



Section 1 Background, Methodology and Consultation process

Background

The National Institute for Health and Care Excellence (NICE) published in February 2014 *Domestic violence and abuse: multi-agency working*¹, (PH50) recommends that an 'assessment of need' should be undertaken by the strategic partnership and by commissioners. The first recommendation is that:-

'Strategic partnerships should...

- *Assess the need for domestic violence and abuse services:*
- *Consult with women, men and young people who have experienced domestic violence and abuse.*
- *Should be aware of the importance of consulting communities that are rarely heard on this matter.*

Commissioners should...

- *Undertake a comprehensive mapping exercise to identify all local services and partnerships in DA and SA.*
- *Use the results of the needs assessment...to inform commissioning (including referral pathways that aim to meet the health and social care needs of all those affected by domestic violence and abuse).*

Therefore this needs assessment has applied the NICE recommendations. Pertinent national and comparative local data (crime, hospital and DA statistics) are included, as are national and local strategies. Prevalence estimates are provided and recognised research is cited to support findings and show Sheffield activity for the last three financial years.

Applying the NICE recommendation this needs assessment will:-

1. Ascertain the prevalence of domestic abuse; understand referral activity and engagement in services and the need for support in Sheffield.
2. Ascertain the prevalence of domestic abuse; understand referral activity and engagement in services and the need for support in Sheffield.
3. Provide new information on services users, using the minimum dataset for domestic abuse.
4. Provide new information on FGM, Sex work, trafficking and therapeutic support.
5. Review the current commissioning of services and pressures on local services.
6. Identify gaps in provision and processes.

The intended purpose of the needs assessment is:-

- to be used as a document to support the writing of the Domestic and Sexual Abuse Strategy in 2017
- Inform the analysis element of the commissioning cycle.

Methodology

The needs assessment was been carried out over the period of one year; from April 2016 to March 2017.

The methodology was as follows:-

- to develop an understanding of the VAWG strategy

¹ NICE (February 2014) 'Domestic violence and abuse: how health services, social care and the organisations they work with can respond effectively' <http://guidance.nice.org.uk/PHG/44>.

- develop an understanding and provide an update on the latest recommended national guidance
- Review the latest data and research available on domestic and sexual abuse.
 - This includes prevalence data; police reported activity and victim engagement with support services. Additional data is available on perpetrators and children affected by domestic abuse.
 - All data shared has been used to increase local understanding of the current data collected, current trends and where possible comparing Sheffield data to other areas. This varies depending on the data available and the current comparison for that dataset. For example comparisons have been with Core cities, comparable cities and the Most Similar Force Groups.
 - Data is all anonymised, no activity is shown where activity is less than 10 and all data contained in the report has been made available for the needs assessment.
 - Data is extensive in the report and data used has been selected with an intended purpose of providing the reader with a good understanding of the issue.
 - As with any data there are limitations in the data available. Data is updated regularly (often quarterly) and there are national reports being published frequently by a number of national and academic sources. Therefore the data and research available was the latest data available at the time of writing each section. Other limitations include data quality, whether data was shared with the author and service user consent to the minimum dataset and use for needs assessment purposes. The dataset provides a good insight on victim information; abuse suffered by victims and the impact of the support on victims and is a good data source. The minimum dataset limitations are when a focus is required on an issue that impacts on a small number of victims (e.g. victims aged over 65 years).
- Understand the views of local experts and service providers working in the field.
- Meet with service users to better understand their support needs, personal experiences and concerns with the current system.

The needs assessment scope was extended partway through the process. This was due to a range of factors including domestic and sexual abuse increasing in priority across a number of directorates in SCC and national VAWG actions being completed. There was also a strategic decision made to focus on children and young people and emerging forms of abuse (e.g. CSE) more comprehensively than in previous needs assessments.

Therefore the methodology was extended to develop an increased understanding on children and young people and sexual abuse than had been taken previously. These subjects can be found in Part 2 and Part 3 of the needs assessment. One limitation is the complexity of commissioning for these areas (a number of commissioners for different areas) and data limitations this can cause (differences in current data reporting, new data collections emerging and IT systems in place). For children and young people a further limitation is the overlap with other areas of concern. Domestic abuse may be one of a number of issues (including parental mental health, drugs and alcohol) of concern.

Consultation with stakeholders

The consultation process was comprehensive:

- An email was sent to all stakeholders on the Domestic and Sexual Abuse Provider Consultation Group circulation list. The email explained that the needs assessment process was starting and as a stakeholder they had an opportunity to inform the process, be invited to attend the expert group and contribute to the final consultation process. The email contained a questionnaire for completion, a six week response period was given and there was a 'catch all' opportunity to share any additional relevant information with the needs assessment lead.
- A full list of the stakeholders consulted is found in Appendix 2.
- A local expert group was held and all PCG members invited to attend. The meeting was attended by a range of key partners from health, social care, criminal justice, children and young people's services and domestic and sexual abuse support services. A presentation on the summary of



initial findings was given and structured questions used to 'test' the data and findings discussed.

- All those attending the expert group were invited to share the presentation with their team and service users and feedback any findings over the subsequent month.
- GPs were consulted via a questionnaire devised between DACT and the CCG.
- Service users were presented key findings and consulted in the Service User Reference Group; in addition minutes from previous SURG meetings and the SURG Service User DVD detailing personal experiences of domestic and sexual abuse were both reviewed.
- The needs assessment has been an agenda item at the PCG, the Joint Commissioning Group, The DSA Strategic Board and the Civil and Criminal Justice meetings.

Detailed final consultation

The police section has been shared prior to consultation with the PCG with the police, the health section with the CCG, the Children and Young People section with the Children and Young People directorate, the pregnancy section reviewed by STH Midwifery, the sexual exploitation section with the SCC project lead, substance misuse section by the drugs and alcohol misuse commissioner. The Therapeutic section written and signed off in March 2016 has already been consulted on and shared as a separate document in its own right.

A draft version of the full needs assessment was circulated to all PCG representatives to provide structured feedback over a period of one month. It was clearly explained that this was their opportunity to feedback formally.

The summary was shared with the service user SURG and web access to the full needs assessment available to those who wanted to review the full report. Paper copies were made available on request.

Feedback was received and the needs assessment was updated accordingly. Full details of the updates undertaken are found in Appendix 9. The final report was published on 21 June 2017.