



**MINUTES**  
**DVA Provision of Services sub-group**  
**Thursday 29 July 2010**  
**10:30 – 12:30**  
**Princess House Meeting Room 1**

S:\CST\Domestic Abuse\DVA Strategy and Sub Groups\Provision of Services Sub Group\mtgs 2010-11\29July10\Minutes DVA Provision sub- gp 29Jul10.doc

<b>Attendee</b>	<b>Representing</b>
Pommy Harmar	BDAF
Sally Morrissey	Novas Scarman Group
Bev Gordon	Victim Support
Amy Campbell	NHS Bristol
Jon Peyton	Chair
Emily Moreton	BDAF
Lesley Welch	Minutes
Richard Nochar	BCC Housing
<b>Apologies received</b>	<b>Representing</b>
Catherine Boyce	CYPS

## 1. Introductions and apologies

As Above.

## 2. Review of previous minutes and actions/matters arising

Minutes of 12 May 2010 – corrections:

1. New Safer Bristol data analyst in post

**Action 1:** now receiving quarterly reports from CYPS around number of children related to DVA, divided down by area. Data analyst now in post, tasked to work with DVA Strategy Gp to produce quarterly data report: part of contracts under commissioning includes a requirement to provide data in place from next quarter, so should have good quality and useful report.. Also looking to produce annually updated stats sheet for all agencies.

**Action 2:** to be completed by 10<sup>th</sup> August (LW)

**Action 3:** done

**Action 4:** in progress

**Action 5:** on agenda

**Action 6:** to be completed by 10<sup>th</sup> August (LW)

**Action 7:** Pommy Harmar reported pilot finished in February 2010. Ministry of Justice pilot looking at new legislation to enable people to obtain Forced Marriage Protection Orders to prevent a forced marriage taking place; pilot looked at whether this was effective and whether to make local authority able to take these out on behalf of people. Worked closely with victims for six months (Sept-Mar) to try to build up relationships with referral agencies especially schools; most FMs take place over the summer so not ideal timing and also very short to turn around attitude. Work continuing with a part-time worker (funded elsewhere). Worked with around 20 victims during the pilot; also starting to see some women who are fearful of a forced marriage – want to focus here on stopping them. FMPO a last resort, as against members of family, so unlikely to become a norm. Next Link on the Forced Marriage Unit website, but uncertain how long this will continue (re funding cuts). Works in other countries to find and repatriate victims. Next Link also do Reunite packs, with eg. fingerprints to send to ports when children taken out of country, and Prohibited Steps orders to prevent parents from taking children away. Still working on getting schools on board. Been on various programmes on Bristol community radio BCFM. Referrals mostly coming from the police with a minority from community agencies and some self-referrals.

**Action 3 Pommy H to liaise with FGM lead in health around referrals from schools for FM.**

Purpose of pilot to look at whether IDVAs should be named as “Relevant Third Parties”, ie. able to go straight to court for 3<sup>rd</sup> party order without first asking for the court’s permission. Now known that is not significant, as court permission can be sought at same time as the order itself.

**Action 8:** unable to do this because of eligibility and budgetary issues (reduced from £80,000 to £27,000 with a potential commitment of much more). Moving to use of homelessness prevention fund to offer a range of options for landlords including but not limited to bonds, with housing advisors providing help based on the best potential outcome rather than being tied to one scheme. However, eligibility issue remains. Bond schemes closed some time ago. Providers can still apply for help as long as eligibility is there (non-EU nationals and E2s are not eligible). Returning UK nationals fleeing DVA abroad should still be eligible.

Have refugee and asylum seekers workers within children’s services who will try to assist victims fleeing DVA. Eligible for housing benefit in private housing but not for social housing – should be able to assist if eligible for housing benefit. Proposed that Pommy and Richard liaise next time a case arises to try to clarify. Arrears owed to the local authority can waive this and frequently do; may be able to address arrears in private tenancies, or not feel that these are a concern for the local authority.

Need to remove item around bond schemes as a strategic group but need to know that there is a way to remove barriers and ensure survivors have access even if not within eligible categories in terms of personal identity, on the ground of fleeing DVA. Richard meeting with Kate from Unseen shortly, who may be aware of a potential solution.

**Action 4 LW to circulate an email asking for questions around housing which can be turned into a frequently asked questions sheet by RN**

### 3. Update of Action Plan

Now version 2, which has fewer national indicators.

Outcome 2/Activity 2: discussed under action point 8 – agreed to propose to strategy group that this item be removed and replaced with outcome: ‘have information about how survivors of DVA are supported to access long-term accommodation’ and activity: ‘to draw up a list of FAQs for the BDAF and neighbourhoods websites’.

Outcome 3/Activity 3: diversity data part of discussion with partnership analyst; currently only data on this is coming through the MARAC so working on changes to this. Target: take up should match the population make-up; also add in target from LW and EM’s individual workplans around this. Agreed to propose to Strategy Group to add another activity around drawing up an action plan for addressing the needs of people from diverse groups, for Lesley to complete in 2010.

Outcome 4/Activity 6 (model DVA policies): should be amber

Outcome 4: should be amber.

Outcome 4/Activity 7: still patchy

Outcome 4 green because funding is in place, but may need another outcome indicator as there are still groups that are not served, as mapping study is seeking to find out. Contracted services are now sustainable as funding is safe due to being subject to legal contract. Needs to become amber. Agreed to propose new planned outcome: “That groups not currently served have access to support services by March 2011.”

Activities 4, 5, 6 and 7 should all relate to planned outcome 4. However, activities 6 and 7 seem to relate less well; about providing better access to services for survivors with substance misuse problems.

Propose additional outcome indicator under Activity 8 relating to mirroring this work with DVA agencies.

Propose asking Angela Clarke to complete the action plan around provision and prevention with indicators around children and young people. CYPS Strategy lead post been handed back to Safer

Bristol and likely to be approved to recruit next week, but still have no method of accountability for improving services unless CYPS will commit to this.

**Action 5 LW to raise this through Angela Clarke to the Safeguarding Children Board and ask them to name a representative and complete Action Plans for Provision of Services and for Prevention to show actions relating to children and young people..**

**Action 6 LW to finish and circulate Action Plan with changes highlighted.**

**Action 7 LW to feedback to Safer Bristol that the group finds the Action Plan format very inaccessible to work with.**

#### **4. Update from survivor groupwork (Freedom Programme)**

Emily Moreton started as Survivor Groupwork Coordinator on Tuesday and in induction. Will be sending out email with contact details to everyone through BDAF next week, including how to contact Freedom Programme, what it does etc.

Some referral routes in North Bristol have now stopped, due to reductions in FP facilitators such as health visitors, etc, which has been reflected in smaller numbers attending groups. Work to be done by the Coordinator around identifying and visiting referrers to keep workers informed.

Evening central group originally included high percentage of Council workers, but not sure if this is still the case as this information isn't collected. However, it does encourage the Council to support the group.

#### **5. Update from IDVA consortium**

Report presented (to be updated with quarter 2 data from 2009-10). Jo agreed with housing officer a system for accessing emergency housing for single people; to remove delays

Service is working very successfully, with a 12% increase in referrals engagement since this time last year. However funding for Victim Support IDVA only ends March 2011 – increase needs to inform future funding prioritisation.

Legal Aid open to anyone applying for an injunction, but subject to income limits.

**Action 8 Amy Campbell to forward this issue to Chair of Protection sub-group (copy in LW).**

#### **6. Update on drugs/alcohol links**

Tuesday 21<sup>st</sup> September 3.00-5.00pm at Council House – Stella Project visit. Need to decide who will be on steering group and be involved with the roll-out of the project; project will run with two DVA agencies, two drugs/alcohol agencies, and two mental health agencies. May need to seek advice from workers in the sector around how best to split up work from drugs/alcohol agencies – ask Barbara Coleman from Health. Two major voluntary agencies are ARA who have already indicated desire to be involved and BDP who have an interest in doing work around DVA; Nilaari, who work with BME users, would be useful to have involved. Also need a process for sharing this with smaller agencies, though Stella's worker should make the outcome available through BDAF.

Criteria for selection: city-wide; reflecting the diversity of the population; voluntary agencies. Once agreed, ask Drugs Strategy Team to make the final selection.

**Action 9 LW to talk to Stella Project about involving smaller agencies via connection to bigger agencies, or as consultants.**

Specialist drugs/alcohol services are part of mental health services. Potential agencies include Second Step, Mind, Missing Link (though could be involved via Next Link as the DVA agency).

**Action 10 LW to ask Ian Popperwell for chair and contact details for Mental Health Network and ask them to make the selection.**

Steering group needs a key contact person who will also act as convenor in Bristol.

**Action 11 AC to speak to Barbara Coleman (NHS Bristol) about taking on this role until Katie Porter returns.**

## **Action 12 LW to write to Barbara inviting her to take on the role.**

Interested individuals and potential evaluators can be invited to the part of the steering group. Agreed that the steering group would start as a small group and invite anyone they wanted to.

NHS Drugs/alcohol liaison worker: now have one (alcohol and substance misuse) and possibly two (acute services) MARAC liaison posts on temporary, seconded contracts, and potentially a delivery level worker on the team as well.

## **7. CYPS representative**

Covered through writing to the Safeguarding Children Board. Maggie Siviter's replacement (Catherine Boyce) working three days per week but link role will be covered by the other two days, now being recruited.

Early Intervention Review taking place currently, mapping services for all children at risk aged 0-19, though DV is not named in this; looking at how to establish and maintain good outcomes in the face of financial cuts. However, this is not relating into DVA strategy, due to lack of linking in.

## **8. Community support services contract**

Contract has been awarded and is in stand-still period for two weeks during which anyone who did not get the contract can make a legal challenge to this. Period finishes on Tuesday unless a challenge is made, at which point an announcement will be made.

## **9. Service directory on website**

Directory will be updated to reflect updates and changes, with the directory being mainly available through the BDAF website, with a limited number of bound copies available to practitioners.

**Action 13 Amy Campbell to ask Prevention sub-group about seeking sponsorship from Lyons Davidson for the production of this**

## **10. Pathways**

Care pathway is written for the public, though professionals could make use of this, for example as a way to guide users through what will happen and why – to understand the services they are entitled to, how these link up, how to get access to them, and why action was taken. About need not services, and how someone will flow through services based on need, presented as a flow diagram. Enter the pathway based on CAADA-DASH risk assessments. Based on what we would like to have happen rather than what does happen, which should grow closer as people become more informed and trained.

Looking for someone to take over the work while Amy is on maternity leave.

Benefits of a pathway are that: it shows where funding is needed, where there are bottlenecks and gaps; is a way of linking services in; and is very client-focused.

Gaps: children's chart needs to be replicated on both sides of the chart with 'discuss with midwife' becoming not currently at risk. Vulnerable adults needs a box to remind people to consider it. Survivor groupwork also needs to be added in. Working document that can be updated. Designed for victims/survivors not perpetrators. Change 'long term support to recover' to 'on-going support.' Boxes with bold borders are decision points (need to add to the bottom of the chart).

**Action 14 Amy Campbell to send presentation and pathway to EM to circulate with minutes**  
**Action 15 All members review and feedback to AC within two weeks for a final draft to be produced**

**Action 16 LW to approach Helen Pitches to see if she can own the project**

## **11. AOB**

None.

## Actions summary table DVA Provision of Services sub-group meeting 29 July 2010

Action Point	Matters arising	By Whom	By When
<b>Section 2 - Review of previous minutes and matters arising</b>			
1 (c/fwd)	Check with Ian Leat, A&S Police, relationship between Guardian / PARIS databases on DV referrals – circulate response to group	LW	10/8/10
2 (c/fwd)	Membership of group: LW to draft a letter to inviting rep on sub-group to Stephen Beet (from Bristol Safeguarding Adults), to Forced Marriage Group (but acknowledging problem of attendance for them), Barnardos and NSPCC	LW	10/8/10
3	Liaise with FGM lead in health around referrals	PH	
<b>Section 3 – Update of Action Plan</b>			
4	LW to circulate an email asking for questions around housing which can be turned into a frequently asked questions sheet by RN	LW	
5	LW to ask Safeguarding Children Board to name a representative and complete Action Plans for Provision of Services and for Prevention to show actions relating to children and young people.	LW	
6	LW to finish & circulate Action Plan with changes highlighted	LW	
7	LW to feedback to Safer Bristol that the group finds the Action Plan format very inaccessible to work with	LW	
<b>Section 5 – Update from IDVA consortium</b>			
8	Amy Campbell to forward this issue to Chair of Protection sub-group, copying in LW.	AC	
<b>Section 6 – Update on drugs/alcohol links</b>			
9	Talk to Stella Project about involving smaller agencies via connection to bigger agencies, or as consultants.	LW	
10	LW to ask Ian Popperwell for chair and contact details for mental health network and ask them to make the selection	LW	
11	Amy Campbell to speak to Barbara Coleman (NHS Bristol) about taking on this role until Katie Porter returns.	AC	
12	LW to write to Barbara inviting her to take on the role	LW	
<b>Section 9 - Service directory on website</b>			
13	Amy Campbell to ask Prevention sub-group about seeking sponsorship from Lyons Davidson for the production of this	AC	
<b>Section 10 - Pathways</b>			
14	Action 14 Amy Campbell to send presentation and pathway to EM to circulate with minutes Action 15		
15	All members review and feedback to Amy Campbell within two weeks for a final draft to be produced	All	
16	LW to approach Helen Pitches to see if she can 'own' the project	LW/HP	

*The meeting finished at 12.30pm*

**Next meetings:** Wednesday 17<sup>th</sup> November 2010, 2.00-4.00pm, Princess House

2<sup>nd</sup> February 2011 10.00-12.00am Venue TBC