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**Sefton Council** 

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Town Hall  
Trinity Road  
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Date: 6 January 2025

**Please contact:**

Laura Bootland

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Dear Councillor,

**OVERVIEW AND SCRUTINY COMMITTEE (ADULT SOCIAL CARE AND HEALTH) -  
TUESDAY 7TH JANUARY, 2025**

I refer to the agenda for the above meeting and now enclose the following report(s) which were unavailable when the agenda was published.

**Agenda No.**

**Item**

- |     |  |
|-----|--|
| 10. | <b>Adult Social Care Performance Data Review</b> (Pages 3 - 22)<br>Report of the Assistant Director, Adult Social Care and Health. |
| 11. | <b>Domestic Abuse Update</b> (Pages 23 - 54)<br>Report of the Assistant Director, Communities.                                     |

Yours sincerely,

Laura Bootland  
Senior Democratic Services Officer

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**Report Title:** Adult Social Care Performance

Date of meeting:	7 <sup>th</sup> January 2024		
Report to:	Overview and Scrutiny Committee Adult Social Care and Health		
Report of:	Executive Director Adult Social Care, Health and Wellbeing		
Portfolio:	Adult Social Care and Health		
Wards affected:	All Wards		
Is this a key decision:	No	Included in Forward Plan:	No
Exempt/confidential report:	No		

**Summary:**

This report to Overview and Scrutiny Committee is to provide an overview of Adult Social Care’s performance against a number of required national and local metrics. It is part of the regular cycle of reporting to Committee and key in terms of preparation for Sefton’s upcoming Care Quality Commission (CQC) assessment. It utilises a number of data sources to provide an overview for Adult Social Care, identifying areas of strong performance and those requiring focus. It supports both strategic commissioning and service planning. The report also details key actions being taken within identified areas of focus. The full report is contained within Appendix one and is provided for review, scrutiny and assurance

**Recommendation(s):**

(1) Committee are asked to note the contents of the report, provide comment and be assured on the actions being taken in areas of identified performance.

(2) It is recommended that regular updates continue to be provided to the Committee regarding the performance of Adult Social Care.

# Agenda Item 10

## 1. The Rationale and Evidence for the Recommendations

Adult Social Care assesses performance against a number of measures. The report provides an overview of performance against national indications contained within the Adult Social Care Outcomes Framework (ASCOF), annual surveys and local performance indicators.

Within Adult Social Care there is a well established Strategic Performance and Finance Board in place and a Quality, Safety and Practice Assurance meeting. Reports are shared directly with the Executive Director and Cabinet Member, and mitigation plans are put in place for any performance and risks requiring specific focus. Regular reporting is also in place to the Executive Leadership Team.

The national assurance framework for Adult Social Care was introduced in April 2023 and is a statutory requirement for all Councils. Adult Social Care services within Sefton have now received confirmation that the Care Quality Commission (CQC) will undertake an onsite assessment of services during the 27-29th January 2025.

As part of the assurance process, the CQC will scrutinise key performance data before conducting onsite visits. CQC already have access to the data provided in the report, which is provided for existing national returns (and as part of the required data return). Whilst this is already utilised for strategic commissioning and service delivery, ongoing scrutiny and visibility is key in ensuring ongoing evaluation of performance and quality of practice.

## 2. Financial Implications

No additional costs are identified for this specific report

## 3. Legal Implications

The information provided in the report provides details of performance against statutory data sets

## 4. Corporate Risk Implications

None identified within this report

## 5. Staffing HR Implications

None identified within this report

## 6. Conclusion

**Alternative Options Considered and Rejected None** – All Local Authorities are required to report against statutory returns and performance.

### Equality Implications:

Equitability of support is a fundamental principal within the Care Act 2014 and the National Assurance Framework.

### Impact on Children and Young People:

Adult Social Care has a statutory duty to ensure Page 4 arrangements are in place for

those children and young people requiring a transition into adult services. The effectiveness of these arrangements will be assessed by CQC as part of the national assurance framework.

**Climate Emergency Implications:**

Neutral Impact

**What consultations have taken place on the proposals and when?**

**(A) Internal Consultations**

The Executive Director of Corporate Services and Commercial (FD7901/24) and the Chief Legal and Democratic Officer (LD6001/24) have been consulted and any comments have been incorporated into the report.

**(B) External Consultations**

Not applicable

**Implementation Date for the Decision:**

With immediate effect. The Chair of the Overview and Scrutiny Committee

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Email Address:	Sarah.alldis@sefton.gov.uk

**Appendices:**

The following appendices are attached to this report:

Appendix 1 – Adult Social Care Performance Report

# Agenda Item 10

## Background Papers:

None

# Adult Social Care Performance Overview

## Overview and Scrutiny Committee Adult Social Care & Health January 2025

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Agenda Item 10

## ASCOF measures

The Adult Social Care Outcomes Framework (ASCOF) measures how well care and support services achieve the outcomes that matter most to people. The ASCOF is used both locally and nationally to set priorities for care and support, measure progress and strengthen transparency and accountability.

### Care Home Admissions:

- Sefton's admissions to nursing and residential care homes for people aged 18-64 is high compared to other local authorities. Our current rate of 25 people per 100,000 of the population puts us in the bottom quartile in the North West, England and against our Statistical Neighbours.
- Admissions of people aged 65 and over have come down slightly since the beginning of the financial year. Our current rate of 688 people admitted per 100,000 population is average compared to our Statistical Neighbours but is slightly above the rates of the North West and England.

### Self-directed support & direct payments:

- Around 23% of our social care clients are supported via a direct payment, this is slightly less compared to the North West (25%) and England (26%) but the same as our Statistical Neighbours (23%).

- We have seen significant increases in the proportion of our carers receiving direct payments. The 90% of carers receiving a DP is similar to the North West and England but puts us in the top quartile of Statistical Neighbours.

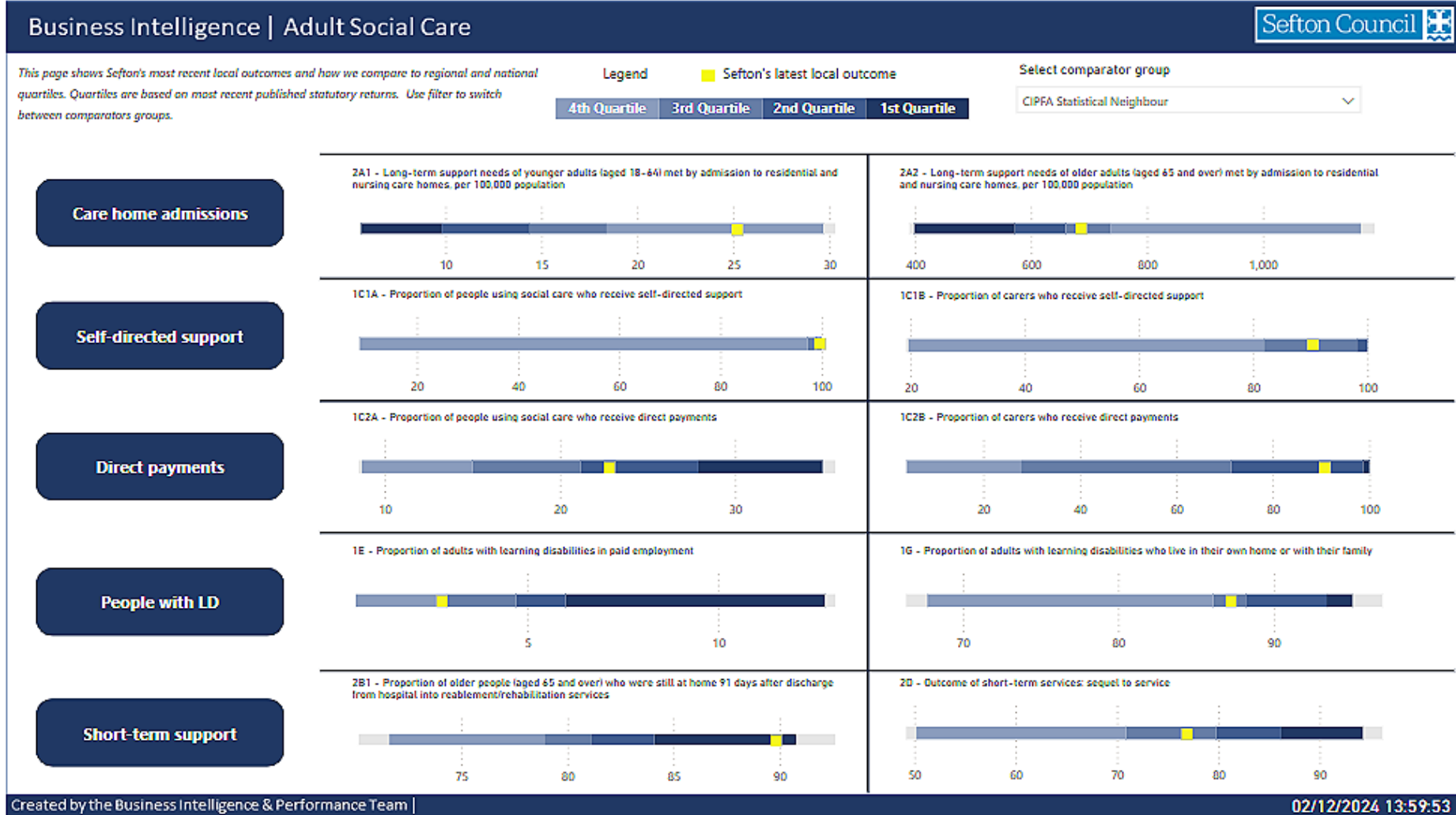
### People with Learning Disabilities:

- The proportion of learning-disabled people in paid employment remained fairly stable over the past few years between 2-3%. This is lower than the North West (4%), England (5%) and our Statistical Neighbours (5%).
- The proportion of people with learning-disability who live in their own home or with their family has remained stable over the past 12 months. The 87% of people living in settled accommodation puts us in a better position compared to England (80%) and close to the North West (89%) and Statistical Neighbours (89%).

### Short-term support:

- Just under 90% of older people (65+) going through reablement/rehabilitation services following hospital discharge remain at home 91 days later. This compares well regionally and nationally, putting us in the top quartile in England, the North West and against Statistical Neighbours.
- Around 77% of people supported with a short-term service subsequently go on to require no ongoing support or see a reduction in their support package. This is close to the proportions seen in England (78%) and slightly lower compared to the North West (80%) and Statistical Neighbours (79%).





# Finance – Weekly Overview

Total weekly expenditure has increased since the beginning of the financial year by £109k. This is mostly linked to an increase in long term client numbers – up by 100 people.

We have seen an increase in the number of people supported in community-based services by around 3%, and an increase in the number of people supported in long-term residential and nursing placements which is 1.5% higher compared to April.

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## Business Intelligence | Adult Social Care

### Weekly Summary

This page displays the the current total weekly cost, average weekly cost and client count snapshot. The change indicators show the same seven day periods last week, last month, last quarter and last year. The change is displayed in total numbers and percentage change.

**Total Weekly Cost**  
**£2,703,204**

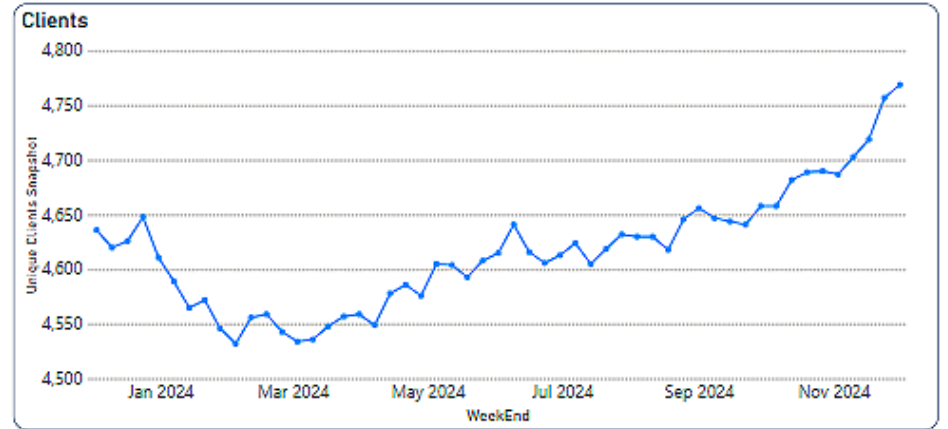
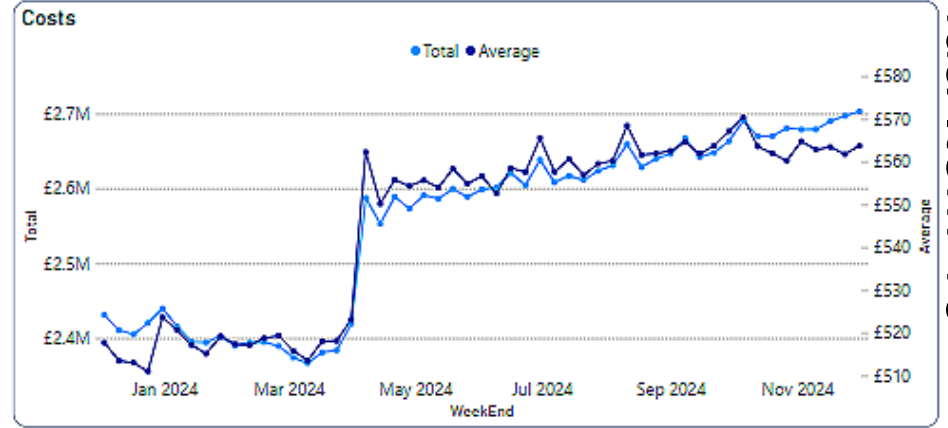
<b>Week Change</b> ▲ £5,975 (+0.2%)	<b>Month Change</b> ▲ £24,224 (+0.9%)	<b>Quarter Change</b> ▲ £36,049 (+1.4%)	<b>Year Change</b> ▲ £270,871 (+11.1%)
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**Average Weekly Cost**  
**£564**

<b>Week Change</b> ▲ £2 (+0.3%)	<b>Month Change</b> ▼ -£1 (-0.2%)	<b>Quarter Change</b> ▼ -£1 (-0.1%)	<b>Year Change</b> ▲ £48 (+9.3%)
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**Client Count Snapshot**  
**4,769**

<b>Week Change</b> ▲ 12 (+0.3%)	<b>Month Change</b> ▲ 82 (+1.7%)	<b>Quarter Change</b> ▲ 122 (+2.6%)	<b>Year Change</b> ▲ 53 (+1.1%)
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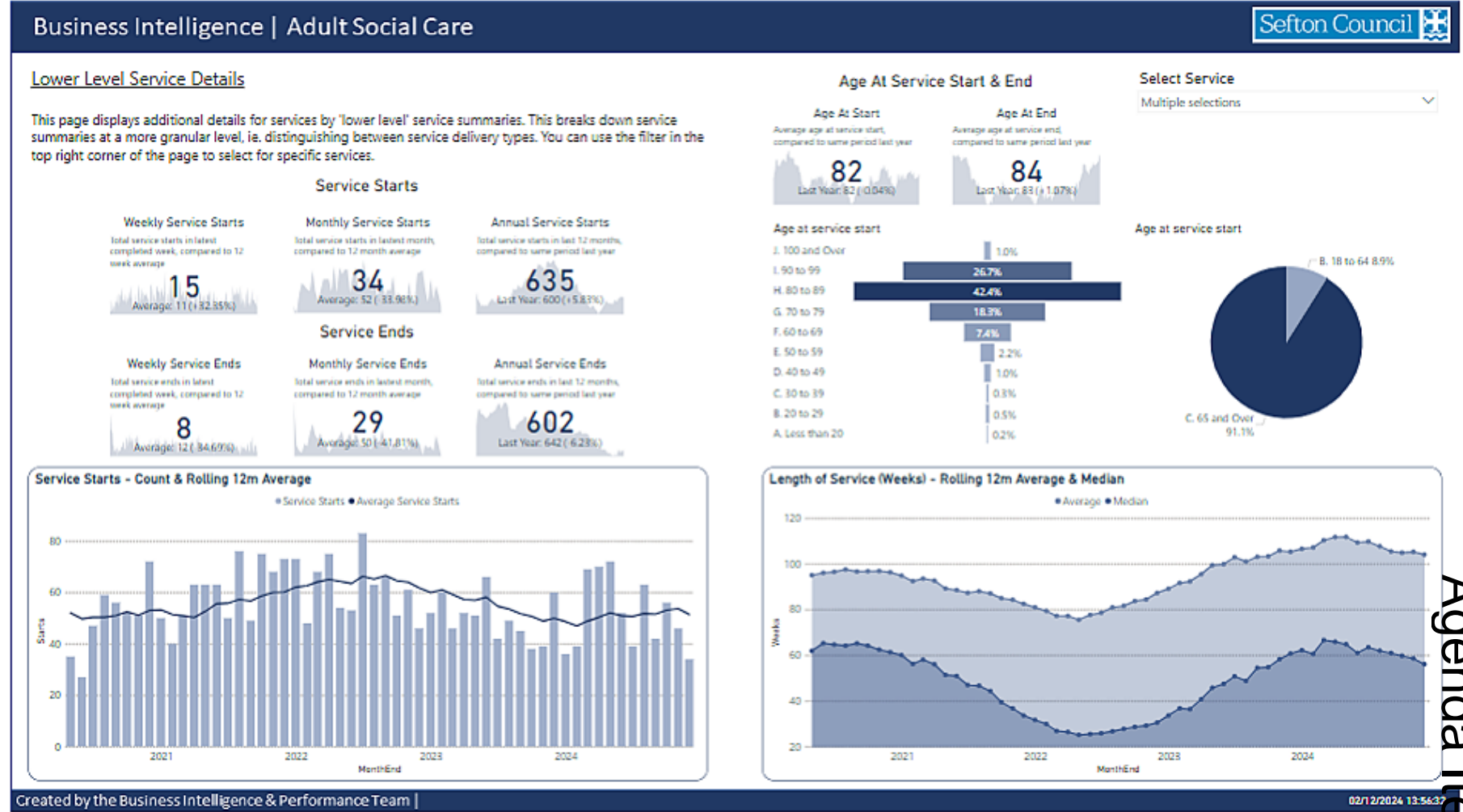
# Long-term Residential & Nursing Care

Between February–April we saw an increase in the numbers of residential and nursing placements being made. Admissions have however been reducing during the latter part of the year with 4 out of the last 7 months having lower a than average number of new placements

Overall, however the numbers of people in residential and nursing care (for under 65's) remains high compared to other Local Authorities and slightly above the rates of the North West and England for people over aged 65.

For those over 65 yrs the number of admissions has been impacted by an increased in referrals from people previously self funding and who now require assistance from the Local Authority.

Overall numbers have also been impacted by longer length of stays and less placements ending.



# Reablement & Alternative to Reablement Services


As part of our “Better at Home” transformation programme reablement capacity is crucial as it provides short-term home-based support to people after a period in hospital or illness at home (reducing or delaying the need for longer term support).

Demand for reablement services has increased significantly over the past 2 years. The total number of people going through reablement in the last 12 months is 43% higher than in 2023.

Nationally Sefton are in the top quartile for the proportion of people 65 and over who are still at home 91 days after discharge from Hospital into Reablement/Rehabilitation services.

New Directions provision accounts for 27% of Reablement service delivery, with 73% delivered by the Sefton Domiciliary Care sector.

Business Intelligence | Adult Social Care

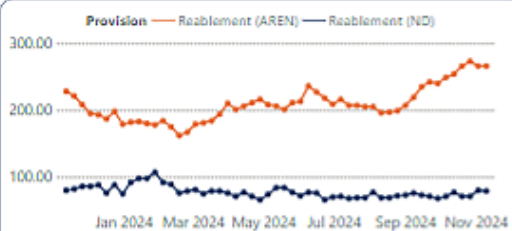


**Reablement**  
 Reablement is delivered via New Directions and the Alternative to Re-ablement (AREN) service. This page shows the number of clients in receipt of both services, total weekly hours delivered and total hours delivered per person.

**Packages Of Care**

345

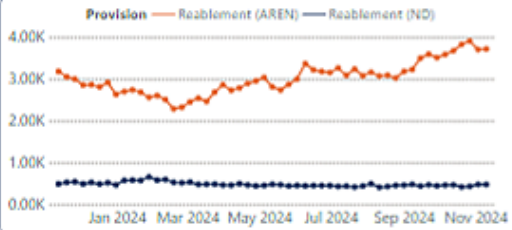
Last Year: 308 (+12.01%)



**Total Weekly Hours**

4,196.16

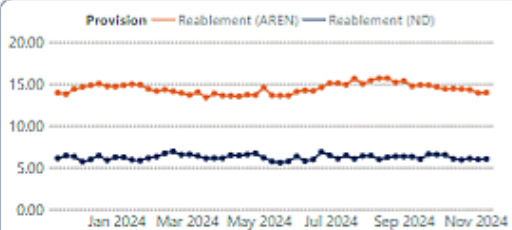
Last Year: 3,672.39 (+14.26%)



**Average Weekly Hours Per Person**

12.2

Last Year: 11.9(+2.01%)

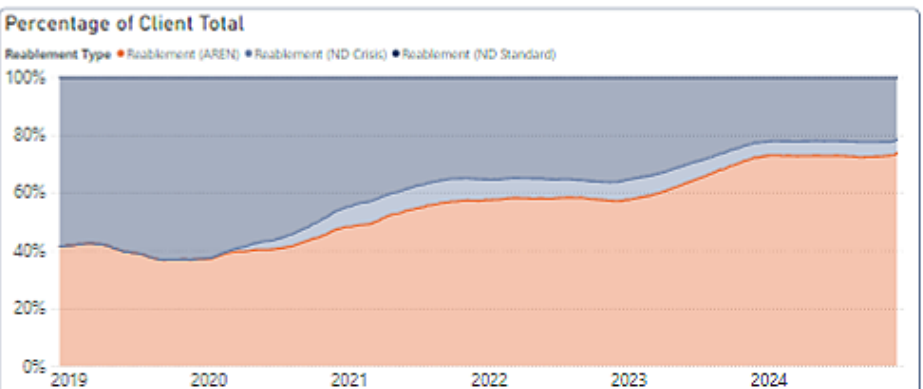


**Service Delivery**  
 The table below shows the current client numbers & percentage, current weekly hours numbers & percentage and the number of hours delivered per person. This is broken down by AREN and reablement delivered by New Directions. New Directions reablement can be drilled down further to see breakdowns by standard and crisis reablement.

Reablement Type	Client #	Client %	Weekly Hours	Weekly Hours %	Hours Per Person
<input checked="" type="checkbox"/> Reablement (AREN)	266	77.1%	3,719.00	88.6%	13.98
<input checked="" type="checkbox"/> Reablement (ND)	79	22.9%	477.16	11.4%	6.04
Reablement (ND Standard)	70	20.3%	428.67	10.2%	6.12
Reablement (ND Crisis)	9	2.6%	48.49	1.2%	5.39
<b>Total</b>	<b>345</b>	<b>100.0%</b>	<b>4,196.16</b>	<b>100.0%</b>	<b>12.16</b>

**Reablement Delivery Proportions**  
 Below is displayed the proportion of reablement delivered via AREN and New Directions. The filter to the right can be used to display either client numbers or hours delivered.

Client Count



Created by the Business Intelligence & Performance Team |
02/12/2024 13:56:32

# First Point of Contact

Adult Social Care receives an average of 2,150 contacts per month. These can include requests for care packages, safeguarding concerns or queries about existing support packages.

The number of people contacting Sefton Adult Social Care requesting support has risen by 10% in the last year.

Of our contacts relating to requests for support, 22% are resolved through providing information, advice or signposting. The aspiration is to achieve 25% with the transformation work.

Work to review and improve how people first access support from the service has been progressing, and this programme of transformation is being developed with staff and individuals with lived experience. Additional staff have been recruited to resolve more requests for support at the first point of contact, rather than needing to refer on to another team.

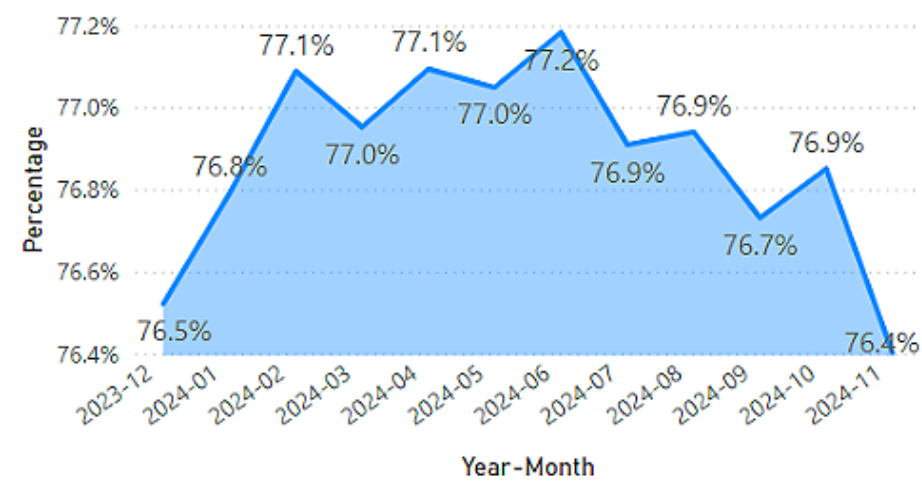


Contacts Received by Month

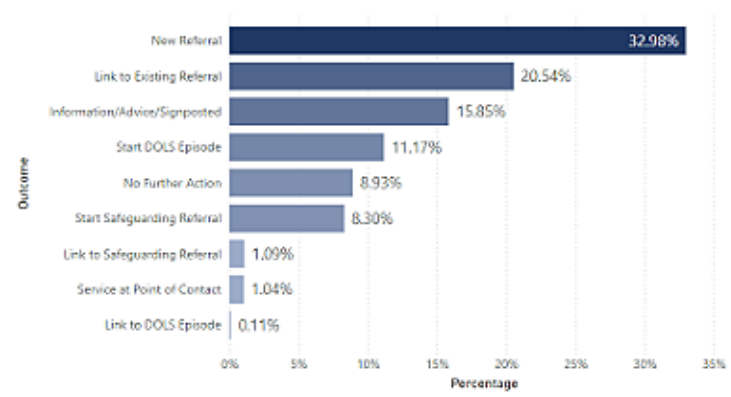
● Contacts Received ● Contacts Received Rolling 12m Avg



Percentage Resolved Within 2 Working Days by Rolling 12 Months



Contacts Outcomes - 12 Months



# Activity

Sefton like all Local Authorities is experiencing waiting lists across its core services and the oversight and reduction of these remain a key focus. All referrals have been screened and prioritised.

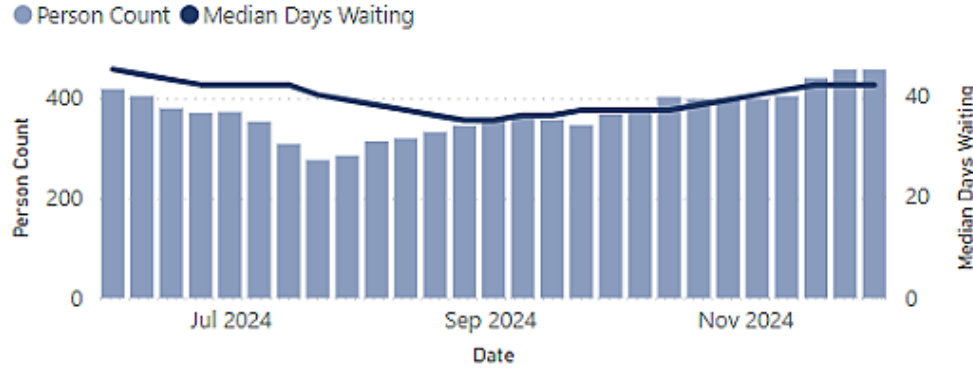
Arrangements are in place to manage any risks and ensure that contact is maintained with people on the waiting list. Weekly oversight meetings, case weighting, reporting to the Executive Director, and risk management procedures are in place.

Additional resources and use of agency staff are being utilised to reduce people's wait time.

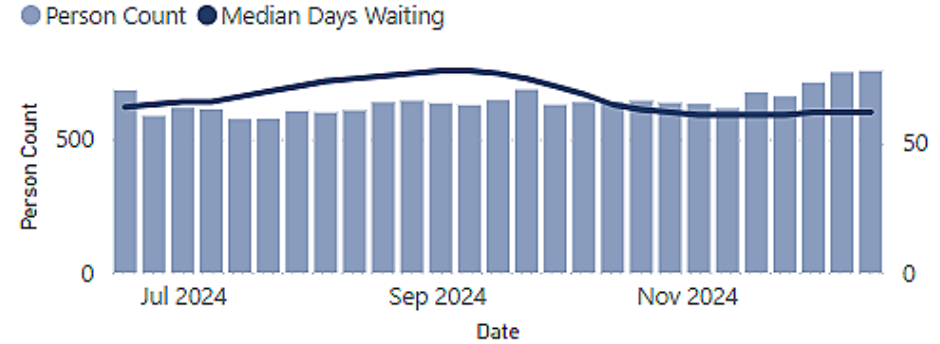
A full capacity and resource evaluation has just been completed across all teams, and this will be used to inform our future workforce requirements as we move into 25/26.

A "waiting well approach" has been developed which draws on best practice across the region to support people whilst they wait, using technology and access to the community and voluntary sector.

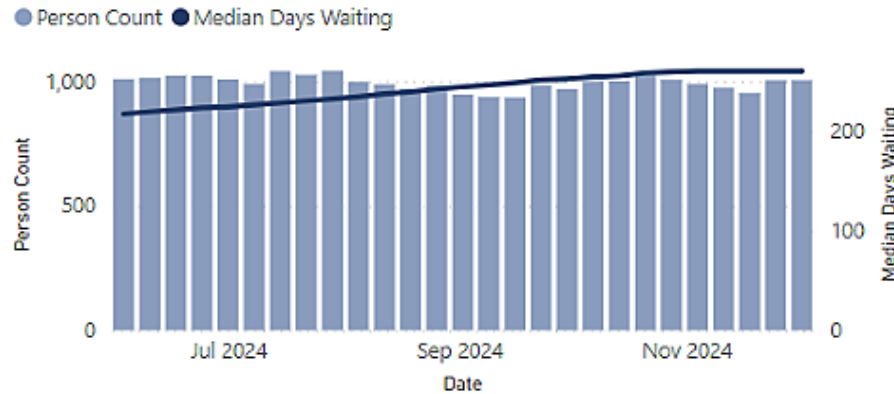
### Social Work



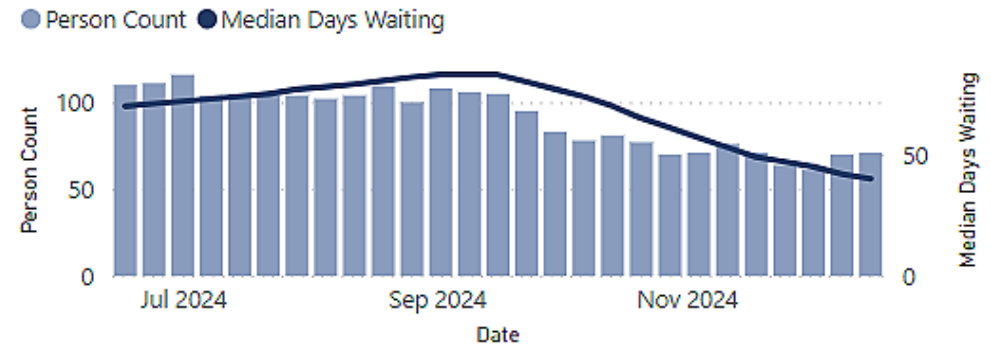
### Occupation Therapy\*



### Deprivation of Liberty Safeguard (Dols) Referrals



### Visual Impairment



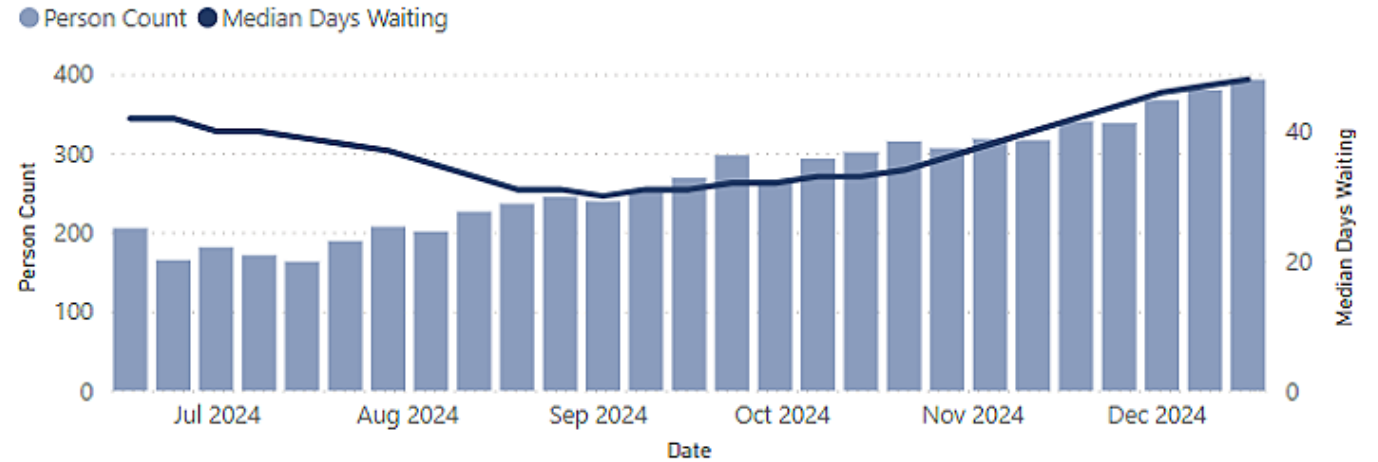
## \*Occupational Therapy Waiting Lists

The list for those awaiting assessment from the OT service is currently split into those individuals' awaiting assessment from a qualified Occupational Therapist (complex assessments and DFGs) and those requests which can be assessed by a Community Care Practitioner (low level equipment etc)

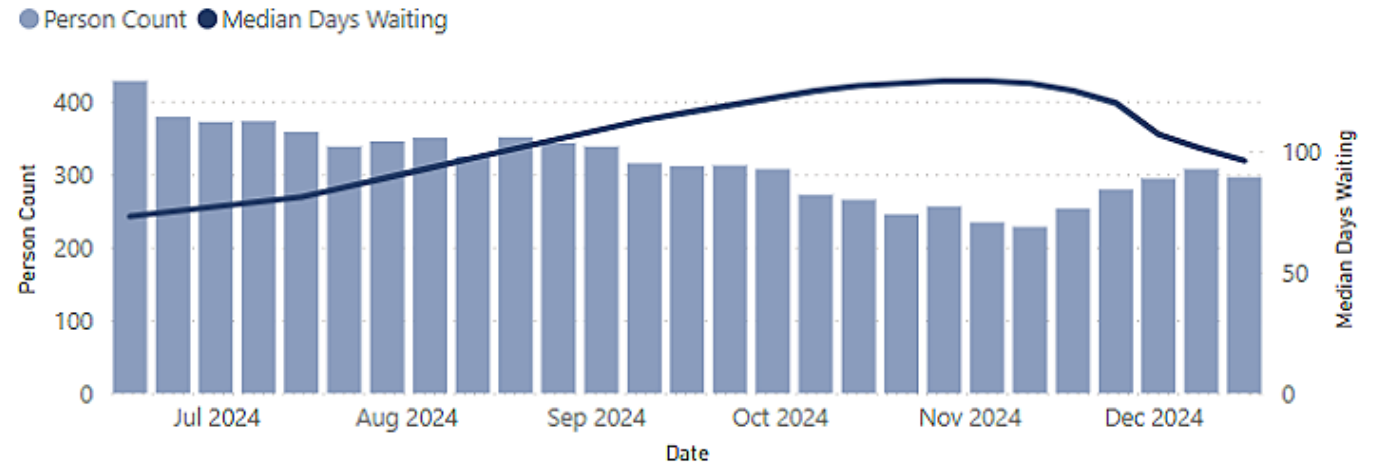
Whilst we have seen an increase in the numbers of people awaiting further intervention from an OT (up 15% in the last month), additional permanent recruitment has now taken place which will have an impact early in the New Year. This will be supported by additional agency OT support.

Those awaiting a CCP assessment have also increased by 15% over the past month, although numbers remain significantly below those of 6 months ago. The success of the mobile clinic and targeted screening of the CCP waiting list has had a substantial impact. Additional mobile clinic vans have now been procured and the service will expand significantly in 2025. We therefore expect to see reduce further.

### OT Assessments Waiting



### OT CCP Assessments Waiting



# Annual Reviews/Reassessments

During the past 12 months, teams have completed 22% more annual reviews compared to the same period last year.

As well as annual reviews, a programme of targeted reviews is in place to ensure the right level of care is being provided, this also supports the achievement of efficiency requirements for 24/25.

As of the end of November 2024, 57% of our long-term clients had received their annual review within the previous 12-month period, which is higher compared to the previous 3-4 months. The target is 65%.

A waiting well approach is being implemented for those people awaiting a review, with cases risk assessed and prioritised. Care providers and partner organisations are proactively asked to contact the service if there is any change in circumstance and need for re-prioritisation. Families can also make contact directly to request a review.

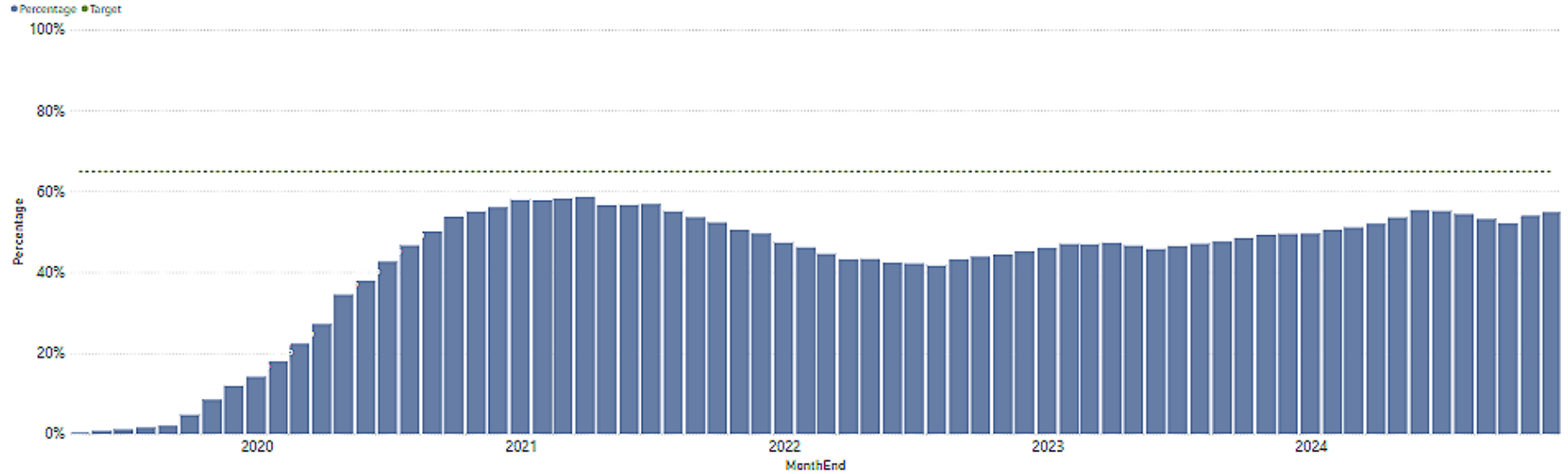
Across the care home market, the Dols Team regularly identify and action the need for a review should they identify any change in circumstance.

## Weekly Overview - Reviews Due

The first three cards at the top of this page display (from left to right) the proportion of our long-term clients (those receiving a service for over 12 months) who have received any kind of review within the past 12 months, the proportion of our long-term clients who have received an annual review (that excludes initial reviews following service start) within the last 12 months and the proportion of our long-term clients who have received a full core reassessment within the past 12 months. The fourth card from the left shows a count of our long-term clients and the fifth from the left shows the number of long-term clients who have been waiting over 18 months for any review. The table displays our currently open care plans related.



Percentage of long-term clients received annual review within previous 12 month period





# Actions to be taken in responses to Carer Surveys

Local authorities in England with responsibility for providing Adult Social Care services are required to conduct a biennial survey of carers. The Survey of Adults Carers in England (SACE) contains questions about the carer’s general health and wellbeing; how services impact their quality of life; and the quality of services being provided. Whilst this feedback was gathered in 2023, comparator results of the Carers Survey have just been made available.

The outcome of the responses received from the SACE indicate that in a number of domains there has been a decline in what carers report. This includes how much control they feel they have over their daily life, the levels of loneliness and self neglect being experienced, how involved they feel in discussions regarding the person they care for and how easy they find accessing information/advice.

Since the time of the survey there has been continued work undertaken with partners in relation to supporting carers. Carers from across the borough, system partners and Council colleagues have come together to coproduce a new Sefton Carers Strategy 2025 – 2028. Carers developed the vision, and the strategy's six themes, which are:

- Early Identification, Recognition and Appreciation of Carers
- Information and Advice
- Young Carers
- Empowering Carers
- Health & Well-being
- Carers Assessments

This strategy closely aligns with national and local policy drivers and has early intervention and prevention at its heart. It is intended for carers of all ages and sets out what we will do together to improve their health and well-being. The strategy and accompanying action plan were shared with carers groups on Carers Rights Day, November 21 2024, and received their support.

- ✔ Sefton's value falls into the top quartile
- ▬ Sefton's value falls into one of the two middle quartiles
- ✘ Sefton's value falls into the bottom quartile

Theme	Good is	Sefton	Statistical Neighbours	North West	England
<b>Satisfaction</b> <i>(proportion of carers either extremely, very or quite satisfied)</i>	High	63.4	▬ 69.5	▬ 66.8	▬ 67.1
<b>Control</b> <i>(proportion of carers reporting as much control over their daily life as they want)</i>	High	13.7	✘ 21.4	✘ 21	✘ 21.5
<b>Time spent</b> <i>(proportion of carers reporting they are able to spend their time as they want)</i>	High	11	✘ 15.3	✘ 15.1	✘ 16
<b>Self-neglect</b> <i>(proportion of carers reporting they look after themselves)</i>	High	46.7	▬ 47.1	▬ 47	▬ 46.7
<b>Social contact</b> <i>(proportion of carers reporting they have as much social contact as they want)</i>	High	26.8	▬ 30.8	▬ 30.4	▬ 30
<b>Involvement</b> <i>(proportion of carers reporting they were involved in the discussions about the person they care for)</i>	High	29.3	✘ 38.3	✘ 36.9	✘ 36.9
<b>Financial difficulties</b> <i>(proportion of carers reporting they did not have any financial difficulties caused by caring)</i>	High	52.8	▬ 57.1	▬ 54	▬ 53.4
<b>Safety</b> <i>(proportion of carers reporting they have no worries about personal safety)</i>	High	79.7	▬ 81.7	▬ 82.3	▬ 81
<b>Information &amp; Advice</b> <i>(proportion of carers reporting information was easy to find)</i>	High	55.3	✘ 63.1	✘ 58.7	▬ 59
<b>Loneliness</b> <i>(proportion of carers reporting they feel lonely often or always)</i>	Low	19.9	✘ 13.4	✘ 15.6	✘ 13.3

# Actions to be taken in response to Adult Social Care Survey (ASCS)

- ✔ Sefton's value falls into the top quartile
- ▬ Sefton's value falls into one of the two middle quartiles
- ✘ Sefton's value falls into the bottom quartile

Local authorities in England with responsibility for providing Adult Social Care services are required to conduct an annual survey of their service users. The Adult Social Care Survey (ASCS) asks questions about general health and wellbeing; how services impact their quality of life; and the quality of services being provided. The results of the client survey 23/24 have recently been published (for Sefton 429 people responded a 24.8% response rate).

Satisfaction levels in Sefton remained stable from the previous survey. Overall quality of life has also remained stable from the previous survey, with levels slightly above other Local Authorities. In respect of reported choice and control, Sefton has similar levels to the North West and England but ranks below statistical neighbours.

Respondents reported poor health, loneliness, anxiety & depression and concerns re cleanliness as areas of focus as well as difficulties accessing advice and information. The findings from the survey have been shared with the adult social care forum and used to inform the proposed priorities for the draft Early Intervention and Prevention Strategy 2025–2027. Key stakeholders, including community members, carers, and leaders from Community Voluntary Services, participated in an engagement event on December 5, 2024.

During this event, community empowerment and reducing social isolation were among those identified as priority areas for the strategy. Additional events will take place in January to further explore collaborative actions needed to improve outcomes for residents of Sefton. A full report on the Early Intervention and Prevention Strategy will be presented to Overview and Scrutiny Committee in due course.

Adult Social Care is also piloting a new approach called the Three Conversations. It recognises that people are the experts in their own lives, and it is essential to listen carefully rather than prescribe a service. This approach empowers individuals to maintain choice and control over their lives and has fostered enthusiasm among team members. As a result, it has led to positive examples of personalised care and support. This approach will be rolled out service wide.

Satisfaction	Good is	Sefton	Statistical Neighbours	North West	England
<b>Satisfaction</b> <i>(proportion of service users either extremely, very or quite satisfied with the care and support they receive)</i>	High	89.6	▬ 90	▬ 88.9	▬ 88.7
<b>Choice</b> <i>(proportion of service users reporting they have enough choice over care and support services)</i>	High	65.2	✘ 70.2	▬ 67.8	▬ 66.2
<b>Control</b> <i>(proportion of service users reporting they have as much control as they want or adequate control over their daily lives)</i>	High	75.3	✘ 79.6	▬ 78.6	▬ 77.6

Health	Good is	Sefton	Statistical Neighbours	North West	England
<b>General health</b> <i>(proportion of service users reporting their health is either bad or very bad)</i>	Low	19.2	▬ 18	▬ 19.6	▬ 18.3
<b>Pain and discomfort</b> <i>(proportion of service users reporting they have extreme pain or discomfort)</i>	Low	15.6	✘ 13	▬ 13.9	✘ 13.2
<b>Anxiety and depression</b> <i>(proportion of service users reporting they are extremely anxious or depressed)</i>	Low	12.1	✘ 7.8	✘ 9	✘ 8.7

Social Contact	Good is	Sefton	Statistical Neighbours	North West	England
<b>Social contact</b> <i>(proportion of service users reporting they have as much social contact as they want with people they like or have adequate social contact)</i>	High	74.6	✘ 79.4	▬ 77.6	▬ 76.9
<b>Loneliness</b> <i>(proportion of service users reporting they feel lonely either often or always, or some of the time)</i>	Low	43.2	✘ 39.4	▬ 39.6	▬ 40.8
<b>Time spent</b> <i>(proportion of service users reporting they are able to spend their time as they want, doing things they value or enjoy or are able to do enough of the things they value or enjoy)</i>	High	62.2	✘ 70.8	✘ 69.1	✘ 69.1
<b>Getting outside</b> <i>(proportion of service users reporting they can get to all the places in their local area that they want)</i>	High	28.9	▬ 31.2	▬ 29.7	▬ 29.6

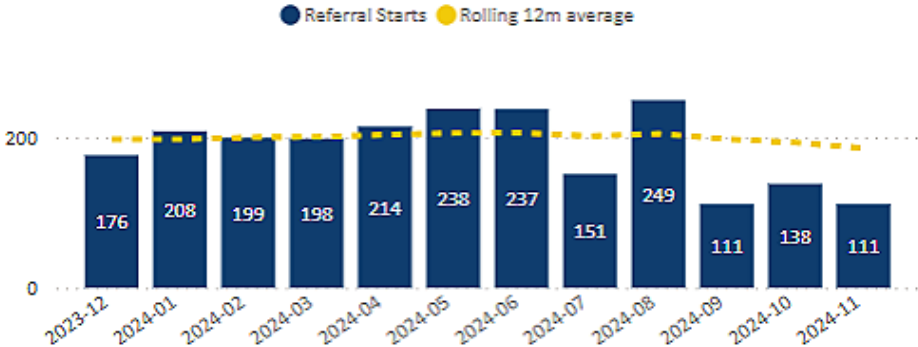
# Safeguarding Activity

The team receive on average 274 safeguarding referrals per month. For each referral social workers will then conduct initial enquiries to ascertain if the person is safe and what action needs to be taken to address the immediate concerns.

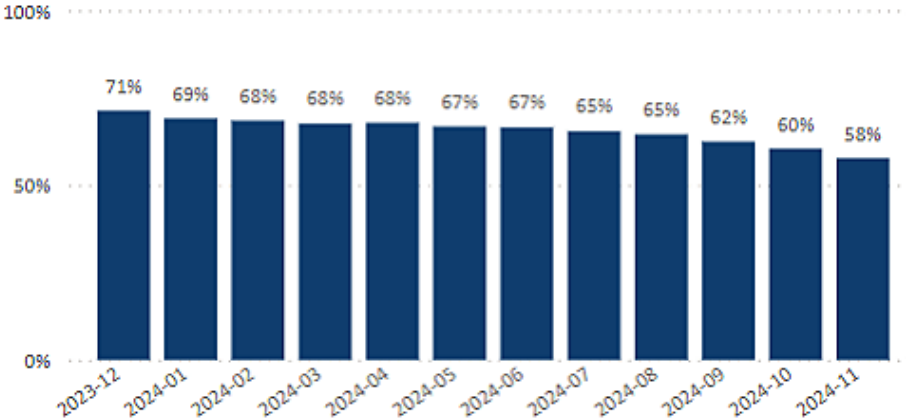
A number require a section 42 enquiry (around 30%) or other type of investigation (e.g. where there is still potential risk, but an individual does not meet the Care Act criteria). Urgent situations are always escalated to the Team Manager and Service Manager. Weekly oversight meetings are also in place with the Assistant Director.

Where possible safeguarding enquiries will be conducted and concluded within 28 days, however the complexity of the situation, the number of parallel enquiries and participating agencies may result in this taking longer.

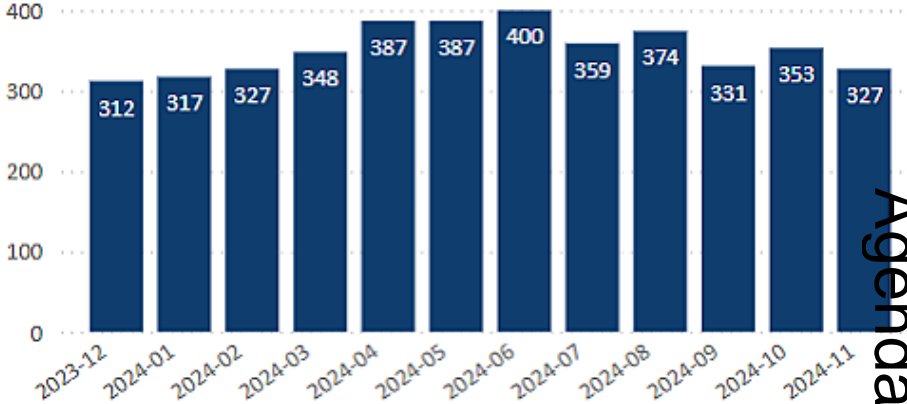
Referral Starts



Referrals Resolved within 28 days - rolling 12 months proportion



Referrals Open at Month End



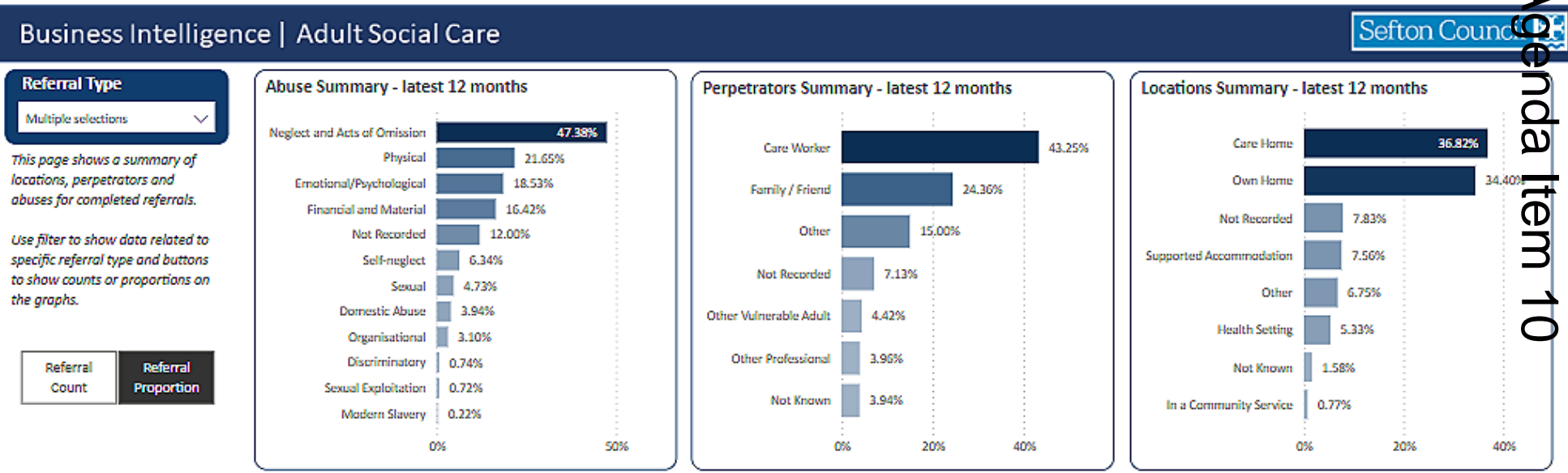
# Safeguarding Themes

Types of abuse are categorised in a number of ways. Neglect and acts of omission are the most common abuse types seen in safeguarding enquiries with almost 50% involving this abuse type.

Over 40% of enquiries involve abuse perpetrated by a care worker and 70% of abuse is perpetrated in a care home or the victim's own home.

Multi-agency organisational safeguarding arrangements are in place to ensure a swift and collective response to situations where there may be more than one concern raised in relation to specific care providers.

Proactive awareness raising regarding identifying, preventing and reporting abuse is also carried out by the Sefton Safeguarding Adults Board (SSAB)



Below heatmap can be expanded using plus sign (+) to show perpetrators.

Location Summary/ Perpetrator Summary	Discriminatory	Domestic Abuse	Emotional/Psychological	Financial and Material	Modern Slavery	Neglect and Acts of Omission	Not Recorded	Organisational	Physical	Self-neglect	Sexual	Sexual Exploitation
Care Home	3	3	138	86		1,101	58	45	361	7	54	2
Health Setting			17	7		178	13	20	34	3	7	1
In a Community Service			4	1		12	3	3	15		3	
Not Known		4	21	16	2	12	9	1	15	4	12	5
Not Recorded	2	5	21	24		30	248	5	24	4	5	
Other	6	19	98	72	3	76	23	4	86	29	41	14
Own Home	15	136	399	414	4	470	124	29	304	210	63	9
Supported	5	1	87	75		113	23	23	78	13	17	1

# Care Market – Care Quality Commission Ratings

Currently 84.5% of registered providers in Sefton are rated good or outstanding.

Of the people that we are currently commissioning the care for, nearly 81% are with providers rated good or outstanding.

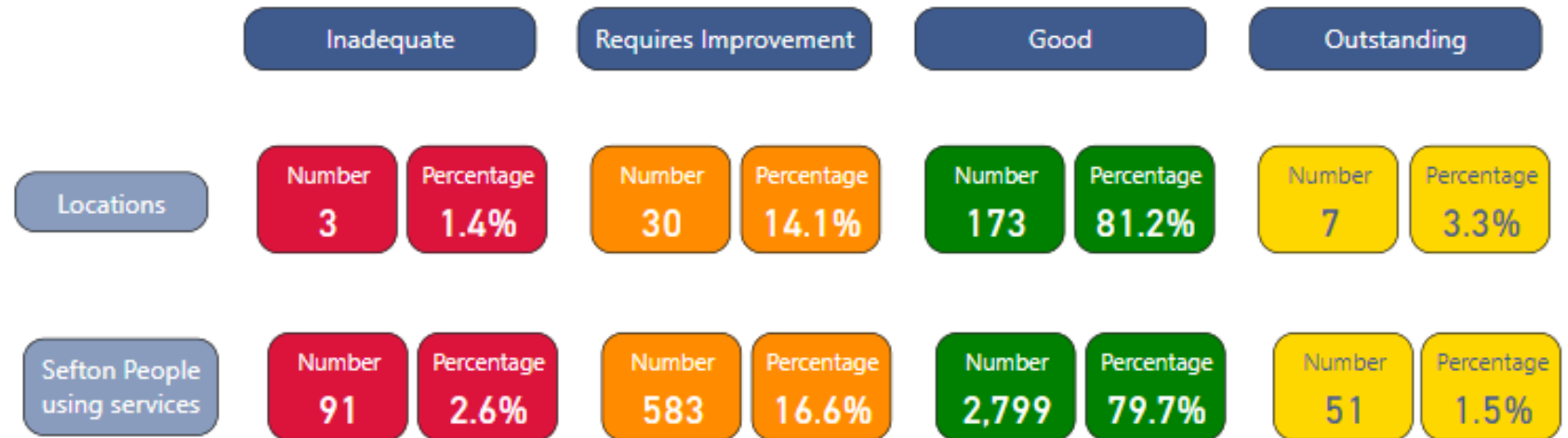
91 people are placed with inadequate providers. This includes 1 Domiciliary Care Provider and 2 Nursing Homes (one of which is in Sefton).

All individuals have been reviewed and action plans and risk mitigation is in place for all placements with those providers rated inadequate which includes oversight by both health and social care professionals. This can include suspension of new placements and targeted support for providers from the Council and NHS. Wherever required alternative support is arranged.

CQC are responsible for the reassessment of providers and have now adopted a risk-based approach, which can mean a significant delay in returning to re inspect especially if there is no deterioration in concern or indeed if the situation is improving

The Quality Assurance Team within Adult Social Care has a risk stratification model in place for all providers and works in collaboration with key partners to provide support where quality concerns have been identified. The Team is currently working with 15-20 providers.

*November 2024 snapshot*



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**Report Title: Domestic Abuse Update**

Date of meeting:	Tuesday 7 January 2025		
Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)		
Report of:	Assistant Director Communities		
Portfolio:	Communities & Partnerships		
Wards affected:	All		
Is this a key decision:	No	Included in Forward Plan:	No
Exempt/confidential report:	No		

**Summary:**

The purpose of the report is to update Overview & Scrutiny Members on Sefton’s strategic approach to tackling domestic abuse.

**Recommendation(s):**

- (1) Members note the content of the report

**1. The Rationale and Evidence for the Recommendations**

Elected members will benefit from understanding the work of the Domestic Abuse Board and how the council collaborates with partners to respond to the requirements of the Domestic Abuse Act locally. This will provide assurance as well as information and insight to support overview and scrutiny of this issue.

**2. Financial Implications**

# Agenda Item 11

The Domestic Abuse Act 2021 placed duties on local authorities across England to ensure that victims of domestic abuse and their children can access the right support in safe accommodation when they need it. The council received £631,105 in new burdens funding for 2024/25 for delivery of this duty. The Ministry of Housing, Communities & Local Government has confirmed that the domestic abuse safe accommodation grant will continue in 2025-26.

## 3. Legal Implications

The work of the board and commissioning of domestic abuse services is a statutory responsibility of the council

## 4. Corporate Risk Implications

If the work of the board and commissioning of domestic abuse services using allocated funds is not carried out, there is a risk that statutory requirements are not fulfilled.

## 5 Staffing HR Implications

None

## 6 Conclusion

The work of the board and commissioning of domestic abuse services is a statutory responsibility of the council.

## Alternative Options Considered and Rejected

There are no alternative options as Sefton's domestic abuse response and the work of the Domestic Abuse Partnership Board are a statutory requirement.

<b>Equality Implications:</b>
The equality implications have been identified and mitigated
<b>Impact on Children and Young People:</b>
Children and young people affected by domestic abuse are defined as direct victims within the Domestic Abuse Act 2021. Therefore, it is imperative that addressing the needs of children and young people is integral within the preventative and response work associated with domestic abuse.
<b>Climate Emergency Implications:</b>
The recommendations within this report will have a neutral impact.

## What consultations have taken place on the proposals and when?

### (A) Internal Consultations

The Executive Director of Corporate Services and Commercial (FD7889/24) and the Chief Legal and Democratic Officer (LD 5989/24) have been consulted and any comments have been incorporated into the report.



## (B) External Consultations

N/A

### Implementation Date for the Decision:

With immediate effect.

Contact Officer:	Mel Ormesher
Telephone Number:	
Email Address:	mel.ormesher@sefton.gov.uk

### Appendices:

Sefton Domestic Abuse Partnership Board Mid-year Report September 2024

**Background Papers:** None

## 1. Introduction/Background

- 1.1 In September 2023 elected members were provided with an update on the work of Sefton Domestic Abuse Partnership Board and the refresh of Sefton's Domestic and Sexual Abuse Strategy and accompanying action plan.

## 2. Sefton Domestic Abuse Partnership Board

- 2.1 Over the past year, Sefton Domestic Abuse Partnership Board has continued to meet on a bi-monthly basis and has focused on taking forward some of the key priorities identified in Sefton's Domestic and Sexual Abuse Strategy 2023-2028.
- 2.2 On 15 May 2024 the board met for a half day workshop session to review the work achieved so far against the strategy objectives and action plan and what activity needs to be prioritised going forward. This has been compiled into a mid-year report to share across partners and partnership (see attached appendix to this report). Key highlights from this report around what has been achieved over the past year include:

### Objective 1

**To prioritise a strategic partnership approach to the reduction of domestic and sexual abuse in our communities.**

- Partnership approach with Safer Sefton Together for the 2023 White Ribbon and 16 days of action campaign, repeated in 2024.
- Additional funding from the Standing Together national whole health project to trial the IRIS programme, which focuses on improving the response to domestic abuse in health settings. The programme started in January 2024 and by September there were 22 GP practices signed up for the IRIS domestic abuse training, with 6 practices having been trained in full. In addition to this, there have been 32 referrals from GPs for domestic abuse support since the programme started.

# Agenda Item 11

- Partnership mapping around current domestic abuse provision to build on the outcomes of the domestic abuse strategic assessment which has informed the development of the Healthy Relationships programme and multi-agency training on domestic abuse.
- Partnership away day held in May 2024 which aimed to take stock of progress so far and consider the experience of children's services in defining outcomes and measuring impact against activity.

## Objective 2

**To improve the prevention, early identification and response to domestic and sexual abuse.**

- Introduction of the new Healthy Relationships offer for children and young people. The Women's Aid's 'Expect Respect' programme is delivered in Sefton schools by Sefton Women and Children's Aid (SWACA) as part of Sefton Domestic Abuse Service. 4,128 children and young people have attended sessions between January and June 2024.
- An increase in opportunities for professionals working in Sefton to access free multi agency training on domestic abuse, including sessions on domestic abuse awareness, Multi-Agency Risk Assessment Conference (MARAC), coercive control and domestic abuse and children. Sessions continue to be delivered, and further training options are being developed, including a new e-learning domestic abuse awareness package which is hosted by Sefton Council's corporate learning site and launched in November 2024.

## Objective 3

**To increase the reporting of domestic and sexual abuse through awareness raising and access to support services.**

- Launch of a new borough wide Domestic Abuse Helpline 0151 394 1400 as part of the integrated Sefton Domestic Abuse Service (SDAS) open 8am-6pm Monday – Friday. Between November 2023 – June 2024 the helpline has received 3,173 calls.
- Introduction of new community based drop-in sessions as part of the integrated Sefton Domestic Abuse Service offer.
- Creation of a new Health IDVA (Independent Domestic Violence Advisor) post in January 2023 seconded to Mersey and West Lancashire Teaching Hospitals NHS Trust following a successful bid for funding from the Ministry of Justice via the Office for the Police and Crime Commissioner Merseyside. In 2023/24 144 victims/survivors were supported by the health IDVA.
- Development and launch of a new domestic abuse microsite which includes a range of information and guidance as well as links to support services:  
[www.sefton.gov.uk/domesticabuse](http://www.sefton.gov.uk/domesticabuse)

## Objective 4

**To work with commissioners to ensure a wide range of services are in place to support and protect victims and survivors of domestic and sexual abuse, including children.**

- New domestic abuse housing advisor post created within Sefton Council's housing options team who can offer specialist advice and guidance and is linked closely to local specialist domestic abuse support services.

# Agenda Item 11

- Opening of Sefton's new 24-hour refuge provision Eva House managed by SWACA for female victims of domestic abuse and their children. This consists of a total of 19 bedspaces – for up to 5 adults and 14 children. Between December 2023 and June 2024, 8 women and 14 children have been supported.
- Ongoing co-production of the new Sefton Domestic Abuse Service between the community safety and engagement team, children's services and the Integrated Care Board Sefton Place commissioning team, utilising learning from the proof of concept model currently in place.
- Development and procurement of a new Complex Lives Accommodation service – Athena House - for female victims of domestic abuse by Sefton Council. This service launched in August 2024 and is being delivered as a partnership approach between Excel Housing and Venus. It offers 12 beds with a mix of crisis, short, and long-term accommodation and will include 24/7 support with a therapeutic and trauma informed approach.

## Objective 5

### **To hold perpetrators to account through appropriate criminal justice sanctions and effective interventions that promote long term behaviour change.**

- Development and introduction of a new pilot multi-agency approach to tackling serial/high risk of harm perpetrators of domestic abuse in Sefton which started in February 2024.
- Introduction of the Caring Dads programme within the safer families practice team in children's social care, in May 2023. This is a group behaviour change programme for fathers who have been abusive, neglectful or violent in their families and is run by trained facilitators.

## Objective 6

### **To safeguard children and vulnerable adults from the impacts of living within a household experiencing domestic and sexual abuse.**

- Creation of the Sefton safer families practice team in children's social care, with a focus on improving practice in social care, the implementation and delivery of a new Caring Dad's programme to offer behaviour change opportunities to perpetrators of domestic abuse and supporting the multi-agency training offer.
- Additional domestic abuse staffing resource provided by SWACA to Sefton Children's Social Care at the Integrated Front Door (now FAST and CHAT) and in the Sefton Safer Families Practice Team.

2.3 The board is also working on a creating a performance dashboard which will include a combination of quantitative and qualitative data and will be used as a tool to help measure the impact of the strategy.

## **3. Domestic abuse improvements - Ofsted monitoring visit June 2024**

3.1 Positive work around domestic abuse was highlighted in the feedback provided by Ofsted following their latest monitoring visit to Sefton children's services on 25 and 26 June 2024. This included specific reference to ~~improvements~~ in the response to domestic abuse

# Agenda Item 11

(please see below) which reflects the partnership work between children's social care and community safety & engagement and preventing homelessness teams, and the prioritisation of this work.

"The approach to dealing with domestic abuse concerns is improving. There are now clear discussions with victims in considering children's safety before contacting perpetrators. Additional resources of a dedicated Sefton's women and children's aid worker are enabling swift access to support victims. Victims are quickly contacted, risk assessments are completed, and safety plans implemented. This is providing a more holistic approach to supporting victims to keep children safer."

## **4. Other initiatives**

4.1 Several other initiatives are also in development or being rolled out, including:

### **4.1.1 Brighter Kinder Future project**

In September 2024 Sefton was successful in securing funding from Merseyside Violence Reduction Partnership to implement Brighter Kinder Futures to offer a whole family response to domestic abuse. Delivered by children's social care, this includes 3 elements:

- Father's using harmful behaviours – Caring Dad's is a 17-week programme using a CBT model of intervention to create behaviour change.
- Adult victim/survivors – Healing Together is a 6-week trauma informed programme to support increased emotional recovery following abuse.
- Child victim/survivors – Healing Together is a 6-week trauma informed programme with 3 options – experience of domestic abuse, angry feelings, stress and anxiety.

# Sefton Domestic Abuse Partnership Board

Mid-Year Report September 2024



# Agenda Item 11

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## Our partners



## About the Board

The Domestic Abuse Act was signed into law on 29 April 2021. The Act is designed to raise awareness of domestic abuse and provide a range of further protections for victims of domestic abuse as well as strengthen measures to tackle perpetrators.

Part 4 of the Act places a statutory duty on local authorities in England to provide support to victims of domestic abuse and their children in refuges and other safe accommodation.

The Government has provided a statutory framework which outlines how local authorities are expected to meet the needs of this duty, which includes:

- The appointment a multi-agency Domestic Abuse Local Partnership Board
- Assessment of the need for accommodation-based domestic abuse support
- Development and publication of a strategy

The Sefton Domestic Abuse Partnership Board was established in September 2021, taking over the responsibilities of the previous Sefton Domestic Abuse steering group.

To ensure a comprehensive approach to tackling domestic abuse in Sefton, the Board is responsible for overseeing all areas of domestic abuse and not just safe accommodation.

There is a legal requirement to have the following representatives on the Board:

- Local authority
- Representative of victims of domestic abuse
- Representative of children of victims of domestic abuse
- Other VCF organisations working with domestic abuse victims
- Health representative
- Criminal justice representative.

Sefton's Domestic Abuse Partnership Board also includes a number of other agency representatives so there is a wide range of involvement and partnership working. Details of the Board's membership can be found in Appendix B ([hyperlink](#)).

The Board's Vision is set out in the Sefton Domestic and Sexual Abuse Strategy 2023-28

- That domestic and sexual abuse is viewed and challenged as an unacceptable form of behaviour by all our communities.



- That victims and survivors of domestic and sexual abuse and their families in Sefton feel safer in their communities, are protected from harm, and are able to move forward positively with their lives as a result of receiving the support and interventions they need.
- That the behaviour of perpetrators is effectively challenged, and perpetrators are fully held to account.

## Board Governance

Sefton Domestic Abuse Partnership Board is responsible for overseeing the delivery of Sefton’s Domestic and Sexual Abuse Strategy and meets on a bi-monthly basis.

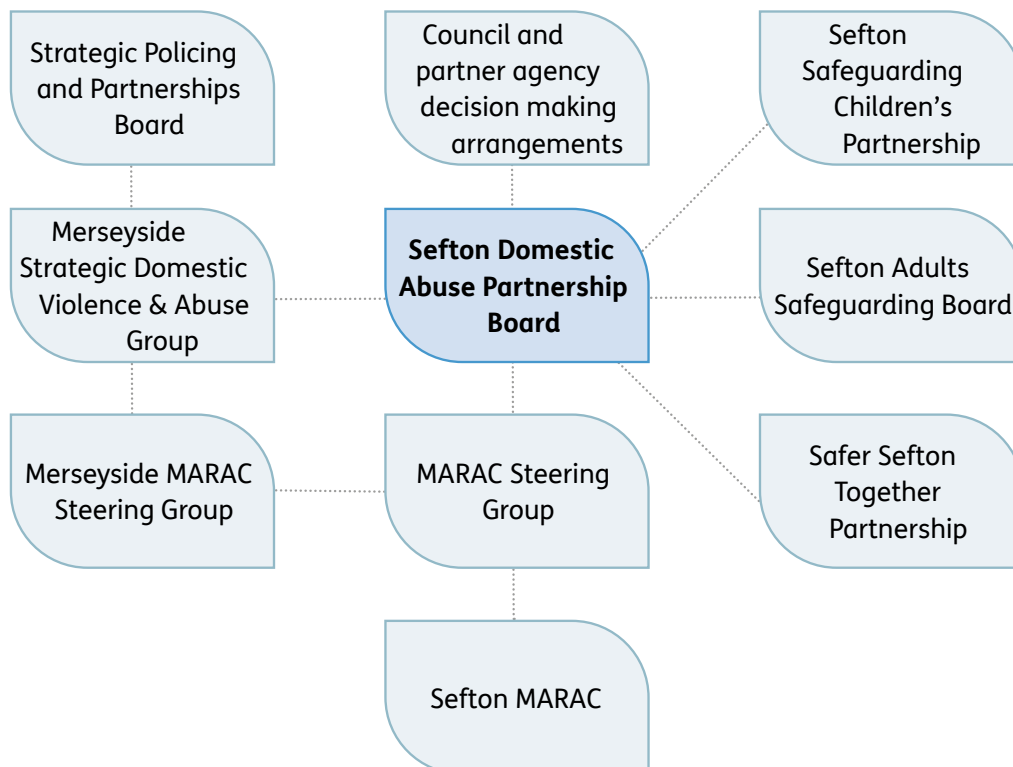
There are 3 sub-groups of the Board which are responsible for taking forward the Strategy Action Plan. They are based on the Strategic Themes outlined in the Strategy and meet on a monthly basis.

### Sub-Group 1 Leadership & Governance and Prevent

### Sub-Group 2 Protect and Repair

### Sub-Group 3 Children and Young People

The Board is also closely linked with a number of other multi-agency partnerships in recognition of how domestic abuse cuts across a range of work areas.



## Learning from Domestic Homicide Reviews

Domestic Homicide Reviews (DHRs) were introduced in April 2011 under section 9 of the Domestic Violence, Crime and Victims Act 2004. The purpose of these reviews is to understand what lessons can be learned and to implement changes to help stop them happening again and to help prevent future deaths.

A DHR is a locally conducted multi-agency review of the circumstances in which 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 or she was related, or with whom he or she was or had been in an intimate personal relationship or
- member of the same household.

This includes considering deaths by suicide whereby a history of domestic abuse with coercive and controlling behaviour was present or suspected.

DHRs are a statutory responsibility for Community Safety Partnerships (CSPs). In Sefton, they are managed via the Safer Sefton Together (SST) partnership. To date, 16 DHRs have been completed in Sefton on behalf of Safer Sefton Together.

The learning and recommendations from these reviews is linked closely to the work of the Domestic Abuse Partnership Board to ensure they are being enacted on and are directly built into the Strategy Action Plan. In February 2023 an Analysis Report on DHR1-14 was produced on behalf of the Board to identify key themes to help support the prioritisation of key activities within the Strategy.

## Understanding and awareness of domestic abuse

- Lack of consistency amongst professionals of what domestic abuse can consist of.
- Lack of knowledge of family violence and abuse.
- Lack of understanding of the barriers victims can face in making a disclosure, particularly for older people.
- Lack of understanding of the law in relation to domestic abuse in the context of GDPR and consent, and when to override this.

## Providing an appropriate response

- Lack of risk recognition /use of risk assessment to identify risk.
- Lack of understanding of what support services are available and the referral processes.

- A need for more accessible advice and resources for family and friends.
- Practitioners not following organisational policies and procedures.
- Lack of management oversight/quality assurance on cases involving domestic abuse.

## Complex needs

- Victims of domestic abuse with substance misuse and/or mental health issues face additional vulnerabilities and barriers to accessing support meaning standard referral/support routes and services may not be sufficient.
- The risk of suicide for victims of domestic abuse is increased but often not properly considered or understood.
- Consider how domestic abuse victims with complex needs can be best supported by services and multi-agency safeguarding partnerships.

## Professional curiosity

- Lack of further querying by practitioners of issues presented – both in terms of issues faced by victims and what is presented by perpetrators.
- A need for more routine enquiry of domestic abuse indicators.

## Impact of trauma

- Lack of consistent understanding of the additional trauma impact on victims of domestic abuse who have children removed from their care.
- Victims with complex needs often have a significant history of trauma.
- A need for a greater understanding of the impact experiencing domestic abuse as a child can have on an individual.

Additional learning from further current DHRs will be incorporated into the work of the Board as it becomes available.

This work also continues to feed into the Merseyside strategic domestic abuse partnership arrangements to support pan Merseyside priorities.

The Board also continues to develop involvement and sharing of information with other local partnerships with responsibility for learning reviews – such as Local Child Safeguarding Practice Reviews and Safeguarding Adult Reviews – to support collaborative working on similar themes.

## Experts by experience - survivor voice

The Partnership recognises that while this is still an underdeveloped area which must be prioritised in the next year. Currently survivor voice is represented at the Board via specialised domestic abuse support services and early mechanisms are now established to gather feedback and survivor voice from clients who have utilised local domestic and sexual abuse support services, such as those below:

**“Talking has allowed me to put the past behind me and cope better with what happened to me.”**

“The services have helped me be more mindful to put myself first.”

“I was lucky enough to find the Freedom Programme after 20 years of domestic abuse. Following the Freedom Programme I was invited to complete the Freedom Forever programme. At first I wasn't sure I was ready to think about relationships and moving forward, but I am so glad I did. The 9 weeks are intensive, but it has allowed us as a group to grow and share experiences on ensuring we move forward with housing, finances, parenting and new relationships in a safe and healthy way. I have come away with some great tools to be able to move on from domestic violence. Thank you for having me and supporting me grow. I will forever be thankful to Jemma and her team as without them I know I wouldn't be here today.”

**“I think the best thing to say is how important exercise is, it can boost your confidence and make you feel powerful again after feeling so powerless due to DV.”**

“I valued the care, compassion and understanding.”



**“The place was very comfortable and welcoming. Everything was well explained in sessions, I learn a lot. I felt at ease and validated which was really helpful.”**

“AW was amazing, she didn't judge me and I felt that she really understood what I had gone through. She helped me to see that I am strong, despite what he (ex-partner) did and said about me. I have a long way to go, but in the future, I feel that I could maybe help other women who have experienced what I have gone through. I just want to say thank you to AW.”

“You have all been amazing. I don’t know how I would have survived these last 7 weeks without you. You’ve been a family when I have been isolated and away from mine and part of my team. My boys cried when I told them we had to leave, and I will cry too. The work you do here is amazing and you all do a fantastic job.”

**“Thank you again Victoria for your ongoing support especially during this difficult time in my life. The situation would have been very different if it hadn’t of been for your help and support.”**



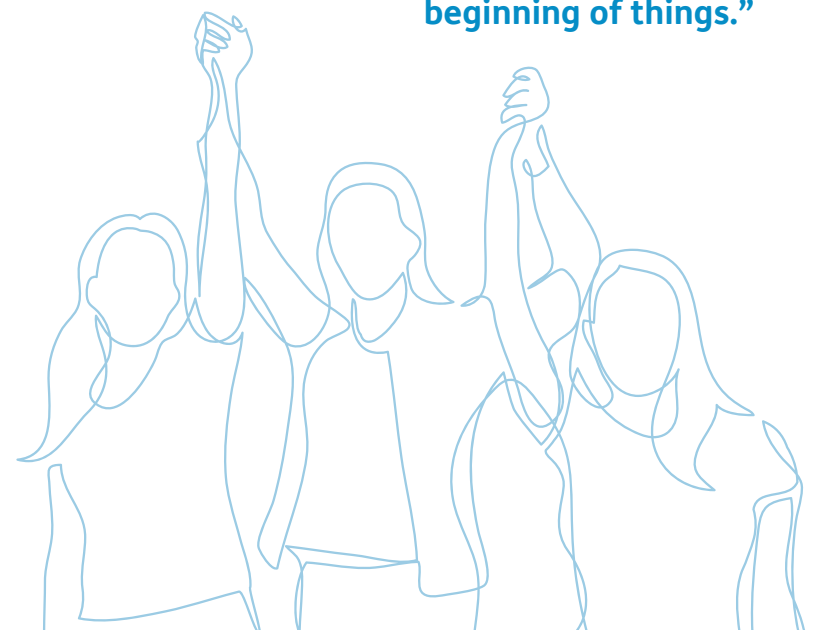
“I find it so easy to talk to you - it’s difficult with family because they are emotionally invested and affected.”

“You were the only one there throughout such a negative experience with every other agency that got it and I felt I trusted. I can honestly say you were the only one who seemed to fully understand every emotion I felt, even when my friends and family have been so supportive. Thank you so much for being there.”

**“I didn’t know what support was available in this country for abuse and feel reassured to know that there are services who will help you and not judge. I feel a lot better now.”**

**“I just wish everything was under one person, it was a bit confusing having so many people involved at once at the beginning of things.”**

The Partnership will develop a range of mechanisms to enable victims and survivors to have their voices heard across all elements of Sefton’s Domestic and Sexual Abuse Strategy. This includes gathering qualitative and quantitative data on the impact of support services.



## Strategy progress and achievements so far

Sefton's Domestic and Sexual Abuse Strategy contains a range of priorities under 3 Strategic Themes to be delivered over the next 5 years.

- 1. Prevent** - Early intervention provision, including improving public knowledge on domestic and sexual abuse to drive a cultural shift, intervening earlier to prevent and reduce the impact of longer term poor outcomes, and breaking the cycle of abuse across generations.
- 2. Protect** - Keeping victims/survivors of domestic and sexual abuse and their children safe in a consistent and coordinated way, providing safe and quality assured support services, and challenging the behaviour of perpetrators whilst also offering opportunities to change
- 3. Repair** - Supporting the development of resilience for families and individuals to move on and deal with future life challenges, providing ongoing support beyond crisis intervention.

In addition to this, 2 additional cross cutting priorities have been created as part of the Sub-Group remits:

**Leadership & Governance** – to ensure the board has an effective structure and ensure delivery of the strategy.

**Children and Young People** – to ensure there is sufficient focus on supporting our children and young people.

On 15 May 2024 the Board held a half day workshop session to review the Strategy Themes and Objectives, and to reflect on what has been achieved so far in the past 12 months and understand what needs to be refreshed and prioritised going forward. Highlights on new areas of work that have been progressed towards the achievement of the Strategy Objectives are outlined below:

### Objective 1 - To prioritise a strategic partnership approach to the reduction of domestic and sexual abuse in our communities.

- Joint partnership approach with Safer Sefton Together for the 2023 White Ribbon and 16 days of Action campaign, which included the following:
  - Promotion of 16 days of action themes and new SDAS Helpline across partner social media channels
  - White Ribbon Schools resources 'Building Gender Equality' shared and promoted across all Sefton schools as part of healthy relationships mapping work

- Opportunities to support the campaign and make the White Ribbon promise
  - ◇ Sefton Health & Social Care Forum hosted by Sefton CVS as part of National Safeguarding Week
  - ◇ Sefton CVS Annual Conference
  - ◇ Sefton Council Full Council meeting
  - ◇ Sefton Domestic Abuse Partnership Board and Safer Sefton Together meetings
- Display stands and information across public Council buildings (libraries, leisure centres, Family Wellbeing Centres and Town Halls) and Mersey and West Lancashire Teaching Hospitals NHS Trust sites in Southport and Ormskirk.
- A range of community based activities hosted by RASA Merseyside
- Sefton has been successful in securing 12 months funding from the Standing Together national Whole Health project to trial the IRIS programme. Sefton Council and Merseyside ICB (Sefton Place) Safeguarding Team helped prioritise this as an area for focus by providing information on the need for this type of programme in Sefton as part of the Whole Health mapping phase. SWACA was successful in becoming the local provider to deliver IRIS and have employed the Advocate Educator. The programme started in January 2024 and at September 2024 22 GP practices in Sefton are signed up for the IRIS domestic abuse training, with 6 practices having been trained in full. In addition to this, there have been 32 referrals from GPs for domestic abuse support since the programme started.
- Partnership mapping around current domestic abuse provision to build on the outcomes of the Domestic Abuse Assessment which has informed the development of the Healthy Relationships programme and multi-agency training on domestic abuse.

### **Objective 2 - To improve the prevention, early identification and response to domestic and sexual abuse.**

- Introduction of the new Healthy Relationships offer for children and young people. The Women's Aid's 'Expect Respect' programme is delivered in Sefton schools by SWACA as part of Sefton Domestic Abuse Service. 4,128 children and young people have attended sessions between January and June 2024.
- An increase in opportunities for professionals working in Sefton to access free multi-agency training on domestic abuse. This has included the following in 2023/24 which provides a snap shot of what has been promoted and shared across Sefton partnerships.

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Name of training	Provider	Format	Date
Domestic Abuse Awareness	Sefton CSC- Safer Families Practice Team, Sefton Council	In person	March 2023
Domestic Abuse Awareness	SWACA via Sefton Safeguarding Children's Partnership	In person	June 2023, April 2024
Sefton MARAC Briefing	Community Safety & Engagement, Sefton Council	Virtual	5 sessions June 2024
Coercive Control	Sefton CSC - Safer Families Practice Team, Sefton Council	Briefing	Sept 2023
Supporting Survivors of Domestic Abuse and Harmful Practices from Marginalized Communities	Wirral Change	Virtual	February and March 2024
Minority Ethnic Women's Advocate training	Wirral Change	2 & Half days	March 2024
Children & Domestic Abuse	Sefton Domestic Abuse Service	Virtual	March, April, May & June 2024
An Introduction to Domestic Abuse	Sefton Domestic Abuse Service	Virtual and in person	March, April, May & June 2024
Coercive and controlling behaviour	Sefton Domestic Abuse Service	Virtual	May and June 2024
Trauma Informed Practice	Merseyside Violence Reduction Partnership	4x in person sessions	Various dates in 2023/24
Female Genital Mutilation (FGM)	Mersey Care	Virtual	May 2024
Honour Based Abuse	Karma Nirvana via Sefton Safeguarding Children's Partnership	Virtual	July 2024

**Objective 3 - To increase the reporting of domestic and sexual abuse through awareness raising and access to support services.**

- Launch of a new borough wide Domestic Abuse Helpline 0151 394 1400 as part of the integrated Sefton Domestic Abuse Service (SDAS) open 8am-6pm Monday – Friday3  
Between November 2023 – June 2024 the Helpline has received 3,173 calls.





- Introduction of new community based drop-in sessions as part of the integrated Sefton Domestic Abuse Service offer. Locations for sessions are currently being reviewed to consider additional community venues.
- Creation of a new Health IDVA (Independent Domestic Violence Advisor) post in January 2023 seconded to Mersey and West Lancashire Teaching Hospitals NHS Trust Mersey following a successful bid for funding from the Ministry of Justice via the Office for the Police and Crime Commissioner Merseyside. In 2023/24 144 victims/survivors were supported by the Health IDVA.

- Development and launch of a new domestic abuse microsite which includes a range of information and guidance as well as links to support services. [www.sefton.gov.uk/domesticabuse](http://www.sefton.gov.uk/domesticabuse)

**Objective 4 - To work with commissioners to ensure a wide range of services are in place to support and protect victims and survivors of domestic and sexual abuse, including children.**

- New Domestic Abuse Housing Advisor post created within Sefton Council's Housing Options Team who is able to offer specialist advice and guidance and is linked closely to local specialist domestic abuse support services.
- Opening of Sefton's new 24 hour refuge provision for female victims of domestic abuse and their children. This consists of a total of 19 bed spaces – for up to 5 adults and 14 children. Between December 2023 and June 2024, 8 women and 14 children have been supported.
- Ongoing co-production of the new Sefton Domestic Abuse Service between Sefton Council Community Safety and Engagement team, Children's Services and Integrated Care Board Sefton Place commissioning team, utilising learning from the Proof of Concept model currently being delivered.
- Development and procurement of a new Complex Lives Accommodation service for female victims of domestic abuse by Sefton Council. This service will be delivered as a partnership approach between Excel Housing and Venus and will be operational by September 2024. It will offer 12 beds with a mix of crisis, short, and long-term accommodation and will include 24/7 support with a therapeutic and trauma informed approach.

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## **Objective 5 - To hold perpetrators to account through appropriate criminal justice sanctions and effective interventions that promote long term behaviour change.**

- Development and introduction of a new pilot multi-agency approach to tackling serial/ high risk of harm perpetrators of domestic abuse in Sefton which started in February 2024.
- Introduction of the Caring Dads programme within the Safer Families Practice Team in Children's Social Care, Sefton Council in May 2023. This is a group behaviour change programme for fathers who have been abusive, neglectful or violent in their families and is run by trained facilitators.

## **Objective 6 - To safeguard children and vulnerable adults from the impacts of living within a household experiencing domestic and sexual abuse.**

- Creation of the Sefton Safer Families Practice team in Sefton Children's Social Care, with a focus on improving practice in social care, the implementation and delivery of a new Caring Dad's programme to offer behaviour change opportunities to perpetrators of domestic abuse, and supporting the multi-agency training offer.
- Additional domestic abuse staffing resource provided by SWACA to Sefton Children's Social Care- at the Integrated Front Door and in the Sefton Safer Families Practice Team.



## Looking ahead – 2024/25 Priorities and Actions

The Board feels progress has been made but is fully aware there is still lots to do. The Strategy is a 5-year plan with a broad range of ambitions. As part of the workshop session on 15 May 2024, partners discussed and identified what needed to remain a priority and areas that needed to be progressed further.

The following provides an overview of the outcomes of this workshop, including the key themes identified by partners and suggested actions:

### Objective 2 - To improve the prevention, early identification and response to domestic and sexual abuse.

Key themes identified:

1. **Early Intervention:** All partners emphasised the importance of addressing domestic abuse at an early stage. This includes preventing escalation and providing support before risks increase.
2. **Training and Consistency:** The need for quality training for front-line staff, considering the importance of consistent language and approaches across agencies.
3. **Resource Management:** Resource allocation, understanding funds brought into the system, and working smarter with available resources.
4. **Data-Driven Approach:** Thorough analysis of data, understanding case numbers and their needs, and tailoring interventions based on characteristics.
5. **Awareness and Education:** Age-appropriate campaigns and training to raise awareness among less represented demographic areas, young people and older individuals.

Overall, these themes underscore the collaborative efforts required to effectively address domestic and sexual abuse, emphasising early action, consistency, and resource optimisation.

Action plan based on key themes –

1. **Early Intervention and Consistency:**
  - Develop a clear pathway for lower-risk referrals/cases.
  - Provide a toolkit for practitioners with key messages and guidance.
  - Ensure consistent language and approach across agencies.
  - Train staff to deliver this approach effectively.

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## 2. Resource Management:

- Identify funds brought into the system.
- Optimise resource deployment.
- Address recruitment challenges in the workforce.

## 3. Data-Driven Approach:

- Analyse case numbers and characteristics.
- Understand risk around resource deployment.

## 4. Awareness and Education:

- Tailor campaigns for different age groups.
- Include consent discussions and sexual violence awareness.
- Address barriers for specific groups (e.g., males, older people).

**Objective 3 - To increase the reporting of domestic and sexual abuse through awareness raising and access to support services.**

Key themes identified:

1. **Emphasis on Reporting and Confidence:** All partners highlighted the importance of increasing reporting.
2. **Collaboration and Consistency:** ensuring consistent messaging and training across agencies. All partners support peer reviews to gather evidence of practice and improvements as well as standardised approaches where possible.
3. **Creative Solutions:** A multi-faceted approach to address fear of reporting. Utilisation of community safe spaces (e.g., libraries, family wellbeing hubs) for disclosure.

Overall, the themes emphasise collaboration, standardised approaches and creative solutions to enhance disclosures and support services.

Action plan based on key themes –

### 1. Enhance Reporting and Confidence:

- Develop targeted awareness campaigns to encourage reporting.
- Ensure consistent messaging across agencies.
- Promote protective orders and Claire's Law.
- Establish clear pathways for friends and family to report concerns.

### 2. Resource Allocation and Training:

- Provide trauma-informed training for professionals.

- Address fear of reporting through multi-faceted approaches.
- Collaborate with private sector/businesses for wider engagement.

### 3. Data Collection and Safe Spaces:

- Collect data beyond police records (e.g., support service uptake).
- Create safe spaces (e.g., libraries, family hubs) for disclosure.
- Implement routine questioning and peer review within agencies.

**Objective 4 - To work with commissioners to ensure a wide range of services are in place to support and protect victims and survivors of domestic and sexual abuse, including children.**

Key themes identified:

#### 1. Collaboration and Cohesive Approach:

- All partners emphasised collaboration between services and agencies.
- They highlight the importance of a cohesive offer and strong collaboration.

#### 2. Resource Optimisation and Funding:

- The majority discussed sustainable funding, co-commissioning, and shared resources.
- The importance of robust contract monitoring and value for money.

#### 3. Data-Driven Decision-Making:

- Focus on data collection, overlaying information, and understanding resources.
- Importance of capturing victims' experiences and measuring engagement.

#### 4. Creative Strategies:

- Suggestions for lobbying for longer-term funding and using procurement rule changes.
- Community events and independent evaluators.

Overall, these themes underscore the need for collaboration, resource optimisation, evidence-based approaches, and creative solutions in supporting abuse victims and survivors.

Action plan based on key themes –

#### 1. Collaboration and Cohesive Approach:

- **Objective:** Strengthen collaboration between services.
- **Actions:**

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- ◇ Facilitate joint meetings to align understanding of needs.
- ◇ Review commissioned services based on current needs.
- ◇ Encourage services to evolve as requirements change.
- ◇ Implement robust contract monitoring.

## 2. Resource Optimization and Funding:

- **Objective:** Ensure sustainable funding and resource utilization.
- **Actions:**
  - ◇ Co-commission services across partnerships.
  - ◇ Explore shared resources and funding transfers.
  - ◇ Advocate for long-term funding at the national level.
  - ◇ Leverage procurement rule changes.

## 3. Data-Driven Decision-Making:

- **Objective:** Use evidence to inform decisions.
- **Actions:**
  - ◇ Overlay information across partnerships to identify gaps.
  - ◇ Collect data on engagement and quality of work.
  - ◇ Regularly report to the Board on progress.

## 4. Creative Strategies:

- **Objective:** Innovate and engage.
- **Actions:**
  - ◇ Piggyback on community events for awareness campaigns.
  - ◇ Involve non-threatening teams (e.g., money management, fire service).
  - ◇ Collaborate with independent evaluators for effectiveness assessment.

**Objective 5 - To hold perpetrators to account through appropriate criminal justice sanctions and effective interventions that promote long term behaviour change.**

Key themes identified:

### 1. Accountability and Outcomes:

- All partners emphasised the importance of holding perpetrators accountable, including outcomes such as reduced crimes, prevention of reoffending, and increased prosecutions.

## 2. Measures and Evidence:

- Discussions around increased prosecution rates and engagement in multi-agency plans.
- Highlighted the need for better data collection and understanding of risk.

## 3. Creative Approaches:

- Mentions of the “Caring Dads” programme and volunteer services.
- Suggestion of a perpetrator framework and early intervention.
- Ensure that there is an offer for all perpetrators.

Overall, these themes underscore collaboration, evidence-based approaches, and innovative strategies in addressing domestic abuse perpetrators.

Action plan based on key themes –

### 1. Collaboration and Accountability:

- **Objective:** Strengthen collaboration among agencies.
- **Actions:**
  - ◇ Establish regular joint meetings focused on perpetrators.
  - ◇ Identify the most dangerous offenders based on intel from a variety of sources.
  - ◇ Develop a hub for men to access support.
  - ◇ Address barriers for men reporting abuse.

### 2. Evidence-Based Measures:

- **Objective:** Use data to inform decisions.
- **Actions:**
  - ◇ Monitor prosecution rates and breach incidents.
  - ◇ Collect service user feedback.
  - ◇ Assess programme effectiveness.
  - ◇ Record victim/survivor journeys.

### 3. Creative Approaches:

- **Objective:** Innovate and prevent reoffending.
- **Actions:**
  - ◇ Implement behaviour change programmes for all types of perpetrator.
  - ◇ Involve grassroots organisations.
  - ◇ Address child-on-parent violence through early intervention.

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**Objective 6 - To safeguard children and vulnerable adults from the impacts of living within a household experiencing domestic and sexual abuse.**

Key themes identified:

**1. Outcome Focus:**

- All partners emphasise specific outcomes, such as reducing risk, increasing knowledge, and raising public confidence.
- They recognize the importance of early identification and prevention.

**2. Measures and Evidence:**

- Review of strategies, monitoring interventions, and tracking cases.
- Suggestions on capturing data on prevalence reduction and understanding risk.

**3. Collaboration and Education:**

- All recognised that collaboration among agencies is crucial.
- Educating children on healthy relationships is highlighted as a preventive measure.

**4. Holistic Approach:**

- Emphasis on considering the whole family, including both victims and perpetrators.
- Mentions of focusing on adults and older people.

Overall, these themes underscore the need for collaboration, evidence-based approaches, and a comprehensive strategy to protect vulnerable individuals from abuse .

Action plan based on key themes –

**1. Collaboration and Knowledge Sharing:**

- **Objective:** Enhance collaboration among agencies.
- **Actions:**
  - ◇ Establish regular joint meetings to improve understanding of each agency's role.
  - ◇ Develop a trauma-informed approach to engage families.
  - ◇ Use established family links for creative interventions.
  - ◇ Review strategies and assess knowledge levels of front-line services.

**2. Data Integration and Monitoring:**

- **Objective:** Use evidence-based measures.
- **Actions:**
  - ◇ Create an outcomes framework to track progress.



- ◇ Integrate data systems (e.g., Oasis, Liquid Logic, Power BI).
- ◇ Collect service user feedback and track cases.

### 3. Prevention and Education:

- **Objective:** Educate children and prevent future abuse.
- **Actions:**
  - ◇ Provide healthy relationship training beyond schools.
  - ◇ Focus on adults, including older individuals.
  - ◇ Analyse data to identify trends and risks.

These themes and actions have been incorporated within the review of the current Strategy Action Plan which is in the process of being refreshed and updated.

## Existing Priorities - Further continuing activity

In addition to the actions identified by partners at the Board workshop, there are a number of continuing activities that are either already underway or have been identified as priority pieces of work that need to be progressed.

- Development of an Experts by Experience framework which includes survivor forum(s) options for representation on the Board, involvement in the development of campaigns and resources, and involvement in future service commissioning.
- Development and implementation of a data dashboard which enables the Partnership to better understand the local picture of domestic and sexual abuse in Sefton and what impact the Strategy is having in making a positive difference. This will include qualitative information from victims and survivors gathered through the Experts by Experience framework.
- Continued development and roll out of domestic abuse multi-agency training:
  - new DA Awareness E learning programme in development with the aim to be launched by October 2024.
- Continued development of the Domestic Abuse microsite, to include a refreshed Multi-Agency Domestic Abuse Protocol/Handbook and thematic resources for professionals.
- Development of a domestic abuse perpetrator framework for Sefton which provides a comprehensive and coordinated approach to tackling the behaviour of perpetrators.
- Developing and implementing a campaign around tackling sexual violence in the night time economy.

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## How to get help

Information, guidance and support is available at Sefton's Domestic Abuse Helpline on **0151 394 1400**. This is available to anyone in Sefton:

- if you are experiencing domestic abuse yourself
- you are a family member, friend or colleague
- you are a professional working with a victim/survivor

Further information, including advice and guidance and the latest news on domestic abuse can also be found at [www.sefton.gov.uk/domesticabuse](http://www.sefton.gov.uk/domesticabuse)



## Emergency situations and Safeguarding

If you or someone you are concerned about is in immediate danger call 999

If you are worried about the safety of a child, contact the Sefton Children's Help and Advice Team (CHAT) or Sefton Family Advice and Support Team (FAST). Visit **here** for more information Children's Help and Advice Team (CHAT) ([sefton.gov.uk](http://sefton.gov.uk)) Family Advice and Support Team ([sefton.gov.uk](http://sefton.gov.uk))

If you are worried an adult is at risk of, or is experiencing, abuse or neglect, consider making an Adult Safeguarding referral. Visit **here** for more information Worried about an adult ([sefton.gov.uk](http://sefton.gov.uk))



## Appendix A

### Definition of domestic abuse and sexual abuse

The Domestic Abuse Act 2021 provides a definition of domestic abuse which can be found **here** [www.gov.uk/government/publications/domestic-abuse-bill-2020-factsheets/statutory-definition-of-domestic-abuse-factsheet](http://www.gov.uk/government/publications/domestic-abuse-bill-2020-factsheets/statutory-definition-of-domestic-abuse-factsheet)

In summary, it includes the following key points:

The behaviour of a person towards another person is defined as “domestic abuse” if:

- both people are aged 16 or over and are “personally connected” to each other  
and
- the behaviour is abusive

Behaviour is defined as “abusive” if it consists of any of the following:

- physical or sexual abuse
- violent or threatening behaviour
- controlling or coercive behaviour
- economic abuse
- psychological, emotional or other abuse

It does not matter whether the behaviour consists of a single incident or a pattern of behaviour.

Two people are “personally connected” to each other if any of the following applies:

- they are, or have been, married to each other
- they are, or have been, civil partners of each other
- they have agreed to marry one another (whether or not the agreement has been terminated)
- they have entered into a civil partnership agreement (whether or not the agreement has been terminated)
- they are, or have been, in an intimate personal relationship with each other

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- they each have, or there has been a time when they each have had, a parental relationship in relation to the same child
- they are relatives

It should be noted behaviour considered as abusive towards a victim can also include conduct directed at another person eg the victim's child/children

Children are also explicitly included within the Act as direct victims of domestic abuse. This includes circumstances where a child:

- sees or hears, or experiences the effect of, the abuse,

and

- is related to either the victim or perpetrator of the abuse

There is no one set definition of sexual violence or abuse; however, it is widely accepted as being any unwanted sexual act or activity. There are many different kinds of sexual violence and abuse, including rape, sexual assault, child sexual abuse, sexual harassment and sexual exploitation. Sexual abuse can be perpetrated by a stranger or by someone known.

## Appendix B

### Sefton Domestic Abuse Partnership Board Membership

- Sefton Metropolitan Borough Council - Elected Member, Communities, Adult Social Care, Children's Social Care, Public Health and Housing and Investment Services.
- Sefton Women's and Children's Aid (SWACA)
- Rape and Sexual Assault Merseyside (RASA)
- Merseyside Police
- Probation Service
- Mersey and West Lancashire Teaching Hospitals NHS Trust
- Liverpool University Hospitals NHS Foundation Trust
- NHS Cheshire and Merseyside Integrated Care Board - Sefton Place
- Mersey Care Foundation Trust
- One Vision Housing
- Sefton Council for Voluntary Services (CVS)
- Venus
- Merseyside Fire and Rescue
- Office for the Police and Crime Commissioner Merseyside
- Sefton Safeguarding Adults Partnership Board

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