THE EXECUTIVE

16 FEBRUARY 2010

REPORT OF THE CORPORATE DIRECTOR OF ADULT AND COMMUNITY SERVICES

Title: Commissioning of Domestic Violence Advocacy	For Decision
Services	

Summary:

The Domestic Violence (DV) Advocacy Service has been managed within the Council since 2005. An independent review of the Service, undertaken by *Standing Together Against Domestic Violence* in 2009, identified key problems with the delivery of the service associated with its placement within a strategic service and its lack of independence. The report recommended, in line with national best practice, that the service was commissioned out to the voluntary or third sector and that an interim arrangement was made whilst this process was being followed through.

This recommendation has been followed through and sufficient funding had been identified to commission the service. Recently, additional funds have also been made available by health partners to procure three maternity based advocates within the Barking, Havering and Redbridge Hospital Trust, making the total funding available of £240,000 per annum, £720,000 over 3 years.

This is a contract being let by the Council on behalf of the Local Strategic Partnership, for which the Council acts as the accountable body. In view of this the decision to commission the service must now be considered and taken by the Executive. This report therefore seeks the Executive's agreement to commission the service from the third sector and describes the process that will be followed.

Wards Affected: All

Recommendation(s)

The Executive is recommended to:

- (i) Agree to the procurement of a three year contact for the provision of a Domestic Violence Advocacy Service on behalf of the Barking and Dagenham Partnership, as detailed in the report;
- (ii) Authorise the Corporate Director of Adult and Community Services, in consultation with the Chief Financial Officer and Legal Partners to award the contract.
- (iii) Decide, in accordance with the Council's Contract Rules (paragraph 3.6.4, Part D of the Constitution) if it wishes to be further informed or consulted on the progress of the procurement and the award of the contract.

Reason(s)

To assist the Council and the Partnership to achieve the Community Priorities of ensuring that residents are "Safe" and "Healthy", by following good practice, working in partnership

and putting customers first.

Implications

Financial

The funding identified for this service would be £240,000 per annum for three years. This includes funding from the Housing Revenue Account (HRA), Area based grant and from the Metropolitan Police and NHS Barking and Dagenham, the Council's external partners. Paragraph 2.7 gives a detailed breakdown of the funding.

Legal

The services to be provided under the contract to which this report relates are classified as "Part B" services under the Public Contracts Regulations 2006 (the "Regulations"), therefore the full rigour of the Regulations do not apply.

As the value of the contracts exceed the European Union (EU) threshold for services (currently £156,442), the Council nevertheless has a legal obligation to comply with the Treaty of Rome principles of equal treatment of bidders, non-discrimination, and transparency in procuring the contract. A contract award notice is also required, under the Regulations, to be published in the Official Journal of the EU upon selection of a service provider.

Furthermore, the Council's Contract Rules (Contract Rule 3.6) require the strategy for the procurement of contracts of above £400,000 in value to be submitted to the Executive for approval prior to procurement of such contracts.

The estimated value of the contract to which this report relates is above £400,000, therefore the Corporate Director for Adult and Community Services, in compliance with the Contract Rules, has set out the proposed strategy for the procurement of the contract in Paragraphs 2.8 to 2.15 of this report for approval by the Executive.

The Executive has the power under Section 15 (6) of the Local Government Act 2000 and under Part C of the Council's Constitution to delegate its powers to officers. The report is also requesting that the Executive delegate its authority to award the proposed contract to the Corporate Director for Adult and Community Services.

It may be that the effect of a contract award will be to engage the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) which operates to transfer contracts of employment of staff assigned to the relevant service before the transfer. Officers should consult with the Legal Practice as to the application of TUPE.

The Legal Partner (Procurement, Property and Planning) confirms that there are no legal reasons preventing Executive from approving the recommendations of this report.

Contractual

The value of all services is over the EU threshold of £156,442 for Part B services and should be tendered. Under EU procurement rules these services are classed as a part B services and have minimal legislative requirements. The main requirements are in relation to transparency, technical specifications and award notices. The tenders will be carried out in full compliance with the EU rules and Council policy in procurement. The details on this and an outline of the timetable are in paragraphs 2.10 to 2.15

Risk Management

The risks associated with this decision are in relation to regulations in relation to procurement, TUPE and the multi-agency nature of the funding.

The Council's procurement rules will be followed to ensure that the contract is awarded in line with national and European Contract law. HR advice has been sought in relation to TUPE issues and the staff have been consulted and advised of these plans since summer 2009. Partners have been advised of the three year funding commitment and will be involved in the decision on awarding the contract in order to ensure their continued commitment. There will be a written agreement between the Council and its partners reflecting this.

In addition, it should be noted that the risk of not providing this enhanced service relates to a very vulnerable high risk client group. At present the advocacy service is only able to impact on the most serious cases, while the new proposed enhanced service will allow for greater intervention with this group and will allow for intervention with low to medium risk clients so preventing costly escalation. The service is detailed in the departmental risk register and at present steps are in place to mitigate the risk through the universal offer and training of staff. The proposals allow for wider points of intervention, in particular those detailed in the health setting.

Staffing

There are two Council employees working for the current service. Their employment would transfer to the new provider at the date the new provider takes over responsibility for the service. Employees would transfer with continuity of service and on the same terms and conditions, pay and other benefits (other than Pensions).

Customer Impact

The DV Advocacy Service review proposal to commission the service externally from the voluntary sector, rather than delivering the service in house, is identified as best practice by Coordinated Action Against Domestic Abuse (CAADA, the national organisation that designs and prescribes the structure for Advocacy Services and provides accredited training), and will result in better outcomes for women's safety, improved service user satisfaction and improved working arrangements. We anticipate by ensuring the independence of the service increased service user access will be achieved through:

- Re-assuring victims that they will be supported by staff who have only their best interests at heart;
- Greater ability and freedom to "institutionally advocate" on behalf of victims;
- Increased capacity to supervise and support the advocates;
- Access to sources of funding not available to the statutory sector

Domestic violence affects all groups in society irrespective of age, gender, race, faith, disability or sexual orientation. The single most over-represented group amongst victims of DV are women with 90% of all LBBD DV victims being female. The highest risk victims make up about 10% of the total victims of DV in LBBD and <u>all</u> the highest risk victims are female.

CAADA trained advocates will be a specification in the tender. Currently CAADA services are designed and based on the needs of women and there is no nationally accredited Advocacy Service that works with both men and women. Therefore the DV Advocacy service is for female victims of DV only and, as such, the service positively seeks to

address the disproportionate and negative impact on women of violence within personal relationships.

Male victims are catered for by other local and national services. In order to mitigate any negative impacts of the lack of access to the Independent Domestic Violence Advisers (IDVA) service, any male referrals to the IDVA service will be signposted to these alternative services. This will be a requirement of the chosen service provider. In LBBD male victims are referred to Victim Support and the Domestic Violence Intervention Programme.

Safeguarding Children

Children witness about 75% of domestic violence incidents and one in four children are affected by DV in their lifetime. In Barking and Dagenham, there were 266 children involved in the 156 highest risk referrals made to the Multi-Agency Risk Assessment Conference (MARAC) in 2009. The recommendations represent a strengthening of provision for victims of DV. Therefore they will also have a beneficial effect on children and young people in line with all five Every Child Matters outcomes.

Crime and Disorder

Barking and Dagenham has the highest rate of DV across London with 4,336 incident reported to Police in 2008/09. Tackling and reducing DV is one of the key priorities for the Safer Borough Board and for the Council. The DV Advocacy Service is focussed on reducing victimisation and harm to women and preventing homicide. A particular focus of the service is reducing repeat victimisation of victims (NI32) and the number instances of DV related homicide (NI134).

The recommendations within this report are intended to deliver a service that is based upon national best practice and to promote the greater partnership working to reduce crime and disorder. Section 17 of the Crime and Disorder Act places a statutory duty on Councils and partners to consider crime reduction and prevention in all service planning and provision. The provision of this contracted out service would see health and council partners working together with the Police and community sector partners to ensure that DV is addressed more effectively and that victims of crime are appropriately supported .

Property/Assets

No specific implications

Options appraisal

Two alternative options to the recommended proposal were considered:

- 1. Not to commission a DV Advocacy Service This option was rejected because Barking and Dagenham has the highest level of reporting of DV per 1,000 population across London. In 2008/9 a total of 4,336 incidents were reported to Police with Domestic Violence being identified as a priority by the Safer Borough Board and the Healthy Borough Board. The impact of DV on children has also been identified as an issue by the Children's Trust and the Local Safeguarding Children's Board. The cost of DV in the Borough (when taking into account criminal justice, health, social care, human and employment costs) has been estimated as £82.3 million.
- 2. **To retain and manage the service in-house** This option was rejected because

an independently managed DV advocacy service, based in the voluntary sector, is regarded as national best practice. This issue was highlighted in the report of an independent review of the Advocacy service in May 2009. Advocacy services are a specialist provision with advocates and their managers subject to specialised training. These skills and capacity are not available within the Council. A voluntary sector based service will also be able to access sources of funding not available to the Council. Whilst the advocates had been managed in-house prior to the review, since September 2009, they have been seconded to an independent specialist voluntary sector agency on an interim basis whilst the full commissioning and tendering process goes ahead.

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1. Background

- 1.1 Domestic Violence Advocates provide a crisis intervention service to high risk victims of DV. 'High risk' is defined as those victims who are in danger of further serious assault and/or murder. Advocates conduct risk assessments and put in place bespoke safety plans with assistance from the monthly Multi Agency Risk Assessment Conference (MARAC). Their role is specialised and accepted good practice is that advocates should be Coordinated Action Against Domestic Abuse (CAADA) trained and managed by someone with the appropriate level of training and clinical background.
- 1.2 It is also accepted good practice that a DV Advocacy service should be independent and preferably based within the voluntary sector. The independence of an advocacy service provides:
 - Reassurance for the victim that they will be supported by staff who have only their best interests at heart;
 - An ability to "institutionally advocate" on behalf of that victim;
 - The likelihood of suitably experienced managers who will have the skills and capacity to supervise and support the advocates;
 - Sources of funding not available to the statutory sector
- 1.3 An independent review of the Council run DV Advocacy Service and associated DV partnership was commissioned in February. Reporting in May 2009 the review was conducted by Anthony Wills, a well respected DV practitioner with a police background. Two of the report recommendations concerned the future management and positioning of the DV Advocacy Service.

2. Report detail

- 2.1 The LBBD DV Advocacy Service was established in 2004 with the employment of a single advocate who was placed within the voluntary sector in Waltham Forest. However, the service was brought back in house in 2005 and an additional advocate employed. The advocates have been Council employees ever since and were managed by the DV and Hate Crime Manager in the Community Safety Team.
- 2.2 The review and final report of the current service provision identified two problems, the placement of the service within a strategic setting and a lack of independence. The report proposed that "a new, clearly defined Independent Domestic Violence Advisers (IDVA) service with three advocates be commissioned from within the voluntary sector."
- 2.3 The report recognised that a commissioning and tendering process could take up to 6 months, possibly more, if the additional funding could be found. It also recognised that there was an urgent need to address the current deficiencies in relation to supervision and management. It therefore proposed "that a short term and simplified contract be agreed with a suitable voluntary sector organisation to provide advocacy services for high risk victims", in the interim.
- 2.4 Both recommendations were accepted by officers and the Safer Borough Board. The opportunity to bid to manage the advocacy service on a short term basis was advertised to 4 local voluntary sector agencies with experience of operating advocacy services. Bids were assessed and interviews were held in August. SOLACE Women's Aid were awarded the contract and took over the management of the service on 15 September and the existing advocates were seconded to SOLACE.
- 2.5 Since September Council officers have worked to identify funding to allow a 3 year contract to be developed and offered for commissioning using Council and Metropolitan Police Service (MPS) contributions. An additional sum has been identified to increase the number of advocates in line with the recommendations of the review and the tender had been advertised on that basis. However, we have now received an indication from NHS Barking and Dagenham that they have identified funding for 3 maternity based advocates to work within the Barking, Havering and Redbridge Hospital trust area from 2010-2011. They have indicated that they would like this sum to be added into the contract and specification. This will take the total value of the 3 year contract to more than £400,000, requiring referral to the Council's Executive for decision.
- 2.6 The specification for the revised service will be to provide:-
 - Advocacy and multi- agency liaison, one-to-one crisis intervention (including support), risk assessment, case management and safety planning sessions;
 - Referral and advocacy to enable service users to understand their rights, access and use other relevant services (according to their individual needs and entitlements) such as housing (including refuge), legal advice and representation, immigration, financial and benefits services, child protection, vulnerable adults team counselling and mental health services;

- Act as the coordinating referral source for borough 'Sanctuary Project', carrying out risk assessments for all clients ensuring the 'Sanctuary Project' is an appropriate safety measure for the victim and their children;
- Providing an on-call out of hours service for professionals/agencies to refer to, on behalf of their service users, ensuring access to the Service 24 hours, 7 days per week;
- Provision of information when attending civil courts and criminal courts, including referrals to the Witness Service and liaison with relevant officers from the Police, Crown Prosecution Service and solicitors both pre-and post trial hearing; support service users to access legal aid and DIY injunctions;
- NHS Barking and Dagenham will be a partner with LBBD for this contract. NHS B&D will agree a service specification for this element of the contract which will consist of 3 full time Domestic Violence Independent Advocates located within Barking, Havering, Redbridge University Hospital Trust Maternity Services. This additional service will increase capacity within the DV Advocacy Service to respond to pregnant DV victims who live in the borough and will improve partnership working arrangements between maternity services and the Borough (namely the MARAC and DV Forum).
- 2.7 The provisional funding sources for the service have been identified, including external partners, and the combined budget of £240,000 per annum is shown below. As stakeholders partners from the MPS and the NHS will be involved in the commissioning process and decisions.

Source	12 Months	3 years
MPS BCU Funding	31,500	94,500
LBBD – ACS, Area Based	28,500	85,500
Grant (SSCF)		
LBBD HRA	40,000	120,000
LBBD Customer Services –	20,000	60,000
Private Housing (Sanctuary		
Project)		
NHS Barking and	120,000	360,000
Dagenham		
TOTAL	240,000	720,000

- 2.8 It is our intention to advertise on the council's website and other appropriate websites inviting expressions of interest from parties that can demonstrate relevant experience in delivering domestic violence advocacy services.
- 2.9 Interested parties will be invited to tender on the basis of a two-stage, 'restricted tender' process. The first stage will be to invite expressions of interest requiring the completion of a pre-qualification questionnaire which will be assessed against the responses given. This will result in a shortlist of up to six providers being invited to tender.
- 2.10 The evaluation of tender submissions will be based on a weighted quality/cost matrix, with a quality and price weighting of 80/20 respectively. The quality assessment will be based on the following criteria: Staffing and Personnel related issues (15%), Quality and Performance Management (20%), Partnerships (10%),

- Service Delivery (35%). Details of these will be published in the invitation to tender which will enable a fair and transparent approach.
- 2.11 An evaluation of contract prices will be carried out to ensure potential suppliers offer fair and competitive prices that are consistent with the service outline. A contract will be awarded to the successful provider for a period of three years, with an option to extend for a further two year dependent upon future availability of funding and satisfactory performance.
- 2.12 This process will involve TUPE arrangements and negotiations as both advocates are Council employees. The advocates and HR have been kept informed of these plans throughout the process and time has been allowed in the project plan to facilitate any required meetings in respect of this and to ensure continuity of service to service users. TUPE arrangements will be included in the service specification and evaluation and will be assessed as part of the selection process.
- 2.13 In accordance with Council rules the contracts will be let with approval of the Chief Officer and the 151 Officer (Chief Financial Officer) if the Executive decide that they do not wish to be further involved in the procurement of these services.

2.14 Outline Timetable

Action	Date
Executive Approval	16 February 2010
Advertise	19 February 2010
Expressions of interest to be returned	12 March 2010
Tenders to be returned	30 April 2010
Interviews to be conducted	May 2010
Approval from Chief Officers and 10 day standstill period	May/June 2010
Contract Award	Early June 2010
Facilitate possible TUPE meetings between providers	June 2010
Contract Delivery starts	July/August 2010

3. Links to Corporate and other Plans and Strategies

- 3.1 This proposal is in line with the following Corporate Plans and strategies
 - Safer Borough Board Partnership Plan for Crime and Disorder Reduction
 - LBBD Domestic Violence Strategy 2008-2011
 - Health and Well-Being Strategy

4. Consultees

4.1 The following were consulted in the preparation of this report:

Councillor Jeanne Alexander - Cabinet Member for Community Safety All members of Adult and Community Services Departmental Management Team (DMT)

Ian Taylor - ACS Corporate Procurement Eleanor Margaritelli - ACS Human Resources manager Fiona Taylor – Acting Legal Partner (Safeguarding and Partnerships) Stephen Whitelock - ACS Finance Manager Helen Jenner - Corporate Director of Children's Services

Metropolitan Police:

Chief Superintendent Matt Bell - Borough Commander

NHS Barking and Dagenham

Victoria Hill - DV Strategic Lead, Victor Ferreira - Head of Public Health and Childrens Commissioning

- 5. Background Papers Used in the Preparation of the Report: None
- **6.** List of appendices: None