



## **SCRUTINY COMMITTEE REPORT**

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Organisation/Agency	Safer Merthyr Tydfil
Committee Date	19 <sup>th</sup> January 2021

*To: Chair, Ladies and Gentlemen*

### **Update Report – Violence Against Women & Girls, Domestic Abuse and Sexual Violence**

#### **1.0 SUMMARY OF THE REPORT**

1.1 The Committee has requested a report outlining the current position of VAWDASV services in the County Borough along with information on the status for the wider Cwm Taf region, since the occurrence of Covid 19. The Committee would specifically like to know the impact that the pandemic has had on services and how services have adapted to continue to offer support

#### **2.0 RECOMMENDATION(S)**

2.1 The Committee receives and notes the content of the report.

#### **3.0 INTRODUCTION AND BACKGROUND**

3.1 This report has come to Scrutiny Committee to ensure that members of the group have an awareness of what is happening, and has recently happened to violence against women, domestic abuse and sexual violence services during the global pandemic created by Covid 19, specifically in Merthyr Tydfil.

3.2 The request for information also requires an outline of what is happening in the broader Cwm Taf region. This report also covers the Bridgend region as since April 2020 the region has become Cwm Taf Morgannwg (CTM) for the purposes of VAWDASV

- 3.3 The detailed content of the report will focus upon the journey undertaken by Safer Merthyr Tydfil (SMT) during the period of March 2020 – December 2020, as the authors of this report are employees of that organisation.
- 3.4 This report has been prepared by the Chief Executive Officer of Safer Merthyr Tydfil and the VAWDASV Regional Adviser for Cwm Taf Morgannwg.

## 4.0 WHERE WE WERE

- 4.1 Until 2015, the service provisions in Merthyr Tydfil focussed primarily on services for the victims of domestic abuse and sexual abuse. However, in 2015 with the advent of the Violence Against Women Domestic Abuse Sexual Violence (Wales) Act responsible authorities were given duties to prevent, protect and support victims of Honour Based Violence, Female Genital Mutilation, Forced Marriage, Domestic Abuse and Sexual Violence. The Act recognises that domestic abuse and sexual violence, along with forced marriage are also experienced by men.
- 4.2 To meet the needs generated by the broadened scope of the Act, SMT has increased the range of services it now provides. The service still primarily deals with Domestic Abuse but now works with male as well as female victims, perpetrators of either gender who are committing abuse and children and young people who are victims of domestic abuse. When safe to do so and where appropriate, a whole family approach is adopted.
- 4.3 In 2016 the Welsh Government determined that the areas of Merthyr Tydfil and Rhondda Cynon Taf would become one region for commissioning and service delivery of VAWDASV: the motivation for this change being greater integration, consistency, and equality of provision across the region. In April 2020, the region was again extended to include the Bridgend area, so the region is now CTM.
- 4.4 With the expansion of the region SMT has extended some provision of services in the three areas of CTM. There is also a greater degree of partnership and shared working arrangements
- 4.5 Pre Covid, the Teulu Multi Agency Centre (Merthyr Tydfil's Domestic Abuse One Stop Shop) received **1,330 referrals** during 2019-20, a **12% decrease** from the previous year (**1,517**).
- 4.6 Across the region, high risk cases of domestic abuse are referred to the Multi Agency Risk Assessment Conference (MARAC). Pre-Covid MARAC data shows there was a **4% decrease** in the number of high-risk cases heard at Merthyr MARAC **from 356 cases** (2018/19) **to 343 cases** (2019-2020).

- 4.7 It is important to note that Merthyr Tydfil MARAC cases during 2019/20 **exceeded the SafeLives recommended cases per 10,000 female head of population by 39%**, further evidencing the high-risk nature of domestic abuse concentrated in the area.
- 4.8 Prior to Covid, all services operated within tried and tested formats that had worked successfully for many years, referral pathways were well known and operational partnerships well established. Interventions whether offered individually or through groups were primarily delivered in a face to face format. Partnership meetings were also generally face to face with a very small amount of tele-conferencing.

## 5.0 WHERE WE ARE NOW

- 5.1 This section will highlight the journey SMT and other providers had to undertake and the challenges to be overcome in continuing to provide services. The motivation driving all services was the understanding that abuse of any type would not stop because of the pandemic, but that there was increased risk to victims as they were locked down with their abusers. To increase the safety of victims, services had to remain available and find new methods of remaining visible to victims albeit using new means of safe communication.
- 5.2 Just before lockdown at the end of March 2020 all services faced the huge challenge of sourcing the appropriate equipment to enable staff to commence working from home. This was a difficult task as everybody else was doing the same thing and equipment became scarce and expensive. Purchasing of this equipment had to be borne by organisations as this was not a predicted situation with an allocated budget. In addition to securing the hardware, organisations had to ensure that staff had secure access to the documents and data they needed to continue this work away from the work environment. For Safer Merthyr Tydfil, this meant expediting the migration from server based to a cloud based back up system and ensuring staff had appropriate and secure connection facilities. In the early days of lockdown, contact with service users was primarily through telephone. Despite the difficulties VAWDASV services have been delivered every working day since lockdown.
- 5.3 Working with service users remotely using online methods and over the telephone presented further challenges and resulted in new risk assessments being considered and completed, staff had to be sure that it was safe to contact the service user if they were with their abuser 24/7. Additional training for staff had to be completed together with the adoption of safe work procedures with regards to use of platforms such as Zoom and Teams, WhatsApp and Facebook Live. A policy and procedure were developed for staff supporting children and young people when using online platforms – modelled using NSPCC guidance.

- 5.4 Whilst agencies had the technology to contact existing service users, organisations had to ensure that new service users knew how to get in touch to seek support. This need drove a significant amount of communication with the public through social media. All VAWDASV organisations used Facebook, Twitter, and Instagram to raise awareness of service provision and how to obtain support. CTM agencies also promoted Welsh Government's campaign '**Home shouldn't be a place of fear**'.
- 5.5 To encourage male victims to seek support we launched the CTM **Any Man Can campaign**. As time has passed organisations have become more sophisticated in their use of technology to reach out to their colleagues and the public. Consequently, websites have been updated to be more responsive to those seeking information and support using additional methods of communication not used prior to Covid. YouTube channels are utilised to promote the awareness raising videos developed to assist victims and families whilst in lockdown. However, these will be useful resources for the future and can be accessed by service users and members of the public who may be supporting family and/or friends or may themselves be contemplating support.
- 5.6 To encourage collaborative safeguarding activity the CTM Safeguarding Board established Command Meetings at Bronze, Silver and Gold levels, these were multi agency partnerships covering operational to strategic issues. The purpose of these meetings was to gather information and data, identify trends and respond collectively to issues. VAWDASV agencies were a major participant in these groups.
- 5.7 Through the data collection process of the Bronze Command meetings, organisations were able to determine what was happening to their referral rates. At SMT there was a rise in the referral rates into the Teulu one stop shop once it was apparent lockdown was going to happen and then a drop the initial week or two of lockdown, but this quickly escalated again. After this period referrals were busy some weeks not so busy others, increase was 44% during May, however **an average of the months April – September saw an overall 3.5% increase (688 referrals)** as compared to the same period last year (**665**).
- 5.8 What became apparent was that organisations were seeing a greater uptake of support and engagement of service users who needed contact more frequently, longer support sessions and that the issues they were presenting were more complex. Service user numbers **increased by 50% between April – September (377) as compared with same period during 2019/20 (252)**. During lockdown, cases remained open for longer as service users required ongoing emotional support with a plethora of issues including mental health, substance misuse, financial hardship all requiring referrals to other agencies.

- 5.9 Having the above information was extremely useful in helping to secure the additional resources made available to combat Covid. Applying for all the different grants has been a time-consuming process that often had to happen within short timescales and has been accompanied by challenging and frequent monitoring and reporting activity. However, across the region organisations have successfully achieved additional grant funding from Welsh Government, the Police and Crime Commissioner's (PCC) Office, Home Office, Ministry of Justice, and various charitable foundations. However, it should be noted that many of the gaps bridged by this funding existed prior to the pandemic e.g., therapeutic interventions for children and young people and Recovery programmes for victim/survivors.
- 5.10 Working online with service users has also had implications for the health and wellbeing of staff. In an office environment staff can distance themselves from the trauma they have worked with, by having a distinct separation between home and work. Working from home does not allow this, workers are having the trauma brought into their homes. An office environment also brings with it immediate and organic support from Managers and colleagues which is not immediately available when home working. To offset harm that staff may experience, organisations have had to increase the levels of managerial support provided and have purchased additional, external support such as clinical supervision and trauma informed training. On a more positive note there have been benefits to working online such as a reduction in travelling time and increased accessibility for service users.
- 5.11 Covid restrictions have changed and are still changing so organisations must adapt to the current climate. Most VAWDASV organisations have seen some return to the office to deal with the most urgent need, however this must be carefully managed. Social distancing is hard to achieve in small premises. In SMT work bubbles have been created with specific days when that cohort can be in the office. Senior staff have conducted Covid specific risk assessments and prepared work environments to be Covid Secure and compliant with workplace guidelines. Staff have also had to deal with the use of PPE, mask wearing, Covid cleaning regimes and restrictions on the use of facilities such as kitchens. Disruption to face to face contact remains ongoing as SMT responds appropriately to 'firebreak and lockdown' restrictions. Despite these barriers to delivering services, VAWDASV agencies continue to deliver.

## **6.0 WHERE WE WANT TO BE**

- 6.1 Feeling confident to continue to provide quality services that are responsive to need against a landscape that is still changing due to Covid restrictions
- 6.2 Specialist VAWDASV want to receive appropriate and sustainable resources. Whilst additional grants have been forthcoming during the pandemic all additional funding ends at the end of March 2021, so services will be operating at a level insufficient to need. VAWDASV services in Merthyr are heavily reliant on external funding, whether that be WG, UK Govt, PCC or Trust funding. In both RCT and Bridgend the core

services are supported by respective local authorities. There is a risk to services in Merthyr Tydfil, particularly as they currently receive a disproportionate amount of the WG VAWDASV grant and if parity of funding across the region were to be sought it could significantly reduce services in MT. VAWDASV services would welcome consideration be given to greater investment and sustainable funding.

- 6.3 Service delivery during Covid has changed and is unlikely to revert entirely to pre Covid methods of delivery, therefore there is a need to develop a shared vision of how services across the region will look in the future.
- 6.4 VAWDASV services need to continue to embrace the use of technology to make services more accessible to service users, especially as online services are not limited by geography
- 6.5 Prior to Covid the CTM areas were working together to try and achieve consistency and equality of services across the region, this commissioning work was derailed by the need to ensure that services were available to keep people safe. Once this work recommences it may impact upon the issues outlined in 6.3 of this report.

## **7.0 WHAT WE NEED TO DO NEXT**

- 7.1 Service providers need to continually analyse the environment that they operate within to be responsive to changes in legislation and guidance, thereby safeguarding staff and service users, whilst delivering services
- 7.2 Service providers will continue to apply to grant making trusts to support the development and enhancement of services whilst statutory services have an ongoing role in supporting core provisions.
- 7.3 Service providers and Statutory Authorities need to raise awareness with funding bodies of the crisis service providers will face in March 2021 when additional Covid funding ends
- 7.4 Statutory authorities have duties under VAWDASV legislation and should monitor and review their commitment and financial support to VAWDASV services possibly committing to the issuing of longer length contracts
- 7.5 VAWDASV Strategic and Commissioning Partnership to establish a task and finish group that considers what services of the future look like and commissions services accordingly, in a manner that ensures consistency and equity across the region but also meets with local needs

## 8.0 CONTRIBUTION TO MTCBC WELLBEING OBJECTIVES

8.1 VAWDASV service provisions contribute to all the Council's wellbeing objectives. However, as this report focuses upon the services provided by SMT then the focus of this report will be upon the wellbeing objectives that SMT contributes to.

8.2 SMT contributes to the following objectives:

- **Best Start to Life**

Children and young people get the best start to life and are equipped with the skills they need to be successful learners and confident individuals.

- **Working Life**

People feel supported to develop the skills required to meet the needs of businesses, with a developing, safe infrastructure which makes Merthyr Tydfil an attractive destination.

- **Living Well**

People are empowered to live independently within their communities, where they are safe and enjoy good physical and mental health.

8.3 Children who live in homes where they experience or witness domestic abuse have further to travel to achieve these outcomes. However, with the support of services such as DART, Comets and Rockets and the Family Programme these outcomes are achievable.

The integrated support that these projects provide, helps victims (parents) to be more able to respond positively to the traumatic experiences their children have experienced. The interventions offered provide support to reduce risk, increase safety and opportunities to re-build parent/child bonds. Creating resilience in families helps to reduce repeat referrals and pressure on frontline services, including statutory intervention

Specialist domestic abuse therapeutic is essential for children and young people who are adversely affected by domestic abuse. These interventions allow children to safely process their experiences, this in turn reduces fear and anxiety. Therapy of this nature enables an understanding of healthy relationships, improves health and wellbeing and contributes to better outcomes with their development and education.

8.4 A key element in the **Working Life** objective is to develop safer communities, which the Drive project contributes to. The Drive project works with high risk perpetrators of domestic abuse with the objective of helping them to change their abusive behaviour. This approach aims to eliminate the root cause of domestic abuse and prevent further victimisation. This in turn will lead to safer less violent communities.

SMT victim services highlighted above also contribute to communities and residents feeling safer. Each project assists victims in their recovery journey to increase their feelings of safety and their sense of being connected to their communities. Through increased confidence and self-esteem, victims are able to see a future for themselves and are more able to achieve their future aspirations.

8.5 SMT's domestic abuse services deliver on many of the components of the **Living Well** objective but for the sake of brevity this report will focus upon:

- Safeguarding children and adults who are at risk of harm;
- Tackling adverse childhood experiences and developing community resilience.

Domestic abuse services work in close collaboration with safeguarding services as adults and children who experience abuse may also need safeguarding. Witnessing domestic abuse is child abuse. Many of the children supported by SMT's Comets and Rockets project are registered on the child protection register or are children looked after.

The Drive Project works with high risk perpetrators of domestic abuse therefore safeguarding of victims and children is a core priority.

To achieve a reduction in harm the MARAC coordinator is situated in the Multi-Agency Safeguarding Hub (MASH) so that all safeguarding risks to family can be considered. The MARAC process itself can also be considered a safeguarding tool as its sole purpose is to identify and mitigate the risk of harm to victims and their families. DART is a key player in this process as the IDVA (Independent Domestic Violence Adviser) will attend the MARAC and independently represent the needs and wishes of the victim.

Adverse Childhood Experiences (ACEs) are traumatic experiences that occur before the age of 18 and are remembered throughout adulthood.

These experiences range from suffering verbal, mental, sexual and physical abuse, to being raised in a household where domestic violence, alcohol abuse, parental separation or drug abuse is present.

Evidence shows children who experience stressful and poor-quality childhoods are more likely to develop health-harming and anti-social behaviours, more likely to perform poorly in school, more likely to be involved in crime and ultimately less likely to be a productive member of society (Public Health Wales).

SMT domestic abuse services work with victims who have experienced one or usually more ACEs. Many of the children and young people have experienced parental separation and/or parental incarceration in addition to one or more of the types of abuse identified. A high proportion of victim's experience increased mental health needs and substances; drugs and/or alcohol are often used for coping with the abuse, which also has a negative impact on parenting. SMT using an integrated approach



(The Family Programme) provides families with the appropriate support at the relevant time in order to maximise positive outcomes for all family members and builds resilience against future harm.

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**SAFER MERTHYR TYDFIL**

<b>BACKGROUND PAPERS</b>		
<b>Title of Document(s)</b>	<b>Document(s) Date</b>	<b>Document Location</b>
List the Background documents which have been relied on in preparing the report. e.g. previous minutes of relevant committees		
<b>Does the report contain any issue that may impact the Council's Constitution?</b>		<b>No</b>