guidance ‘Domestic violence and abuse; how services can respond effectively’ (PH50) 2014

In addition to the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015, there is other Welsh Government (and wider UK) legislation and policy that informs gender specific services in the region. These are:

⇒ The Renting Homes (Wales) Act 2016 aims to make it simpler and easier to rent a home, replacing various and complex pieces of existing legislation with one clear legal framework. This includes a new approach to joint 'occupation contracts' which replaces tenancies and licenses with two contracts and will help victims by enabling perpetrators to be targeted for eviction.

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 ⇒ The Well-Being of Future Generations (Wales) Act 2015 sets out 7 well-being goals that public sector bodies must take action to achieve. These are all relevant to the prevention of VAWDASV and the support of victims, including an equal Wales, a resilient Wales and a healthy Wales.



⇒ The Housing (Wales) Act 2014 enshrines in legislation, amongst other matters, a reform of homelessness law and strengthens duties on local authorities to prevent and alleviate homelessness.

⇒ The Social Services and Well-being (Wales) Act 2014 provides a 'legal framework for improving the well-being of people (adults and children) who need care and support, carers who need support, and for transforming social services in Wales.'



⇒ The Welfare Reform Act 2012 laid out the UK Government's proposals for reforming the welfare system to improve work incentives, simplify benefits, address fairness and tackle administrative complexity. This affects funding provided to operate supported housing schemes, including refuges.

⇒ Regional Safeguarding Children Boards (RSCBs) and partner agencies must report progress against the four overarching outcomes of the National Action Plan to Tackle Child Sexual Exploitation (CSE) (Wales):

<b>1. PREPARE:</b>
RSCBs and partner agencies assume CSE to be present and have specified objectives to support:- <ul style="list-style-type: none"> <li>• The identification of children and young people subject to or at risk of CSE</li> <li>• A range of appropriate responses and resources designed to improve well-being outcomes for children subject to or at risk of CSE</li> </ul>
<b>2. PREVENT:</b>
RSCBs and partner agencies have a prevention programme and responsive services in place to help children and young people at risk of CSE and their families
<b>3. PROTECT:</b>
RSCBs and partner agencies actively protect children and young people from CSE, by working together to achieve the continuity and effectiveness of care plans for those children and young people subject to or at risk of CSE
<b>4. PURSUE:</b>
RSCBs and partner agencies have a clear and shared understanding about how they can contribute to the disruption and prosecution of perpetrators and to the support of victims through a consistent child-centred approach



⇒ The Home Office Strategy—'Ending Violence against Women and Girls 2016-2020' sets out an ambitious vision to tackle violence against women and girls in all its forms, drive a transformation in the delivery of VAWG services, make prevention and early intervention the foundation stones of a new approach, and embed VAWG as 'everyone's business' across agencies, services and the wider public.

- scope a needs analysis of training currently being delivered in Wales and future requirements;
- develop intelligence/information sharing protocols;
- establish a Wales anti-slavery communications engagement plan;
- identify and encourage good practice in victim care.

Wales is the only government within the UK to employ an Anti-Slavery Coordinator, following a recommendation from the Welsh Government Cross Party Group on Slavery. The post has been in existence since April 2011.

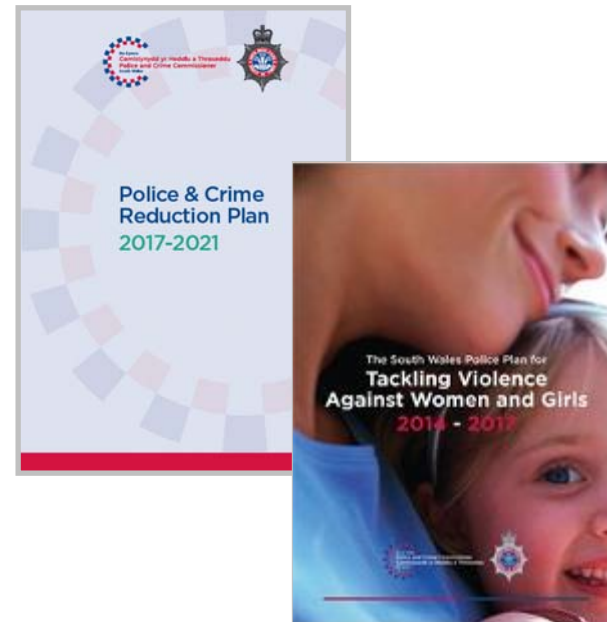
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The Wales Anti-Slavery Leadership Group provides strategic leadership for tackling slavery in Wales and co-ordinates collaboration between devolved and non-devolved partners and third sector organisations. Working to the Modern Slavery Act 2015, the Group's strategic objectives are to:

- build an evidence base using primary and secondary data sets to better assess the scale of slavery in Wales;

⇒ The South Wales Police and Crime Commissioner's (PCC) 'Police and Crime Reduction Plan 2017-2021' identifies that, although it covers just 10% of the geographical area of Wales, South Wales Police provides a policing service to 1.3 million people covering 42% of the country's population with 49% of the total crime in Wales.

Within the 6 priorities identified in the Police and Crime Reduction Plan is Priority 3: "We will work to protect the most vulnerable in our communities". To achieve this priority, the South Wales PCC is committed to "Complete the implementation of the South Wales Violence Against Women and Girls Action Plan."



*"It ought to concern every person, because it is a debasement of our common humanity. It ought to concern every community, because it tears at our social fabric. It ought to concern every business, because it distorts markets. It ought to concern every nation, because it endangers public health and fuels violence and organized crime. I'm talking about the injustice, the outrage, of human trafficking, which must be called by its true name - modern slavery."* Barack Obama



⇒ Although police have been advised to prioritise sex workers' safety since 2011, the National Police Chief Constable's Policing Sex Work Strategy 2016 takes this duty even further. It introduced a new responsibility to protect sex workers, and also frames prostitutes as potential victims of criminality rather than offenders. It is acknowledged that raiding brothels breeds mistrust amid sex workers, police and external agencies. Rather, police forces in England and Wales have been advised to move away from enforcing laws that criminalise the sale of sex. The strategy has accompanying guidance for police officers that continues to support the work of chief constables and their staff when they deal with prostitution, related exploitation and social consequences in their areas.

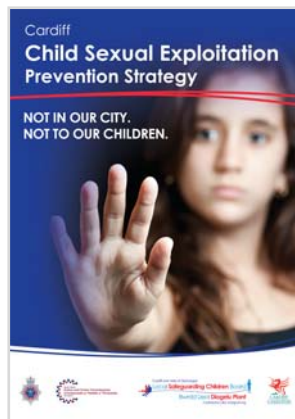
Page 4  
 In terms of regional context, the following local strategies and policies are supported by this strategy and, where necessary, relevant objectives and/or actions will be referenced to show alignment.

⇒ 'Delivering a Safe and Welcoming Night Time Economy' strategy identifies that Cardiff already has a proven record of ensuring safety and wellbeing of those who use, and work in, the night time economy in the capital of Wales. It is in this context that this strategy will help to ensure Cardiff retains a vibrant and safe night time economy by continuing to work with partners, ensuring that the necessary commitments and resources are secured so that existing best practice is sustained.

⇒ Cardiff's Child Sexual Exploitation Prevention Strategy outlines how partners will prepare children, families, communities and professionals to spot children at risk, prevent harm, protect victims and pursue, disrupt and prosecute perpetrators.

Specifically it identifies objectives to:

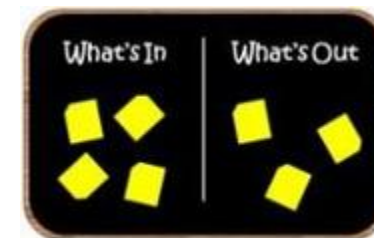
- Understand the scale of the problem
- Raise awareness of the issue through education and training
- Identify those at risk and provide early support to prevent exploitation and abuse
- Protect children who are affected by following the All Wales Child Protection Procedures
- Support victims to break away from sexual exploitation and recover from their experiences
- Disrupt and prosecute perpetrators



**WE WILL:**  
**Work towards developing relevant joint regional strategies and policies where possible**

## Scope

This regional VAWDASV strategy reflects the current strategic and policy framework in force and will be amended as national or local policy changes.



A number of crime types and issues are naturally referenced in this strategy. These include:

- ◆ Coercive control
- ◆ Domestic abuse
- ◆ Female Genital Mutilation
- ◆ Honour Based Violence and Forced Marriage
- ◆ Modern slavery – people trafficking; domestic servitude; labour exploitation
- ◆ Sexual violence – Child Sexual Exploitation; Child Sexual Abuse; rape
- ◆ Stalking
- ◆ Perpetrators of all of the above

A number of related issues will be within the scope of this strategy. These include:

- ◇ The Sex Industry
- ◇ Night-Time Economy
- ◇ Technology – sexting; dating websites; cyber grooming; sex work
- ◇ County Lines - response to cross-border illegality that impacts on VAWDASV

## Glossary of Terms

- ACE—*Adverse Childhood Experience*
- APR—*Adult Practice Review*
- BCU—*Basic Command Unit*
- CPR—*Child Practice Review*
- CPS—*Crown Prosecution Service*
- CSE—*Child Sexual Exploitation*
- DHR—*Domestic Homicide Review*
- FGM—*Female Genital Mutilation*
- GP—*General Practitioner*
- HBV—*Honour Based Violence*
- IDVA/ISVA/IPA—*Independent Domestic/ Sexual Violence Advocate/Independent Personal Advocate*
- IRIS—*Identification and Referral to Improve Safety*
- LGBTQ—*Lesbian, Gay, Bisexual, Transgender & Queer*
- MAPPA—*Multi-Agency Public Protection Arrangements*
- MARAC—*Multi-Agency Risk Assessment Conference*
- MASH—*Multi-Agency Safeguarding Hub*
- MATAAC—*Multi-Agency Tasking and Coordination*
- NRM—*National Referral Mechanism*
- NTF—*National Training Framework*
- PCC—*Police and Crime Commissioner*

- PPN—*Public Protection Notice*
- PSE—*Personal and Social Education*
- SARC—*Sexual Assault Referral Centre*
- SEEdS—*Survivors Empowering and Educating Services*
- SWP—*South Wales Police*
- VAWDASV—*Violence against Women, Domestic Abuse and Sexual Violence*
- WASPI—*Wales Accord in Sharing of Personal Information*

## Links to Further Information

- ◇ [www.livefearfree.org.uk](http://www.livefearfree.org.uk)
- ◇ [www.gov.wales/topics/people-and-communities/communities/safety/domesticabuse/](http://www.gov.wales/topics/people-and-communities/communities/safety/domesticabuse/)
- ◇ [www.youtube.com/watch?v=u7Nii5w2Fal](http://www.youtube.com/watch?v=u7Nii5w2Fal)
- ◇ [www.beyond-the-gaze.com/briefings](http://www.beyond-the-gaze.com/briefings)
- ◇ [www.gov.uk/government/publications/analysis-of-serious-case-reviews-2011-to-2014](http://www.gov.uk/government/publications/analysis-of-serious-case-reviews-2011-to-2014)

## Key Annual Dates (for information only)

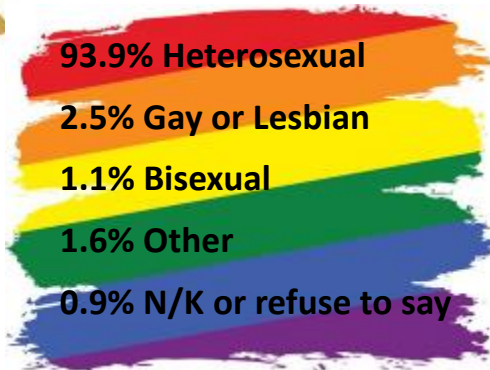
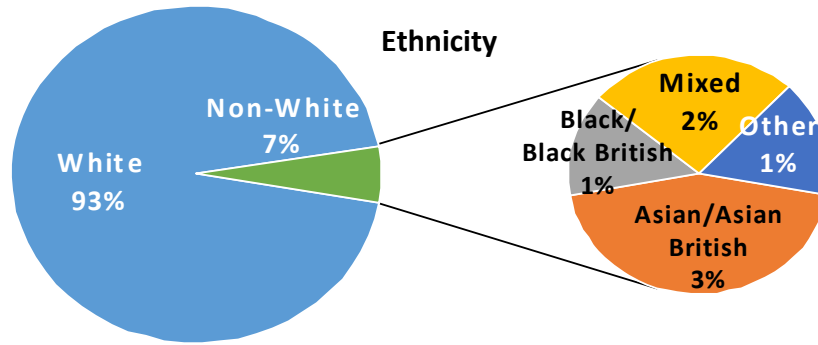
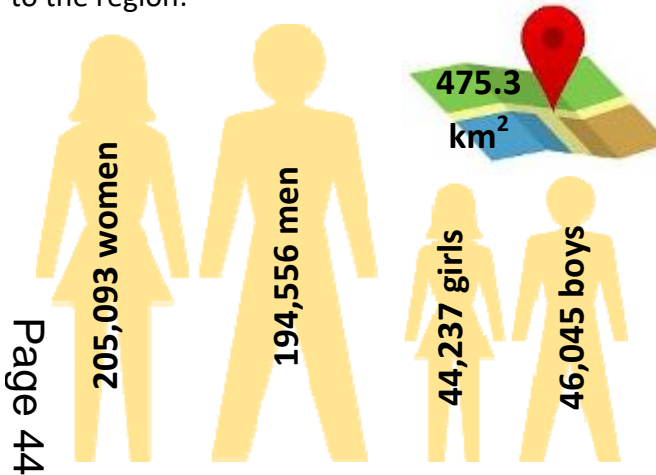
DATE	EVENT
6th February	International Day of Zero Tolerance for Female Genital Mutilation
8th March	International Women's Day
18th March	CSE National Awareness Day
18th April	National Stalking Awareness Day
17th May	International Day against Homophobia and Transphobia
14th July	Memory for Victims of Honour Based Violence
19th November	International Men's Day
20th November	Children's Rights Day
25th November	International Day to Eliminate Violence against Women / White Ribbon Day
November	National Safeguarding Week
17th December	International Day to Eliminate Violence against Sex Workers
10th December	Human Rights Day

# CHAPTER ONE

# PREPARE

## Regional Overview

The area covered by Cardiff and the Vale of Glamorgan local authority boundaries has a total population of **489,931**; 16% of the Welsh population. The following facts and figures apply to the region:



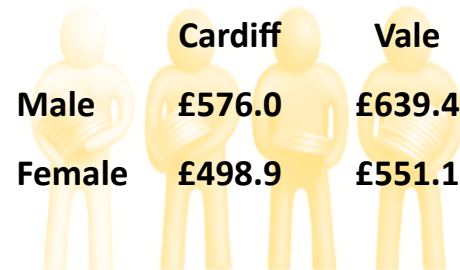
**18 Police Stations**  
4 - Vale  
14 - Cardiff



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Ages	♂	♀	Totals
0-4	15,115	14,489	29,604
5-15	30,930	29,748	60,678
16-24	37,248	38,241	75,489
25-44	67,835	65,168	133,003
45-64	55,595	58,786	114,381
65+	33,878	42,898	76,776
<b>TOTAL</b>	<b>240,601</b>	<b>249,330</b>	<b>489,931</b>

### Weekly Gross Earnings (f/t):



**2 official gypsy/traveller sites = 80 pitches**

**85 GP surgeries: Cardiff 62, Vale 23**

**1 prison**



**EMPLOYMENT**

- Employee
- Self-Employed
- Unemployed
- Retired / Other

	Cardiff	Vale
Employee	60.9%	63.1%
Self-Employed	7.2%	10%
Unemployed	5.6%	4.6%
Retired / Other	26.3%	22.3%

Schools	Cardiff	Vale
Primary	95	19
Secondary	19	9
Special	7	4
Independent	8	2
Colleges / Universities		12

All figures correct as at January 2018

## Needs Assessment

A regional needs assessment exercise was undertaken to gather data from statutory and specialist services to inform the Local Wellbeing Assessments. A subsequent exercise was undertaken to inform this Strategy and future commissioning of services. Findings will be referenced throughout this Strategy to illustrate demand for services and to identify any gaps or duplications.

One of the tools for understanding need for VAWDASV services in an area is the Home Office's Ready Reckoner Tool. This was developed as a key action from the Home Office Violence against Women and Girls (VAWG) Strategy. Using findings from the British Crime Survey, it enables commissioners of services to estimate the need for local services for domestic violence, sexual violence and stalking in their area.

For the adult population of the region of 399,649, the tool estimates that:



In addition the tool also identifies the estimated cost of domestic and sexual violence in an area of this size:

Total costs (not including human and emotional costs):	Physical and mental health care costs:	Criminal justice costs:
<b>£76,344,150</b>	<b>£16,451,082</b>	<b>£10,361,971</b>
Social services costs:	Other costs (incl. housing, civil legal & employment costs):	Human and emotional costs (not included in total):
<b>£1,951,360</b>	<b>£47,579,738</b>	<b>£243,751,358</b>

The figures do not include additional costs from stalking, female genital mutilation, 'honour'-based violence and forced marriage. As well as the human cost of violence against women, domestic abuse and sexual violence, there is clearly a cost to society.

All partners in Cardiff and the Vale will continue to enhance their knowledge base regarding the true impact of VAWDASV in the region and ensure data is captured on all services operating in the area.

### WE WILL:

**Continually improve data collection methods to better inform ongoing needs assessment**

## Regional Working

In 2016 the Welsh Government's Cabinet Secretary for Communities & Children required a move towards a national rollout of a regional funding and commissioning model approach from 2018 onwards.

Cardiff and the Vale of Glamorgan have agreed to operate as a region due to a shared Health Board footprint, natural travel to work patterns, service access migrations for residents across the area, and the pre-existence of a number of regional services and policies.

The Cardiff and Vale region have submitted a Commissioning Plan for 2018/19 to the Welsh Government. During 2018/19, which is the last transition year, all regions will be required to develop a Commissioning Strategy to encompass requirements laid out in statutory guidance due to be circulated to local authorities in early 2018. Funding for other third sector services currently paid direct by the Welsh Government will also transfer to local authority regional allocation from 2019.

Cardiff and Vale of Glamorgan local authorities will be establishing formal partnership arrangements to take forward regional activities including commissioning, and continuing discussions with partners on the approach to procuring specialist services in the region.

## Governance

To move from a single authority to a regional partnership arrangement, many of the existing reporting groups and structures required some rationalisation. The diagram below is the proposed governance structure to be adopted in the region. The following strategic and overarching groups are explained in more detail:

### Cardiff and Vale VAWDASV Steering Group

This overarching strategic group will ensure the delivery of the Strategy's action plan and have oversight of all issues pertaining to VAWDASV. It will also have links into other regional structures.

### VAWDASV Executive Groups

These groups will continue to oversee the issues relating to VAWDASV in each local authority area, ensuring representation from Education, Adults and Children's services to address local service access and delivery and strategic issues.

### Regional VAWDASV Commissioning Board

A specific requirement of the Welsh Government, this Board will manage the commissioning of specialist service through assessing the needs of victims, designing and securing services using the 'analyse', 'plan', 'do' and 'review' cycle.

### Ask & Act, Education and Training Group

This Group will oversee the planning and delivery of the National Training Framework (see p.30) to public sector employees; ensuring schools, colleges and universities are aware of services and referral pathways; and to develop appropriate awareness-raising materials.

### Sexual Violence Strategic Group

This group will ensure that sexual violence issues including rape, sexual assault, sexual harassment, CSE and FGM are addressed strategically.

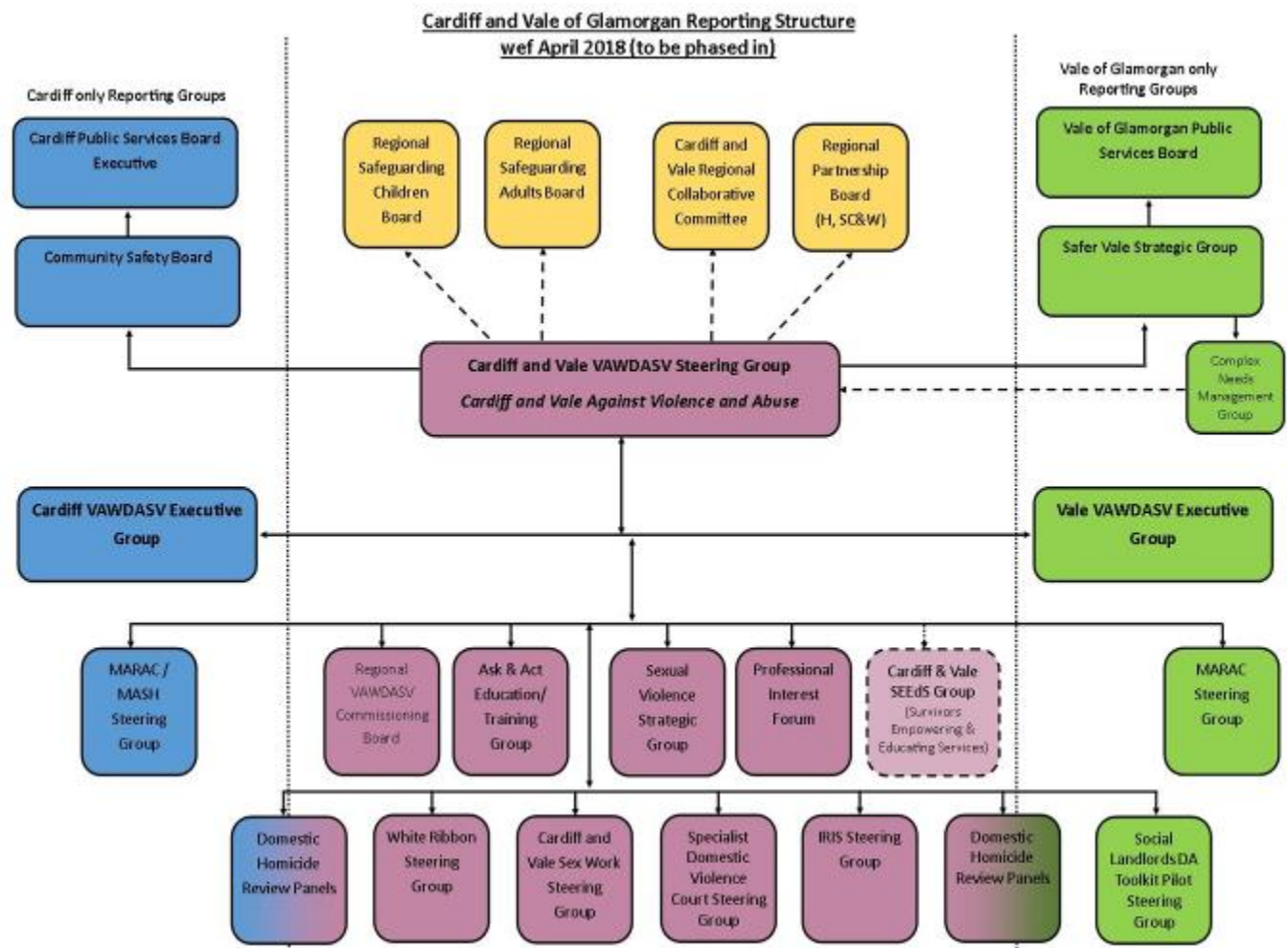
### Professional Interest Forum

A means of sharing new and emerging research projects and findings, best practice examples and evaluations between all interested stakeholders working in the sector.

There will continue to be a degree of reporting through local authority governance and oversight arrangements. This regional structure will be continually monitored and reviewed to remain in line with other relevant structures.

### WE WILL:

**Implement and continually review governance arrangements including membership, to ensure they remain fit for purpose**



## Available Specialist Services

Mapping of services available across the region shows that there are currently:

- 1 One Stop Shop (Cardiff only)
- 36 Independent Domestic Violence Advocates (IDVAs) and 5 Independent Sexual Violence Advocates (ISVAs)
- 84 units of specialist accommodation
- 4 MARAC Coordinators overseeing 4 MARACs
- 2 VAWDASV Managers and 1 Domestic and Sexual Violence and Abuse Coordinator
- 9 specialist providers of victim support services
- 2 providers of perpetrator programmes

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- **Cardiff Women's Aid** (working as *Triwriaeth with Bawso and Llamau*) delivering the RISE Cardiff-Cymru VAWDASV service for female victims including One Stop Shop, a range of crisis accommodation/ refuge, floating support, specialist children and young people support, IPAs and therapeutic work

- **Atal Y Fro** provides static and dispersed refuge, IDVA support, community interventions, children and young people support and perpetrator programmes / family interventions

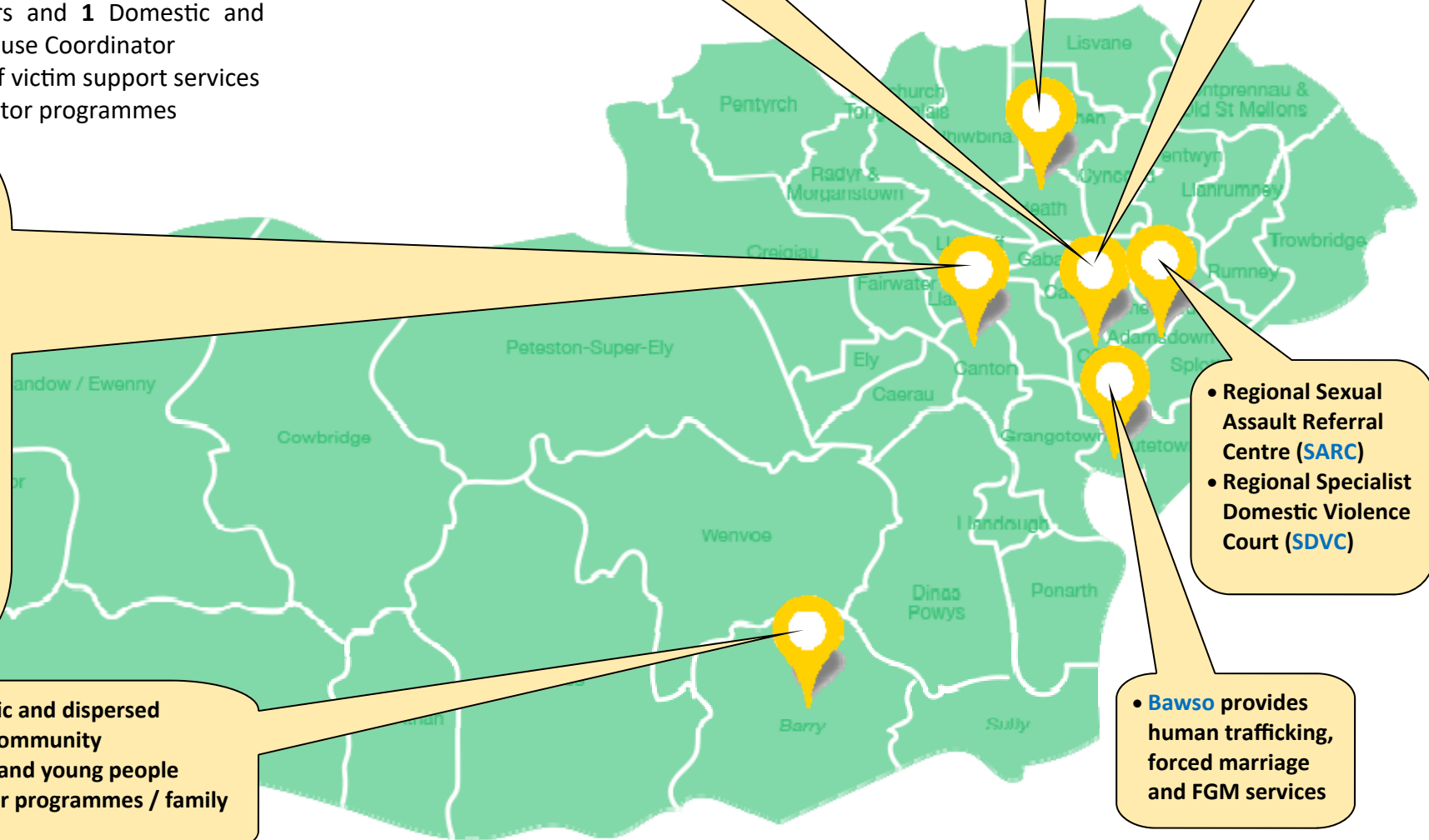
- **Dyn** national male victim service
- **Safer Wales Streetlife** project for street sex workers
- **Safer Wales** and **Probation Women's** pathfinder service

- **Cardiff and Vale Health-based IDVA**

- **New Pathways** delivers current and historic sexual abuse counselling for women, men and children
- **Gwalia** male refuge

- **Regional Sexual Assault Referral Centre (SARC)**
- **Regional Specialist Domestic Violence Court (SDVC)**

- **Bawso** provides human trafficking, forced marriage and FGM services



## Wider Collaboration

The Home Office Violence Against Women and Girls Service Transformation Fund (2017) provided an opportunity for commissioning partners to bid for funding that supported activity that “*seeks to embed Violence Against Women and Girls as ‘everyone’s business’ across agencies, services and the wider public, ensuring every victim gets the support she needs - and the support her children need - at the right time.*”

The South Wales Police and Crime Commissioner was successful in being awarded £1.4m of this funding over three years to establish a strong foundation that enables a whole systems approach to improving the response to this issue and making a positive impact in relation to all victims/survivors and wider communities across the South Wales area. The collaboration between all the commissioning bodies eligible for this funding across South Wales (PCC, Health Boards and local authorities) was identified by the Home Office as a particular strength of the bid. The objectives of this whole systems approach are to:

1. Improve strategic planning and commissioning of VAWDASV services, through a more coordinated partnership approach.
2. Enhance and maximise on the evidence base underpinning practice addressing VAWDASV, through a collaborative shared learning approach.
3. Improve the service delivery landscape – through investing in services in two key areas:



- Change that Lasts - early intervention and prevention (to be trialled in Cardiff)
  - Holistic services including work with perpetrators and families
4. Raise awareness of all forms of VAWDASV, thereby supporting community engagement and empowerment.

The whole Programme will support the overarching outcomes framework shown above. The specific activities to be undertaken during the three year funded period include:

- Establishing a South Wales Regional Collaborative Board to oversee the project
- Establishing thematic workstreams to explore solutions to a range of issues
- Establishing a South Wales Service Provider Forum
- Establishing South Wales Survivor Engagement processes
- Developing a South Wales regional learning network
- Delivering the ‘Ask Me’ Scheme and local Ambassadors

- Ensuring availability of trained and trusted professionals to Ask and Act
- Providing specialist services to support both victims and perpetrators

Research also indicates that sex workers are highly likely to be victims of crime, but are unlikely to report incidences to the police and seek justice. South Wales Police has secured funding to enhance existing provision in order to be able to respond to these vulnerabilities and address neighbourhood concerns associated with prostitution. This includes the establishment of dedicated Sex Work Liaison Police Officer’s in both Swansea and Cardiff and additional dedicated advocacy services for those involved in prostitution. This work is part of the wider systems change initiatives that are being led by the Police and Crime Commissioner.

### WE WILL:

**Actively assist with embedding a whole systems approach across the region**



## Survivor Engagement



SEEdS is a survivor participation project that gives women who have lived through all forms of domestic and sexual violence and abuse the opportunity

to share their experiences and influence change. The project brings together women from across a number of South Wales regions and provides training, support and resources as well as a safe space where survivors can learn from and encourage one another.

It works in partnership with agencies across the public and voluntary sectors to provide platforms where survivors can have a voice to inform the planning, development and delivery of violence against women services, including domestic abuse and sexual violence. SEEdS participants are supported and encouraged to speak out about their own and other survivor's experiences of violence and abuse. This has included their participation and input into local campaigns and subsequent publicity. SEEdS have worked to raise awareness about the reality of domestic abuse, sexual violence and all other forms of violence against women, so that it is understood, challenged and prevented. This is especially helpful through delivery of training and speaking at conferences. SEEdS representatives have helped inform the development of this Strategy, providing quotes and valuable input into the commitments made by partners.

The Welsh Government is seeking comments on its Survivor Engagement Framework. It states that "the purpose of a National Survivor Engagement Framework is to ensure that the needs and experiences of survivors of violence against women, domestic abuse and sexual violence, including the most marginalised survivors, those who face multiple disadvantage in accessing help and support, are understood. It is also important that those for whom policy is made, are able to influence and guide that policy and share what works for them."



Within the region this concept is fully supported as it is acknowledged that the views of those with protected characteristics and those with complex, multi-faceted needs must also be allowed the opportunity to input their views and voices into service design and feedback. Any such framework must be sustainable and geographically representative and the region will fully support Welsh Government requirements in this area.

## SURVIVORS' VOICES

I love being part of this project and love the way it's driving forward. I feel we can make real change and at last it's not just me knocking on doors on my own.

The confidence and skills I have developed since joining SEEdS has enabled me to return to work after a period of uncertainty and lack of self-belief.

I feel listened to, I feel valued and I feel an important part of change

SEEdS has let me experience environments I have never had the opportunity to see or be part of and I hope this will continue to be the case.

SEEdS project is a hugely important part of my life. It is giving me the strength to move forward, regain my self-confidence, self-esteem and once again be the strong independent woman I was before my experience.

To know my experiences will now influence other women's experiences and implement change for the better, means that all that suffering was not in vain and that light can arise from the darkness that is violence against women.

### WE WILL:

**Actively seek engagement and input from victims and survivors that represent all crime types and protected characteristics.**

## Equality and Diversity

Working to the Equalities Act 2010 and the Welsh Language Act 1993 which has been further amended by the Welsh Language Measure 2011, all partners in the region are mindful how they respond to the diverse needs of victims including how they engage with, and meet the needs of, victims and their children with protected characteristics. Partners share the values of being open-minded and respectful and have a commitment to equality and diversity, acknowledging individuality and recognising that people are not a homogenous group of victims.

Partners require the same values to be displayed within the specialist services commissioned to support victims - they must be committed to anti-oppressive and anti-discriminatory practice, display non-judgmental acceptance of the victim's experiences and demonstrate understanding and empathy. Services must be inclusive, recognising the specific needs, and barriers to accessing support, of all victims and their children, especially those with protected characteristics.

Services in the region are also required to support any revised Equality and Human Rights Commission (EHRC) stance on the delivery of helplines, to ensure that male and female callers receive the same level of service.

Protected Characteristic	Service Requirements
Age	<ul style="list-style-type: none"> <li>Acknowledge and understand the impacts of violence against women, domestic abuse and sexual violence on older people seeking support and tailor services appropriately.</li> <li>Deliver a range of age-appropriate therapeutic interventions for children and young people.</li> </ul>
Disability	<ul style="list-style-type: none"> <li>Ensure equitable access to services, especially information and advice and in accommodation-based support.</li> <li>Develop referral pathways into other specialist support such as mental health and substance misuse services</li> </ul>
Gender Reassignment	Have clear policies and procedures in place for delivering services to transgender victims, especially in shared accommodation-based settings and in group work – both in terms of keeping the victim safe and managing any impact
Pregnancy and Maternity	Service provision should acknowledge and understand how violence against women, domestic abuse and sexual violence is impacting on a victim's own wellbeing and on their capacity to form positive attachments and effectively parent their children
Race	Provide sensitive and appropriate services for all victims but specifically for those from a BME background who may experience additional barriers that may affect their ability to seek help and support and who may have additional needs.
Religion / Belief	Have an awareness of the different requirements of a victim's religion/belief and meet these needs wherever possible, for example the use of prayer/contemplation rooms in the accommodation-based support settings.
Sex	<ul style="list-style-type: none"> <li>Deliver services that are informed by a gendered understanding of violence against women, domestic abuse and sexual violence to reflect the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) 2015 Act.</li> <li>Ensure that children of any gender accompanying a victim are provided with appropriate support and positive mentoring.</li> </ul>
Sexual Orientation	Acknowledge and understand the effects of sexual orientation on the abuse experienced by victims who are LGBT+.
Welsh Language	Facilitate response to initial enquiries in the Welsh language and ensure that all publicity materials regarding services are bilingual.

*"Equal rights, fair play, justice, are all like the air; we all have it, or none of us has it. That is the truth of it."* Maya Angelou



## **CHAPTER TWO**

# **PURSUE**

## Criminal Justice Response

All police first responders wear body cameras so that events from the moment police respond to a call-out can be recorded to support a victim's case and, where necessary, be used for victimless prosecutions. Also known as evidence-based prosecution, a victimless prosecution is where the police or Crown Prosecution Service progress a case without the cooperation of an alleged victim

to convict perpetrators. In domestic violence cases, if the victim is willing to give evidence, it is more likely than not that the decision made will be to prosecute. Where the victim is not willing to participate, prosecutors will need to give careful consideration to public interest factors, including the interests and safety of the complainant, other family members and any children or other dependants.

There is no specific offence of 'domestic violence' or 'domestic abuse'; however, the term can be applied to a number of offences committed in a domestic environment. The domestic nature of the offending behaviour is an aggravating factor because of the abuse of trust involved.

Some 11,302 incidents of domestic abuse were reported in the region in 2016/17, with a total of 5,067 recorded crimes as follows:

	Cardiff	Vale
Assault	1,915	566
Harassment	929	353
Stalking	47	15
Coercive Control	25	9
Threat to Kill	17	4
<b>TOTAL</b>	<b>3,837</b>	<b>1,230</b>

The offence of coercive or controlling behaviour in an intimate or family relationship became a criminal offence as part of the Serious Crime Act 2015. Coercive control is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten. This controlling behaviour is designed to make a person dependent by isolating them from support, exploiting them, depriving them of independence and regulating their everyday behaviour.



Coercive control creates invisible chains and a sense of fear that pervades all elements of a victim's life. Experts such as Evan Stark liken coercive control to being taken hostage. As he says: "the victim becomes captive in an unreal world created by the abuser, entrapped in a world of confusion, contradiction and fear." This offence is starting to become more recognised amongst professionals as specialist training is rolled out. In 2017, a total of 309 offences of coercive and controlling behaviour came before the courts in England and Wales; 97% of defendants were male (CPS.)

Of the 5067 cases of recorded domestic abuse in Cardiff and the Vale, 27% were not progressed due to lack of evidence and a further 33% were not progressed due to a lack of victim engagement.

In terms of Forced Marriage Protection Orders (FMPO), the number of applications made nationally is very small although figures suggest an upward trend in their use. To date, only two FMPOs have been granted in the region.



For sexual violence there were 1,011 recorded crimes in 2016/17 with a further 182 related to historical abuse. 77% of victims were female and 23% of victims were aged under 16. Some 69 perpetrators of sexual violence were also known domestic abuse offenders. Of all offenders, 33% were not convicted due to lack of evidence; a further 12% due to lack of victim engagement.

The service in the Vale of Glamorgan now responds to those experiencing sexual violence through a specialist team of police officers to investigate and respond to rape and sexual assault. This new team will deliver expertise and confidence amongst fellow officers and victims when dealing with such cases and will be able to ensure that more perpetrators are brought to justice.

There were 99 incidents of honour based violence and 37 recorded crimes in 2016/17. Of all recorded crimes, 10% were not progressed due to lack of evidence and a further 11% were not progressed due to a lack of victim engagement. 30 cases of trafficking were reported in the region in 16/17; 14 of the victims were children (86% girls).

Female Genital Mutilation (FGM) is usually carried out on young girls between infancy and the age of 15, most commonly before puberty starts. It is illegal in the UK and is child abuse. The number of applications made for FGM Protection Orders (FGMPOs) remains very small across the UK. In total, there have been 205 applications and 179 orders made in England and Wales up to the end of September 2017 since their introduction in July 2015.

**WE WILL:**

- Increase the number of positive outcomes for victims
- Enhance the monitoring of the outcomes of cases appearing before Magistrates and Crown courts

*"We remain committed to working collaboratively with our partners, focusing on early intervention and prevention to tackle abuse at its root as well as supporting police action and appropriate prosecutions. . . we will continue to drive this agenda by tackling the harmful attitudes that underpin these behaviours...and investing in evidence-based perpetrator interventions."* Alun Michael, South Wales Police and Crime Commissioner

## Integrated Offender Management



In order to optimise collaboration in the identification, assessment and management of offenders who pose multi-agency defined high risk, threat and harm, the High Risk of Harm Project (Wales Integrated Serious and Dangerous Offender Management (WISDOM)) has been initiated.

The types of offenders within this definition will include sexual and violent offenders, serial domestic abuse perpetrators and serious and organised crime nominals, amongst other dangerous priority groups. Key to the achievement of the WISDOM objectives is the integration of the statutory responsibilities of police, probation officers and prison staff, as well as other social justice partners such as health, by harnessing their respective expertise. Inter-agency working is not new, indeed this project draws on the expertise the police and Probation bring by using existing Integrated Offender Management principles in relation to:

- fundamental information-sharing;
- intensive, joint supervision and surveillance;
- dynamic risk management and enforcement tactics,

all of which provides added value to the management of this dangerous cohort.

This project is able to define, in its own terms, the scope of its activities and therefore the cohort of offenders who form the subject of its activities. It is therefore more responsive to operational need and as such provides a more sharply focused and flexible body of expertise to tackle some of the largest risks both agencies have to manage – with all the presentational and reputational benefits this can bring.

The WISDOM project has adopted an evidence-based approach, by using the available multi-agency expertise, with the aim of realising the following benefits:

- Enhanced information-sharing arrangements in relation to dangerous priority groups;
- Improved public protection and community safety as well as reduced re-offending of the most dangerous offenders in Wales;
- Developed, evidence-led, targeted approach to multi-agency management of high risk of harm cohorts;
- Greater efficiencies realised through better integrated services and reduced duplication;
- Development of a vehicle through which lessons can be identified and multi-agency learning can be shared to prompt invaluable systemic changes.



South Wales Police use local, regional, national and international intelligence to undertake specific, directed operations and raids as necessary to arrest and detain suspects and gather evidence. For example there could be specific operations relating to human trafficking or CSE and also raids of commercial and/or residential properties. These operations and raids are often undertaken collaboratively across a number of police areas, sometimes referred to as 'County Lines' operations, with raids across different areas taking place simultaneously.



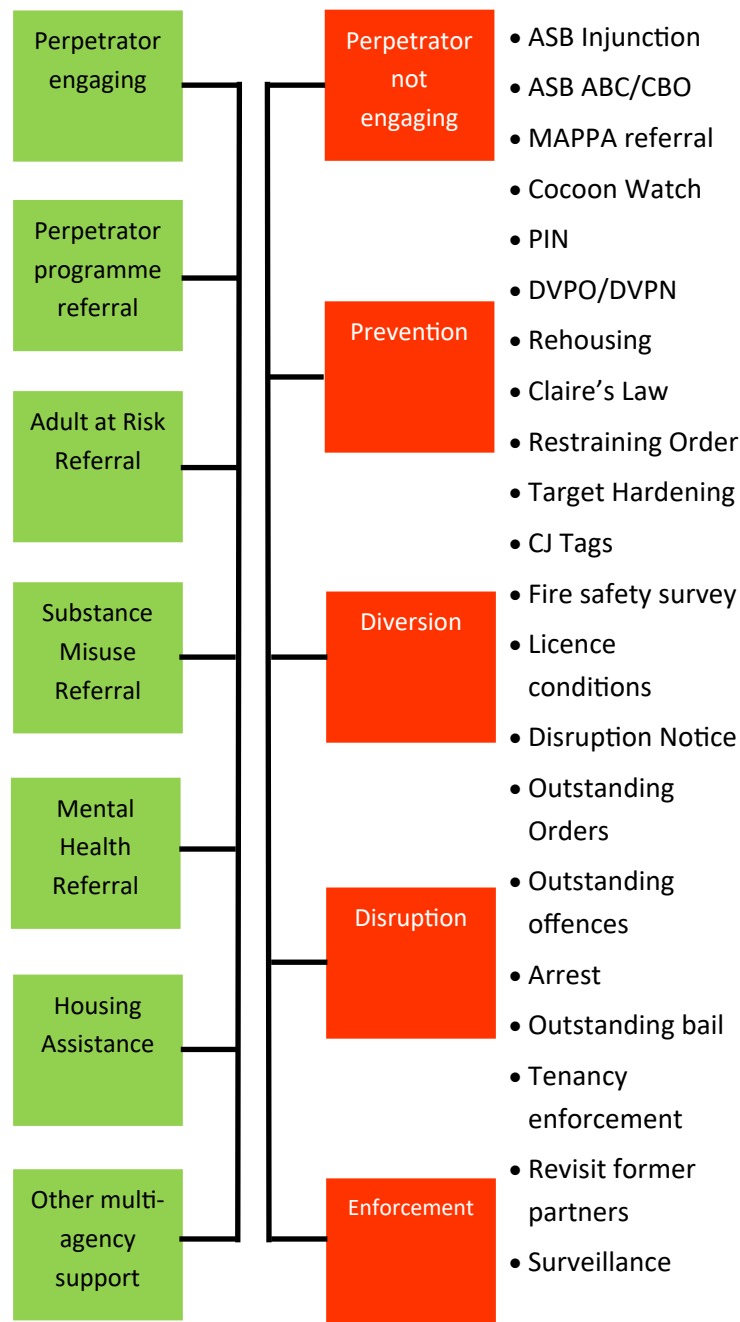
A new approach to tackling perpetrators has been successfully trialled in Scotland and Northumbria. Called Multi-agency Tasking and Coordination (MATAC) it takes a similar approach to MARAC in having partners share the responsibility of tackling perpetrators of domestic abuse through disruption and direct support. Its aims include:

- Tackling the cause of the problem (perpetrators)
- Prevent domestic abuse related offending
- Improve victim safety
- Improve criminal justice outcomes
- Improve partnership engagement
- Improve offender behaviour

A 'Recency, Frequency and Gravity' analysis identifies the most harmful and often serial perpetrators to be targeted. Partnership meetings are then held to determine what multi-agency interventions can be implemented. Partners will need to include Housing, Probation, Mental Health and Substance Misuse services. Links to MARAC and MAPPA must also be facilitated to ensure ongoing victim safety and to raise awareness of the impact of any interventions. It is anticipated that this model will be implemented in Cardiff in the near future.

**WE WILL:**  
**Trial and evaluate the MATAC Intervention for perpetrators of domestic abuse**

## MATAC Toolkit



The Drive Project currently delivered in Cwm Taf will be extended to Cardiff from September 2018, utilising Home Office Transformation Funding. Drive is a community-based intervention for perpetrators of domestic abuse whose victims are assessed as at a high risk of significant harm or fatality. The service offers a risk and needs led response that proactively works with this potentially involuntary client group. The service is delivered in the context of a multi-agency response, provides a tailored intervention plan that meets needs, addresses offending and motivates active engagement in activities that will produce sustained behavioural change; whilst keeping the risk to victims paramount.

In Cardiff, perpetrators will be identified through the MATAC process, including intelligence from MARAC, MAPPA and WISDOM and they will receive support from Safer Merthyr workers who have been involved in the Cwm Taf Drive pilot.

An important focus of work with perpetrators is to increase the safety and wellbeing of survivors and their children. The Cardiff RISE service will work with Drive to ensure that victims can be supported and will contribute to effective risk management.

**WE WILL:**  
**Evaluate the impact of Drive including impact on victims and children**

## Working With Perpetrators

For the period 2016/17, some 207 adults were on Community Orders with a domestic violence related index offence; of these 6% were female. Only 79 offenders completed their Community Orders successfully. A further 94 adults were on Licence with a domestic violence related index offence; 3% were female and only 48 completed their Licences successfully.

The HM Prison and Probation Service is currently transitioning towards a new model of delivery for Accredited Programmes for perpetrators of abuse. The 'Kaizen' programme is designed for adult males assessed as high risk of reoffending with a high level of criminogenic need, irrespective of the nature or type of their offending. 'Becoming New Me+' (BNM+) is the equivalent of Kaizen but suitable for participants with Learning Disability. 'Horizon' is designed for adult males who have been convicted of sexual offences and who have been assessed as medium risk and above of re-conviction. 'New Me Strengths' (NMS) is for individuals with Learning Disability who are assessed as medium risk and above. Both BNM+ and NMS have a 'bolt on' module called 'Living as New Life Me' that focuses on maintaining the strength and skills learned from programmes.

Project Name:	Aimed at:	Description:	Programmes Held Jan-Dec 2017:
<b>Break 4 Change Cymru</b>	Adolescent to parent violence	A programme that supports parents/carer's and young people in building healthy relationships. The programme aims to help the family break patterns. where a young person in the home is: <ul style="list-style-type: none"> <li>Controlling the home environment</li> <li>Being violent or aggressive towards a parent</li> <li>Making threats</li> </ul>	2 in the Vale 1 in Cardiff = 9 families
<b>Choose to Change (Respect accredited)</b>	Male perpetrators	24 week rolling programme for men who are motivated to make changes and willing to engage. They must be over 18 and cannot be on any other programme, or on bail or waiting for a court date.	1 in Cardiff = 34 men

All programmes adopt a strengths based, future focused approach, paying attention to the individuals needs of each participant and places an emphasis on the Risk, Need and Responsivity model of rehabilitation. All programmes are underpinned by a commitment to inclusivity and can be delivered as group work or on a 1-1 basis. Importantly, programmes can also be delivered where an offender is in denial of their offending.

Currently the Wales Community Rehabilitation Company deliver Building Better Relationships (BBR) group work programmes for domestically violent/abusive men in the community. 'Horizon' is also delivered (as mentioned above) and

individual work, underpinned by 'Maps for Change' is also undertaken with sexual offenders.

Currently the only non-Criminal Justice community perpetrator provision available in the region is the suite of programmes delivered by Atal y Fro's EPIC project (shown above). In addition they offer 'Journey Beyond Abuse' for women who have used forced in a domestically abusive relationship. However this funding is due to cease in 18/19 and so alternative provision is being explored, including preventative options for those concerned about their own sexual thoughts or behaviour and for young people concerned about their behaviours.

*"If you tackle male violence against women & girls, you tackle all the other issues."*

Nazir Afzal OBE, formerly Crown Prosecution Service and now Welsh Government National Advisor



An important focus of work with perpetrators is to increase the safety and wellbeing of survivors and their children.

Respect, the organisation that provides the accreditation for perpetrator programmes, has recently launched its revised standards (November 2017). The Respect Standard sets out an evidence-based, safety-focused framework which identifies good practice and offers guidance for organisations to ensure that they are meeting the needs of service users safely and effectively. It covers the whole cohort of perpetrators; men and women in straight or same sex relationships; those motivated to change and those who aren't; and those presenting different levels of risk and need. It encompasses all work an organisation carries out with perpetrators, including:

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- Early intervention
- Behaviour change programmes (groups or 1-1)
- High intensity case management with high risk perpetrators
- Disruption activities

Evidencing that they meet the Standard, organisations demonstrate their competence in working with perpetrators, with the safety of survivors and their children integral.

**WE WILL:**

- **Improve monitoring and reporting of perpetrator programmes/interventions**
- **Consider early intervention options for those concerned about their behaviour**
- **Explore options for delivering a range of community perpetrator interventions**



A multi-agency Specialist Domestic Violence Court (see p.52) Operational Group meets twice a year to discuss the regional approach in handling cases. The Group considers the practicalities of trials from a victim's perspective and ensures the process runs as smoothly as possible for all concerned.

Examples include cases being listed on a Monday to minimise disruption, the use of IDVA/IPA support to represent victims and video-conferencing facilities in the Vale to support victims who feel that attending court is too traumatic. The assistance of IDVA/ISVA/IPA needs to be extended to all victims at all courts.

The Code of Practice for Victims of Crime (Victims' Code) was introduced in 2006 and sets out the minimum levels of service which victims can expect from agencies that are signatories to it. For those who have not engaged with an IDVA/ISVA/IPA there may be support for court representation from Victim's Support.

**Restorative Justice**

Restorative justice is the process of bringing together those harmed by crime or conflict with those responsible for the harm to find a positive way forward. Following the provisions of the Crime and Courts Act 2013, it is possible that sentencing can be deferred or adjourned for pre-sentence restorative justice to take place.

Under the Code of Practice for Victims of Crime (October 2013), victims are entitled to take part in restorative justice techniques. Police policy does not support the use of restorative justice for domestic abuse and sexual violence in intimate (current or previous) partner cases and some familial abuse cases; the use of restorative justice is not seen to be appropriate. Therefore, restorative justice should only take place after cautious consideration and advice from experts.

In the cases where it is requested and felt appropriate, restorative justice or mediation must focus on a victim's safety. Care should be taken to ensure the victim is a willing participant and there are no coercive influences; this is because of the nature of the relationship between the complainant and offender. A properly trained facilitator experienced in dealing with sensitive cases of this nature, should manage arrangements to ensure the victim is not pressurised.

**WE WILL:**

- **Continually review the guidance and approach to the use of restorative practice for victims of VAWDASV**

## Safe Use of Technology



An online life is now taken for granted. Smartphones, email, social networking, online dating, chat rooms, blogs, online gaming, Facebook, Twitter, Snapchat and Instagram etc. allow greater interaction than ever before. However, these online interactions can easily become abusive and harmful, and new technology and applications can be used as a means of monitoring and controlling others. Online abuse can include grooming of children and young people, cyberbullying and sexting.

As well as raising awareness with children and young people about these issues, adults are not immune from being victims of online sexual harassment, stalking, shaming, violent threats and being targeted through dating websites and chatrooms. Unfortunately these issues are of a global nature and must be tackled at national government levels. Locally however, partners can do more to alert people of potential harm and make them more cautious about how they use and respond to this technology.

### WE WILL:

**Deliver local campaigns to highlight safe use of technology**

## Encouraging Victims to Report

The reluctance of victims of any form of VAWDASV to come forward and report to anyone, including the police, can involve a number of factors:

### ⇒ Victims' Perceptions

Victims often feel shame, guilt, or are immobilised by psychological or physical trauma, and have a fear of not being believed; not even telling family or friends. Some believe in family/religious values that encourage the maintenance of the family unit at all costs and many continue to hope for the perpetrator's promises to change.

### ⇒ Perceived Powerlessness of Police

People see the police as being over-stretched and often minimise their experience as not worth reporting and needing to take up police time. The ability to seek a criminal sanction or civil remedy can also be perceived as unlikely. This 'lack of confidence' in the criminal justice system is an important factor in reporting.

### ⇒ Threat of Further Victimisation from the Perpetrator and Authorities

Fear of reprisals, either by the offender or his or her family members or friends is a major reason for people's silence. Others do not report as they cannot face the thought of taking their case through the courts, with the time and stress that can involve. Additionally they have to repeat their stories to a range of statutory services in order to access health or housing services for example.

Although services' capacity to respond is a real issue, this should not be a factor that impedes the confidence of the public to report crimes. All partners, whether statutory or third sector, need to work together to support each other's contribution to tackling VAWDASV in all its forms.

This strategy identifies a number of opportunities to support victims to feel more confident in coming forward, thereby assisting the Criminal Justice System to improve its intelligence of perpetrators and improve the range of support services to victims. Examples include:

- Training of first responders in all services to recognise vulnerability and understand all types of VAWDASV and effects of coercive control.
- More collaborative approach through MASH and MARAC processes and co-location.
- Assisting victims with a named support worker throughout their recovery journey such as an IDVA/ISVA/IPA to advocate with services on their behalf.
- More opportunities to disclose through Community Ambassadors / Ask Me Scheme.

Ultimately, the aim of all partners is to stop repeat victimisation and so this requires a collaborative approach in giving confidence to victims to report, which may also protect others from being abused in the future.

### WE WILL:

**Encourage and assist more victims to seek criminal sanctions and civil remedies**



**CHAPTER THREE**

**PREVENT**

## Educational Settings

One way to address attitudes of violence towards women and girls is to start with children and young people. Beginning at a young age to explore gender stereotyping and what a healthy relationship looks like, will equip young people to notice the signs of unhealthy symptoms in their own and other's relationships and will heighten their awareness of potential exploitation.

Welsh Government and Welsh Women's Aid produced a good practice guide in 2015 called 'Keeping learners safe' to support the VAWDASV Act. The guide provides advice for primary and secondary schools on how to develop, embed and successfully deliver a whole-school approach to promoting gender equality and in challenging VAWDASV. In 2016, the Welsh Government also produced a guide for school governors on the issues surrounding VAWDASV and the actions that they can take to make their schools safer. In the same year they worked with the Children's Commissioner, NSPCC, Cardiff University, Welsh Women's Aid and young people to produce 'AGENDA: A young people's guide to making positive relationships matter'. This resource includes a range of activities for schools to use with young people.

There are a number of programmes raising awareness about all forms of VAWDASV currently delivered to pupils through PSE sessions in all schools. The following resources are promoted widely across the region:

- ⇒ Barnardo's Cymru 'Seraf Service' has produced the 'Hidden' and 'What's Happening Frankie?' school resources – 2 lesson plans and extensive activities looking at child sexual exploitation targeted at 14-18 year olds.
- ⇒ Hafan's 'Spectrum' Programme - an All Wales Healthy Relationships Programme funded by Welsh Government that is delivered by qualified and experienced teachers in all types of schools. Spectrum also offers briefings on whole school approaches that can be delivered to school staff and governors.

		Cardiff	Vale
Primary	Total schools	97	49
	Schools accessed	9 (9%)	9 (18%)
	Pupils taught	576	613
Secondary	Total schools	19	9
	Schools accessed	7 (37%)	6 (67%)
	Pupils taught	2003	1168

The table above shows the impact of the Spectrum programme across the region during 2016/17. Clearly there is more to be done to enhance take-up to ensure equitable access to this key resource for all children, as well as continued engagement with schools year on year. Obviously such training can generate disclosures from both pupils and staff following these sessions. Unfortunately the extent of these is not known as this information is not collated centrally.

Estyn were asked by Welsh Government to undertake a Thematic Review to evaluate the quality of provision for healthy relationships education in schools in Wales. The resulting report published in 2017 identifies strategies to support schools in improving provision and outcomes for pupils and made the following recommendations:

- Implement Welsh Government guidance to provide a whole-school approach to preventing VAWDASV.
- Ensure that key messages around healthy relationships are embedded in the curriculum and reinforced regularly.
- Build on best practice identified in the report.
- Local authorities and regional consortia should ensure that all staff who work in schools complete the training set out in the National Training Framework.

The Welsh Government will also be developing statutory guidance under section 15 of the Act and regulations to place a duty on local authorities to report annually on the action they are taking, including within schools. However, no requirements have yet been made of private schools and home-schooled children.

### WE WILL:

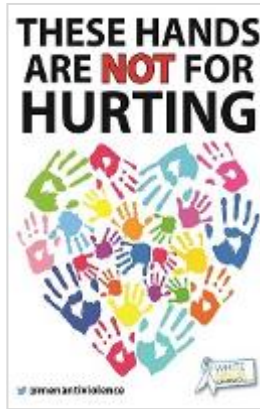
**Continue to promote and monitor education-based activities across the region to include 'hard to reach' children**

Every school in Wales is being encouraged by Public Health Wales to take up a new training package so that staff can help pupils overcome the damaging effects of early childhood trauma. Staff will be offered training to make them more aware of the life-long impact adverse childhood experiences (ACEs) can have on pupils (see p.40).

A pilot project has been funded by the Home Office Police Innovation Fund and the South Wales Police and Crime Commissioner (PCC), resulting in a training package being made available to all primary and secondary schools in Wales from mid 2018. The pilot schools received an initial introduction to ACEs awareness delivered by Barnardo's Cymru and the NSPCC, then two further sessions from educational psychologists focusing on how to support children affected by trauma.

Barnardo's Cymru has been working on a whole-school approach to building resilience called PATHS© programme. Youngsters have been taught how to recognise their emotions and handle them better, look after children who look sad or lonely in the playground and feel more positive about themselves.

Additionally, the School Standards and Organisation (Wales) Act 2013, requires local authorities to make reasonable provision of independent counselling services for children and young people aged between 11-18 and pupils in Year 6 of primary school.



## CASE STUDY

Sian is a year two student; during her first year she was accommodated in University halls. During her second year she rented a shared house with three of her female friends. This house accommodated 8 students in total, Sian knew of the other students but they were not on the same course as her; there were three males and two females, two of the other males were also attending a different University nearby.

Over a period of time one of the housemates known as Simon, became infatuated with Sian, asking her out on dates and coming on to her suggestively during house parties. However Sian always spurned his advances and Simon would become verbally aggressive toward her, calling her a slut. As time went on Simon disclosed that he masturbated when she was in the shower stating he dreamt of raping her and that she should always keep her door locked, then would go on to say he was joking. He would brush up against her whilst she was cooking in the kitchen and rub himself suggestively against her clothing, and would often brush past her touching her breast.

Sian began to withdraw and her studies were affected, she was reluctant to disclose anything as when things were witnessed by her housemates they brushed off Simon's behaviour stating he was only messing, showing off, just being a lad and to take no notice of him. Things became overwhelming for Sian and she became tearful in one of her lessons, she confided in her personal tutor who initially did not know what to do but told her to report to the Police. She was also advised to contact a specialist service after speaking to a counsellor at the University. She eventually built up the courage to do so and they supported her and offered counselling, they explained what her options were in relation to the law and what help was available.

With advocacy support, Sian told the University advice centre and accessed their counselling service and eventually reported the matter to the police. Simon was arrested and given bail conditions removing him from the accommodation, prohibiting him from having any direct or indirect contact with Sian. The University was dealt with the perpetrator internally too, being suspended from lessons, pending an investigation.

South Wales Police have Schools Liaison Officers to deliver awareness sessions to school children and to ensure a positive relationship between pupils, staff and the Police as part of its community policing function. These Officers deliver sessions to different school years on a range of topics within the VAWDASV agenda:

- ⇒ **Safe Haven – Year 2.** This lesson sensitively introduces the concept of domestic abuse. Through the use of role-play, story time and other interactive activities, it helps children explore and understand difficult emotions. The lesson also highlights the importance of talking to a trusted adult if they feel unsafe or uncomfortable.
- ⇒ **Friend or Foe – Year 4.** The lesson raises awareness with pupils that it's not possible to tell what a person is like just by their appearance. It helps identify potentially dangerous situations and explores coping strategies. A short DVD called 'Anwen's Story' highlights the importance of talking to a trusted adult if they feel unsafe or uncomfortable.
- ⇒ **The Right to Be Safe – Year 6.** This lesson focuses on all children and young peoples' right to feel safe. Through class activities and group work, pupils are asked to consider various safe and unsafe situations, how risks can be reduced, and who they can turn to if they need help or support.



- ⇒ **Risky Pics – Year 7.** An international award winning film provides the focal point of this lesson where Erin, a schoolgirl makes the decision to send an indecent image of herself to her boyfriend. The film presents the consequences for Erin when she presses 'send' and shows the different course of events when she chooses to 'delete'. Pupils discuss the social and emotional consequences of sexting and discover what the law says. Pupils are then signposted to help available.
- ⇒ **Dangerous Deception – Year 9.** Based on a real life event, a DVD describes the story of Lucy who is groomed by a man, who contacted her on the Internet, posing as a model agency. Lucy soon becomes a victim of CSE. Using discussion and interactive activities, the lesson focuses on identifying early warning signs and encourages pupils to make positive choices and keep safe.

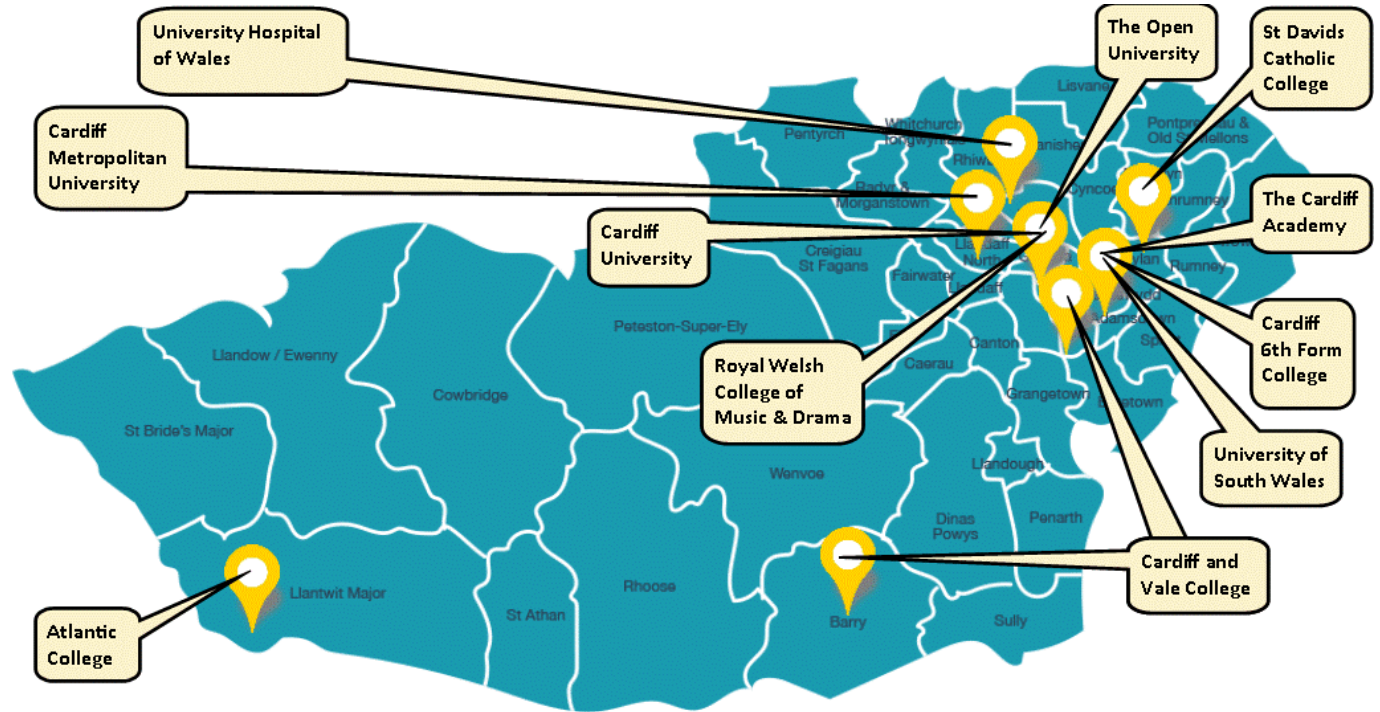
- ⇒ **Hidden Hurt – Year 9.** This lesson, with the use of a DVD entitled 'Hidden Hurt', focuses on a young couple called Carys and Rhys. The lesson helps young people to understand the different forms of domestic abuse and through the use of interactive activities pupils are empowered to identify the warning signs of an abusive relationship. Scenarios are used to help the pupils identify how to access help and support.
- ⇒ **No Means No – Years 10-11.** This lesson introduces the concept of consent and develops strategies to empower young people to understand sexual consent. Pupils watch a DVD clip to trigger group discussion around sexual consent, the law and its consequences and explore scenarios to enable them to make informed decisions. The lesson also highlights local and national support agencies.



Students studying at college or university away from home for the first time can find themselves vulnerable to sexual assault, violence and abuse. All further and higher education bodies have a duty of care to support the pastoral needs of all students and this includes their health and emotional wellbeing. Examples of current good practice provided in the region include:

*"The first 5 years have so much to do with how the next 80 turn out." Bill Gates*

⇒ Cardiff University, the University of South Wales (USW) and Cardiff Met are part of the **Safe Taxi Scheme** with Dragon Taxis. This emergency-only service ensures students return safely to their homes, halls or can be taken to hospital or local police stations.



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The **Bystander Initiative** is an evidence-based programme for the prevention of sexual coercion and domestic abuse in university settings, through empowering students to act as prosocial citizens. It is delivered through a programme of eight facilitated sessions with accompanying resources.

⇒ South Wales PCC and the alcohol education charity Drinkaware have come together with student unions to launch a scheme to safeguard students and raise awareness of sexual harassment within the night time economy. Specially trained staff, known as **Drinkaware Crew**, will work in a number of student venues across South Wales to support customers who are vulnerable as a result of drinking too much and prevent them from potentially becoming victims of crime.

⇒ Cardiff University has recently launched their **Disclosure Response Team** to support students who have experienced violence or abuse.

⇒ Cardiff Met have specialist team of qualified **international welfare advisors** who have specific responsibility for the safety and welfare of their transnational students; 20% of all students in the region. They are trained to assess vulnerabilities, particularly in relation to cultural isolation and alienation.

⇒ Professionals from specialist providers and statutory partners supplement teaching on university courses at undergraduate and post-graduate levels, sharing their experience and knowledge of key issues relating to VAWDASV.

⇒ All Students Unions participate in campaigns such as White Ribbon and promote this to the 66,000 students in the region.

Although there is a good range of responses being made by universities, closer links need to be made with all further and higher education facilities in the region to ensure that best practice is shared, consistently adopted, and that current pathways to specialist support are known and understood.

**WE WILL:**

**Give support to all higher and further education establishments to have a consistent and visible approach to tackling VAWDASV and in managing disclosures**

## National Training Framework

This Framework and materials have been developed by the Welsh Government to ensure a consistent and strengthened formal response to victims from all public services in Wales. It is acknowledged that many victims may be in contact with housing, social care, health and education services and each of these is ideally placed to provide a gateway into specialist support services. However it is recognised that staff in these services are not currently equipped to deliver a satisfactory response to victims, due to lack of confidence in knowing how to discuss the topic and where to signpost for support.

The Framework is delivered via specific levels to recognise the various staff roles and their ability to interact with, signpost and support victims. In addition to these levels (next page), there can be a number of bolt-on modules delivered through a specialist subject syllabus, which can be designed locally but must be accredited by the Welsh Government. Relevant Authorities (local authorities, Health and Fire Service) have developed 5 year training plans to set out how this Framework will be delivered (see p.32-33).



In order that justice is effective it is imperative that judges and magistrates also undertake regular training to understand the impact of VAWDASV on victims and their families.

In the region all public sector staff will receive the **Group 1** e-learning which provides an introduction to violence against women, domestic abuse and sexual violence. This is hosted in-house in both local authorities and accessed via the All Wales Academy NHS hosting site for health staff. For those staff who work predominantly off-site in manual roles, the e-learning has been adapted into a presentation that can be delivered in facilitated group settings, generating discussion and ensuring understanding by all.

For all staff, a questionnaire both before and after the e-learning, will assess prior knowledge of the issues being discussed and how aware staff feel once they have completed the e-learning.

**Group 2** is concerned with the VAWDASV Act requirement to 'Ask and Act'. This will be for staff that come into daily contact with patients/clients/tenants/citizens as part of their role and have the ability to enquire about VAWDASV where they feel this may be a factor. The training will equip staff to ask the right questions and understand the local pathways to signpost victims into specialist support services. In the region it is

anticipated that this training will be delivered to staff in class-based sessions lasting 1 day.

**Group 3** is for staff in roles where the client group is likely to have experienced a form of violence against women, domestic abuse and/or sexual violence or in a setting or location which is reason alone to 'Ask & Act' (midwifery, mental health, child maltreatment). This experience complicates and impacts on the nature of the client's engagement with that role.

Groups 2 and 3 continue to be piloted by the Welsh Government with the expectation that each region utilises the 'Train the Trainer' approach to roll-out. Both group 2 and Group 3 sessions will be co-delivered by specialist IDVAs/IPAs. Regionally the following additional modules will be developed, accredited and delivered to Groups 2 and 3 attendees:

- Human Trafficking
- Sex workers
- Stalking
- Female Genital Mutilation

**Group 4** will deliver additional skills to specialist third sector workers, and **Group 5** will similarly address the managers of specialist services. Welsh Government has awarded a contract to Welsh Women's Aid to deliver this training.

*"Sometimes you just want someone to ask you. You don't know how to bring up that you're a victim of abuse but you are hoping for an opportunity to tell someone who will understand"* Domestic Abuse Survivor, South Wales



Finally, **Group 6** is aimed at strategic Leaders who have a responsibility to foster a culture and infrastructure in which VAWDASV are acknowledged as issues which may affect the workforce, the client group, friends and family. This will be delivered through the Strengthening Leadership Series of short films, each on an important issue related to VAWDASV.

Below is a summary of the delivery methodology for the National Training Framework:

Level	Aimed at	Method	Total Staff
<b>Group 6</b>	Strategic leaders	Videos	72
<b>Group 5</b>	Specialist service managers working in VAWDASV sector	Class based	12
<b>Group 4</b>	Specialist workers in VAWDASV sector	Class based	42
<b>Group 3</b>	Individuals in champion roles supporting colleagues and family members of those affected. Roles requiring more than Ask & Act	Class based	1,726
<b>Group 2</b>	Professionals likely to be in relevant roles, i.e. treating or working with someone as a result of violence and abuse (Ask & Act)	Class Based	24,782
<b>Group 1</b>	All public sector staff	E-learning	34,493

To take forward the approach to roll-out, each relevant authority has internal oversight of Group 1 training but for other Groups this is facilitated and coordinated by a joint steering group. There is a need to integrate this Framework with other safeguarding training.

As a non-devolved body, South Wales Police are not required to adopt the NTF; nevertheless it requires officers to undertake a range of relevant training and awareness around violence against women and sexual violence. This includes:

- ⇒ **SOFR – (Sexual Offences First Responder)** – 3 day course aimed at first responders to sexual assaults and rapes. This is for response officers and a pre-requisite for officers attending the SOIT course.
- ⇒ **SOIT – (Sexual Offences Investigation Trained)** – 5 day course aimed at investigators of sexual assaults and rapes.
- ⇒ **PIP 2 Witness and Suspect** – both of these courses are 5 day. Threaded through both are scenarios around a sexual assault and domestic violence incident. This is now being delivered to CID, PPU and HUB officers as part of a PIP 2 pathway.
- ⇒ **Human Trafficking and Modern Slavery** – a number of courses are delivered including a First responder and SIO course.
- ⇒ **Proactive** – One scenario within this five day course includes a Human Trafficking scenario.
- ⇒ **SAIDP – (Serious Adult Abuse Investigators Development Programme)** – 3 week specialist course aimed at officers working within Vulnerable Adult arena in PPU. This includes a

case study around a sexual assault on a vulnerable female.

- ⇒ **SCAIDP – (Specialist Child Abuse Investigators Development Programme)** – 3 week specialist course aimed at child protection officers in PPU. Also includes case study scenario involving neglect of a female child.

The majority of the above courses are specialist courses that Criminal Intelligence Dept./Public Protection Unit/Major Crime teams receive. Response officers also receive training on stalking and recognising vulnerability and how to initially respond and make the correct referrals. All have refresher training on an annual basis.

Overleaf is the 5 year training plan for all Relevant Authorities across the region. South Wales Fire and Rescue Service and the Wales Ambulance Services NHS Trust will deliver their Framework through a separate approach in collaboration with Welsh Government. It is unclear whether the National Probation Service or the Wales Community Rehabilitation Company will be adopting the Framework.

**WE WILL:**

- **Liaise with the Judicial College to ensure Magistrates are trained in VAWDASV awareness and sentencing guidelines**
- **Implement the regional training plan to ensure all staff are trained in accordance with the National Training Framework**

## COMBINED 5 YEAR NATIONAL TRAINING FRAMEWORK PLAN

LEVEL	Total Staff to be Trained	Target Audience	YEAR:							
			2017-18				2018-19			
			Cardiff Council	VoG Council	C&V UHB	Velindre	Cardiff Council	VoG Council	C&V UHB	Velindre
<b>GROUP 1</b>	Cardiff Council = 13093; Vale Council = 5040; C&VUHB = 15021; Velindre = 1339	Mandatory training for <b>all employees</b> . Manual staff to receive interactive training via group presentation based on e-learning.	10%	17%	62%	50%	40% plus via Induction	40% plus via Induction	30% plus via Induction	40% plus via Induction
		<b>TOTALS</b>	<b>1294</b>	<b>856</b>	<b>9313</b>	<b>670</b>	<b>5176</b>	<b>2016</b>	<b>4506</b>	<b>536</b>
<b>Group 2</b>	Cardiff Council = 9200; Vale Council = 1500; C&VUHB = 13259; Velindre = 823	Applicable to all <b>frontline staff</b> who are likely to be meeting those experiencing abuse. Signs/symptoms/risk. 'Ask' - broaching the subject through targeted enquiry. 'Act' - information sharing, signposting and referring. Care pathways and multi-agency work.	None. Waiting on learning and materials from Welsh Government pilots	None. Waiting on learning and materials from Welsh Government pilots	None. Waiting on learning and materials from Welsh Government pilots	None. Waiting on learning and materials from Welsh Government pilots	10% Welsh Government agreement to train staff in Q3 and begin Group roll-out from Q4	10% Welsh Government agreement to train staff in Q3 and begin Group roll-out from Q4	10% Welsh Government agreement to train staff in Q3 and begin Group roll-out from Q4	10% Welsh Government agreement to train staff in Q3 and begin Group roll-out from Q4
		<b>TOTALS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>920</b>	<b>150</b>	<b>1326</b>	<b>82</b>
<b>Group 3</b>	Cardiff Council = 1500; Vale Council = 200; C&VUHB = 26; Velindre = 0	Those who will <b>provide a service</b> (within a general role) to those who are experiencing abuse. - Risk assesment / Immediate safety / Care pathways and multi-agency work Those who perform a <b>champion role</b> within their organisation (as per the VAWDASV Act).	None. Waiting on learning and materials from Welsh Government pilots	None. Waiting on learning and materials from Welsh Government pilots	None. Waiting on learning and materials from Welsh Government pilots	None. Waiting on learning and materials from Welsh Government pilots	5% Welsh Government agreement to train staff in Q3 and begin Group roll-out from Q4	5% Welsh Government agreement to train staff in Q3 and begin Group roll-out from Q4	26 specialist staff roles. Welsh Government agreement to train staff in Q3 and begin Group roll-out from Q4	3 specialist staff roles. Welsh Government agreement to train staff in Q3 and begin Group roll-out from Q4
		<b>TOTALS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>75</b>	<b>10</b>	<b>26</b>	<b>3</b>
<b>Group 4</b>	Cardiff Council = 35; Vale Council = 6; C&VUHB = 1; Velindre = 0	Specialist VAWDASV services	None. Waiting outcome of recommissioning	6 previously trained	6 previously trained	n/a	27	New staff and any refresher training	New staff and any refresher training	n/a
		<b>TOTALS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>27</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Group 5</b>	Cardiff Council = 8; Vale Council = 3; C&VUHB = 1; Velindre = 0	Specialist VAWDASV service managers	None. Waiting outcome of recommissioning	Previously trained	Previously trained	n/a	8	3	New staff and any refresher training	n/a
		<b>TOTALS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>8</b>	<b>3</b>	<b>0</b>	<b>0</b>
<b>Group 6</b>	Cardiff Council = 17; Vale Council = 20; C&VUHB = 25; Velindre = 17	Senior managers and leaders	41%	None	None	n/a	59%	100%	100%	100%
		<b>TOTALS</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>10</b>	<b>20</b>	<b>25</b>	<b>17</b>

### COMBINED 5 YEAR NATIONAL TRAINING FRAMEWORK PLAN Cont...

2019-20				2020-21				2021-22			
Cardiff Council	VoG Council	C&V UHB	Velindre	Cardiff Council	VoG Council	C&V UHB	Velindre	Cardiff Council	VoG Council	C&V UHB	Velindre
40% plus via Induction	40% plus via Induction	8% plus via Induction	10% plus via Induction	10% plus via Induction	10% plus via Induction	Induction and any refresher training	Induction and any refresher training	Induction and any refresher training	Induction and any refresher training	Induction and any refresher training	Induction and any refresher training
5176	2016	1202	133	1309	504	0	0	0	0	0	0
30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%
2760	450	3978	247	2760	450	3978	247	2760	450	3978	247
20%	20%	New staff and any refresher training	New staff and any refresher training	25%	25%	New staff and any refresher training	New staff and any refresher training	50%	50%	New staff and any refresher training	New staff and any refresher training
300	40	0	0	375	50	0	0	750	100	0	0
New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	n/a	New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	n/a	New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	n/a
0	0	0	0	0	0	0	0	0	0	0	0
New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	n/a	New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	n/a	New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	n/a
0	0	0	0	0	0	0	0	0	0	0	0
New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	n/a	New staff and any refresher training	New staff and any refresher training	New staff and any refresher training	n/a
0	0	0	0	0	0	0	0	0	0	0	0

## Early Intervention

Upon taking the courage to contact services, victims of VAWDASV require the response of specialist staff that can give non-judgmental advice and who will:

- validate their experience of violence against women, domestic abuse and sexual violence;
- explain the gendered understanding of the relevant abuse being experienced;
- explain the range of service options available and the general arrangements for access, engagement criteria and expectations;
- offer practical safety planning support.

Such contact points need to be able to assist with any form of VAWDASV. The national Live Fear Free, and local specialist service provider helplines and One Stop Shops can offer advice to victims, friends, family and professionals alike.



Another indication of early help-seeking is a 999 call to the Police. Following a call-out, South Wales Police refer cases to specialist services including the SARC and third sector providers. High risk domestic violence cases may be referred to MARAC and are dealt with by agencies immediately, contact with medium and standard risk victims can be less responsive.

In the region, funding was redistributed in 2017/18 to ensure some resource was targeted at standard risk victims to prevent escalation of risk and to ensure ongoing safety.

However, as part of the Transformation Fund approach, all services in the region will be exploring how to make the shift from a purely risk-based to a needs-led service model or at least a combination of the two. Risk is recognised as a safety need, but the approach to service delivery must consider the wider array of needs and resources victims have.

An element of the Transformation Fund that is being piloted in Cardiff, with the learning shared across the region, is the 'Ask Me' Ambassador scheme. Volunteers who live and work in local communities will be equipped with the basic skills, knowledge and tools to have a supportive conversation and provide an initial appropriate response to their clients who are experiencing abuse. The Ask Me scheme tells survivors of domestic abuse that the individual:

- Is inviting them to disclose they are experiencing domestic abuse;
- Will give them enough information about immediate options to take the next step towards safety, freedom and independence.

The scheme does not expect that all Ambassadors will become experts in abuse, case workers or be significantly diverted from their day to day job. The purpose is to ensure that they will, as a minimum, act as a point of safe disclosure to enable access to appropriate support and safety.



The level of response will depend on their circumstances and role. They will be empowered to act as a gateway, not a barrier, to whatever the individual victim needs at that point. This scheme will target professionals and local community workers who fall outside the scope of the statutory 'Ask and Act' guidance. Examples of potential 'Ask Me' points (not limited) include:

- ⇒ Hairdressers
- ⇒ Shop assistants
- ⇒ Local community champions, e.g. Women's Institute representatives
- ⇒ Avon representatives
- ⇒ Job centre personnel
- ⇒ Community centres
- ⇒ Food banks
- ⇒ Youth centres
- ⇒ Court personnel
- ⇒ Licensed premises

Every point of interaction with a victim is an opportunity for intervention

The opportunity to act sooner will ensure that further harm is minimised and victims can be supported to recover from their experiences.

### WE WILL:

- **Prioritise funding for early intervention services that prevent all forms of VAWDASV**
- **Implement the Ask Me Ambassador pilot in Cardiff and share the learning**

# Sexual Violence

Sexual violence is a serious public health and human rights problem with both short- and long-term consequences for an individual's physical, mental, and sexual health. Whether occurring in the context of an intimate partnership, within the larger family or community structure, or during times of conflict, it is a deeply violating and painful experience. The consequences on a victim's psychological wellbeing can be far-reaching including guilt, anger, anxiety, depression, post-traumatic stress disorder, sexual dysfunction, somatic complaints, sleep disturbances, withdrawal from relationships and in a number of cases, attempted suicide.

Any culture that minimises, trivialises or excuses sexual violence, and shifts responsibility away from perpetrators and onto victims means that individuals, organisations and communities are less likely to respond. This culture is often referred to as 'rape culture'.

Sexual harassment is often normalised as a social nuisance—in the workplace, on public transport and in the street. Sexual violence and the attitudes that condone it are learned. If attitudes are to be changed, social culture and the influences that shape it must also be challenged. This involves the way boys and girls are raised, the way men's and women's relationships are portrayed in the media and popular culture, and the stance leaders and key influencers visibly take on this issue.

South Wales Police & Crime Commissioner (PCC) is aware that sexual harassment is often thoughtless, wholly inappropriate and extremely personal, it can also be of a criminal nature and more often than not goes unreported. Working with partners to shape their approach to this issue, and with the support of Welsh Government and the other Welsh Police forces, the South Wales PCC will be commissioning a survey aimed at obtaining a fuller understanding of the scale of unreported sexual harassment.

Integral to this issue is the concept of consent. This is defined as "a clear

and unambiguous agreement, expressed outwardly through mutually understandable words or actions, to engage in a particular activity." Consent can be withdrawn by either party at any point. Consent must be voluntarily given and may not be valid if a person is being subjected to actions or behaviours that elicit emotional, psychological, physical, reputational, financial pressure, threat, intimidation, or fear (coercion or force). Consent to engage in one sexual activity, or past agreement to engage in a particular sexual activity, cannot be presumed to constitute consent to engage in a different sexual activity or to engage again in a sexual activity. Consent cannot be validly given by a person who is incapacitated.

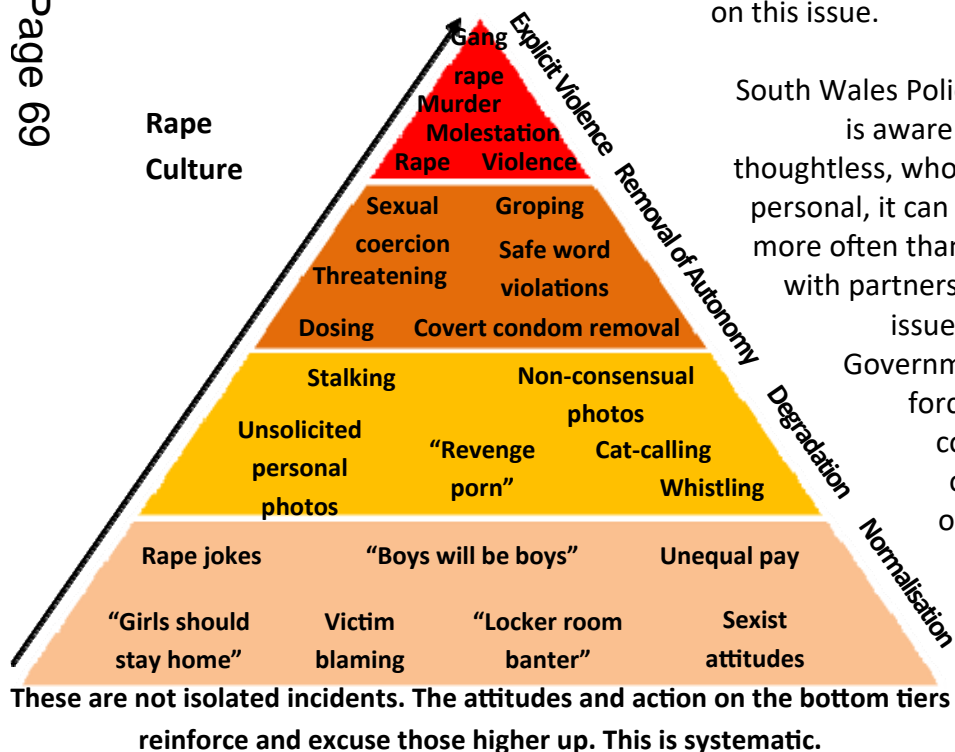
The 'Cup of Tea' YouTube video (see link on p.12) is a very useful resource that explains consent in simple terms. Presumed consent is often central to trials, especially those involving public or prominent figures and fuels public opinion on this issue. The current groundswell of publicity on this issue can only serve to raise awareness and improve service responses.



### WE WILL:

- Provide a male ISVA at the SARC
- Work with the South Wales Police & Crime Commissioner to gain a greater understanding of sexual harassment
- Raise awareness of consent at all opportunities

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## Stalking

Stalking can be hard to define and prove. While a small proportion of stalkers are strangers, most are known to their victim - the majority are ex-partners (particularly those who were abusive). Stalking indicates a high risk of serious harm, making identification very important and potentially lifesaving. Stalking examples include:

- following a person
- contacting, or attempting to contact, a person by any means
- publishing any statement or other material relating or purporting to relate to a person, or purporting to originate from a person
- monitoring the use by a person of the internet, email or other electronic communication
- loitering in any place (whether public or private) including the victim's workplace
- interfering with any property in the possession of a person
- watching or spying on a person

Stalking is rarely reported to police - victims are unsure what support can be offered. All partners in the region need to do more to raise awareness that stalking is a crime. Partners and the public need to be clear on how to spot the signs, feel confident to report and record evidence to support the criminal justice process.

### WE WILL:

**Improve awareness of stalking and promote the practical steps to reporting**



## Honour-Based Violence / Forced Marriage

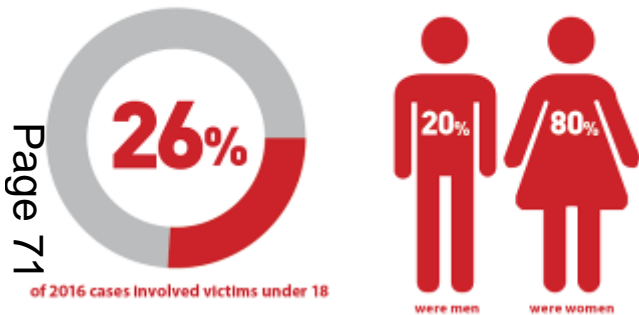


The terms 'honour crime', 'honour-based violence' or 'izzat' embrace a variety of crimes of violence (mainly but not exclusively against women), including assault, imprisonment and murder where the person is being punished by their family or their community. They are being punished for actually, or allegedly, undermining what the family or community believes to be the correct code of behaviour. In transgressing this code, the person shows that they have not been properly controlled to conform and this is to the "shame" or "dishonour" of the family. It can be distinguished from other forms of abuse, as it is often committed with some degree of approval and/or collusion from family and/or community members. Victims will have multiple perpetrators and not only in the UK; Honour Based Violence (HBV) can be a trigger for a forced marriage.

A forced marriage is where one or both people do not consent to the marriage and pressure or abuse is used. Pressure can include threats, physical or sexual violence and financial pressure.

This is different to an arranged marriage, where both parties have consented to the union but feel free to refuse if they want to. Child marriage is any formal marriage or informal union where one or both people are under 18 years old. All child marriages are forced, because a child cannot provide informed consent, and are therefore a violation of children's rights. Child marriage also affects boys, but to a lesser degree than girls.

### FORCED MARRIAGES IN THE UK



Wider acknowledgement is also needed that forced marriage can also take place between those with disabilities. For instance, in 2017, 125 of all cases (12%) involved victims who had a learning disability. Of these 66 (52.8%) were male and 59 (47.2%) were female (Forced Marriage Unit 2018). Similarly, forced marriage affects many different communities including Gypsies & Travellers.

**WE WILL:**

**Improve understanding of how forced marriage affects individuals with protected characteristics**

## Female Genital Mutilation (FGM)

FGM is a procedure where the female genitals are deliberately cut, injured or changed, but where there's no medical reason for this to be done. It's also known as "female circumcision" or "cutting", and by other terms such as sunna, gudniin, halalays, tahur, megrez and khitan, among others.

The UK Government and UNICEF hosted the first 'Girl Summit' in July 2014 aimed at mobilising national and international efforts to end Female Genital Mutilation (FGM) as routine practice in some countries across the world.

In 2015 a number of amendments were made to the UK's Female Genital Mutilation Act 2003 through the Serious Crime Act 2015. Section 4 of the 2003 Act specifies that extra-territorial jurisdiction extends to prohibit acts done outside the UK **by** a UK national or a person who is resident in the UK. Considered with that change, section 70 (1) of the Serious Crime Act also amends Section 3 of the 2003 Act (offence of assisting a non-UK person to mutilate overseas a girl's genitalia) so that it extends to acts of FGM done **to** a UK national or a person who is resident in the UK.

This Act has placed a mandatory reporting duty on health professionals to report 'known' cases of FGM in under 18 year olds to the police; this duty has been in force since October 2015. The All Wales Clinical Pathway for FGM was created and completed by a task and finish group in



October 2015 and ratified in July 2016. Specific mandatory training for Midwives has been in place since 2014; bespoke training has also been delivered to targeted areas across Health in the Sexual Assault Referral Centre (SARC), Sexual Health and Gynaecology departments. Online FGM training endorsed by the Home Office is accessible to all Health staff.

Since October 2016 Health Boards must provide quarterly updates to Welsh Government identifying FGM, this also includes referrals made to Children's Services where mothers of female children are identified as having experienced FGM. These referrals ensures that professionals are aware of an increased risk that any female children may also experience FGM in the future. In the year July 2016-June 2017 there were 199 identified cases of FGM, resulting in 86 child protection referrals.

It is essential that the safeguarding leads in schools are aware of FGM and have ensured that their staff are aware of the potential risks. This includes awareness of the new FGM clinic and referral methods (see page 64).

**WE WILL:**

**Increase FGM referrals from schools**

## Health Based IDVA

Supporting the work of the health-based ISVA's, the Health Independent Domestic Violence Advisor (IDVA) within Cardiff and Vale University Health Board (C&V UHB) supports patients and staff members who are experiencing domestic abuse. The Health IDVA receives referrals from across C&V UHB and is able to meet with patients at time of disclosure in a hospital setting. For referrals received out of hours, the Health IDVA will contact the client and can meet them in the community utilising GP surgeries and partner agency premises, however health staff are signposted to contact out of hour partner agencies for immediate advice if necessary. For those clients that accept support, an assessment is completed, along with a safety and support plan, which may include referrals to other services, usually multi-agency partners and third sector specialist agencies.



In addition, the Health IDVA's role within the hospital is utilised by safeguarding partner agencies working within the Cardiff Multi-Agency Safeguarding Hub (MASH) and both local MARACs to reach and offer support to hidden clients who are not engaging with other services but are accessing hospital services.

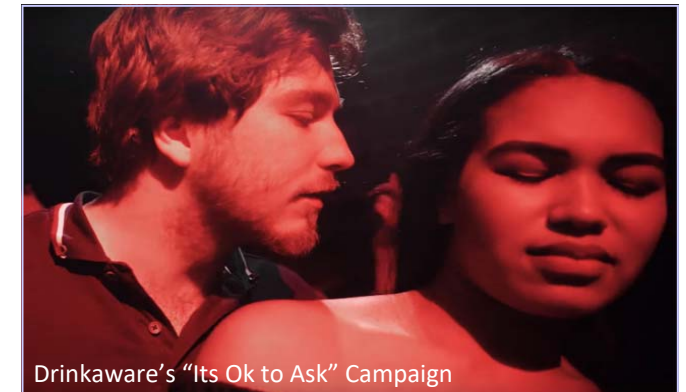
Furthermore, the Health IDVA provides regular training to health professionals and promotes awareness of domestic abuse and specialist support services through attending departmental meetings and presenting at various conferences.

In line with the South Wales Police and Crime Commissioner's Tackling Violence against Women and Girls Plan 2014-17, and in particular it's objective to improve early identification and intervention, health services have an important role to play in identifying hidden victims of domestic abuse and can provide a gateway for patients to access support. Many victims may not be reporting to the police or accessing domestic abuse services but will be accessing health services. The Health IDVA role can help to increase the confidence of health practitioners in asking about domestic abuse and responding to disclosures, as they have a direct and easy pathway to refer patients for IDVA support within C&V UHB. Health practitioners can also contact the Health IDVA for support and advice.

This service in C&V UHB is unique in Wales. The Health IDVA post is now a full-time permanent position following part-funding from the South Wales Police and Crime Commissioner for the first 2 years. The post has been successfully identifying victims at the point of attendance in A&E and providing early intervention and support to victims. Staff working within the department have received additional training and the Ask & Act process is completed here as well as in other departments across the Health Board.

## Night Time Economy

Cardiff has a thriving daytime economy and is renowned for successfully hosting large sporting and cultural events, with local and regional residents travelling for work and pleasure. Based on this success and as one of the fastest growing cities in the UK, the popularity of Cardiff's night time economy can only be expected to increase. A broad definition of this economy is that it occurs between 6pm and 6am and involves a wide range of leisure activities (pubs, clubs, live music, cinemas, theatres, retail, cafes and restaurants) as well as the services that exist to support them (policing, transport, enforcement, street cleansing including rubbish removal and health services).



It is recognised that for some people the night time economy does not always feel very welcoming and can occasionally feel unsafe. While 96.3% of people surveyed felt safe walking in the city centre in daylight, this reduces to 56% after dark. Gender is also a factor in perceptions of safety. Less than half of females (49.0%) felt safe when walking in the city centre after dark compared to two thirds of males (64.9%).



Partners have introduced a number of actions in order to ensure women are safe from domestic and sexual violence in the night time economy. These have included the expansion of the Safe Taxi scheme for students and training for door staff to spot and assist those who are vulnerable. The links between domestic and sexual violence and excessive alcohol consumption have also been acknowledged. A number of actions have already been outlined in the 'Delivering a Safe and Welcoming Night Time Economy' strategy 2017-2022 that support the VAWDASV agenda:

- ⇒ Improve lighting in areas of the city where a need is identified.
- ⇒ Consider and review the need for safe spaces at night where individuals can go to wait for friends, charge phones and receive first aid and advice.
- ⇒ Maintain and build on relationship with the Taxi Forum to develop the role of taxi drivers as ambassadors for safeguarding.
- ⇒ Work with licensed premises in the city centre to expand vulnerability awareness training to door staff.
- ⇒ Funding has been secured to enhance the provision of the Stay Safe joint project with the aim of protecting vulnerable young people at key times during the week and for particular dates e.g. Bonfire Night, Halloween and a pop and rock concerts and similar events.

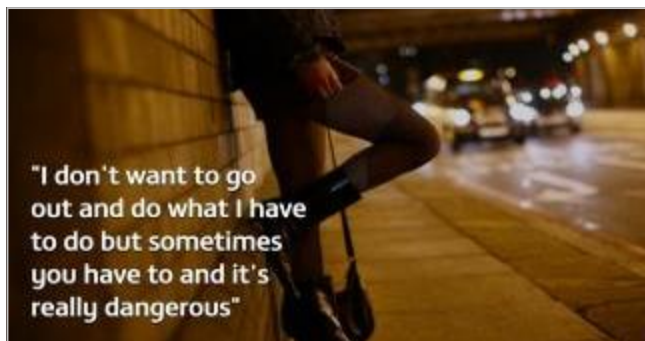
**WE WILL:**

**Assist with implementing the actions from the 'Delivering a Safe and Welcoming Night Time Economy' strategy**

**Sex Workers**

In 2006 the Home Office published 'A Coordinated Prostitution Strategy' stating that addressing prostitution requires strong partnerships, involving a wide range of enforcement and support agencies. The Strategy was welcomed but however focussed mainly on visible street-based sex workers, considering them victims of exploitation. This was an important move, however did not offer guidance on supporting those working in the commercial off-street sex industry, which accounts for the largest number of sex workers and includes massage parlours, lap dancing clubs, escort agencies and those selling sex via the Internet.

Many men and women who become involved in the industry are often victims of childhood and/or adult trauma and damage resulting from domestic and/or sexual abuse, neglect and CSE. Many are often victims of poverty, use substances and are vulnerable to exploitation. Street sex workers are often caught in the revolving door of the criminal justice system where arrest and penalties do not address the behaviour.



All those engaged in sex work, whether by choice or exploitation, experience an increased risk of physical, emotional and sexual violence. All partners must promote the acceptance of the principle that sex workers are often victims of crime who have enhanced vulnerabilities. This will facilitate increased confidence of sex workers to report abuse, bolstering the existing National Ugly Mugs scheme that collates data on perpetrators.



The Streetlife project in Cardiff actively supports 70 street-based sex workers at any time to undertake sex work safely, offering advice, health screening, condoms and the opportunity to

discuss options for exiting. For those that have chosen to exit prostitution, the Ty Tarian supported housing scheme is being piloted to support up to 5 women to manage their complex issues and consider alternative life paths.

Off street sex work includes 5 massage parlours in Cardiff, with approximately 50 women working in this area at any given time. Most sex work is offered via the Internet and reaching out to and engaging with those who provide internet based sex work is extremely challenging.

**WE WILL:**

- **Raise awareness across the region of the issues faced by sex workers**
- **Review the effectiveness of the Ty Tarian scheme to inform future service delivery**

## Trafficking and Modern Slavery

**ARE YOU TURNING YOUR BACK ON SLAVERY?**

If the individual is perceived to be at immediate risk of significant harm:  
**DIAL 999**

If you want to discuss your concerns or wish to receive further information, please contact the National Referral Mechanism (NRM) Helpline:  
**0800 731 8147**

**WHAT ARE SOME OF THE SIGNS?**

- Present at locations held by someone else
- Others speaking for people you are talking to
- Lack of access to money
- Expressions of fear or anxiety
- Extreme measures to authority
- Isolated social contact
- Isolation or requirement as a result of work
- Working sleeping in the place of work
- Signs of physical abuse
- Unexplained expenses gifts

THE OFFICIAL MODERN SLAVERY HELPLINE  
WWW.NRM.CO.UK | WWW.HUMANTRAFFICKING.CO.UK  
WWW.HOTLINE.CO.UK | WWW.LETV.CO.UK

Coventry  
Crest

**30 trafficking offences were reported in 16/17**

Human trafficking is a form of modern-day slavery, in which human beings are controlled and exploited for profit. Perpetrators use force, fraud or coercion to manipulate and establish control over individuals. Various forms of modern slavery exist around the world, including forced labour, sex trafficking, child labour, commercial sexual exploitation of children and child soldiers. Trafficked persons often have limited access to basic necessities such as safety, food, sleep, hygiene, and medical care.

The National Referral Mechanism (NRM) is a framework for identifying victims and ensuring they receive the appropriate support. The NRM was introduced in 2009 to meet the UK's obligations under the Council of European Convention on Action against Trafficking in Human Beings. From 2015 the NRM was extended to all victims of modern slavery in England and Wales following the Modern Slavery Act 2015; (17 such referrals were made in 2016/17). Statutory staff can receive training on how to identify the signs that someone may be the victim of modern slavery or human trafficking, understand how the NRM works and to navigate the referral pathway. However this training has yet to be mainstreamed to extend the potential reach to identify victims earlier.

**WE WILL:**  
**Widen the reach of the Human Trafficking awareness module through the National Training Framework**

## Adverse Childhood Experiences (ACE's)

Adverse Childhood Experiences (ACE's) are stressful experiences occurring during formative years that directly harm a child (e.g. sexual or physical abuse) or affect the environment in which they live (e.g. growing up in a house with repeat offending, domestic violence or substance misuse). ACEs have harmful impacts on physical and mental health, attainment and well-being across the life course. Individuals affected are more likely to perform poorly in school, more likely to be involved in crime, experience chronic health issues and ultimately less likely to be a productive member of society.



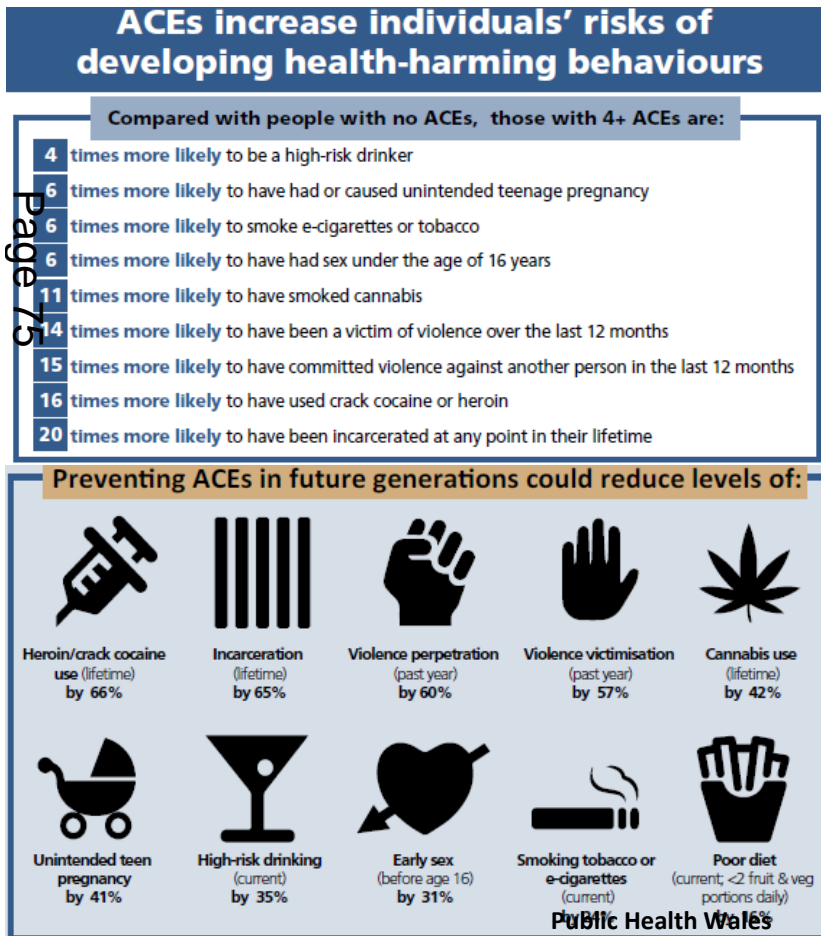
Those children currently on the Child Protection Register obviously have already experienced adversity. Specifically, figures show that, in Cardiff, the number of children where domestic abuse is a factor in their registration has remained static at 73% of all registrations. Figures for 16/17 show that a further 5% of all registrations have sexual violence as a factor.

Clearly many of the issues seen in current adult victims and perpetrators have their roots in childhood. There is a requirement to manage the effects of historic ACEs on the current adult population and minimise the potential effects of ACE's on children and young people now.

Specialist services are beginning to embrace trauma-informed approaches which must be victim-centred and age appropriate. The use of psychological and cognitive behavioural therapies

are beginning to be used to help a wide variety of clients in a range of settings including homelessness, schools and for victims of VAWDASV.

Other responses that could be applied to prevent ACEs and minimise the impact of existing ACEs include: considering the ACE history of parents, assessing the risk of exposure to the child, and integrating a routine ACE enquiry into existing assessments.



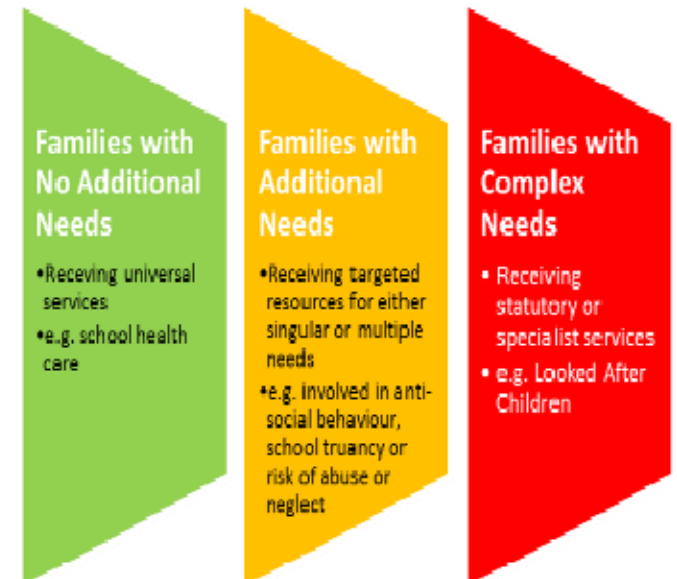
Public Health Wales has received an award of £6.87m from the Home Office Transformation Fund to transform the policing of vulnerability in Wales to a multi-agency, ACE informed approach that enables early intervention and root cause prevention. Working with the 4 Police forces in Wales and the NSPCC and Barnardo's, Public Health Wales is seeking to develop a programme of innovative local solutions over the next 3 years.

These local solutions will include implementing ACE informed approaches for operational policing and key partners, and developing single integrated early help front door services. Formal governance arrangements and a network of coordinators will oversee the programme.

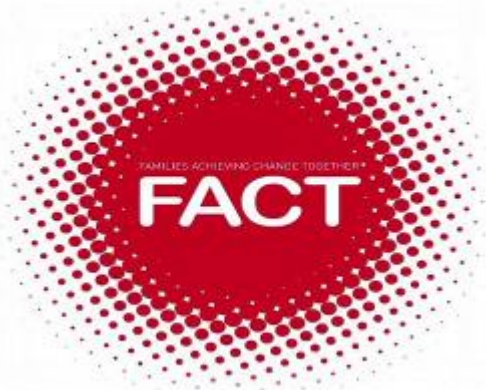
**WE WILL:**

**Support Public Health Wales to move from a position of understanding the ACE research to understanding what a positive and effective response looks like**

The Early Help Front Door has been acknowledged by Public Health Wales as a key response to ACEs. In Cardiff this is called Support4Families and is being delivered in a partnership between Tros Gynnal Plant and Children's Services. A core team of Family Practitioners will be able to provide a clearer point of access to early help services for families in Cardiff so that they can receive the right services at the right time to prevent their situations getting worse. It is hoped that this will reduce the numbers of families needing statutory interventions or being referred to the MASH.



In Cardiff, the specialist IPA service is expected to develop effective links with Support4Families, receive referrals and to refer families who might benefit from other early help services that might be offered, using a Team Around the Family approach.



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In the Vale of Glamorgan, the Fact Team is a crucial part of the Families First initiative as it manages referrals, and provides a team of support workers who will complete a 'Joint Assessment Family Framework' (JAFF) for each referred family.

This ensures that they deliver family support through holistic multi-agency service tailored to the identified needs of individuals and the family as a whole. The FACT Team has been developed in line with the 'Team Around the Family' (TAF) model and will be supported by a range of supportive programmes.

**WE WILL:**

**Develop close working arrangements between the Early Help Front Door services and specialist VAWDASV services**

**IRIS**

The Identification and Referral to Improve Safety (IRIS) service aims to improve the identification of, and response to, patients who are or have been affected by domestic violence and abuse across general practices (GPs) in Cardiff and the Vale of Glamorgan. The service provides training to GP practitioners and support staff to identify and refer patients affected by domestic violence and abuse and to establish care and referral pathways to specialist domestic violence services.

IRIS has been independently evaluated in a randomised controlled trial in Bristol and launched its first pilot in Wales in November 2014 in Cardiff and the Vale of Glamorgan region, followed by the Cwm Taf region.

The objectives of the service are to:

- ⇒ Increase knowledge of GP staff about domestic abuse and the help available for patients.
- ⇒ Improve the confidence of general practice staff to ask questions about possible abuse in a safe way.
- ⇒ Make referrals (in a timely manner appropriate to the needs of the patient and the identified risk) resulting in improved patient care.
- ⇒ Improve the recording of domestic abuse in the patients' medical notes.
- ⇒ Increase the number of patients referred from GPs for help with domestic abuse.
- ⇒ Improve data collection and analysis of the number of disclosures and referrals.
- ⇒ Improve the safety of patients by reducing repeat victimisation.

Research indicates that women are more likely to disclose domestic violence and abuse to their GP than to anyone else. The pilot has proved extremely successful; to date it has generated more than double the amount of referrals that were expected with Year 1 resulting in 156 and Year 2 resulting in 284 referrals. Prior to the pilot, GPs had only generated 5 referrals annually to specialist services. The analysis of the pilot identifies that the effectiveness of IRIS increases year on year with IRIS trained GP's being 22 times more likely to ask about domestic abuse than a non-IRIS trained GP.

Funding was found by the South Wales Police and Crime Commissioner to extend the pilot for a further year during 2017/18, but in 2018/19, the Cardiff and Vale University Health Board have secured funding in to train the remaining GP surgeries in the region.



From 2019 the service will therefore be mainstreamed into existing service provision, with minimal funding needed to ensure continuation of training and support.

**WE WILL:**

**Remain committed to mainstreaming the IRIS model across all GP surgeries in the region**

## CASE STUDIES

"I have experienced domestic abuse from childhood; my first memory is seeing my dad hit my mother. When my Dad left, my older brothers stepped into his abusive shoes and were very violent to each other and my mother. My mum struggled to cope and sadly had an issue with alcohol. I think this impacted on my own relationship choices and I've had two very abusive partners leading to me battling my demons with alcohol at times and having a bad effect on my mental health. I have moved from area to area and been under loads of different doctors but my current GP was the first doctor to identify that all my issues are linked to my domestic abuse experiences and took the time to ask me about it. She explained she could make a referral to someone who would see me at the practice and be able to get me the right support. I was relieved there was someone I could talk to and it came at the right time when my life has been particularly difficult and I knew I needed to focus on getting myself some help. I agreed to referrals to the freedom programme and recovery toolkit on that day and started the freedom programme the following week. When we met we agreed that I'd benefit from some stress control sessions and mindfulness to hopefully meet new people in my area, and my GP also referred me to MIND, a mental health service. I'm also looking for voluntary work further down the line to keep myself busy. I really enjoyed volunteering before my ex-partner stopped me doing it. I know it's a journey but the difference this time is that I know I am on the right road thanks to my GP referring me to the IRIS service."

"Sarah is 41 years old and has been married for 20 years; her husband was sexually, physically and emotionally abusive. She never reported this abuse to the police or shared her experiences with family, friends or professionals. Having recently filed for divorce, she went to the doctors as she was not sleeping and feeling depressed. Her doctor asked her if the split from her husband was amicable and if he had ever been abusive in any way. Sarah said she felt comfortable speaking openly with the doctor who clearly was very knowledgeable. She didn't feel she had to go into detail and her GP told her she would put her in touch with someone specialising in domestic violence and abuse. Sarah was relieved to speak to someone who could give her advice and support and she agreed to referrals to the Freedom Programme and survivor groups. She also agreed to referrals to mindfulness and confidence courses. She said since disclosing to the doctor she finds it easier to speak to others including family and friends, and is eager to deal with things, draw a line and move on."

## Cardiff & Vale IRIS Statistics 2014-16



**26 of 27  
surgeries  
received  
training**

**359 health  
professionals  
trained**



**186  
patients  
referred  
to IRIS  
service**



**41% of referrals  
had Police  
involvement,  
43% none and  
16% not known**

## Formal Reviews

The Office for National Statistics has undertaken analysis of homicides combining data between April 2013 - March 2016. Analysis shows:

- There were a total of 454 domestic homicides in England and Wales; this represents 31% of all homicides where the victim was aged 16+.
- The majority of victims were female (70%, or 319), with 30% male (135); this contrasts with victims of non-domestic homicides, where the majority of victims were male (88%, or 704) and 12% were female.
- Over 3/4 of female victims were killed by a male partner or ex-partner (76%, 242 females).
- Only 3% of female victims (11 females) were killed by a female, 8 of which were killed by their mother; females were killed by their fathers in 34 cases.
- The majority of male victims (66%) were killed by another male; a higher proportion of male victims were killed by a family member than females (47% compared with 23%).
- Around half (53%) of male victims were killed by a partner/ex-partner (32 male/40 females).

Home Office Multi Agency Statutory Guidance (revised December 2016) is issued under section 9 (3) of the Domestic Violence Crime and Victims Act 2004 and, since April 2011, there has been a statutory requirement for local Community Safety Partnerships to conduct Domestic Homicide Reviews (DHRs) following a homicide that meets the following criteria: where the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse or neglect by:

- a person to whom he/she was related or with whom he/she was or had been in an intimate personal relationship, or
- a member of the same household as himself/herself.

The DHR's purpose as outlined in the Guidance is:

- ⇒ To establish what lessons are to be learned regarding the way in which local professionals and agencies work individually and together to safeguard victims;
- ⇒ To identify clearly what those lessons are both within and between agencies, how and within what timescales they will be acted on, and what is expected to change as a result;
- ⇒ To apply these lessons to service responses including changes to inform national and local policies and procedures as appropriate;
- ⇒ To prevent domestic violence and homicide and improve service responses by developing a coordinated multi-agency approach to ensure that abuse is identified and responded to effectively at the earliest opportunity;
- ⇒ To contribute to a better understanding of the nature of domestic violence and abuse; and
- ⇒ To highlight good practice.

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*“Reviews should illuminate the past to make the future safer.”*

Home Office Guidance, 2016

To date the region has initiated 8 Domestic Homicide Reviews. The breakdown of these Reviews is shown in the table (right). Such Reviews can be lengthy, costly and emotionally challenging for Panel members and family alike.

Also these reviews can be undertaken alongside court proceedings (both criminal and Coroner), Child Practice Reviews, Adult Practice Reviews, Further Serious Offence Reviews, internal and external formal investigations (including the Independent Police Complaints Commission and the UHB Root Cause Analysis) and staff disciplinary proceedings. All of these processes are governed by different guidance whether UK-wide or Welsh Government policy led and can often duplicate attendees and overlap reviewing criteria. Nonetheless, the findings of all of these reviews are invaluable if lives are made safer because learning from past mistakes has been remedied.

It must be acknowledged that there are other VAWDASV related deaths that do not meet the criteria for a DHR. These include death by dangerous driving and road traffic collisions (where the victim is being pursued by a

perpetrator), deaths caused by individuals to whom the victim was not related or in a relationship with but where there was an element of abuse (e.g. neighbours) and suicides where victims have felt there is no other way out of their abusive situations.

Due to the time to undertake each DHR, partners will often implement learning and amend policies and procedures as early as possible. The Welsh Government are reviewing the DHR process in Wales and potential changes to national policy.

**WE WILL:**

- Ensure that the learning from all formal service reviews including DHRs is reflected in service delivery and is shared widely
- Implement any Welsh Government policy changes arising from its review of DHR processes

	Homicide			Victim		Perpetrator		
	Date of Homicide	Method of killing	Relationship (victim to perpetrator)	Gender	Age	Gender	Age	Sentence
<b>Cardiff</b>	Dec-15	Strangulation	Ex-partners	F	28	M	45	17 years
	Aug-15	Stabbing	Grandfather/grandson	M	67	M	16	3 years
	Jan-16	Arson	Father/daughter	M	59	F	27	Not guilty - insanity
	Jul-16	Head injury	Wife/husband	F	85	M	86	committed suicide
	Aug-16	Assault	Partners	F	24	M	23	18 years
	Sep-16	Stabbing	Ex-partners	F/M	21/34	M	20	23 years, 4 months
	Sep-17	Stabbing	Partners	F	26	M	46	18 years
<b>Vale</b>	Aug-16	Set alight	Ex-partners	F	54	M	62	17 years , 4 months
No children in any of these households								

## White Ribbon Campaign

The White Ribbon Campaign is the largest effort in the world of men working to end male violence against women. Started in Canada in November 1991, the White Ribbon Campaign (WRC) is active in over 60 nations across the world including Canada, Australia, Pakistan, Italy the UK. The White Ribbon UK branch was established in 2004 with separate Scotland (2006) and Ireland (2010) branches established soon after.

WRC states that "This is not and never has been a 'women's issue'. We address men directly so they understand the scale of the problem, and become part of the solution, alongside women." The campaign asks men to wear a White Ribbon as a personal pledge to never commit, condone or remain silent about violence against women to be the faces and leaders as Ambassadors in local awareness raising and education activities.



In 2014, the Minister for Housing and Regeneration, the late Carl Sergeant, urged all local authorities in Wales to sign up to the WRC. Both Cardiff the Vale of Glamorgan Councils duly applied and were awarded White Ribbon City/Town status by December 2014. Other organisations such as South Wales Police followed suit soon after.

The Campaign has also chosen the International Day to eliminate Violence Against Women as White Ribbon Day (25th November each year). To date activities have included the annual march to Llandaff Cathedral and the multi-faith service, stands in public spaces including hospitals and supermarkets, an annual 'Walk a Mile in Her Shoes' event through Cardiff city centre, a flower bed depicting the White Ribbon and stickers on Police and Fire Service fleet vehicles.

All partners are committed to a new regional application to renew the status already held - this is being led by the local authorities but will require the input of all partners to implement the required action plan of activities. Ideally a White Ribbon Wales branch of the charity would ensure that any funding from the sale of merchandise would remain in Wales and all publicity and merchandise would reflect the national legislation around VAWDASV and the Welsh language.

**#Whiteribboncardiffvale had a reach of 2.1m people in 2017**

*"The people who could do most to improve the situation of so many women and children are in fact, men. It's in our hands to stop violence towards women."* Patrick Stewart



### WE WILL:

- Implement the White Ribbon Action Plan across the region
- Continue to advocate for a White Ribbon Wales

A background image of two hands, palms facing forward, with the words 'HELP' and 'ME' written on them in a yellow, hand-drawn font. The hands are set against a solid yellow background.

HELP

ME

**CHAPTER FOUR**

**PROTECT**



## Improve the multi-agency response and support to all victims and their children regardless of risk level and needs.

### Clare's Law / Sarah's Law Disclosures

Clare's Law (Domestic Violence Disclosure Scheme) allows the Police to disclose bad character information to men and women who believe themselves or their children to be at risk from another person. It was established after Clare Wood was stabbed to death by her ex-boyfriend, who had been stalking her. Following her death, Clare's parents campaigned for "Clare's Law" as they believed that if she had known about his violent past, she would never have entered into a relationship with him. Coming into force across the UK in 2012 there are 2 strands:

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**RIGHT TO ASK** – any person can request a disclosure about somebody with whom they are in, or about to start a relationship

**RIGHT TO KNOW** – If the Police or other agency believe that a person needs to know about their partner's history, it will be provided without them asking for it

During 2016/17 the region have made 90 Clare's Law disclosures from 134 applications.

The sex offenders register contains the details of anyone convicted, cautioned or released from prison for a sexual offence since September 1997. All convicted sex offenders must register with the Police, in person, within three days of their conviction, or release from prison. They must continue this registration on an annual basis -

those with a jail term of 30 months to life are subject to an indefinite term of registration but can appeal after 15 years; a sentence of 6-30 months requires 10 years on the register; and a sentence of under 6 months requires up to 7 years registration. Those in receipt of a Police Caution can be registered for up to 2 years.

From 2011 the Child Sex Offender Disclosure Scheme, known as Sarah's Law, allows parents, carers and guardians to ask the Police if someone has a record for child sexual offences. The Scheme was developed by Sara Payne, mother of Sarah who was abducted and murdered at age 8. Although disclosure is not guaranteed, it can trigger an investigation to see if a person has a known history even if there are no firm grounds for suspicion.

#### WE WILL:

**Further promote Disclosure Schemes at all available opportunities**

### Notices and Orders

A Domestic Violence Protection Notice (DVPN) is an emergency non-molestation and eviction notice which can be issued by the Police to a perpetrator when attending a domestic abuse incident (39 issued in 16/17). Effective from the time of issue, it gives the victim the immediate support they require. Within 48 hours of a DVPN being served, an application for a Domestic Violence Protection Order (DVPO) may then be made by the Police to the Magistrates Court.

DVPOs are a new civil order power that enable the Police and Magistrates Courts to put in place protective measures in the immediate aftermath of a domestic violence incident, where there is insufficient evidence to charge a perpetrator and provide protection to a victim via bail conditions. In 16/17, 34 were granted regionally. A DVPO can prevent the perpetrator from returning to a residence and from having contact with the victim for up to 28 days, allowing the victim time to consider their options with the help of a support agency. Both the DVPN and DVPO contain a condition prohibiting the perpetrator from molesting the victim.

The Anti-social Behaviour Crime and Policing Act 2014 introduced Sexual Harm Prevention Orders (SHPOs) and Sexual Risk Orders (SROs). An SHPO is a measure given by the Magistrates' Court or Crown Court to a person who poses a risk of sexual harm to the public or an individual person. They can be made in relation to a person who has been convicted or cautioned for an offence under the Sexual Offences Act 2003 in the UK or abroad. Prohibitions can be wide ranging and include preventing travel overseas, restrictions on undertaking certain forms of employment and limiting Internet use by the offender.

An SHPO lasts for a minimum of five years and has no maximum length, except for any foreign travel restrictions stated in the Order, which must be renewed after five years.

SROs can be used to impose prohibitions on an individual who has committed an act of a sexual nature, as a result of which there is reasonable cause to believe that it is necessary to make an Order to protect the public from harm. There is no requirement for the individual to have actually been convicted of any offence. Only the Police are able to make an application to the Court for an SRO.

An SRO prohibits the relevant individual from doing anything described in the Order. The prohibition either lasts for a fixed period of not less than two years (as specified in the Order) or until a further Order is made.

Both SHPOs and SROs may contain foreign travel restrictions where this is necessary for the purpose of protecting children or vulnerable adults abroad.

A Forced Marriage Protection Order (FMPO) assists those who are in, or about to enter, a forced marriage. An FMPO is unique to each case and contains legally binding conditions and directions that change the behaviour of a person or persons trying to force someone into marriage and aims to protect the victim. The Court can make an Order in an emergency so that protection is in place straight away.

**WE WILL:**

**Improve the use of Notices and Orders across the region.**

**Safeguarding**



The Welsh Government’s National Training Framework Statutory Guidance, published in January 2016 under s.15 of the Violence against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 states that:

*“Whilst violence against women, domestic abuse and sexual violence are safeguarding issues, it is important they are not only seen as issues of child protection. To do so may exclude adults from services they require and miss the wider needs of families affected by these issues. The purposes of this specific, focussed Framework is to acknowledge VAWDASV as significant social care, public health and social justice issues, directly affecting a significant proportion of the Welsh population, including children and young people, as primary issues.”*

This is supported by the Social Services and Wellbeing (Wales) Act 2014 which changes the way people’s needs are assessed and the way

services are delivered. Citizens have more of a say in the care and support they receive and there are also stronger powers to keep people safe from abuse and neglect.

Working together to protect children and vulnerable adults and promote their welfare is therefore a key legislative and policy requirement of all agencies. The identification of risk, to ask, act and refer all safeguarding concerns is the duty of all professionals employed by the partner agencies in the region, both statutory and third sector.

Governing the approach to safeguarding are the two regional boards - the Regional Safeguarding Adults Board (RSAB) and the Regional Safeguarding Children Board (RSCB). The role of the Boards is to ensure partner agencies are working well together and delivering their responsibilities.

Policies, procedures and training for staff and all partners is coordinated by the business unit administering both Boards.



## SURVIVORS VOICES

What people don't realise is that when you have at last separated, a new form of abuse begins - the stalking - leaving abusive messages on your answerphone and standing outside your house at 2am. It was then that the neighbours started calling the Police.

Stalking...He had a bike. Everywhere I turned he was there across the road at school pretending to alter his wheel. He would drive around my street late at night copying down registration numbers, especially if I had visitors. He followed a worker home and put nails and knife blades in my tyres. My circle of friends shrunk.

He threw the phone at me in the car - "transfer the money", he said. I picked up the phone - the line was live. He looked at me 'do it now' he mouthed, as he put his foot to the floor up the winding b-road. The kids were in the back of the car - we drove full pelt. I transferred the money - £10,000 from his card to mine. The car resumed calm driving. The kids were safe; I was safe, because I had done exactly as he asked.

He did not hit me... He frequently told me this as he held me down with the knife on the table. I did whatever he asked, I wanted to survive.

We are trying to advocate for and protect our children from ongoing abuse by going to family court. We are the only ones who can advocate, but we are limited in witnesses. We leave family court feeling gagged and incorrectly viewed as two kids squabbling in the playground and our children end up with no advocate. Our children end up traumatised and not safeguarded.

I ran. It was not safe to stay. I was pregnant with two small children. I was technically homeless. I have no solicitor. No support. My job is in jeopardy. I have to fight my way through benefits and housing systems. I have to attend family court in this state. They are not interested in what happened before I left. He has a solicitor. He is allowed to leer over me in the waiting room. He is allowed contact. He loves family court. He knows it aids him in his abuse towards me and the kids. We go 21 times over 8 years before me and my kids are protected.



## Cardiff Multi-Agency Safeguarding Hub

Ineffective information sharing and joint working was a consistent finding of Serious Case Reviews within Cardiff; these findings have been mirrored in other areas of the UK. This has led to the Multi-Agency Safeguarding Hub (MASH) model becoming an increasingly adopted approach in addressing the issue UK-wide. A Home Office evaluation in July 2014 identified the MASH model as making a positive contribution to the effective management of Child Sexual Exploitation in Gangs and of Domestic Abuse. Therefore Cardiff partners agreed to establish a MASH which became operational in September 2016. The aims of the MASH model in Cardiff are:

- ⇒ To improve the capacity and efficiency of existing referral management and risk assessment systems in collaboration with key partners.
- ⇒ To improve demand management for statutory assessments by ensuring vulnerable children and adults receive timely interventions to prevent their needs from escalating.
- ⇒ To improve the effectiveness of risk assessment in relation to children and adults considered to be at risk of significant harm.

This facility, based at Cardiff Bay Police station, offers an environment which supports effective sharing of information, collaboration and understanding between professionals and third sector agencies concerned with the safeguarding of adults and children.

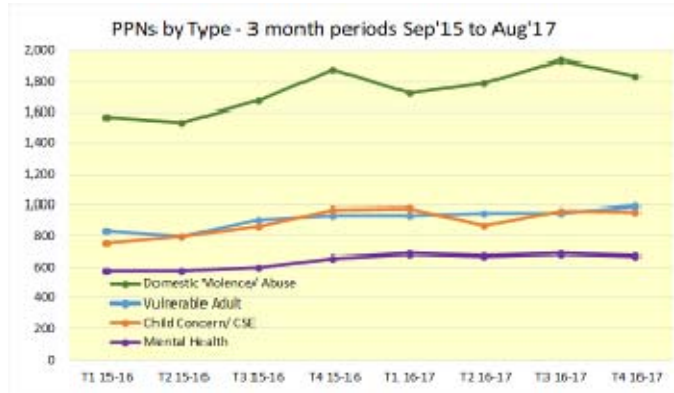


This is managed through agreed operating procedures, a Wales Accord on Sharing of Personal Information (WASPI) information sharing protocol and is overseen by a multi-agency Board. Key partners have allocated space and use of their own IT systems to record and share information in a timely manner. A shared system allows for greater collaboration on cases, pulling together key information to support safeguarding solutions and safety planning.

In Cardiff, all safeguarding concerns go via the Cardiff Multi Agency Safeguarding Hub. Concerns may be raised in following ways: via a Public Protection Notice (PPN) form completed by the Police, a Multi-Agency Referral Form (MARF) completed by professionals working across the public and third sector or via an A1 'Adults at Risk' form that again is completed by professionals working across the public and third sectors.

Referrals to Multi-Agency Referral Assessment Conference (MARAC) are also received by the MASH. The MASH facilitates a 'live time'

daily discussion process involving all relevant agencies to put in place strategies to safeguard victims. On average 7 referrals are discussed in this way each day. This approach enables multi-agency information to be discussed and decisions to be made in a timely manner.



To support the statutory response to safeguarding, the new specialist VAWDASV service in Cardiff is also responsible for ensuring an IDVA/IPA is based within the MASH each day. This worker can provide valuable input into daily discussions and act as liaison between all services, providing advice and guidance on cases.

### Managing VAWDASV PPNs

South Wales Police identify victims as either Standard, Medium or High risk following Police assessment at a domestic incident and then refer victims through the PPN process or other referral.

In the Vale, VAWDASV PPNs are managed by a dedicated worker employed by the local authority, based within the Community Safety team. This allows for cross-referencing with anti-

social behaviour cases to improve the intelligence gathering to inform wider safeguarding processes. In Cardiff the local authority has used the third sector to manage the PPN process for some time. The average weekly total of domestic abuse PPN referrals received for the region for 16/17 across the risk levels are shown below:

High	Medium	Standard
Weekly Avg.	Weekly Avg.	Weekly Avg.
20	45	15

In both local authorities, an IDVA/IPA is used to make contact with victims and offer advice, support and advocacy within prescribed timescales - high risk victims are contacted within 1 day, medium risk 3 days and standard risk 7 days.

The priority is obviously to support those assessed as high risk to address immediate safety concerns, but the region identified the need to address standard and medium risk victims more effectively to stop escalation of risk and to provide effective early intervention. This requires some reallocation of funding through recommissioning and revised specialist service specifications.

#### WE WILL:

- Work with partners to ensure continuous improvement of the MASH
- Closely monitor the specialist service response to PPNs

## MARAC (Multi-Agency Risk Assessment Conference)

MARACs are multi-agency meetings where statutory and voluntary agency representatives share information about high risk victims in order to produce a coordinated action plan to increase victim safety. The role of the MARAC is to provide a forum for effective information sharing and partnership working amongst a diverse range of adult and child focussed services in order to enhance the safety of high risk victims and their children.

The concept of MARAC was first trialled in Cardiff in 2002 for domestic abuse victims and now there are over 250 such MARACs across the UK.

The region now operates 2 MARACs for domestic abuse victims (fortnightly meetings - 1 in the Vale and one for Cardiff), 1 for sex workers (monthly meetings) and 1 for human trafficking (monthly meetings). Each locality has signed up to its own WASPI.

Referrals are received from a wide range of statutory and third sector agencies using the Safe Lives DASH-Ric, a standardised form designed to identify high risk victims, which is commonly used by all partners.



Ending domestic abuse

The Safe Lives charity (formerly CAADA) have the responsibility for overseeing the operation of all

MARAC's across the UK and undertake annual reviews of MARACs and develop guidance, procedures, templates and training. The following is a breakdown of Domestic Abuse MARAC cases received and discussed between Jan-Dec 2017 across the region:

MARAC Jan-Dec 17	Cardiff	Vale
Cases Referred	1208	n/k
Cases Discussed	453	319
Repeats	96 (21%)	134 (42%)
No. Children	657	384
BME Victims	60 (13%)	28 (9%)
Male Victims	20 (4%)	16 (5%)
LGBT Victims	3 (1%)	4 (1%)
Disabled Victim	6 (1%)	52 (16%)
Pregnant Victim	24 (5%)	n/k
Victim aged 16/17	8 (2%)	8 (3%)
Victim aged 60+	16 (4%)	15 (5%)

Levels of cases discussed from those with protected characteristics are generally in line with Safe Lives guidance, however Cardiff needs to improve its questioning around disabilities including complex issues such as mental health and substance misuse. The Vale needs to better record those who are pregnant and manage repeat cases. Individually, Cardiff is classified as a High Volume MARAC, although numbers of cases discussed each fortnight have reduced following the implementation of the Daily Discussions process at the MASH.



Although each MARAC monitors agreed actions by partners, the true outcomes of the MARAC process are not fully understood regionally, especially whether victims feel supported throughout. Cardiff University has been asked to undertake a piece of work to better understand the future of MARACs, given the changes brought about by the operation of the MASH locally. It will also review how the entire process can be made more effective for partners to respond appropriately so that victims can be better safeguarded. Views of all partners and survivors will be sought as part of the evaluation.



### WE WILL:

- Improve the quality of MARAC referrals across the region
- Review the findings of the research into the future of MARAC and consider any impact on existing processes

## Housing-Related Support

Having made the decision to leave an abusive relationship, this becomes the most risky time for victims as this opens them up to other forms of abuse such as stalking and harassment. Across the region there are 84 units of crisis/emergency accommodation for victims and, if necessary, their families who need to flee from their abuse and feel safe. These range from 1-bed self-contained dispersed units to family sized rooms in shared houses accommodating up to 7 families.

Units	Women Only	Men Only	Either
DA, SV, HBV	61	5	6
Stalking	8	4	0
<b>TOTALS</b>	<b>69</b>	<b>9</b>	<b>6</b>

In line with best practice guidelines of the Welsh Government Modernisation Group, such refuges offer self-contained units wherever possible to allow for different family sizes, including older and male children to be accommodated with their parent. The dispersed unit approach adopted in the Vale of Glamorgan is being explored regionally for male victims.

The Modernisation Group also advocated the use of the Intake and Assessment model trialled in Cardiff, which has proved beneficial in delivering short-term, emergency, safe accommodation to allow for a full assessment of need to be undertaken. Then a move to a specialist refuge can be facilitated or, where it is safe and

practicable to do so, a return to a target-hardened property in the community.

Over 700 households accessed refuge in 2016/17. The breakdown of family size is shown in the next table. Unfortunately not everyone can access crisis/refuge accommodation in the region when they need it. UK Routes to Support (formerly Refuges Online) is a network of refuges across the UK to allow victims to access safe crisis/emergency accommodation out of area.

Adult Accompanied by:	No. of Households	TOTAL PEOPLE
0 children	439	439
1 child	66	132
2 children	125	375
3 children	44	176
4 children	14	70
5+ children	0	0
<b>TOTALS</b>	<b>688</b>	<b>1192</b>

Services in the region understand the barriers to accommodation-based support caused by immigration legislation. Bawso predominantly mitigates these barriers and provides safe accommodation and support to victims and children with no recourse to public funds (NRPF) and other insecure immigration status, bringing in other resources to finance this provision:

NRPF	14/15	15/16	16/17
No. presenting	44	31	27
No. supported	14	18	16

Move-on from all refuges can be into a step-down supported housing scheme or a return to

residential accommodation either in the social or private rented sectors. Both local authorities prioritise cases in their social housing allocation policies and can assist with bonds etc. The impact of the proposed Renting Homes (Wales) Act 2016 legislation on accommodation for victims is yet to be fully understood as the implementation has been further delayed until 2019.

Other crisis support in Cardiff includes IPA support to accompany police call-outs to incidents. This has proved beneficial as the IPA can talk through the range of options open to victims and can support the Police in encouraging formal reporting. This can then be followed by a period of intensive tenancy support where the victim wants to remain in their own home, rather than access refuge.

Target hardening can also be accessed for victims who want and are able to remain in their home with additional safety measures (see p.54). Use of security and safety measures around the homes negates the need for family upheaval. This can also be supplemented with a period of tenancy support in any tenure to ensure that the victim feels safe in their home and can engage once more with their community in safety.

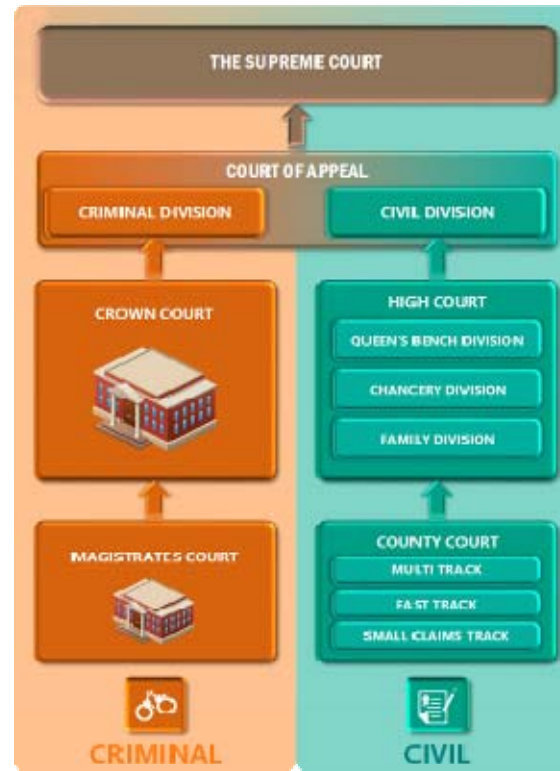
### WE WILL:

- Continually monitor the use of crisis/emergency accommodation to ensure provision for those who need it most
- Assess the impact of welfare reform changes and the Renting Homes Act on specialist accommodation for victims

## Specialist Courts

Cardiff & Vale of Glamorgan Magistrates Court is an accredited Specialist Domestic Violence Court. Cases are usually heard on a Monday each week, with victims being supported by their IDVA/IPA. Videoconferencing facilities exist to support those who cannot attend in person. The Probation Service aims to support victims by being aware of their views and wishes. When they are fully aware of the court conditions applied, this makes it easier to work through with perpetrators and any safeguarding considerations for victims.

The difference between civil and criminal procedures can be confusing for victims and perpetrators alike; very often they will be dealing with both systems. Family law generally involves issues that have to be decided when an intimate relationship breaks down, and can also involve childcare matters. The family court helps solve disagreements and helps protect children and young people who may be at risk of harm. In any application for contact, residence and child arrangements where there is alleged or admitted domestic violence or abuse or risk of this by a party to the case, clear guidelines are followed.



This 'Practice Direction' was amended in October 2017 to ensure that when considering child contact, the court must now assess if there is an ongoing risk of domestic abuse to the child or the parent in cases where domestic violence and/or abuse is a factor.



CAFCASS Cymru (Children and Family Court Advocacy and Support Service) provides a voice for children in Wales that are involved with the Family Justice System, working with families and other organisations to find long-term solutions for the child. Although appointed by the courts, CAFCASS is not a legal service - it provides expert independent social work advice to family courts across Wales. Legal Aid can help meet the costs of legal advice, mediation and court/tribunal representation. Legal Aid can be applied for if there is evidence that a victim and/or their children have been victims of domestic abuse and/or financial control and have been at risk of harm from an ex-partner. Victims usually need to show that they cannot afford to pay for this help.

### WE WILL:

- **Better support victims through the criminal and civil justice processes**
- **Work with campaigners to strengthen victims voices across all courts**

*"My 7 year old looked at me from behind the sofa. I held his coat out to him. His father shouted from the door. Our son's eyes did the talking whilst my hands, my encouraging words, gave him to his dad despite wanting to protect him. He says desperately "why are you sending me mum when I have told you what happens? I told you I don't feel safe." He had told me so I could protect him - he doesn't know it's the family court who aren't listening. I desperately hold the pain in as I do the opposite of what my child needs." Survivor, South Wales*

## CASE STUDY

An employee disclosed to her line manager that she was experiencing threatening and controlling behaviour by her ex-partner. They had now ended the relationship but the abuse had continued and increased, resulting in harassment and further threats. The ex-partner was also an employee and they both worked at the same site, though not in the same department. The emotional abuse and anxiety experienced by the victim on a daily basis at the thought of seeing her ex-partner was impacting on her work and affecting her emotional well-being. She was referred by her line manager to an IDVA who was able to offer expert support and advice as often as the employee required.

Once she had engaged with the IDVA and felt able to discuss the extent of her abuse, it became clear that additional support was required. The employee described her fear of returning to her car at the end of her working day, the thought of seeing her ex-partner at work and the intimidation that she felt due to the position that he had. The IDVA completed a risk assessment and a safety/support plan which included a referral to a specialist agency that provided additional locks, vibration alarms and a door brace for the property; supporting her in reporting each incident to the police; a referral to a solicitor for advice and support around child contact and financial advice to maintain her home.

As well as practical support, the IDVA undertook therapeutic work including helping the employee to understand power and control, post separation tactics of abuse and acknowledge and challenge her feelings of self blame which often accompanies domestic abuse. With the victim's consent the IDVA spoke with her line manager to explore what adjustments the employer could facilitate including altering working hours or a move to another workplace. A new parking permit was issued that changed the area where her car was parked at work. She was referred to employee wellbeing for additional support and advised to speak with her GP; her line manager would also be her initial point of contact should she feel anxious at work.

As is often the case, the harassment from her ex-partner did increase following the relationship ending however with support in place and her increased confidence to report to the police, the risk has since reduced and the employee has said that she feels a lot safer and happier. She now knows that there is support available and how to make contact should she need any further support in the future.

## Workplace Policies

In the UK every year, 20% of employed women take time off work because of VAWDASV and 2% lose their jobs as a direct result of the abuse. 53% of abused workers (male and female) miss at least 3 days from work per month (*Welsh Women's Aid, 2017*).



For employers, this can manifest into performance and productivity concerns. The effects of violence against women, domestic abuse and sexual violence can include decreased productivity, poor time-keeping, stress, absenteeism, errors and increased employee turnover. It is also important to recognise that whilst VAWDASV impacts on the health, safety and wellbeing of employees, for some the workplace can be the safest place to be and for many this is the only element of their life they feel they have some degree of control over.

All statutory partners in the region fully recognise the duty of care owed to their employees and have therefore revised or are currently revising their existing domestic abuse workplace policies to encompass the wider issues under the VAWDASV Act. It is hoped that other non-statutory partners, including private sector employers, will be encouraged to develop their own VAWDASV workplace policies.

*"Equality is the soul of liberty; there is, in fact, no liberty without it."* Frances Wright (Scottish Writer)



Employers can also extend their duty of care through sub-contractual arrangements. This is usually undertaken through explicitly outlining legal requirements in any contract terms and conditions to look out for, and report, any safeguarding matters when working directly with clients or when working in their homes.

The requirement for all contracted staff to be aware of safeguarding issues is nothing new - child protection protocols have been used for some time but a wider awareness of VAWDASV will be of huge benefit as such contractors are often the real eyes and ears of statutory services that can spot the early signs of abuse. Assisting contractors to develop workplace policies will also ensure that such duty of care is extended to all contracted staff.

**WE WILL:**

- **Develop and adopt revised VAWDASV workplace policies and encourage all partners to do the same**
- **Adopt the requirement for contractors to develop workplace policies through commissioning and procurement arrangements**
- **Ensure contractors are aware of the issues and understand referral pathways**



Wherever possible and safe to do so, victims should be supported to stay in their existing home with additional security measures if necessary. As well as offering practical solutions to prevent unwanted access, they can offer peace of mind to victims. Such provision is often referred to as 'target hardening' and can include security measures on the fabric of the building such as external locks on gates, security lighting, fencing and CCTV, or internal measures such as window locks, fireproof letterboxes, bogus caller buttons and community alarms.

Currently, through their landlord and/or anti-social behaviour functions, local authorities and other Registered Social Landlords offer a range of options. Some measures, such as community alarms and CCTV are a finite resource and

landlords need to ensure operating units are recycled when no longer required.

All refuge provision has CCTV and victims are provided with personal attack alarms. Assessments are carried out on properties with victims before any measures are installed. The local authority can provide the safety measures for those who rent privately so long as the landlord consents. In addition, the Fire Service and the Police also provide security equipment to victims. Figures for 16/17 are as follows:

Area:	Cardiff		Vale	
Provider:	Referred	Installed	Referred	Installed
<b>Council/RSL</b>	169	154	55	55
<b>Fire Service</b>	79	48	23	15
<b>Police</b>	n/k	n/k	15 available	
<b>TOTAL</b>	Min. 272 Installed			

Monitoring of the availability and use of such equipment is therefore key. The region needs to explore the current approaches to target hardening and consider if any shared practice can be implemented to combine efforts.

**WE WILL:**

- **Review the availability of target hardening options and develop a regional approach**

*"For years I felt constantly afraid in my own home, now it is the safe place it should be"* Survivor, South Wales



## **CHAPTER FIVE**

# **SUPPORT**

## Research



The region is a prominent supporter of the use of research and fully embraces all opportunities to be involved in exploring issues in-depth and developing innovative solutions to address them. Over the past 10 years, partnerships have been developed with a range of Welsh and English Universities to take forward a number of pieces of research that explore different elements of the VAWDASV agenda. Some findings have already been translated into service delivery and have proved to work such as MARAC, IDVA and IRIS. Other research has ceased and revised service delivery is still in its infancy, whilst other projects are ongoing, such as Change That Lasts; these will be discussed further throughout this chapter.

### WE WILL:

**Actively participate in a range of meaningful research projects to broaden understanding and improve services**

## Independent Advocates

The main purpose of Independent Domestic Violence Advocates (IDVA), or Independent Domestic and Sexual Violence Advocates (ISVA) is to address the safety of victims at high risk of harm from intimate partners, ex-partners or family members to secure their safety and the safety of their children. In Cardiff, IDVAs have been renamed as Independent Personal Advocates (IPAs) to acknowledge their wider remit under the VAWDASV Act.

Serving as a victim's primary point of contact, IDVA/ISVA/IPAs normally work with victims from the point of crisis, assessing the level of risk and discussing the range of suitable options leading to the creation of a workable safety plan. They are proactive in implementing the plans which address immediate safety, including practical steps to protect victims and their children, as well as longer-term solutions. These plans will include actions from MARAC as well as sanctions and remedies available through other organisations. The IDVA/ISVA/IPA's role in all multi-agency settings is to keep the client's perspective and safety at the centre of proceedings and be the victim's voice.

IDVAs/ISVAs/IPAs receive specialist accredited training as part of the National Training Framework and hold nationally recognised qualifications. Studies have shown that when high risk clients engage with an IDVA/ISVA, there

are clear and measurable improvements in safety, including a reduction in the escalation and severity of abuse and a reduction or even cessation in repeat incidents.

IDVA / ISVA / IPA Specialism (not FTE)	No.
Health-Based	1
Sexual Assault Referral Centre (SARC)	5
Immigration/ Human Trafficking	1
MASH	1
Court-Based	3
Flying Start (children aged 0-4)	2
Families 1st	1
Young Male Victims	1
Children and Young People	2
Lesbian, Gay, Bisexual and Transgender	1
General	23

In the region, there are 41 workers, some with specialisms/specific roles outlined in the table above. Although originally established to work with the highest risk cases, it has been recognised regionally that supporting lower risk victims is beneficial, preventing further harm. IDVAs/ISVAs/IPAs are used to deliver a range of therapeutic and self-help interventions to help victims recognise and come to terms with the abuse experienced. This is especially important when perpetrators are undergoing interventions to prevent further abuse 'spikes'.

Services are also becoming more trauma-informed, in acknowledgement of the impact of early childhood neglect and abuse on the physical health, mental health, and well-being of victims, compounded by the abuse experienced in later life. In Cardiff the new commissioned specialist service for female victims will use the Psychological Advocacy Towards Healing (PATH) intervention. This targeted 1-1 counselling has been developed by Bristol University and Cardiff Women's Aid participated in the largest European clinical trial. Research showed that those receiving the PATH intervention experienced clinically lower levels of psychological distress, depression and post-traumatic stress and a clinically important reduction in anxiety.

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Not all specialist providers in the region employing IDVAs/ISVAs/IPAs hold the Safe Lives Leading Lights quality accreditation but all services either already hold or are in the process of applying for the Welsh Women's Aid National Quality Service Standards and/or other relevant Service Standards.

**Therapeutic Group  
Work Options:**



The Freedom Programme



**SURVIVORS VOICES**

"If it wasn't for the services, understanding and support that Cardiff Women's Aid provided me with I would not be where I am today .. I am not sure I would even be here at all (I know that may seem like a strong statement) but I owe so much to them.

I was referred via the IRIS project from my GP. I was really lucky to be one of the first to take part in the Recovery Toolkit programme, which was amazing. I learnt so much more of what I had/was experiencing; this course was the beginning of a new life for me. I cannot explain how grateful I am to have participated in this. It helped me see things differently and made me feel like I was not alone and not the only one going through so much.

I was given a great opportunity to go on the PATH project which once again helped me so much - both these courses helped me with my self-esteem and my confidence. I previously had counselling through my GP but never opened up what I was experiencing and found no help. I feel I have a lot to be thankful for from Women's Aid, they really helped me change my life around. I don't like to think where I would be today without them and their support and specialised services. I feel extremely lucky to have had been given the opportunity to access such great support services and I am grateful for that. Once again I truly believe my life would not be the way it is now without them."

"It was only with support from an IDVA that my situation was at last taken seriously and I gained the first steps in moving safely away from a situation of coercive control that others I had reported to did not understand."

"Attending sessions that help individuals understand that what they have experienced is recognised and that they are not alone is a major contributing factor to moving on and re-building your life. Individual specialist counselling allows you to reflect on what you have been through and begin to find closure through this supportive healing process."

*"I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel." Maya Angelou*

## Children and Young People

Underpinning Wales's approach to child protection is the importance placed on children's rights. The Rights of Children and Young Persons (Wales) Measure 2011 made Wales the first country in the UK to incorporate the United Nations Convention on the Rights of the Child (UNCRC) into its domestic law. Therefore all Welsh policy and legislation has to take into account children's rights.

In 2015 the Welsh Government published its Programme for children and young people. This has 7 core aims, each linked to articles in the UNCRC. The programme says children and young people should:

- have a flying start in life
- have a comprehensive range of education and learning opportunities
- enjoy the best possible health and be free from abuse, victimisation and exploitation
- have access to play, leisure, sporting and cultural activities
- be listened to, treated with respect, and have their race and cultural identity recognised
- have a safe home and a community which supports physical and emotional wellbeing
- not be disadvantaged by poverty

Partners in the region fully support these aims and work collaboratively to ensure the safety of children and young people at all times.



As well as the wide range of awareness raising that takes place in schools and colleges, and the range of child protection arrangements in place across the region, children and young people can receive direct support for any abuse or trauma they have experienced or witnessed.

The main specialist providers in the region support children and young people with both individual and group work from ages 4-25. Some group work including Star and the Recovery Toolkit are aimed at working with the child and their parent/carer.

In addition, through the specialist Safe As team, Cardiff Women's Aid deliver the SODA (Survivors of Domestic Abuse) project, designed for teenagers who are using self-harm and experiencing suicide ideation to deal with the trauma of living, or having lived previously, with domestic violence or abuse. Dave's House is a programme for young men aged 17-25 years who may have been affected by domestic abuse, or are concerned about their behaviour within their own relationships. Cardiff Council is also funding a Male IDVA/IPA to support young men and boys who are more difficult to engage in discussing their experience of domestic violence/abuse. This service feeds into the Dave's House group work.

### WE WILL:

**Consider extending positive male role models to children and young people experiencing other types of violence and abuse**

## Family Interventions



One of the services offered by Atal y Fro is the Early Intervention programme. This means that as soon as a referral is received they call together the agencies who need to be involved, to develop a 'package' for the whole family, with safety always central. The package is initially for six weeks then reviewed and a longer term plan put together, providing a service for couples who wish to stay together or separate amicably. The service supports family members by providing one to one work for the victim, their partner and any children involved. This will often include required attendance on community perpetrator programmes, but many of those currently in existence do not support the different family compositions that exist, relying on the traditional family stereotype.

Services in Cwm Taf will be delivering similar family interventions through the PCC Transformation Fund programme to further test and pilot the whole-family approach.

### WE WILL:

**Research and consider family intervention models for future service delivery**

## People from a BME Background



BME victims' and their children's experience of violence can be shaped by their relationship to concepts such as culture and their

relationship with communities. These issues can define their experiences of violence and abuse and impact on their access to, and the types of services they may need or want. Additional barriers to support may be experienced by BME victims and their children due to the impact of language, discrimination, racism or immigration status. The region recognises the imperative to have services delivered by and for BME people.

The Centre for the Study of Safety and Well-being, University of Warwick and Imkaan undertook a study to explore the extent to which BME women and girls are disclosing sexual violence and accessing support and to look at emerging barriers and gaps to accessing support. The resulting report - *Between the Lines - Service Responses to Black and Minority Ethnic (BME) Women and Girls Experiencing Sexual Violence* reviewed 38 specialist services across the UK.

Findings showed a lack of real understanding of the issues and a need for training and delivery of specialist services were recommended.

The population across Cardiff & the Vale (C&V) is constantly evolving, with a growing number of diverse ethnic cultures and increased migratory movement. With the increased diversity, it is not uncommon to identify increased cultural health concerns which affect reproductive, psychosocial and psychosexual health. This includes the practice of FGM; the trauma of which has been widely reported to be relived for many years after the mutilation takes place.

Noting the significant need for a seamless service to meet the needs of all females affected by FGM, it is proposed that a pilot community clinic is established. Cardiff & Vale UHB Midwifery service and Bawso will deliver a service that will help break down barriers to accessing care and ensure all females affected have access to clinicians and counselling support. It will also facilitate an opportunity to work with some of the deep-rooted cultural beliefs with older family and extended community members.

### **WE WILL:**

**Review the pilot FGM clinic's effectiveness**

## Gypsy & Traveller Communities

Gypsies and travellers experience a high level of discrimination and prejudice in their daily lives, and experience great difficulty in maintaining their lifestyle and heritage. They are disadvantaged in accessing healthcare, education, and securing accommodation.

Research shows that domestic abuse is a significant health issue for the Gypsy & Traveller communities. A recent study estimated that between 60% – 80% of women from travelling communities experience domestic abuse during their lives, compared to 25% of the female population generally. Cultural expectations combined with the isolated nature of the communities, can make it difficult for domestic violence to be challenged with successive generations of both men and women viewing domestic abuse as normal. A Gypsy or Traveller woman leaving because of domestic abuse not only loses her home and partner, but also her community, her culture and her way of life. For these reasons, Gypsies and Travellers are far less likely to report an incident or to seek help.

### **WE WILL:**

**Raise awareness of available support services to the Gypsy and Traveller communities**

*"I was 14 years old when my mother presented me with the picture of a man I later learned I had been promised to at the age of eight. I was the one who dared to say: 'No, I was born here, I want to go to school - I don't want to marry a stranger.'"*

Jasvinder Sanghera, CBE, founder of Karma Nirvana

## Male Victims

Both local authorities in the region have identified a need for discrete male victim provision and acknowledge that the delivery of services to male victims can differ from those provided to female victims. Although practically there are similarities in that they require non-judgmental validation of the abuse suffered, a safe place to stay and support to rebuild their lives. It is evident that some male victims are also accompanied by their children of either gender.

Access to services is often made via male-specific helplines or through Council homelessness routes. In terms of a safe place to stay, Cardiff currently hosts the South Wales male-only refuge. The dispersed refuge service currently delivered in the Vale of Glamorgan has been identified as a good model for complex cases including larger families and male victims.

Work is underway to explore best practice and develop a more rounded end-to-end service for male victims, to replicate the seamless services offered to female victims. To broaden economies of scale, other South Wales local authorities have been invited to participate in the needs assessment and commissioning process. Data and views will be captured from partners, current providers and past victims, along with best practice and research.

### WE WILL:

**Commission a specialist male victim service with wider regional partners**

**In 2016/17:**



*216 men contacted the Live Fear Free helpline*



*Dyn Project received 236 referrals to the Cardiff male IDVA*

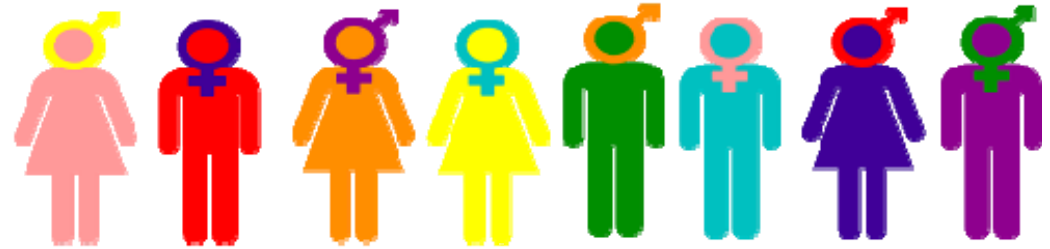


*36 high risk male victims discussed at MARAC*



*Almost 100 males sought help from the SARC*

## LGBTQ+ Victims



IDVAs/ISVAs/IPAs work with victims who identify as Lesbian, Gay, Bisexual and Transgender, however Rainbow Bridge is a service operated by Victim Support that specifically supports victims of domestic abuse who identify as LGBTQ+. This includes abuse from intimate partners, ex-partners (also heterosexual ex-partners) and relatives. Services include advocacy, personal and home security, emotional support and mentoring. Reporting from LGBT victims remains especially low and confidence to report and seek help needs to be encouraged. There is a willingness from partners to work and engage with organisations who have specialist knowledge of the needs of LGBTQ+ victims to ensure that services are accessible and appropriate.

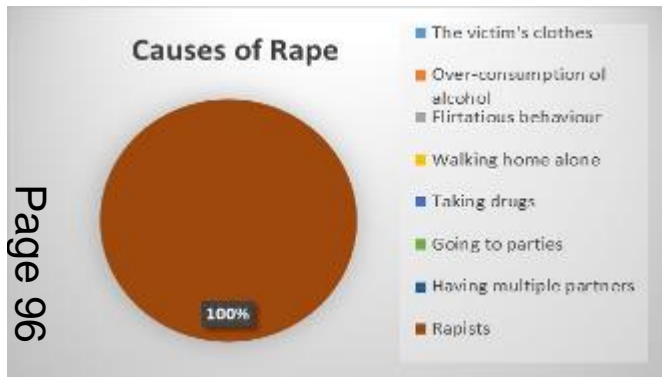
In respect of the transgender community, in July 2017 the UK Government announced plans to reform the Gender Recognition Act (2004). The proposed changes include making the process to change the gender on someone's birth certificate less bureaucratic and bring it into line with existing non-medicalised processes for changing gender, e.g. on passports, relying on 'self-identification'. Changing attitudes to gender and sexuality are hotly discussed subjects and the proposed changes to legislation are proving controversial. Currently, the Equality Act 2010 has exemptions that permit single-sex services, occupations, communal accommodation and sporting activities where these are a proportionate means of achieving a legitimate aim. Campaigners raise concerns that a move towards gender self-identification could have unintended consequences. These issues are complex and clearly require further open discussion regarding service accessibility and delivery.

### WE WILL:

- **Strengthen links with specialist LGBTQ+ organisations to improve services and increase reporting**
- **Ensure services are responsive to LGBTQ+ victims**

## Sexual Assault Referral Centre

The full extent of the effect of sexual violence within our communities is largely unknown as many victims do not report to the Police. Male rape is particularly under reported, the reasons for not reporting include shame, guilt and fear of not being believed or of being denounced for what has occurred. Myths and strong prejudices surrounding male sexuality also prevent men from coming forward.



Ynys Saff Sexual Assault Referral Centre (SARC) offers services to victims of sexual violence, meeting the needs of all ages and all genders. Its aim is to offer appropriate support and care required at the point of need, working to advocate on behalf of the client ensuring that the service is victim focused at all times. The SARC is based in the Cardiff Royal Infirmary and is jointly funded as part of the provision of Cardiff and Vale UHB. The Centre can facilitate forensic medical examinations, Police interviews, ISVA support during the criminal justice process, specialist trauma counselling and psychological educational group support. Accountability for Ynys Saff rests with Cardiff and Vale UHB.

The SARC also provides a specialist paediatric service for children and young people, acknowledging that this client group have specific needs which must be addressed in a sensitive and timely manner. Sexual crime amongst children and young people is now more publicised than ever before and the risks to the younger generations are increasing; the development of the use of social media, the grooming and exploitation of those who are vulnerable and those who are abused within their own families.

Much work has been done to ensure a sustainable model for sexual violence services across South Wales. Plans are underway to regionalise services and develop the Cardiff and Vale SARC as a 'Hub' for acute service provision for adults and children in South East Wales. This highlights the recognition that service provision for sexual violence is highly specialised and requires the best models of care that can be provided for all victims. However, there remain many factors which need to be addressed in the future. It is recognised that there are groups who under-report such as male victims, sex workers, those from ethnic minority backgrounds and victims of HBV. There is a requirement to develop a greater understanding of the problem, the causes and circumstances and to build confidence of individuals to report.

### WE WILL:

**Embed the new Hub SARC model for victims of sexual violence across South East Wales**

## Older People

Some older people may be vulnerable to domestic or sexual abuse as a result of their mental or physical frailty, and/or mental capacity or physical disabilities; however, these are not the only factors which could lead to an older person being abused. Abuse may be perpetrated on older victims for a number of reasons, and does not necessarily cease or reduce as the victim or abuser gets older. In fact, an older victim may experience more frequent or increased intensity of abuse; additionally, some older people may only start to experience abuse at this stage in their life. Older people may also be the victims of abuse perpetrated by multiple family members, some of whom may also be assuming a caring role. Financial abuse by family members should be regarded as domestic abuse.

Issues of mental capacity have arisen in a local DHR, both in terms of the victim with early signs of dementia not being asked if she was experiencing any abuse and also in terms of her carer who was experiencing signs of carer stress but who refused help. A debate has arisen over local procedures and whether it is appropriate to override an individual's decision, evidencing the reasons, and managing any consequences. Further guidance is needed on this issue.

### WE WILL:

**Work with the Regional Safeguarding Adults Board to develop policies and training for those working with older victims of VAWDASV**



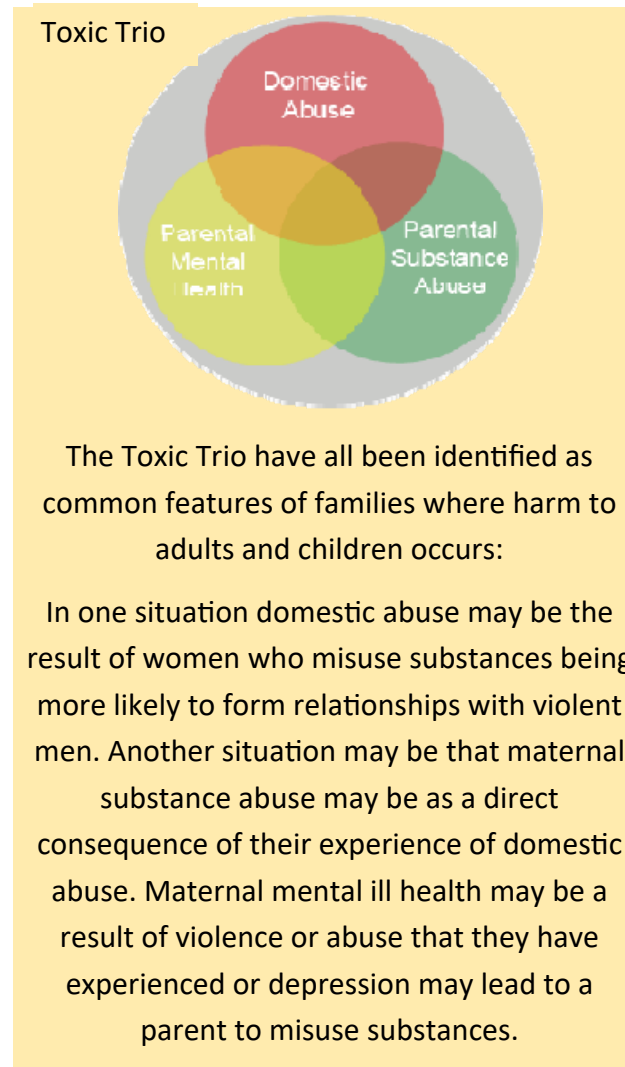
## Complex Needs / Toxic Trio

There are high rates of overlap between VAWDASV and substance use for both victims and perpetrators of abuse. While it is accepted that alcohol and drug abuse does not cause VAWDASV, the presence of substance use can increase the frequency and severity of abuse. Children are at a particularly high risk of harm when substance misuse and domestic violence are present.

Substances can also be involved as a means to incapacitate the victim or make them do things they do not want to do. This can include pushing boundaries in sex, recording it or prostitution. Partners might be forced to sell, buy or even consume drugs. Later on, this might be used as leverage when the victim becomes addicted.

Victims of abuse have a higher rate of drug and/or alcohol misuse (whether it starts before or after the abuse): at least 20% of high-risk victims of abuse report using drugs and/or alcohol (Safe Lives 2015). Often they are used as a self-medicated coping mechanism.

Victims who use alcohol and drugs are more likely to be abused, and abused victims are more likely to use substances. One of the causes of this might be that experiencing prolonged hostility, violence and abuse contributes to deterioration of the victim's mental health – they may struggle with depression, anxiety, suicidal behaviour, low self-esteem, inability to trust others, flashbacks, sleep disturbances and emotional detachment.



40% of high-risk victims report having mental health issues (Safe Lives 2015).

Alcohol and drugs might help them temporarily alleviate anxiety, make them forget, or simply make further abuse easier to bear. They might not realize that self-medicating like this can lead to addiction and more problems.

In the Vale of Glamorgan, a new partnership between Atal y Fro and Gofal will deliver a 12 month specialist mental health support service for victims of abuse. The Mental Health Worker is based within Atal Y Fro and supports any clients accessing services with mental health needs.

In analysis of Serious Case Reviews undertaken by the Department of Education in England (Pathways to harm, pathways to protection: a triennial analysis of serious case reviews 2011 to 2014, published in 2016), found that in a total of 293 Serious Case Reviews, domestic abuse was the most common factor identified, followed by parental mental health problems and thirdly, substance misuse. "it is now abundantly clear from research that living with domestic abuse is always harmful to children and it is rightly seen as a form of child maltreatment in its own right." (Humphreys and Bradbury-Jones, 2015). This report further highlighted that sexual abuse often co-exists with other types of harm. In this study there was evidence of sexual abuse in 53% of cases in children aged between 1-17.

This study highlights that no one single agency can manage the risks and harms when complex needs co-exist. Importantly, when complex needs are identified, consideration must be given to how coercive control may impact upon behaviours.

### WE WILL:

**Ensure health and social care professionals consider and address how complex needs impact on adults and children**

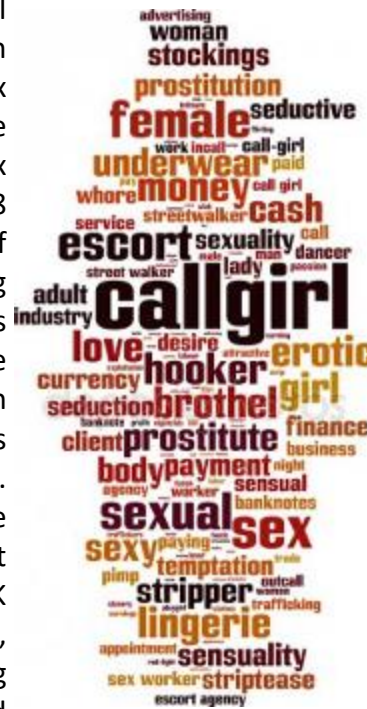
## Sex Workers

Within Cardiff, significant tensions have existed over time between residents and those involved in street-based prostitution in Grangetown and Splott. Research undertaken by Swansea University in 2010 explored the perception of these communities who believe it is not sufficient to merely move the problem elsewhere but to implement a strategic enforcement approach which brings together harm reduction and criminal justice.

Cardiff responded to changes in Section 17 of the Crime & Disorder Act in 2010 with the development of a diversionary pathway, which moves sex-working women away from punitive fines and penalties within the criminal justice system and into support services, recognising the complexity of the situation. This has been successfully implemented by local police and support agencies and has had a significant impact in increasing the numbers of women who now engage with support services. However, despite the implementation of various methods, including the Cardiff Diversionary Pathway, tensions remain between sex workers and residents, with increasing anti-social behaviour, abuse and threats of violence.

## BEYOND THE GAZE

A number of insightful studies have been undertaken into sex work, and with the support of sex workers, in the past 8 years with a variety of Universities, looking at discrete issues including substance misuse, links with traumatic childhoods and BME issues. Currently, Beyond the Gaze is the largest study to date of UK online sex work, examining working conditions, safety and policing of the industry by researchers from the Universities of Leicester and Strathclyde. A number of briefings have been produced with final findings due to be available in 2018 when the project ceases.



## Adults At Risk

Some adult men and women do not have the basic skills to be able to take care of themselves and stay safe – and this can make them more vulnerable to abuse. It is their vulnerability – and sometimes the lack of mental capacity – that makes these adults more susceptible to different types of abuse, as well as neglect.

The Social Services and Well-being (Wales) Act 2014 defines an 'adult at risk' as someone who:

1. is experiencing or is at risk of abuse or neglect;
2. needs care and support (whether or not the authority is meeting any of those needs); and
3. as a result of these needs is unable to protect themselves against abuse, neglect or the risk of either.

This may include people with physical, learning or sensory disabilities. Factors that increase vulnerability include age, mental health problems, chronic illness, challenging behaviour, lack of mental capacity, social and emotional problems, poverty, homelessness and substance misuse.

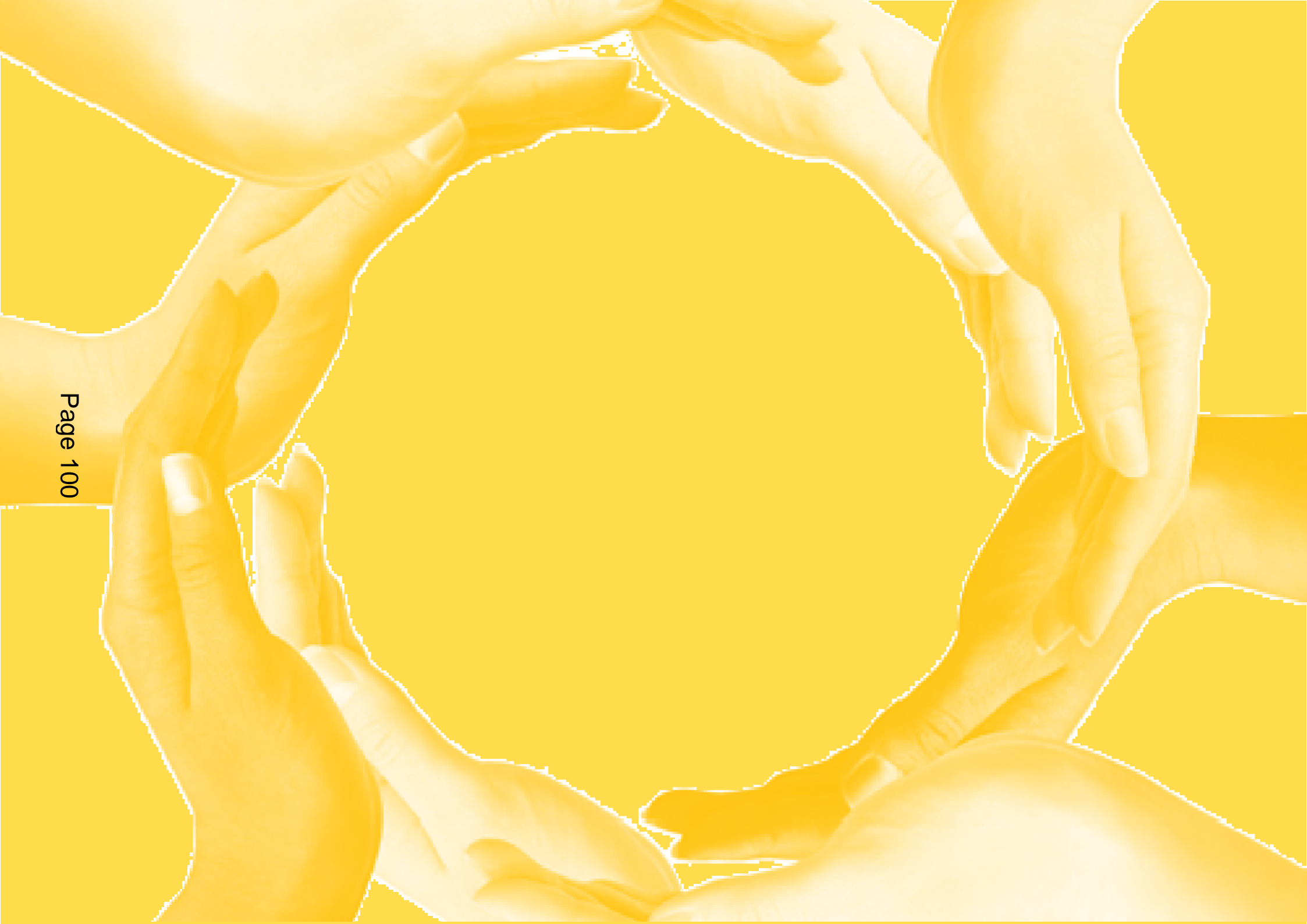
Partners in the region have established policies and procedures for referring and managing Adults at Risk through the Regional Safeguarding Adults Board, replacing the previous Protection of Vulnerable Adults (POVA) arrangements.

### WE WILL:

- Explore new ways to identify, protect and safeguard sex workers and the communities affected
- Review the findings of the 'Beyond the Gaze' research

*"We cannot all succeed when half of us are held back,"* Malala Yousafzai





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<p><b>Policy/Strategy/Project/Procedure/Service/Function Title:</b></p> <p><b>Cardiff and Vale of Glamorgan Violence Against Women, Domestic Abuse and Sexual Violence Strategy 2018-2023</b></p>
<p><b>New/Existing/Updating/Amending:</b> New</p>

<b>Who is responsible for developing and implementing the Policy?</b>	
Name: Jane Thomas	Job Title: Assistant Director (Housing & Communities)
Service Team: Housing & Communities	Service Area: Communities, Housing and Customer Services
Assessment Date: March 2018	

**1. What are the objectives of the Policy?**

The Violence against Women, Domestic Abuse and Sexual Violence Act (Wales) 2015 laid out a requirement for local authorities and Health Boards to jointly prepare regional strategies to tackle violence against women, domestic abuse and sexual violence (VAWDASV). In recognising the national strategic direction, the regional strategy sets out an overarching vision and high level aims as follows:

**Vision:**  
People who live, work and visit Cardiff and the Vale of Glamorgan have the opportunity to live positive, independent lives without being affected by violence and abuse.

**Aims:**

**Aim 1 - PREPARE**  
Improve strategic planning and commissioning of VAWDASV services through a more coordinated partnership approach across the region.

**Aim 2 - PURSUE**  
Address perpetrators of VAWDASV by improving intelligence sharing across services and the use of legal powers to disrupt and convict.

**Aim 3 - PREVENT**  
Pro-actively address negative attitudes and behaviours that have the potential to result in VAWDASV, recognising this as everyone’s business.

**Aim 4 - PROTECT**  
Improve the multi-agency response and support to all victims and their children regardless of risk level and needs.

**Aim 5 - SUPPORT**  
Ensure that innovative, flexible and evidence-based services are available to meet the needs of victims experiencing any form of VAWDASV.

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2. Please provide background information on the Policy / Strategy / Project / Procedure / Service / Function and any research done [e.g. service users data against demographic statistics, similar EIAs done etc.]

**Background**

2. Violence against women, domestic abuse and sexual violence is a fundamental violation of human rights, and both a cause and consequence of inequality. Tackling violence against women, domestic abuse and sexual violence (VAWDASV) has far-reaching consequences for women, men, children, families, communities and society as a whole. Tackling these enduring social problems requires a distinct and proportionate approach to enable everyone to live fear free in safe, equal and violence free communities.
- The Violence against Women, Domestic Abuse and Sexual Violence Act (Wales) 2015 set out a requirement for local authorities and Health Boards to jointly prepare regional strategies to tackle VAWDASV.
- The Welsh Government has set out in its national strategy following the Act, an objective to provide victims with access to “holistic, appropriately resourced, high quality, needs led, strength based, gender responsive services across Wales.” The Act now places a wider duty to support those experience all forms of violence against women, domestic abuse and sexual violence. This duty includes male victims and perpetrators of abuse.
- The regional VAWDASV strategy recognises that anyone (women, men, children and young people) can experience and be affected, it addresses violence and abuse directed towards women, men, girls and boys and violence and abuse perpetrated by men and women. It acknowledges that it can happen in any relationship regardless of sex, age, ethnicity, gender, sexuality, disability, religion or belief, income, geography or lifestyle. However it is acknowledged that women and girls are disproportionately affected by domestic abuse, rape and sexual violence, sexual exploitation (including through the sex industry), modern day slavery, forced marriage, female genital mutilation, child sexual exploitation and abuse, stalking and sexual harassment.
- Cardiff Council has recently undertaken an EIA in relation to the commissioning process to procure a new female victim specialist service. This service was successfully awarded and the contract began implementation on 1<sup>st</sup> April 2018. A male victim service is currently being considered by regional partners to commence in April 2019.
- Welsh Government has also required a move to regional working on VAWDASV in terms of a national approach towards regional funding and commissioning. Cardiff and the Vale of Glamorgan have agreed to operate as a region for this purpose due to a shared Health Board footprint, natural travel to work patterns, service access migrations for residents across the area, and the pre-existence of a number of regional services and policies.
- The Strategy has identified a number of “We Will” commitments to be delivered across all the partners involved in the region and will be monitored by a new overarching Cardiff and Vale VAWDASV Steering Group through a detailed action plan:

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<b>PREPARE</b>	
<b><i>Introduction</i></b>	Work towards developing relevant joint regional strategies and policies where possible
<b><i>Needs Assessment</i></b>	Continually improve data collection methods to better inform ongoing needs assessment
<b><i>Governance</i></b>	Implement and continually review governance arrangements including membership, to ensure they remain fit for purpose
<b><i>Wider Collaboration</i></b>	Actively assist with embedding a whole systems approach across the region
<b><i>Survivor Engagement</i></b>	Actively seek engagement and input from victims and survivors that represent all crime types and protected characteristics

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<b>PURSUE</b>	
<b><i>Criminal Justice Response</i></b>	Increase the number of positive outcomes for victims
	Enhance the monitoring of the outcomes of cases appearing before Magistrates and Crown courts
<b><i>Integrated Offender Management</i></b>	Trial and evaluate the MATAC Intervention for perpetrators of domestic abuse
	Evaluate the impact of Drive including impact on victims and children
<b><i>Working with Perpetrators</i></b>	Improve monitoring and reporting of perpetrator programmes / interventions
	Consider early intervention options for those concerned about their behaviour
	Explore options for delivering a range of community perpetrator interventions
<b><i>Restorative Justice</i></b>	Continually review the guidance and approach to the use of restorative practice for victims of VAWDASV
<b><i>Safe Use of Technology</i></b>	Deliver local campaigns to highlight safe use of technology
<b><i>Encouraging Victims to Report</i></b>	Encourage and assist more victims to seek criminal sanctions and civil remedies



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<b>PREVENT</b>	
<b>Educational Settings</b>	Continue to promote and monitor education-based activities across the region to include 'hard to reach' children
	Give support to all higher and further education establishments to have a consistent and visible approach to tackling VAWDASV and in managing disclosures
<b>National Training Framework (NTF)</b>	Liaise with the Judicial College to ensure Magistrates are trained in VAWDASV awareness and sentencing guidelines
	Implement the regional training plan to ensure all staff are trained in accordance with the National Training Framework
<b>Early Intervention</b>	Prioritise funding for early intervention services that prevent all forms of VAWDASV
	Implement the Ask Me Ambassador pilot in Cardiff and share the learning
<b>Sexual Violence</b>	Provide a male ISVA at the SARC
	Work with the South Wales Police & Crime Commissioner to gain a greater understanding of sexual harassment
	Raise awareness of consent at all opportunities
<b>Stalking</b>	Improve awareness of stalking and promote the practical steps to reporting
<b>Honour Based Violence / Forced Marriage</b>	Improve understanding of how forced marriage affects individuals with protected characteristics
<b>Female Genital Mutilation (FGM)</b>	Increase FGM referrals from schools
<b>Night Time Economy</b>	Assist with implementing the actions from the 'Delivering a Safe and Welcoming Night Time Economy' strategy
<b>Sex Workers</b>	Raise awareness across the region of the issues faced by sex workers
	Review the effectiveness of the Ty Tarian scheme to inform future service delivery
<b>Trafficking and Modern Slavery</b>	Widen the reach of the Human Trafficking awareness module through the National Training Framework
<b>Adverse Childhood Experiences (ACEs)</b>	Support Public Health Wales to move from a position of understanding the ACE research to understanding what a positive and effective response looks like
	Develop close working arrangements between the Early Help Front Door services and specialist VAWDASV services
<b>Identification and Referral to Improve Safety (IRIS)</b>	Remain committed to mainstreaming the IRIS model across all GP surgeries in the region
<b>Formal Reviews</b>	Ensure that the learning from all formal service reviews including DHRs is reflected in service delivery and is shared widely
	Implement any Welsh Government policy changes arising from its review of DHR processes
<b>White Ribbon Campaign</b>	Implement the White Ribbon Action Plan across the region
	Continue to advocate for a White Ribbon Wales

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<b>PROTECT</b>	
<i>Clare's Law / Sarah's Law Disclosures</i>	Further promote Disclosure Schemes at all available opportunities
<i>Notices and Orders</i>	Improve the use of Notices and Orders across the region
<i>Managing VAWDASV PPNs</i>	Work with partners to ensure continuous improvement of the MASH
	Closely monitor the specialist service response to PPNs
<i>(MARAC) - Multi-Agency Risk Assessment Conference</i>	Improve the quality of MARAC referrals across the region
	Review the findings of the research into the future of MARAC and consider any impact on existing processes
<i>Housing-Related Support</i>	Continually monitor the use of crisis/emergency accommodation to ensure provision for those who need it most
	Assess the impact of welfare reform changes and the Renting Homes Act on specialist accommodation for victims
<i>Specialist Courts</i>	Better support victims through the criminal and civil justice processes
	Work with campaigners to strengthen victims voices across all courts
<i>Workplace Policies</i>	Develop and adopt revised VAWDASV workplace policies and encourage all partners to do the same
	Adopt the requirement for contractors to develop workplace policies through commissioning and procurement arrangements
	Ensure contractors are aware of the issues and understand referral pathways
<i>Target Hardening</i>	Review the availability of target hardening options and develop a regional approach

<b>SUPPORT</b>	
<i>Research</i>	Actively participate in a range of meaningful research projects to broaden understanding and improve services
<i>Children and Young People</i>	Consider extending positive male role models to children and young people experiencing other types of violence and abuse
<i>Family Interventions</i>	Research and consider family intervention models for future service delivery
<i>People from a BME Background</i>	Review the pilot FGM clinic's effectiveness
<i>Gypsy and Traveller communities</i>	Raise awareness of available support services to the Gypsy and Traveller communities
<i>Male Victims</i>	Commission a specialist male victim service with wider regional partners
<i>LGBTQ+ Victims</i>	Strengthen links with specialist LGBTQ+ organisations to improve services and increase reporting
	Ensure services are responsive to LGBTQ+ victims

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<b>Sexual Assault Referral Centre (SARC)</b>	Embed the new Hub SARC model for victims of sexual violence across South East Wales
<b>Older People</b>	Work with the Regional Safeguarding Adults Board to develop policies and training for those working with older victims of VAWDASV
<b>Complex Needs / Toxic Trio</b>	Ensure health and social care professionals consider and address how complex needs impact on adults and children
<b>Sex Workers</b>	Explore new ways to identify, protect and safeguard sex workers and the communities affected
	Review the findings of the 'Beyond the Gaze' research

**Data Review**

8. The Strategy identifies the following demographic and service data:

Regional Data

The area covered by the boundaries of Cardiff and the Vale of Glamorgan has a total population of **489,931**; 16% of the total Welsh population. This is made up of **205,093** females and **194,556** males, **44,237** girls and **46,045** boys.

The ages of the population are as follows:

Ages	Males	Females	TOTALS
<b>0-4</b>	15,115	14,489	<b>29,604</b>
<b>5-15</b>	30,930	29,748	<b>60,678</b>
<b>16-24</b>	37,248	38,241	<b>75,489</b>
<b>25-44</b>	67,835	65,168	<b>133,003</b>
<b>45-64</b>	55,595	58,786	<b>114,381</b>
<b>65+</b>	33,878	42,898	<b>76,776</b>
<b>TOTAL</b>	<b>240,601</b>	<b>249,330</b>	<b>489,931</b>

**93%** of the population is **White** with the remaining 7% broken down as follows: **3% Asian/Asian British**, **2% Mixed**, **1% Black/Black British** and 1% Other.

The 2011 Census data indicated that **18.6%** of the regional population have some form of **disability** as detailed below:

*Long-term health problem or disability, 2011 (Census) (StatsWales data)*

Disability	Cardiff		Vale of Glamorgan		Cardiff & Vale of Glamorgan	
	No.	%	No.	%	No.	%
Day-to-day activities limited a lot	31,838	9.2	12,538	9.9	44,376	9.4
Day-to-day activities limited a little	30,493	8.8	13,091	10.4	43,584	9.2
Day-to-day activities not limited	283,759	82.0	100,707	79.7	384,466	81.4
All categories: Long-term health problem or disability	346,090	100.0	126,336	100.0	472,426	100.0

With regards to sexuality, it is estimated that **6.1%** of the regional population do not consider themselves to be heterosexual:

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*Sexual Identity by local authority, England, Wales and Scotland, 2013-2015 (ONS data)*

	<b>Heterosexual or straight</b>	<b>Gay or Lesbian</b>	<b>Bisexual</b>	<b>Other</b>	<b>Don't know or refuse</b>
	<i>Estimate</i>	<i>Estimate</i>	<i>Estimate</i>	<i>Estimate</i>	<i>Estimate</i>
Cardiff and Vale of Glamorgan	269,000	7,000	3,000	4,000	3,000
Percentages	93.9%	2.5%	1.1%	1.6%	0.9%

Service Data

Services available from 1<sup>st</sup> April 2018 include:

- 1 x One Stop Shop (Cardiff only)
- 35 x Independent Domestic Violence Advocates (IDVAs) and 5 Independent Sexual Violence Advocates (ISVAs)
- 84 x units of specialist accommodation
- 9 x specialist providers of victim support services
- 2 x providers of perpetrator programmes
- 4 x MARAC Coordinators and 2 x Domestic and Sexual Violence Coordinators

In 2016/17 across the region,

- 11,302 incidents of Domestic Abuse were reported, resulting in 5,067 recorded crimes.
- One Forced Marriage Protection Order was granted.
- 1,011 crimes of Sexual Violence were recorded with a further 182 cases related to historical abuse.
- 99 incidents of Honour-Based Violence were reported, resulting in 37 recorded crimes.
- 30 cases of Trafficking were reported.
- 29 reported incidences of Female Genital Mutilation resulted in 2 cases being formally charged.

**3 Assess Impact on the Protected Characteristics**

**3.1 Age**

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on younger / older people?

	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Up to 18 years	✓		
18 - 65 years		✓	
Over 65 years	✓		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

Around 1 in 5 children have been exposed to domestic abuse and 1 in 3 children who have witnessed domestic abuse will have also been subject to other forms of abuse, including sexual abuse (NSPCC 2011). They are 6 times more likely to commit suicide as a result of abuses experienced, and 24 times more likely to commit sexual assault (Hafan Cymru 2015). In Wales

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during 2014-15, there were 205 cases of rape perpetrated against girls under the age of 13 in Wales (NSPCC).

Article 19 of the United Nations Convention on the Rights of the Child makes it clear that children and young people have the basic human right to dignity. This means they have the right to be protected from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child. Witnessing violence against women, domestic abuse or sexual violence is also therefore a breach of their rights.

It is estimated that over 40,000 older people in Wales are being abused in their own homes every year. For some, such abuse will have been a significant feature for most of their adult lives, an on-going problem for 20, 30 and 40 years or even longer (Older people’s Commissioner for Wales 2015). This is often further complicated when there are caring responsibilities in the relationship between the victim and the perpetrator of the abuse. Often the abuse only begins when the couple have retired and are spending much more time together alone at home. Older victims are less likely to leave abusive relationships than younger people. Whereas more than two-thirds of victims aged under 60 left their abuser in the year before seeking help, this applied to barely a quarter of older people. A third of victims over 60 were still living with their abuser while seeking help, compared with just 9% of younger victims (Safe Lives).

**What action(s) can you take to address the differential impact?**

For those aged under 16 who have witnessed or experienced any form of violence against women, domestic abuse or sexual violence, all partners, whether in the statutory or third sector, are fully compliant with safeguarding responsibilities under child protection arrangements. For those aged under 16 who are accompanying their parent/guardian into services, they will also have their needs assessed and appropriate tailored services offered. For all children and young people, a range of age-appropriate therapeutic interventions can be delivered. Specifically for those aged 0-5, there is dedicated provision funded through Flying Start and Families First.

It is acknowledged that close working between the Regional Safeguarding Children Board and the wider VAWDASV governance structure needs to be strengthened. This will be facilitated through shared training resources and regular input into each other’s review of policies and procedures and for cross-cutting issues such as Child Practice Reviews and Domestic Homicide Reviews.

Again, working closely with the Regional Adult Safeguarding Board, the needs of older people who have or are experiencing any form of violence against women, domestic abuse or sexual violence can be managed in a collaborative way. Issues of dementia and caring responsibilities can greatly affect relationships, and care needs to be taken to assess and support older people.

Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**3.2 Disability**

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [negative]** on disabled people?

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	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Hearing Impairment	✓		
Physical Impairment	✓		
Visual Impairment	✓		
Learning Disability	✓		
Long-Standing Illness or Health Condition	✓		
Mental Health	✓		
Substance Misuse	✓		
Other	✓		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

Research suggests that those with disabilities are more likely to suffer domestic violence and sexual assault than those without disabilities (Liverpool John Moores University’s Centre for Public Health, a WHO Collaborating Centre for Violence Prevention, and WHO’s Department of Violence and Injury Prevention and Disability, July 2012.) Also those with disabilities report abuse that lasts longer and is more intense than those without disabilities. Like other victims, those with disabilities usually are abused by someone they know, such as a partner or family member. In addition, those with disabilities face the risk of abuse by health care providers or caregivers. Caregivers can withhold medicine and assistive devices, such as wheelchairs or braces. They can also refuse to help with daily needs like bathing, dressing, or eating.

The systematic review on violence against adults with disabilities, published in February 2012, found that overall they are 1.5 times more likely to be a victim of violence than those without a disability, while those with mental health conditions are at nearly four times the risk of experiencing violence. Factors which place people with disabilities at higher risk of violence include stigma, discrimination, and ignorance about disability, as well as a lack of social support for those who care for them. Placement of people with disabilities in institutions also increases their vulnerability to violence. In these settings and elsewhere, people with communication impairments are hampered in their ability to disclose abusive experiences.

**What action(s) can you take to address the differential impact?**

As part of the process of commissioning services to support victims, the issue of ensuring equitable access to services, especially information and advice and in accommodation-based support settings is of paramount importance. This includes being able to respond to enquiries in a number of ways over and above telephone and drop-in access, some of which may be more accessible to those with disabilities including webchat, Skype and via a professional referral from a service they are already engaged with. Services also work closely together to ensure referral and service pathways into other specialist support such as mental health and substance misuse services. Provision is made for current available units of accommodation-based support to be suitable for those with disabilities.

Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**3.3 Gender Reassignment**

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Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive]** on transgender people?

	Yes	No	N/A
<b>Transgender People</b> (People who are proposing to undergo, are undergoing, or have undergone a process [or part of a process] to reassign their sex by changing physiological or other attributes of sex)	✓		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

There is limited research on how many transgender people experience abuse in the UK, and the best studies have small group samples. However, these figures suggest it is a significant issue. A report by the Scottish Transgender Alliance indicates that 80% of trans people had experienced emotional, sexual, or physical abuse from a partner or ex-partner.

Abuse can be as a result of the process of ‘coming out’ perpetrated by partners, family members or friends. This is especially difficult where there are children involved.

**What action(s) can you take to address the differential impact?**

Those who have undergone, or are undergoing, gender reassignment can access the full range of preventative, protective and support services available in this region. Specialist service providers are required to have clear policies and procedures in place for managing transgender victims, especially in shared accommodation-based settings and in any group work – both in terms of keeping the victim safe and managing any impact. Where necessary, dispersed accommodation can be used to ensure additional safety.

Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**3.4. Marriage and Civil Partnership**

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on marriage and civil partnership?

	Yes	No	N/A
Marriage		✓	
Civil Partnership		✓	

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

No impacts identified

**What action(s) can you take to address the differential impact?**

N/A

**3.5 Pregnancy and Maternity**

Will this Policy /Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on pregnancy and maternity?

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	Yes	No	N/A
Pregnancy	✓		
Maternity	✓		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

Pregnancy when coupled with domestic abuse or sexual violence is a form of intimate partner violence (IPV) where health risks may be amplified. Abuse during pregnancy, whether physical, sexual, verbal or emotional, produces many adverse physical and psychological effects for both the mother and foetus. It increases the risk of miscarriage, infection, premature birth, low birth weight, foetal injury and foetal death (Refuge website). Such impacts on the mother can also affect their ability to appropriately feed, care for and form a positive attachment to the newborn baby. Over a third of domestic violence starts or gets worse when a woman is pregnant (Refuge website). More than 30% of this abuse starts in pregnancy, and existing abuse may get worse during pregnancy or after giving birth (NHS website).

**What action(s) can you take to address the differential impact?**

Within Cardiff is a funded service to specifically address the provision of violence against women, domestic abuse and sexual violence that is impacting on a victim's own wellbeing and on their capacity to form positive attachments and effectively parent their children. The service will support those who are, or have recently been, pregnant or have children aged 0-5 years and it works with Health Visitors through Flying Start and a variety of Families First funded services, especially the Early Help Front Door service. This model could be replicated across the region.

The Health-based IDVA can support those who are pregnant and are experiencing VAWDASV both on-site in hospital settings or elsewhere in the community. Those who are pregnant are also discussed at MARAC meetings as they have a higher risk of further abuse.

Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**3.6 Race**

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on the following groups?

	Yes	No	N/A
White	✓		
Mixed / Multiple Ethnic Groups	✓		
Asian / Asian British	✓		
Black / African / Caribbean / Black British	✓		
Other Ethnic Groups	✓		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

BME men, women and children's experience of violence can be shaped by their relationship to 'culture'- this can define their experiences of violence and abuse; their relationship with 'communities' (including gypsies and travellers), and their access to services and the types of



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services they made need or want. Additional barriers to support may be experienced by BME people due to the impact of discrimination, racism and immigration status. Partners acknowledge the need for specialist support for BME people relating to prevention, protection and support informed by expert understanding of specific needs of BME men, women and children experiencing violence against women, domestic abuse and sexual violence.

**What action(s) can you take to address the differential impact?**

Identifies need for sensitive and appropriate services for all victims but specifically for those from a BME background who may experience additional barriers that may affect their ability to seek help and support and may have additional needs. Highlights that provision of language support for other minority languages should also be facilitated.

Delivery of all preventative, protective and support services in the region offers help to those of any race, providing sensitive and appropriate services for all victims but specifically from those from a BME background who may face additional issues. Specialist services in the region are responsive to the individual differences presented by victims and tailor services accordingly, including in the range of languages spoken by staff.

Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**3.7 Religion, Belief or Non-Belief**

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [negative]** on people with different religions, beliefs or non-beliefs?

	Yes	No	N/A
Buddhist	✓		
Christian	✓		
Hindu	✓		
Humanist	✓		
Jewish	✓		
Muslim	✓		
Sikh	✓		
Other	✓		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

A victim’s religious or spiritual beliefs can be central to their understanding and response to abuse. A victim’s own faith and the support of other faith-based members can be key to helping the healing process, while a lack of understanding regarding the religious perspective on abusive relationships by the victim or those they may turn to for spiritual guidance and support can add to the emotional, physical and financial hurdles already faced. Many victims in abusive relationships can feel they ought to submit to their spouses out of duty, that they have no right over their own body, life or even opinions. Quite often this misconception is furthered by advice from clergy, elders, rabbis or other members of the congregation.

However for those who do find some comfort in attending their usual place of spiritual or

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religious guidance, there is often the impediment of being accommodated in a place of safety far removed from their local community or needing to avoid the recognition of local community members and seeking solace elsewhere.

**What action(s) can you take to address the differential impact?**

All partners delivering any form of preventative, protective or supportive service are responsive to the individual differences presented by victims of any religious belief and tailor services accordingly. Where necessary, individual actions regarding religious observation can be included and facilitated through individual support plans and the provision of prayer rooms in emergency/crisis accommodation. Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**3.8 Sex**

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on men and/or women?

	Yes	No	N/A
Men	✓		
Women	✓		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

Violence against women, also known as gender-based violence, is, collectively, violent acts that are primarily or exclusively committed against women. Sometimes considered a hate crime this type of violence targets a specific group with the victim's gender as a primary motive, meaning that the acts of violence are committed against women expressly because they are women. The UN Declaration on the Elimination of Violence Against Women states that "violence against women is a manifestation of historically unequal power relations between men and women" and that "violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men." Kofi Annan, Secretary-General of the United Nations, declared in a 2006 report posted on the United Nations Development Fund for Women (UNIFEM) website that "violence against women and girls is a problem of pandemic proportions. At least one out of every three women around the world has been beaten, coerced into sex, or otherwise abused in her lifetime with the abuser usually someone known to her."

It is estimated that around 3 million women across the UK experience rape, domestic violence, forced marriage, stalking, trafficking and sexual exploitation and other forms of violence every year. This is the equivalent to the entire population of Wales (Report to the Secretary General 2006). Approximately 69,000 women in the UK are victims of rape or attempted rape each year (Crime Survey of England and Wales 2013/14). 1 in 5 women in the UK have experienced some form of sexual violence since the age of 16 (Crime Survey of England and Wales, 2013/14). Approximately 90% of those who are raped know the perpetrator prior to the offence (Crime Survey of England and Wales, 2013). Around one third of all violent crime is 'domestic incident' related (Home Office). Women are also far more likely than men to be killed specifically by partners/ex-partners - 44% of female victims compared with 6% of male victims (Office of National Statistics 2016).

**Equality Impact Assessment  
Corporate Assessment Template**

Although it is acknowledged that women are disproportionately affected by all forms of violence and abuse, men are also victims whether the abuse is perpetrated by a female or a male. It is estimated that in 2010/11 up to 1.2 million women and 800,000 men were victims of domestic abuse (7% and 5% of the population respectively). (Crime Survey for England and Wales). While the Crime Survey collects data on victims, it does not collate information on those who perpetrate crimes. However, in the area of domestic abuse, Scotland collects information on both the "abuser" and the "abused". Since 2002 Scotland's police forces have been producing gender-specific data. From the Scottish Executive's most recent statistics, in 2011/12 there were 59,847 incidents of domestic abuse. In 9,569 incidents (17% of the total) a man had been abused by a woman. We can compare this with the 659 incidents in which the victim and the perpetrator were both male (1% of the total).

**What action(s) can you take to address the differential impact?**

All services in the region are required to be informed by a gendered understanding of violence against women, domestic abuse and sexual violence to reflect the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) 2015 Act.

Within Cardiff, a specialist service for female victims has been procured following consultation with survivors. This service will deliver a One-Stop-Shop service, accommodation-based support and a range of community-based support services. In the Vale of Glamorgan, their specialist service provider delivers a more family oriented service, delivering perpetrator and wrap-around programmes with targeted interventions to support members of the whole family. Ongoing regional working will allow monitoring of these services and replication across the region through joint commissioning processes. Initially, consideration is being given to commissioning a male victim's service; this is being explored between Cardiff and the Vale of Glamorgan and other South Wales local authority partners.

Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**3.9 Sexual Orientation**

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive]** on the following groups?

	Yes	No	N/A
Bisexual	✓		
Gay Men	✓		
Gay Women/Lesbians	✓		
Heterosexual/Straight	✓		

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

Women and men can be abused by former heterosexual partners or family members; perhaps after they have come out for the first time and enter their first same-sex relationship. In some cases, abusers will use the process of 'coming out' as an additional form of control. This is especially difficult where there are children involved.

**Equality Impact Assessment  
Corporate Assessment Template**

Stonewall’s research into the health needs of lesbian and bisexual women, *Prescription for Change*, has found:

- One in four lesbians and bisexual women have experienced domestic abuse in a relationship. Two thirds of those say the perpetrator was a woman, a third a man.
- One in four of the general female population has experienced domestic abuse
- Four in ten (39%) lesbians and bisexual women with a disability have experienced domestic abuse in a relationship.
- More than four in ten (44%) lesbians and bisexual women who have experienced domestic abuse experienced this for more than one year

Stonewall’s Gay and Bisexual Men’s *Health Survey* demonstrates that:

- Half (49%) of all gay and bisexual men have experienced at least one incident of domestic abuse from a family member or partner since the age of 16.
- One in six (17%) men in general have experienced domestic abuse from a family member or partner since the age of 16
- Almost two-thirds (63%) of gay and bisexual men with a disability have experienced at least one incident of domestic abuse from a family member or partner since the age of 16.
- More than one in three (37%) gay and bisexual men have experienced at least one incident of domestic abuse in a relationship with a man.
- Almost one in four (23%) gay and bisexual men have experienced at least one incident of domestic abuse from a family member.
- 7% of gay and bisexual men have experienced at least one incident of domestic abuse from a woman, 39% of these experienced some form of physical violence.
- Four in ten (41%) gay and bisexual men who have experienced domestic abuse experienced this for more than a year.

**What action(s) can you take to address the differential impact?**

The region has a specialist LGBT IDVA service operated by Victim Support. However, numbers of all victims who are LGBT remain low and there is a need to widen awareness that all services are inclusive. Partners recognise a need to engage more with representative organisations.

Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**3.10 Welsh Language**

Will this Policy / Strategy / Project / Procedure / Service / Function have a **differential impact [positive / negative]** on Welsh Language?

	Yes	No	N/A
Welsh Language		✓	

**Please give details/consequences of the differential impact, and provide supporting evidence, if any.**

Victims, as with anyone else, should be able to express a language preference when contacting or working with services.

**What action(s) can you take to address the differential impact?**

**Equality Impact Assessment  
Corporate Assessment Template**

For all those approaching services for help, the need to facilitate responses to initial enquiries in the Welsh language and to ensure that all publicity materials are bilingual, is essential. This is obligatory for all public services but the response of third sector services is proportionate, depending on the level of service being delivered.

Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**4. Consultation and Engagement**

What arrangements have been made to consult/engage with the various Equalities Groups?

A number of key partners took part in the development of the strategy; a Regional Strategy Development Group was established, comprising senior officers from both Cardiff and Vale of Glamorgan Councils, Health, each of South Wales Police’s Basic Command Units, Officers representing the South Wales Police and Crime Commissioner and both the Cardiff and Vale Domestic and Sexual Abuse Coordinators. The Group was responsible for developing the vision and aims and detailing the scope and structure of the document. The chapter on Pursue was felt to be an important factor in acknowledging that there wouldn’t be any victims without perpetrators, and tackling this issue was just as important as protecting and supporting victims. The Regional Strategy Development Group was fortunate to have two representatives from the Welsh Women’s Aid’s SEEdS project (Survivors Empowering and Educating Services) join them. Input from survivors in this way has been extremely beneficial and influential in shaping the direction of the strategy document and in helping to sharpen its contents.

The strategy was circulated widely for consultation on 19th March for 8 weeks. A ‘strategy on a page’ version was circulated alongside the full document so that staff within partner organisations could get a sense of what was being addressed. A further version of the ‘strategy on a page’ was produced for the public and circulated via Facebook and Twitter.

**5. Summary of Actions [Listed in the Sections above]**

Groups	Actions
Age	Closer working with the Regional Safeguarding Childrens and Adults Boards
Disability	Improved first point of access and referral pathways to specialist services
Gender Reassignment	Specialist providers to have clear policies and procedures
Marriage & Civil Partnership	N/A
Pregnancy & Maternity	Continual improvement of links between Health and specialist support services
Race	Widen awareness of additional considerations relating to support needs
Religion/Belief	Use of individual support plans to acknowledge religious observation
Sex	Training of all staff in the gendered understanding of VAWDASV
Sexual Orientation	Improved engagement with representative organisations to raise awareness of services

CARDIFF COUNCIL

Equality Impact Assessment  
Corporate Assessment Template

Welsh Language	Production of bilingual publicity and wider service accessibility options
Generic Over-Arching [applicable to all the above groups]	Specific actions relating to Age (older and young people), BME, LGBT, and Sex are addressed in the Strategy through the 'We Will' commitments and detailed more fully in the strategy's accompanying action plan. Provision for equality and diversity will be a key criteria in ongoing performance monitoring of all partners to ensure that no groups are unduly disadvantaged or impacted.

**6. Further Action**

Any recommendations for action that you plan to take as a result of this Equality Impact Assessment (listed in Summary of Actions) should be included as part of your Service Area's Business Plan to be monitored on a regular basis.

**7. Authorisation**

The Template should be completed by the Lead Officer of the identified Policy/Strategy/Project/Function and approved by the appropriate Manager in each Service Area.

Completed By : Natalie Southgate	Date:
Designation: Improvement Project Manager – Gender Specific Services	15/04/18
Approved By: Jane Thomas	
Designation: Assistant Director Housing and Communities	17/05/18
Service Area: Housing & Communities	

7.1 On completion of this Assessment, please ensure that the Form is posted on your Directorate's Page on CIS - *Council Wide/Management Systems/Equality Impact Assessments* - so that there is a record of all assessments undertaken in the Council.

**CYNGOR CAERDYDD  
CARDIFF COUNCIL**

**COMMUNITY & ADULT SERVICES SCRUTINY COMMITTEE**

**6 JUNE 2018**

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**CARERS – ASSESSMENT & ENGAGEMENT BRIEFING**

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**Purpose of Report**

1. To provide Members with an overview of scrutiny to date on carers assessments and engagement with carers.

**Background**

2. The Social Services and Well-being (Wales) Act 2014 came into force in April 2016 and included significant changes for carers including new rights and new duties on local councils.
3. The Act means that<sup>1</sup>:
  - The definition of a carer is broader and includes more people, that means that more carers are entitled to carer's assessments and support plans
  - Carers no longer have to request an assessment, local authorities must offer assessments where they believe a carer has a need for support
  - Staff must promote the well-being of carers who need support
  - Local authorities must assess the needs of carers in their area and submit a plan to Ministers on how they will meet these needs

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<sup>1</sup> Source - <https://carers.org/legislation-affecting-carers-wales>

- A carer now has an enforceable right to support from the local authority when they meet the eligibility criteria
  - There is a greater focus on the role of local third sector organisations in providing services and support
4. Following the meeting of this Scrutiny Committee on the 6 September 2017 where Members considered Quarter 1 Performance, the Chair wrote to the Portfolio holder and stated that:

*The Committee were encouraged to hear that a dedicated team for carers had been expanded, but acknowledged the challenges the Service still faces in terms of assessing carers, identifying need and delivering appropriate services. Members would therefore wish to receive, during 2017/18, a briefing to Committee on the following:*

- *An overview of the carer assessment process – what does it look like;*
  - *A summary of the range of carers in the City;*
  - *What kinds of assistance are being requested;*
  - *The challenge of increasing numbers of carers being identified;*
  - *What is being done to tap into those people who do not currently identifying themselves as “formal” carers; and*
  - *The outputs/key messages arising from the qualitative data that the Service is currently collecting.*
5. On drawing up the Committee’s 2017/18 work programme, Cllr Asghar Ali suggested that there was much hardship amongst many BME carers – both financially and emotionally. They were often unaware of benefits and assistance they were entitled to. In addition, culturally, they may not feel they could tap into resources, seeing their role as carer as a role they play in the family. Communicating entitlements and reaching out to people was seen as critical in ensuring quality of life for carers and their families.



## Way Forward

6. At this meeting, the following witnesses will be in attendance:
  - (i) Councillor Susan Elsmore (Cabinet Member – Social Care, Health & Well-Being);
  - (ii) Sarah McGill, Corporate Director for People and Communities; and
  - (iii) Sue Schelewa (Operational Manager, Locality Services)
  
7. Following a presentation, Members will be able to decide if they wish to feed any comments, observations or recommendations to the Cabinet Member for their consideration.
  
8. Members of this Scrutiny Committee have previously been involved in a range of pre-decision and policy development activities with this issue including Directorate Business Plans; and quarterly PI results via the Committee's Performance Panel. Other items include:
  - September 2012 - Carers' Information & Consultation Strategy 2012-15
  - May 2013 - Carers Inquiry Report
  - April 2015 - Adult Carers of Adults – Update Report
  - June 2015 - Carers Update

## Legal Implications

9. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person

exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

### **Financial Implications**

10. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

### **RECOMMENDATION**

It is recommended that the Committee note presentation made at this meeting, and consider the future scrutiny of this item.

**DAVINA FIORE**

**Director of Governance and Legal Services**

**31 May 2018**

**CYNGOR CAERDYDD  
CARDIFF COUNCIL**

**COMMUNITY & ADULT SERVICES SCRUTINY COMMITTEE**

**6 JUNE 2018**

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**COMMUNITY & ADULT SERVICES SCRUTINY COMMITTEE ANNUAL REPORT  
2017-18**

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**Background**

1. The Cardiff Council Constitution requires all Scrutiny Committees to *'report annually to the Council on their workings and make recommendations for future work programmes and amended working methods if appropriate'*.
2. A copy of the Community & Adult Services Scrutiny Committee's draft Annual Report 2017-18 is attached at **Appendix A**. This report outlines the Committee's activities from June 2017 through to May 2018, and provides examples of the various types of scrutiny undertaken.
3. The report concludes by setting out topics that the Committee may like to include in its 2018-19 work programme as suitable priorities for future scrutiny examination. The Committee will be agreeing its work programme in the coming weeks and these items will be discussed as part of this process.

**Legal Implications**

4. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council

must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances

### **Financial Implications**

5. There are no financial implications arising directly from this report.

### **RECOMMENDATION**

The Committee is recommended to consider, if necessary amend, and approve the attached draft Community & Adult Services Scrutiny Committee Annual Report 2017-18 to be laid before Council.

**DAVINA FIORE**

**Director of Governance and Legal Services**

**31 May 2018**

scrutiny



# A Report of: Community & Adult Services Scrutiny Committee

Annual Report 2017 – 2018



This document is available in Welsh / Mae'r ddogfen hon ar gael yn Gymraeg

# COMMUNITY & ADULT SERVICES SCRUTINY

## COMMITTEE MEMBERSHIP



[Councillor Ali Ahmed](#)



[Councillor Joe Carter](#)



[Councillor Asghar Ali](#)



[Councillor Susan Goddard](#)



(Chairperson)  
[Councillor Mary McGarry](#)



[Councillor Shaun Jenkins](#)



[Councillor Kathryn Kelloway](#)



[Councillor Sue Lent](#)

## TERMS OF REFERENCE OF THE COMMUNITY & ADULT SERVICES SCRUTINY COMMITTEE

To scrutinise, measure and actively promote improvement in the Council's performance in the provision of services and compliance with Council policies, aims and objectives in the area of community and adult services, including:

- Public and Private Housing
- Disabled Facilities Grants
- Community Safety
- Neighbourhood Renewal and Communities Next
- Advice & Benefit
- Consumer Protection
- Older Persons Strategy
- Adult Social Care
- Community Care Services
- Mental Health & Physical Impairment
- Commissioning Strategy
- Health Partnership

To assess the impact of partnerships with and resources and services provided by external organisations including the Welsh Government, joint local government services, Welsh Government-sponsored public bodies and quasi-departmental non-governmental bodies on the effectiveness of Council service delivery.

To report to an appropriate Cabinet or Council meeting on its findings and to make recommendations on measures which may enhance Council performance and service delivery in this area.

To be the Council's Crime and Disorder Committee as required by the Police and Justice Act 2006 and any re-enactment or modification thereof; and as full delegate of the Council to exercise all the powers and functions permitted under that Act.

## CHAIR'S FOREWORD

DRAFT



**Councillor Mary McGarry**  
**Chair, Community & Adult Services Scrutiny Committee**



## OVERVIEW

The Community and Adult Services Scrutiny Committee plays an important role in assessing service performance and informing service and policy development across a range of Council services, including all aspects of housing, neighbourhood renewal and adult social care. The Committee is also the Council's crime and disorder scrutiny committee.

One of the main aims of this Committee is to look at things from a service user and citizen perspective and use this to inform our observations and recommendations to the Cabinet. We have invited contributions to our work from carers, advocates, citizens, partners and the third sector as well as hearing from Council Members, officers, statutory organisations and feedback from service users.

Between June 2017 and May 2018, the Committee scrutinised the following topics:

- **Pre decision** - Where the Committee has evaluated and commented on policy proposals prior to Cabinet, giving Cabinet the opportunity to know Scrutiny Members' views prior to making their decision:
  - Cardiff's Night Time Economy Strategy 2017-22
  - Single Licensing Authority Enforcement Policy
  - Housing Revenue Account Business Plan 2017-18
  - Proposal to develop a Regional Social Care Training Unit for Cardiff & the Vale of Glamorgan (WDTU)
  - Development of a City Wide Employability Provision and a new approach to building Resilient Communities
  - Domiciliary Care Procurement
  - Supporting People Local Delivery Plan
  - Corporate Plan
  - Budgetary Proposals
  - Cardiff & Vale Area Plan for Care & Support 2018-23
  - HRA Business Plan 2018/19
  - Extension Of Contracts In Relation To The Supported Living Provision For Adults With A Learning Disability

- Building Resilient Communities Through The Further Development Of Community Hubs
  
- **Policy Development/Review** - Where the Committee has contributed to policy development processes, for example by considering draft policy documents, and/or where the Committee has considered the implementation of policies, looking at whether this has happened in a timely manner and the impact of the policy, giving the Cabinet the opportunity to know Scrutiny Members' views about whether any changes are required:
  - Cardiff & Vale draft Dementia Strategy 2017-27
  - Homelessness & Housing Need
  
- **Monitoring Progress** - Where the Committee has undertaken monitoring of the Council's progress in implementing actions previously agreed:
  - Council House Voids – 12 Month Review
  - Information, Advice & Assistance Update
  
- **Monitoring Performance** - Where the Committee has undertaken monitoring of the Council's performance:
  - Communities & Housing Directorate Delivery Plan 2018/19
  - Social Services Directorate Delivery Plan 2018/19
  - Quarterly Performance Reports – Adult Social Services; and Communities and Housing
  
- **Briefing Papers**
  - Proposed Developments for Community Mental Health Services
  - Independent Living Services
  - Lettings Policies in High Rise Blocks
  - Winter Pressures

Over the year, the Scrutiny Committee held 10 committee meetings and wrote 22 letters to the Cabinet, officers and external partners, sharing their comments, recommendations and concerns following the scrutiny of items at committee meetings. Members formed a Performance Panel, which has held 4 meetings this municipal year.

## **IMPLEMENTING WALES AUDIT OFFICE RECOMMENDATIONS 2017/18**

When setting the work programme for 2017/18 Members agreed that, to aid in focussing the agendas more effectively and maximising the impact of the scrutiny of each item at Committee, Members would adapt the way that issues would be scrutinised in the future. In particular, Committee meetings would aim to last no more than 3 hours, which equates to approximately 2 substantial items and 1 smaller item, as recommended by the Wales Audit Office.

Webcasting facilities are in place in County Hall and in the City Hall Chamber, enabling some Scrutiny committee meetings, Planning committee meetings and Full Council meetings to be webcast. Until 31 March 2018, no CASSC meetings were webcast, but this was due to location of Committee meetings. The June 2018 meeting of CASSC will be webcast.

### **COMMITTEE MEMBER DEVELOPMENT**

Scrutiny is a Member-led function whose success is closely linked to the capacity and development of the Members that sit on Scrutiny Committees. The Scrutiny Team therefore worked closely with colleagues across the Council to provide a continuous range of opportunities for Members to build or refresh their Scrutiny skills, and to extend their knowledge and insight into a range of issues relevant to their Scrutiny role.

In May 2017 elections were held for the whole Council which resulted in a considerable number of new Councillors. To aid the new Councillor in an initial understanding of the scrutiny service and support provide by the Council, the service provided a scrutiny stall at the induction session for all Members in May 2017.

Following Council's approval of the Chairmanship and Membership of each of the five scrutiny Committee's, Scrutiny services organised a programme of training events to enable the new Scrutiny members to gain an overview and understanding of their roles, activities and scrutiny processes. This included:

- Introduction to Scrutiny – June 2017
- Chairing Skills – June 2017
- Questioning Skills – July 2017
- Budget Training – February 2018

## **POLICY DEVELOPMENT AND PRE-DECISION SCRUTINY**

Members have undertaken a significant amount of pre-decision scrutiny and policy development work in respect of Social Care, Communities and Housing issues as well as Community Safety and Crime and Disorder scrutiny. Details of some of these are provided below and in the next section; a full list of the topics covered is provided earlier on pages 5 and 6.

When considering pre-decision, Members are advised to:

- i) look at the information provided in the report to Cabinet to see if this is sufficient to enable the Cabinet to make an informed decision;
- ii) check the financial implications section of the Cabinet report to be aware of the advice given;
- iii) check the legal implications section of the Cabinet report to be aware of the advice given;
- iv) check the recommendations to Cabinet to see if these are appropriate.

### **Housing Revenue Account Business Plan**

During 2017/18, the Committee considered both the 2017/18 Plan (July 2017) and 2018/19 Plan (March 2018). Both reports covered:

- Maintenance of the Wales Housing Quality Standard (WHQS)
- New Build Housing Programme, including the Cardiff Living Partnership
- Delivering Energy Efficiency
- Remodelling and Refurbishment of existing homes
- Estate Regeneration
- Fire Safety Works (2018/19, following the Grenfell disaster)
- Neighbourhood Regeneration and Area Improvements
- Community Hubs
- Support for tenants, including participation, consultation and supporting vulnerable tenants
- Community Hubs

Following consideration of the 2018/19 Plan, Members agreed that the Business Plan was an excellent reflection of the progress made by Members and officers, and provided a clear, concise picture of the growth in the Service to date, as well as setting out commitments going forward. Members were extremely pleased by the commitment to provide 2000 new homes during the next 10 years and commended the other avenues taken in maximising the options available in terms of bringing homes into Council ownership.

Members requested that they would wish to receive further information on the 400 properties that are not part of the Cardiff Living developments. Members felt that this should include any implications arising from the procurement process, as they noted that the Cardiff Living Scheme had taken 2 years to secure, so would seek reassurance on what will happen regarding developments provided by other developers.

Members stated that they were disappointed that other energy efficiency measures had not been explored in relation to new builds, such as solar panels. Whilst they appreciated the range of measures that would be installed, they commented that measures to tackle fuel poverty should also be investigated.

*No Response required – Members requested that the above issues be considered during 2018/19*

## **Private Rented Sector Housing – Single Licensing Authority Enforcement Policy**

Following a number of scrutinies over a number of years in relation to Private Rented Sector Housing, in July 2017, Members considered a report setting out Rent Smart Wales' requirement to implement an Enforcement Policy to promote efficient and effective approaches to its' regulatory activities. The Policy aims to promote clarity and consistency across Wales on the standards to be applied. The Policy states that it wishes to do this '*without placing too heavy a burden on landlords, managing agents and tenants*'.

Members were pleased to hear of the success of Rent Smart Wales, and that (as at July 2017) 80,000 landlords had registered 164,000 properties under the mandatory provisions

within the Housing (Wales) Act 2014. Members were content that the proposed Single Licensing Enforcement Policy had been constructed in consultation with all Welsh local authorities, to ensure there is minimal conflict with their own local enforcement policies. The Committee acknowledged that, as Cardiff has by far the greatest number of privately rented properties in Wales, it is a natural home for Rent Smart Wales, and development of the Single Licensing Enforcement Policy. Members stated that they would monitor the progress of Rent Smart Wales and the Single Licensing Enforcement Policy in tackling the 20% of landlords and agents that remain noncompliant.

*No Response required – Members requested that the above issues be considered during 2018/19*

## **A New Approach to building Resilient Communities**

The Committee considered this issue twice during 2017/18 – in November 2017 and May 2018, both as pre-decision Items.

In November 2017, Members considered how services would be commissioned, following the cessation of Communities First. At that juncture, it was proposed that future services be targeted towards:

- City Wide Health and Well Being Service
- Pathways to Learning
- A city wide approach to Community Engagement and Involvement

At that time, Members raised concerns in relation to:

- Implementing a set of workable arrangements, within a vastly decreased budget.
- Seeking further support to community groups and volunteers to free them up to carry out the role they had been tasked to do, with the Council or partners providing support - providing venues and facilities; financial management and monitoring support; assistance with the governance arrangements etc.

In May 2018, Members received a further report on “*Building Resilient Communities through the Further Development of Community Hubs*”. This included:

- The Development of Community Wellbeing Hubs
- A New Approach to Community Engagement Anchored in the Hubs
- Further Development of Central Library Hub

Members were particularly pleased with the further roll-out of the Hub programme into areas that had not been previously considered as part of the original programme, therefore reaching a wider range of people and communities across the City.

Members were assured by the news that the proposals will be applied consistently across the City and that the development of community hubs would be of equal value in each area.

Members noted and supported the need for rigorous community engagement within each area and were assured that the community will decide what services go into the Hub. Members felt that community engagement was absolutely essential in the success of the roll out of the Hub Programme.

However, Members were concerned with the lack of detail in terms of how the programme will be financially supported and sustained in both capital and revenue terms. Members requested that further details be provided to the Committee, when available.

The Committee were particularly concerned about staff affected by the proposals - whilst Members were informed that job losses would be minimal, they were still disappointed that this proposal would result in such.

*No Response required – Members requested that the above issues be considered during 2018/19*

## Domiciliary Care Procurement

In Cardiff, domiciliary care is currently commissioned and provided via a Dynamic Approved Provider List (DAPL), supported by an IT system (called Adam) that underpins the processes of procuring and managing domiciliary care packages. Each care package goes through a 'mini-tender' process where interested approved providers submit a bid containing their price and detailing how they will meet the client's outcomes. Mini-tenders are evaluated on price and quality, which are weighted 50/50, the quality element of which includes an evaluation of how the provider states that they will meet the client's outcomes.

The contracts for the DAPL and Adam IT system are due to expire on 3 November 2018. The report to Cabinet, stated that '*The Council intends to enter into a new arrangement with providers for commissioning domiciliary care to become effective no later than 4<sup>th</sup> November 2018.*'

Members considered this issue in January 2018. Members queried whether an options appraisal had been undertaken and requested that a formal options appraisal document be provided.

Members were provided with a briefing paper (dated 1<sup>st</sup> February 2018) which set out an overview of benefits and risks in relation to the following options considered by the Council:

- Dynamic Approved Provider List (DAPL)
- Framework
- Hybrid (Framework + DAPL)
- The Council directly delivers all domiciliary care

Council officers concluded that the proposed approach should be to continue with the DAPL beyond November 2018.



## Supported Living Provision

In April 2018, Members considered *“Extension of Contracts in Relation to the Supported Living Provision For Adults With A Learning Disability”*.

The agreed model in relation to this service utilised a block contract for a fixed term of three years with the option to extend for a further period or periods equating to no more than two years provided that the contract does not extend beyond 31 July 2020. The proposal to Cabinet was for it to approve an extension to the current contractual arrangements.

Members were very pleased on the work done both in-house and by approved contractors in delivering this Service. Members were satisfied with the rigorous monitoring and review undertaken in ensuring that the service is delivered effectively with a particularly vulnerable group of people, and applauded the range of services offered across a wide range of need. The news that only 2 complaints out of around 320 service users was testimony to this, and the work undertaken by the officer and her team in planning for potential new users coming into the system was to be commended.

Members stated they would be interested to receive more information on those people who are currently in out-of-county placements. Members are keen to understand the scale of this, including how many people are currently supported out-of-county and what types of support are offered in out-of-county settings that cannot be offered within Cardiff.

Members felt that, whilst there is a desire to bring some people back into the area, they were concerned that doing so may be to the detriment of an individual’s wellbeing. An anonymised breakdown of cases would be welcomed by Committee Members to enable them to better understand the out-of-county issue.

*No Response required – Members requested that the above issues be considered during 2018/19*

The Well-being of Future Generations (Wales) Act 2015 inserted section 14A into the Social Services and Well-being (Wales) Act 2014 which requires local authorities and local health boards to prepare and publish a plan (the Area Plan) setting out the range and level of services they propose to provide, or arrange to be provided, in response to the Population Needs Assessment (PNA).

The Area Plan and supporting Action Plan, considered by Members in March 2018, provided the response of the Cardiff and Vale of Glamorgan Regional Partnership Board (CVGRPB) to the findings of the regional Population Needs Assessment (PNA), published on 31st March 2017. The Plan had been prepared on the basis of a 5 year period in line with the requirements for the preparation of a PNA.

The Area Plan and corresponding Action set out an overview of how the Plan has been developed, following the Population Needs Assessment, which took place between February 2016 and January 2017. In addition, the Plan set out how it contributes towards local and national objectives and outcomes; and how the Plan will be monitored and reviewed.

Members agreed that the Action Plan provided a clear commitment towards more joined-up working, as well as drawing together the breadth of work that is already happening across the RPB and beyond. Members felt that the Plan was very clearly set out, easy to read, and appreciated the clear links with Wellbeing Objectives, Social Services Outcomes and Capital Ambition.

Overall, the Committee stated that it would be very interested to monitor the implementation of the Area Plan and Action Plan during the coming year and, in line with the issues raised in this letter, would be particularly keen to receive updates on the following issues:

- Clarity of Governance Arrangements/Structures
- Updates/progress on the implementation of priorities that fall under the remit of this Scrutiny Committee, including those being delivered by Partners
- An update on any Plan on Asylum Seekers and Refugees
- Update on how consultation and engagement methods have been streamlined

*No Response required – Members requested that the above issues be considered during 2018/19*

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## MONITORING PROGRESS

During 2017/18, the Committee received Progress Reports on two issues it had previously scrutinised as Inquiries and had raised a number of concerns and recommendations.

### Council Housing Voids

In 2015/16, the CASSC Performance Panel undertook a “deep dive” into council housing voids management, following poor performance over several years on the average time taken to re-let council housing voids.

The Performance Panel met four times to undertake the deep dive, examining:  
good practice;

- available void performance indicator information;
- benchmarking information;
- key lessons from tenant-led scrutinies in England;
- relevant Cardiff Council procedures and processes; and visiting a number of void properties to see the conditions in which properties are handed back to the Council and the standard that is reached before properties are re-let

The Performance Panel produced a report, arising from the deep dive, which contained sixteen recommendations, all of which were accepted. The Committee had requested further updates on the implementation of improvements.

Members received an update in December 2017 and were pleased to see a significant improvement in performance in relation to the turnaround of Voids. They also received an update on new contractual arrangements that would be in place from January 2018. Members appreciated the “heads up” from officers on the probable “dip” in performance as the Council moves from one set of arrangements to another. This will be taken into consideration by the Committee’s Performance Panel going forward, but will also be monitored closely as the new arrangements settle down.

Members were satisfied with the improved arrangements for monitoring turnarounds, with 5 “types” of monitoring. They request that, in future, these be reported to Members by “type” so that a detailed picture can be presented.

Members were also pleased with the refreshed customer care/complaints procedure, as well as the performance deductions written into the new contracts. Following a discussion on complaints (particularly around contractors leaving mess outside empty properties) and the importance of Members’ role in assisting in the reporting of complaints, Members request that a message be sent to all Members setting out how they can be proactive in the reporting of issues, particularly in the coming months as new contractors take over the work.

## Information, Advice and Assistance

During 2015, Members from this Scrutiny Committee undertook an Inquiry into **“Information, Advice and Assistance for Mental Health Service Users in Cardiff”** in light of the new requirement of the Social Services and Well Being (Wales) Act 2014 for local authorities to ensure provision of IAA services.

The Inquiry made 10 recommendations to the Cabinet, which covered:

- Approaches to Implementation
- Improving Accessibility
- Training
- Monitoring

The Cabinet agreed their response at its meeting in May 2016, with this Scrutiny Committee considering its response on the 8 June 2016. At that time:

- 0 - of the recommendations were accepted.
- 3 – were partially accepted
- 6 – were not accepted.
- 1- where it was unclear whether it is accepted or not

As part of this Committee's commitment to the ongoing monitoring of the implementation of the Act, Members of this Scrutiny Committee, when setting the Work Programme for the current year, agreed that they would wish to receive an update on Information, Advice & Assistance (IAA) at an appropriate juncture.

In April 2018, Members received an update and commended the work done to date on developing the IAA Service. Members stated that they looked forward to receiving further updates as the service continues to develop into mental health and children's services, as well as developments with Health. Members noted the work being done in preventing people getting into crisis and the strengths based working approach adopted by the Service.

Members were reassured to hear that Hubs were providing a good service and the system is an effective one for anyone seeking IAA under the Act. However, Members felt that there should be an acknowledgement that specialist advice services provide a critical service for vulnerable people (whether under the Act or outside of its scope) and this should be recognised. With this in mind, Members recommended that officers liaise, in the first instance, with Riverside Advice to pick up on some of the points made in their presentation, particularly in relation to the flow of information between the Council and the Advice Centre.

Members were disappointed that recommendations arising from the Scrutiny Report on IAA were not used for further developing the service for mental health users. Members would encourage a review of the findings of the Inquiry to potentially inform further work with mental health users.

Members of the Committee stated that they would wish to receive a further update at a future meeting setting out what progress has been made in relation to identifying demand for the IAA service. Members were keen to ensure that it is advertised and promoted to encourage take-up of advice and services that many people may not currently be aware of; and to encourage those who do not currently engage in services to be made aware of what is available to them.

Members agreed that they would wish to hear from Social Workers at a future meeting to gauge their views on the culture change and changes to working practices, following the implementation of the Act. In addition, Members would also wish to hear from Service Users in relation to their experiences in using the IAA service. This will be scheduled into the 2018/19 Committee work programme and I will discuss this with you further at an appropriate juncture.

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## COMMUNITY SAFETY AND CRIME & DISORDER SCRUTINY

During 2017-18, Members have undertaken the following work to discharge their responsibilities for scrutinising the work of the Crime and Disorder Partnership and community safety in Cardiff:

### Cardiff's Night Time Economy Strategy 2017-22

In November 2017, Members considered the "Delivering a Safe and Welcoming Night Time Economy" Plan 2017-22 which had been developed in partnership through a Night Time Economy Steering Group, which is a sub-group of the Safer & Cohesive Communities Programme Board, which itself sits underneath the Cardiff Public Services Board.

Members were pleased by the commitment taken by the Council and its partners to take forward this vitally important issue for Cardiff.

The Committee acknowledged the ongoing challenges faced in terms of funding, but Members stated that they would wish to see a commitment and a sign up to funding arrangements across the partnership, at the earliest opportunity, to ensure the ambitions set out in the Strategy document can be achieved.

Members were concerned about the issue of homeless people not taking up beds in hostels in the City, particularly due to safety fears. Members stated that they felt that this had been an ongoing problem for a number of years, so would request further information on how this is being tackled, to allow street homeless to have the opportunity of a bed and feel safe in a hostel.



## Preventing Young People's Involvement in Drug Dealing

In September 2017, Members agreed to take part in a joint Scrutiny Inquiry with the Children & Young People Scrutiny Committee looking at the effects of drug dealing on young people in Cardiff. Councillors McGarry and Kelloway from this Committee sit on the Task Group.

As this Committee is responsible for the scrutiny of crime and disorder, it was agreed that part of the Inquiry would include looking at the working arrangements of the Safer & Cohesive Communities Work stream of the PSB in relation to this issue.

The Terms of Reference for the Inquiry are to:

### Identify & Investigate

- The contributing factors that give rise to young people becoming involved in gang related drug dealing & knife crime in the city
- The positive contributing factors that communities can put in place to protect and prevent young people becoming involved gang related drug dealing & knife crime in the city
- Determine the effectiveness of current policies and services in protecting and preventing young people becoming involved gang related drug dealing & knife crime in the city
- Identify good practice
- Determine how best statutory agencies can work with communities to ensure they are informed about services and support available and are confident to report concerns
- Make recommendations to be taken forward to the Safer & Cohesive Communities Programme Board

It is anticipated that this Inquiry will take place until the end of June 2018, with the report being considered by both Committees in July 2018.

## **CORPORATE PLAN & BUDGET**

The Council's Constitution allows for scrutiny committees to consider the draft Cabinet budget proposals prior to their consideration by the Cabinet and Full Council. The Committee considered the Council's draft Corporate Plan and draft budgetary proposals for 2018 -19, including their detailed savings proposals and Capital Programme at its meeting in February 2018. It reviewed the draft Corporate Plan and budget savings proposals.

The Committee identified a number of issues across the Corporate Plan, Corporate Budget and Directorate Budget reports. These concerns were included in a letter, sent to the Policy Review and Performance Scrutiny Committee for it to take into consideration when it reviewed the overall Corporate Plan, Consultation and Budget proposals on 13 February 2018 and to the Cabinet for consideration at its meeting on 15 February 2018.

The Committee's letter was considered by Cabinet and Council during their deliberations on the proposals.

## **MONITORING PERFORMANCE**

In response to the Wales Audit Office Corporate Assessment 2014, this Committee established a Performance Monitoring Panel to triage the quarterly performance reports and undertake 'deep dives' as needed, outside of Committee meetings. At a meeting of the Committee in October 2017, two Members agreed to take responsibility for holding quarterly meetings, and if any concerns arose, they would contact the appropriate Cabinet Members/Officers to provide responses either to the Performance Panel, or to address full Committee. To date, the Performance Panel has not raised any particular concerns.

## FUTURE SCRUTINY WORK

During 2017/18, there were a number of issues that had been identified as Items for the Work Programme, but were unable to be considered, due to time pressures. In addition, there were a number of issues that arose from the Committee's deliberation of Items. Therefore, the following may be considered for the 2018/19 Work Programme.

- ❖ Safety in Parks
- ❖ "Designing Out Crime" in New Communities
- ❖ Rough Sleepers Strategy
- ❖ Homelessness & Housing Need Strategy
- ❖ Older People's Accommodation Strategy, to include a briefing from CSSIW on Care Homes in Cardiff
- ❖ Locality Based Working & Neighbourhood Partnerships
- ❖ Well-Being of Staff in Social Care
- ❖ Single Licensing Enforcement Policy Update
- ❖ Cardiff & Vale Dementia Strategy 2017-27
- ❖ Community Mental Health Services Review
- ❖ Review of Safety checks in High-Rise Properties
- ❖ Supporting People Local Delivery Plan
- ❖ Cardiff & Vale Of Glamorgan Area Plan For Care And Support Needs 2018-23
- ❖ Housing – New Build Contractor Procurement
- ❖ Information, Advice & Assistance – User Views
- ❖ Supported Living Services for People with a Learning Disability – Out of County Placements
- ❖ Community & Well Being Hubs Programme
- ❖ Adult Safeguarding, including the Cardiff & Vale Safeguarding Adults Board Annual Report and the Corporate Safeguarding Report.
- ❖ Performance Reports.
- ❖ Savings Reports.
- ❖ Relevant Audit, Inspection and Regulatory Reports.
- ❖ Cabinet Responses to previous Inquiries.
- ❖ Implementation of agreed recommendations from previous Inquiries.

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