

1. Introduction

- 1.1. Domestic abuse services are currently commissioned by a number of agencies across the county, which has resulted in inconsistent provision.
- 1.2. Commissioned domestic abuse services have an annual value of approximately £3.2 million, some of which is commissioned by Kent County Council.
- 1.3. A number of key contracts are due to end during 2015/16 including some of those commissioned or funded by KCC, to the value of £1.74 million per annum.
- 1.4. Kent Public Health's Joint Strategic Needs Assessment, the Kent Select Committee Report for Domestic Abuse and the needs analysis of Housing Related Support undertaken by the Chartered Institute of Housing all recommended a more collaborative commissioning approach and co-commissioning to improve outcomes and reduce inequity of service offer.
- 1.5. Currently, the majority of services are aimed at victims at high risk of harm, and are reactive, emergency services. By redesigning the model of domestic abuse provision to provide earlier intervention to victims and a greater preventative offer, it is expected that victims of abuse will receive support before risk levels escalate, improving outcomes for communities in Kent, and reducing the cost to the County Council.
- 1.6. Through collaborative commissioning with a number of key partners, it has been determined that a single integrated service is the preferred option for delivering the required outcomes and gaining efficiencies. As such, this is the recommended route.

2. Our commissioning challenge

- 2.1 There are a number of challenges within Domestic Abuse service provision, namely the patchy coverage of service offer, and the limited offer available to those at Medium and Standard risk of harm.
- 2.2 Through collaboration and redesign, provision can be rationalised to deliver consistency across the county and improved service user experiences through seamless journeys through a support programme.
- 2.3 There is no statutory requirement to offer domestic abuse services, but in their absence the council's frontline services would likely experience mounting pressures as the complex needs of this client group escalated beyond the eligibility threshold. The services that would experience the greatest rise in demand would include Specialist Children's Services, Adults Social Care, Mental Health Services, Safeguarding and Public Health.

2.4 The redesign of domestic abuse services is a long term project, aimed at shifting the services available within the offer to provide a greater range of preventative interventions, and support to those with lower levels of risk.

2.5 In the short term, the full range of high risk interventions must still be offered to protect victims of domestic abuse in crisis. It is expected, however, that by strengthening the preventative and early intervention offer, particularly in relation to a greater range of opportunities for victims to remain safe at home (such as sanctuary schemes) clients will experience less disruption to their lives, reducing the social cost of domestic abuse, as well as reducing the demand on expensive, reactive services.

3. Current and future need

3.1 Need for domestic abuse services is complex, and often hidden. The Home Office provides a 'ready reckoner' tool to help local areas estimate the prevalence and cost to public services to tackle violence against women and girls. There are an estimated 49,537 female domestic abuse victims in Kent per year. These figures are estimates based on the female population size and British Crime Survey rates for the South East Region. (It should be noted that men and older women can also be victims of domestic abuse and the estimate does not include either.)

3.2 Demand for domestic abuse services has consistently risen over recent years, and is expected to continue to do so, as awareness of domestic abuse increases and more victims seek help.

3.3 Currently the service offer is heavily weighted towards support of high risk victims, in the provision of refuge places and IDVA support. The support to medium risk victims is restricted to Floating Support, which has a restrictive, housing based eligibility criteria. The revised service offer will need to a greater range of interventions, with seamless transition between elements for service users and their families.

3.4 The current landscape is complex and difficult to navigate with lack of clarity as to what is available in each area, and how to access these services. This is not favourable for either referring practitioners or service users.

4. The whole system perspective

4.1 Kent County Council currently commissions 10 women's refuges, and 2 floating support services to those in the community. Additionally, Public Health contributes to the county IDVA service which is funded through a multi-agency partnership. Specialist Children's Services commission 2 services to support children and young people affected by domestic abuse. The current total investment in domestic abuse services is approximately £2.4 million per annum.

4.2 Other funding partners commission domestic abuse services totalling approximately £1 million per annum. Additionally, funding in excess of £200,000 per year is provided through grant and charitable sources.

- 4.3 Service provision is effective within currently commissioned parameters, but these parameters are restrictive and do not allow for services to deliver the holistic and person centred support required by service users and their families.
- 4.4 Through commissioning a model based on outcomes rather than outputs, on a longer contract term to allow for service development and innovation, greater flexibility and efficiency can be achieved.
- 4.5 More robust focus on harnessing communities can bring added social value through improved peer and community support to victims of domestic abuse, and improved outcomes in an efficient manner.
- 4.6 The current market is a balanced mix between registered charities, professional support agencies and registered social landlords. It is not expected that the market composition will change, but through commissioning on a 'Strategic Partner' model, providers will be expected to work in partnership to deliver a holistic package of support.

5. Commissioning strategy

- 5.1 The priorities, based on the intelligence gathered, are to maintain the current offer to high risk victims of abuse, whilst strengthening the preventative and early intervention offer. Through a gradual reshaping of the service offer, the high cost (both financially and socially) elements of service delivery can be reduced and replaced by more preferable, community based services.
- 5.2 Work has been underway for some months with key commissioning partners to explore the possibility of co-commissioning a holistic solution. A number of partners have committed to this approach, with others still considering the option.
- 5.3 As the single largest contributor to domestic abuse services in Kent, with robust commissioning, procurement and legal functions, KCC is considered the most appropriate lead commissioning partner. KCC will also undertake the contract management of the project once delivered.

6. Next steps

- 6.1 To navigate the KCC governance routes for approval to procure the proposed integrated service model.
- 6.2 To secure commitment from potential funding partners for involvement in the project.
- 6.3 To undertake a robust engagement, involvement and consultation process with service users, stakeholders and communities.
- 6.4 To complete a robust tender process to award the contract.

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