

DRAFT Independent Domestic Violence Advisor Guidance

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Background

Purpose and legal status

1. The *[placeholder for Victims and Prisoners Act]* requires guidance to be issued about such victim support roles as specified in regulations. This guidance is issued pursuant to *[placeholder for section 15 of the Act]* and the *[placeholder for Victim Support Role Regulations]* which name Independent Domestic Violence Advisors (IDVAs). It is intended to provide an outline of the role and key functions of IDVAs to improve the consistency of the support they offer and to increase the awareness of IDVAs among other agencies, so they can operate in the most effective way to support victims. It also conveys principles and promotes best practice for IDVAs, training for the IDVA role and working with other agencies.
2. The guidance applies to England and Wales. *[Placeholder for devolution position: In accordance with the requirement in [placeholder for section X of the Act], the Secretary of State has consulted with the Welsh Ministers on elements of the content of this guidance that touch upon devolved matters, such as health or local authorities.]*
3. The *[placeholder for Victims and Prisoners Act]* requires persons who have functions of a public nature relating to victims or any other aspect of the criminal justice system (“relevant professionals”) to have regard to this guidance in the exercise of their functions, unless they are acting in a judicial capacity (or on behalf of a person acting in a judicial capacity).¹
4. Relevant professionals are encouraged to implement the outlined best practice and recommendations, but they are not under a duty to implement them, nor is this document intended to be a training guide. We also recommend that IDVAs themselves have regard to this guidance. The term ‘relevant professionals’ could include, but is not limited to the following when exercising functions of a public nature:
 - adult social care and children’s social care providers;
 - Children and Family Court Advisory and Support Service (Cafcass);
 - the Crown Prosecution Service (CPS);
 - domestic abuse services including specialist, ‘by and for’ services, those working on violence against women and girls more broadly, and services for men and boys;
 - early years, childcare, schools, colleges, and higher education settings;
 - HM Courts and Tribunals Service;
 - HM Prison and Probation Services;

¹ The judiciary is independent from government. It would therefore not be appropriate for Government legislation or guidance to apply to the judiciary. The Ministry of Justice (MoJ) will continue to work with Judicial Office to raise awareness of the role and benefits of ISVAs and IDVAs, and how they can support victims at court.

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- Integrated Care Boards & Integrated Care Partnerships;
 - lawyers and legal services;
 - local authorities;
 - local housing and homelessness teams, registered social landlords;
 - NHS England, NHS Trusts & NHS Foundation Trusts;
 - police forces and Police and Crime Commissioners (PCCs);²
 - Registered Intermediaries (RIs) in the criminal courts and intermediaries in the civil and family courts;
 - Youth Offending Services; and
 - the Witness Service, and the London Victim and Witness Service.
5. Everyone has a role to play in safeguarding. Some organisations may also have specific statutory duties to safeguard victims of domestic abuse. This guidance should therefore be read in conjunction with other relevant guidance and codes of practice, several of which are signposted within this document.
6. The Government will monitor and assess the impact of this guidance through engagement with the domestic abuse support sector, other government departments, and relevant agencies and organisations following publication.

Terminology

7. In line with *[placeholder for section 1(5) of the Victims and Prisoners Act]*, domestic abuse is defined and referenced in line with the Domestic Abuse Act 2021, and conduct is captured regardless of whether a report about it has been made to the police. Although this guidance is directed at support for victims of domestic abuse amounting to criminal conduct, pursuant to *[placeholder for the Act]*, other contexts may approach domestic abuse in a way that extends beyond criminal conduct and the reader should also be aware of wider behaviours and actions which may be considered domestic abuse which are not captured in the definition as set out in the Domestic Abuse Act 2021. More information on these forms of abuse can be found in the Domestic Abuse Statutory guidance.³
8. This guidance focuses on support for victims of domestic abuse. Not everyone who has experienced domestic abuse chooses to describe themselves as a 'victim' and other terms may be preferred such as 'survivor'. Both terms are recognised, but this guidance uses the term 'victim' to be consistent with the terminology of the *[placeholder for Victims and Prisoners Act]*.

² Including Police, Crime and Fire Commissioners, and Mayoral Authorities.

³ Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

Introduction

9. This guidance has three sections:

- **Section 1: The purpose, role, and functions of IDVAs** – this outlines the core elements that we would expect IDVAs to undertake in their roles, and the core minimum principles of training necessary to deliver that role.
- **Section 2: Supporting specific needs of victims** – this focuses on how IDVAs can tailor their service while considering how victims' different needs and experiences may uniquely overlap.
- **Section 3: Effective working between IDVAs and other agencies** – this sets out how IDVAs and other agency professionals can best work together to support victims, outlining key principles and best practice for effective collaboration.

Who this guidance is for

10. This guidance is for:

- **IDVAs** to provide a clear understanding of the core purpose, role, and functions of the role, the varied needs of victims, and how to effectively work with other agencies to provide a consistent service for victims.
- **IDVA managers and providers of IDVA services** to enable a clear understanding of the role, training expectations and expectations for service provision and appropriate support for IDVAs.
- **Those who work with victims of domestic abuse** to fully understand the IDVA role and how to work effectively with them to deliver support for victims—see a non-exhaustive list below.

11. This guidance may also support relevant **commissioners** to better understand the role of an IDVA when commissioning services. A varied support sector is vital to ensuring that the diverse needs of victims are met, so commissioners should not consider this statutory guidance as a directive to focus funding solely on IDVA services. Funding different support services must be based on decisions relating to local need and the broad range of services available.

Section 1: Core principles for IDVAs

12. This section of the guidance sets out:

- Who IDVAs support;
- The purpose and role of an IDVA;
- How IDVAs deliver a quality service;
- Training and qualifications;
- Other forms of support for victims of domestic abuse.

13. For the purposes of the [*placeholder for Victims and Prisoners Act*] regulations, the role of an Independent Domestic Violence Advisor (IDVA) role is '*to provide support to individuals who are victims of criminal conduct which constitutes domestic abuse, where the support provided relates to that conduct.*' This provides the necessary flexibility for IDVAs to support victims of domestic abuse as they deem appropriate.

14. One form of support for victims of domestic abuse is support from advocacy services. IDVAs are a type of advocacy service who often work with victims who are predominantly at high risk of harm.

15. This section of the guidance sets out the core elements and functions of IDVAs so that the roles are consistently understood by those providing support and those working with IDVAs.

16. We recognise that a number of support services for domestic abuse victims exist and will vary in their use and recognition of the term 'IDVA', and that other support roles carry out similar functions (see Chapter 3). This section outlines the Government's expectations of an IDVA role and the related core training expectations. Where other roles perform the same functions and meet the specific training requirements set out in Chapter 2, we would consider those roles to be IDVAs.

17. IDVA is an umbrella term under which various types of IDVA with additional specialisms can sit, such as:

- Children and Young Persons IDVAs (CHIDVAs) support children and young people experiencing domestic abuse between adults in their household or within their own intimate relationships.
- Young Persons Violence Advisors (YPVAs) work with young people experiencing domestic abuse in their own intimate relationships.
- Older Persons Violence Advisors (OPVAs) generally work with older victims who are experiencing domestic abuse from an intimate partner or family members.
- Court IDVAs support victims navigating courts by offering practical and emotional support throughout both public and private law proceedings. Their role includes explaining the court process and the multiple options that are

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available, supporting with logistics, attending court with victims and liaising with court officials.

- Health-based IDVAs (HIDVA) provide support to victims of domestic abuse alongside training for health professionals to understand and respond to domestic abuse.

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Chapter 1: The purpose, role, and functions of IDVAs

Who IDVAs support

18. IDVAs can provide support regardless of:

- whether a victim has chosen to report an offence to the police;
- a victim's age (IDVAs can support adult and child victims, where appropriate training has been completed);
- whether they are victims of multiple offences alongside domestic abuse, such as sexual violence and modern slavery.⁴ Where this is the case, IDVAs and other professionals should continue to consider the cross-cutting needs of the victim. However, this should not prevent IDVAs providing support if they consider it to be appropriate and necessary.

Settings in which IDVAs provide support

19. IDVAs always provide support that is independent, on behalf of the victim, regardless of their employer or setting.

20. IDVAs are likely to be based within organisations specialising in support for victims of domestic abuse, or support for victims more widely. This may be alongside other forms of support for victims of domestic abuse.

21. Some IDVAs provide services 'in-house,' for example by being directly employed by a local authority. IDVAs may also be 'co-located' with other organisations or services such as in a health setting, housing department or police station. IDVAs can also work in multi-agency settings such as multi-agency safeguarding hubs (MASHs). Where this occurs, they will still act independently from statutory services and on behalf of victims.

22. Where IDVAs are working in specialist settings, they may not routinely deliver the full range of services IDVAs working in community settings do. However, they work with the same principles and utilise the same expertise to support victims of domestic abuse.

How IDVAs engage victims

23. An IDVA can work with the victim until a time at which they no longer need support and/or advocacy services. Some victims may only require support for a few months while others may need IDVA support for longer. Depending on the set up of the support service an IDVA may provide more short-term support

⁴ As recognised in Section 1 of the Domestic Abuse Act 2021, domestic abuse can encompass a range of behaviours and offences, including: physical or sexual abuse; violent or threatening behaviour; controlling or coercive behaviour; economic abuse; and psychological, emotional or other abuse.

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where a victim is assessed to be at high-risk before referring onto other domestic abuse support if or when risk decreases or needs change.

Purpose and role of an IDVA

24. IDVAs empower victims of domestic abuse to regain control of their lives and strengthen their safety, independence and autonomy, by providing independent support and advocacy to them to address their needs and vulnerabilities with a particular focus on safety.

25. They do this by undertaking the following core roles. The activities and practicalities of delivering these core roles are expanded on below:

- **Being a domestic abuse victim support specialist:** IDVAs are subject matter experts in domestic abuse and understand the victim's experience, needs and the level of risk posed to them. They will also use specialist skills and knowledge, and provide advocacy to help other professionals understand the victim's experience where appropriate. This allows them to provide informed and empathetic support. Additionally, some IDVAs will have specialist knowledge and skills in working with victims with specific needs and vulnerabilities, for example child victims, victims from different minority backgrounds or deaf and disabled victims.
- **Assessing individual needs and risk to tailor support:** domestic abuse can have a severe psychological, emotional, economic, and physical impact. The extent of this impact will be unique to each individual and affect the support they require to regain power and control. IDVAs predominantly support victims who are at high-risk of harm from domestic abuse. In supporting victims, they will work with them to assess needs and risk in order to provide a tailored package of support and safety planning.
- **Providing accurate and impartial information, exploring options and delivering relevant support:** IDVAs will support a victim to understand the options available to them. IDVAs will empower victims to make informed decisions and, where necessary, advocate on their behalf to help address the victims' needs. This might be to access safe accommodation, report to the police, support in court or access health and therapeutic support.
- **Working on behalf of the victim – independent from, but working alongside, other agencies or organisations:** IDVAs are independent from the government and the interests of other organisations and agencies, which is critical to their success in gaining the victim's trust. They take a victim-centred approach and remain focused on a victim's wellbeing and choice. Where appropriate, they may work alongside other professionals or organisations such as the police or local authority to ensure that the victim's voice is heard, and their needs are being addressed (including advocating on

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their behalf if this is in line with the victim’s preferences).

How IDVAs deliver a quality service

26. To deliver the core responsibilities that underpin the IDVA role, IDVAs will deliver a specialist service to victims of domestic abuse based on an individual’s needs and choice. Below is a non-exhaustive list of examples to show what may be expected from an IDVA across each of the four core responsibilities set out above.

27. To deliver a specialist service to victims of domestic abuse, IDVAs should:

- **Be trauma-informed and responsive:** domestic abuse is a form of trauma, which may impact a victim’s coping responses and their relationships with others. Non-trauma-informed services can create barriers to victims seeking help or engaging with services. IDVAs will therefore take a trauma-informed and responsive approach to support victims. This means they understand, recognise, and respond to the impact and responses to trauma. They actively seek to prevent re-traumatisation, address these barriers, and empower victims.⁵

In practice, this may involve:

- providing a safe and non-judgemental space for victims;
- recognising domestic abuse patterns and typologies, such as coercive and controlling behaviour or economic abuse;
- working to build trusting relationships with the victim by communicating and acting consistently and appropriately when providing support; understanding the importance of, and adopting, good professional boundaries.

- **Take a whole-person approach:** domestic abuse can impact every area of a person’s life, such as isolation from their community, loss of income and impact on mental wellbeing. When supporting victims of domestic abuse, IDVAs will therefore consider and respond to the ‘whole person’, with consideration to their family or other impacted individuals, which means understanding the unique characteristics and circumstances to provide tailored and holistic support. This will mean that victims get the right support to cope and build resilience to move forward with daily life.

In practice, this may involve:

- Taking steps to understand the victim’s characteristics and circumstances, including any protected characteristics and

⁵ Office for Health Improvement and Disparities (2022), *Working definition of trauma-informed practice*. Available at: <https://www.gov.uk/government/publications/working-definition-of-trauma-informed-practice/working-definition-of-trauma-informed-practice>

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additional factors such as their work/occupation or education/schooling, community, caring responsibilities, health needs or immigration status. These should be considered alongside how they overlap with the experiences of domestic abuse, and any barriers they may experience in accessing support, in order to provide effective and holistic support;⁶

- Providing a range of information and supporting victims to make informed choices;
- Working with victims to increase independence and safety in multiple aspects of their lives.

- **Work with professional boundaries:** when supporting victims, IDVAs will ensure that the victim understands the IDVA's role and the professional boundaries they must work within.

In practice, this may involve:

- Ensuring support is not open-ended and that timeframes for support are managed appropriately;
- Adhering to confidentiality policies and procedures;
- Adhering to any relevant statutory frameworks such as safeguarding;
- Not extending their role by assuming the responsibilities of others, for example, mental health professionals, legal support or social services support.

28. To assess individual needs and risk so that support can be tailored, IDVAs will:

- **Understand and assess need:** IDVAs will seek to understand the full picture of a victim's needs to support them. This means they will take a needs-led approach including considering a victim's strengths and any protective factors and inform the tailored support provided.

In practice, this may involve carrying out a needs assessment before creating a support plan with the victim. Needs assessments may cover:

- age;
- employment and education;
- finances and resources;
- friends, family, and community;
- future plans;
- health and wellbeing;
- immigration and residence;
- other sources of support;
- safeguarding considerations;
- safety;
- other aspects of a victim's life, as appropriate.

⁶ Equality Act 2010. Available at: <https://www.legislation.gov.uk/ukpga/2010/15/contents>

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- **Conduct risk assessments:** risk is dynamic and can escalate at any point. Risk assessments and frameworks are used to aid the understanding of risk and establish an appropriate response to domestic abuse to support the safety of the victim. An IDVA will have a thorough understanding of the dynamic nature of risk and conduct thorough and regular risk assessments (every 6-8 weeks, or when there has been a noted change in circumstances). IDVAs and other domestic abuse professionals are trained to understand risk and use assessment tools such as the Domestic Abuse, Stalking and Harassment (DASH) risk assessment to help identify the level of risk an individual is facing, to tailor their support accordingly. This risk assessment, along with needs assessments, will help the IDVA to understand appropriate support options for a victim and any safeguarding concerns. While the DASH is a standardised assessment for adults, it is not designed for use with child victims. Therefore, some organisations may use different or adapted versions to more accurately identify and support child victims. Risk assessment should holistically encompass specialist professional judgement, victim perceptions of risk, along with additional indicators relevant to minority groups and potential escalation. However, an IDVA's professional expertise in domestic abuse means that their recommendations and judgements should be prioritised beyond standardised assessments, which may not fully reflect the risks posed to victims (both adults and children).
- **Develop support plans.** IDVAs will develop support plans based on the individual risks and needs of the victim, as identified by these assessments. This should be reviewed regularly and include what support will be provided by the IDVA as well as any necessary onward referrals. The support plan should consider any planned exit strategies from IDVA support, in addition to having appropriate regard to ongoing risk management and in the aim of working towards the goal of an independent life for the victim.
- **Engage with the victim in safety planning:** safety plans help a victim to consider what they feel they most need, and to think about and plan what they might do in the case of future violence or abuse. It can also help them to think about and plan what to do to increase their safety either within the relationship, or if they decide to leave.

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In practice, this involves:

- understanding risk factors relating to domestic abuse, including the dynamic nature of risk and specific victim experiences;
- communicating with victims and professionals about the impact of the abuse and risks posed. For example, when safety planning with a victim, or advocating on their behalf with other agencies.
- carrying out a risk assessment and regularly reviewing and updating this assessment;
- completing and implementing safety plans. For example, how to prepare to leave the abuser, having a bag packed to do so, and a secret phone.

29. To provide accurate and impartial information, explore options and deliver relevant support, IDVAs may:

- **Attend multi-agency meetings, such as Multi-Agency Risk Assessment Conferences (MARAC).** For more information on the MARAC see Section 3.
- **Provide emotional reassurance.** IDVAs can create a space for victims to speak without judgement and feel heard and believed; help them to understand the potential impact of domestic abuse on their health and wellbeing; and dispel myths and stereotypes surrounding domestic abuse to challenge potential feelings of shame and blame. IDVAs are not trained to provide therapeutic or specialist mental health support but they can support victims to access appropriate therapeutic and mental health support services and work alongside mental health professionals where needed, more information about cross-agency working can be found in Section 3.
- **Support victims to understand and navigate key processes and systems.** This includes the criminal and family justice or health systems. They can also support to access and navigate other multi-agency support such as health or local authority services.

In practice, this may involve:

- outlining the victim's entitlements as set out in the Victims' Code;⁷
- providing information on key processes and timelines, such as engaging with civil, family and criminal processes or health or counselling services;
- supporting a victim to report an offence to the police if they choose to engage with the criminal justice system;

⁷ Ministry of Justice (2023), *Code of Practice for Victims of Crime in England and Wales (Victims' Code)*. Available at: <https://www.gov.uk/government/publications/the-code-of-practice-for-victims-of-crime/code-of-practice-for-victims-of-crime-in-england-and-wales-victims-code>

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- providing accurate and impartial information on the prosecution process and what will happen in the courtroom. For example, facilitating pre-trial familiarisation visits or accessing special measures which are a series of provisions that help vulnerable and intimidated witnesses give their best evidence in court, such as installing screens in court to shield the victim from the defendant or other party;
- assisting victims to communicate with employers, for example in relation to time off to attend police meetings/court, negotiating a phased return to work or ongoing sick leave;
- supporting victims to engage with or access statutory and other services such as sexual health, education providers, housing services, benefits agencies, therapeutic counselling, and mental health services, where appropriate.

Criminal justice processes and knowledge of evidence relating to offences

There are rules that require those supporting victims (including, but not limited to, IDVAs) to avoid discussing the facts of the case and evidence that can be used in criminal cases with the victim, who will be giving evidence as a witness in the criminal case.⁸ This is to avoid giving rise to a challenge by the defence that the supporter has told the witness what to say (“witness coaching”). These rules are set out in the Achieving Best Evidence guidance.⁹ IDVAs should be aware of this guidance before supporting victims in criminal court settings.

This does not prevent IDVAs from understanding information about the victim’s experience that is required to make an informed risk assessment, help assess support needs and develop a safety and support plan. It also does not prevent their involvement in Multi-Agency Risk Assessment Conferences (MARACs).

In practice, where there is a criminal case ongoing, this may see IDVAs:

- Discussing how the victim feels about what has happened and the emotional impact it has had on them – but not asking victims to recount the details of the specific sequence of events that they have reported to the police;
- Explaining to a victim who has indicated that they would like an IDVA with them to provide a witness statement or discuss their case, that they may want to consider using an alternative IDVA or witness supporter to do so. This would ensure they can

⁸ A case refers to the proceedings that are before a criminal court in pursuit of an alleged offence that is to be dealt with summarily in the magistrates’ court or on indictment in the Crown Court. Evidence is relevant material to the case. This may be physical, digital, or forensic material.

⁹ Ministry of Justice, NPCC (2022), *Achieving Best Evidence guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1164429/achieving-best-evidence-criminal-proceedings-2023.pdf

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continue to assist their victim moving forward and maintain their limited knowledge of the specific case evidence;

- Notifying the victim that they have a responsibility to take a note of what is said and notify the police if the victim tells them previously undisclosed, in-depth details, or evidence, relating to the case. Such details could include information about other evidence such as forensic results, CCTV, enquiries about other witnesses, and evidence on social media.

- **Support access to safe accommodation.** IDVAs can help inform and facilitate access to the right and appropriate type of support across the full range of safe accommodation if a victim no longer feels safe in their own home. This includes specialist refuges, or other forms of relevant safe accommodation delivered under the Part 4 statutory duty in the Domestic Abuse Act 2021 and/or provided by local authorities.¹⁰ They may also support a victim to remain in their home by referring them to schemes such as a local ‘Sanctuary Scheme’ which provides additional security to homes. This could include adding and changing locks or installing panic rooms.
- **Support access to appropriate legal advice, where available.** IDVAs are not legally trained and should not provide legal advice. However, they can signpost to relevant support options provided by specialist legal advisors, such as a family lawyer or solicitor. IDVAs can also accompany victims to legal appointments and court hearings for emotional reassurance. IDVAs may also support victims with no recourse to public funds and inform victims of options to pursue non-molestation and occupation orders.
- **Provide information to friends, family, and other appropriate individuals.** Where appropriate and with the consent of the victim, an IDVA may signpost friends, family and others as appropriate (such as employers or school staff) to relevant information and support.

In practice, this may involve:

- assisting communication with employers or educational institutions to negotiate sick leave, phased returns to work or school, time off for appointments;
- helping them to understand the potential impact of domestic abuse;
- outlining civil, family and criminal justice processes;
- signposting to other appropriate support services, such as counselling or therapeutic support.

30. To work on behalf of a victim independently but alongside other agencies or organisations, IDVAs should:

¹⁰ Department for Levelling Up, Housing and Communities (2021), *Delivery of support to victims of domestic abuse in domestic abuse safe accommodation services*. Available at: <https://www.gov.uk/government/publications/domestic-abuse-support-within-safe-accommodation/delivery-of-support-to-victims-of-domestic-abuse-in-domestic-abuse-safe-accommodation-services>

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- operate only in the interest and needs of the victim with their consent, rather than any particular organisation's purposes;
- keep notes and information confidential and stored on secure IT so that they are not accessible by other agencies or professionals.

[placeholder: testimony on importance of independence]

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Chapter 2: Training and qualifications for IDVAs

31. This is not intended to be an exhaustive guide or training material but is designed to provide a starting point for IDVAs, commissioners and employers of IDVA services.

32. To effectively deliver the IDVA role as detailed in Chapter 1, IDVAs should receive specialist training so they have the right knowledge and skills to support victims. This involves undertaking a Level 3 regulated qualification at a minimum. There will be variation in the name of the qualification and its assessment. However, training should equip an IDVA to deliver the core responsibilities outlined in the above section, “how IDVAs deliver a quality service”. Listed below are the core requirements which training should meet in order for these roles to be recognised as an IDVA:

Core principles of the IDVA role	<ul style="list-style-type: none"> • Referral processes; • Case management; • Communication; • Delivery of support; • Record keeping; • MARAC processes.
Safeguarding	<ul style="list-style-type: none"> • Safeguarding legislation (adults and children); • Internal safeguarding protocols.
Safe Working Practices	<ul style="list-style-type: none"> • Keeping themselves and others safe (for example, lone working, vicarious trauma and burnout).
Understanding and addressing victims’ overlapping needs	<ul style="list-style-type: none"> • Assessment and support of victim needs (including accessibility needs) and barriers or challenges to support (see Section 2).
Understanding civil, family, and criminal justice processes	<ul style="list-style-type: none"> • Police investigations; • The role of the Crown Prosecution Service (CPS); • The different court stages, types of hearing and special measures; • The potential outcomes of hearings/trials; • The role of the probation service; • Family proceedings including, non-molestation and occupation orders, divorce, and child contact.
Understanding risk relating to domestic abuse	<ul style="list-style-type: none"> • Understanding and assessing risk; • Developing and implementing safety plans.
Understanding the impact of domestic abuse	<ul style="list-style-type: none"> • Types and dynamics of abuse; • Impact of abuse on victims (including child victims); • Trauma-informed support;

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	<ul style="list-style-type: none"> • Perpetrator typologies.
Understanding the variety of options available to victims	<ul style="list-style-type: none"> • Understanding and providing information about relevant legislation and key processes, including: <ul style="list-style-type: none"> • housing options; • civil, family, or criminal justice remedies.
Working with other agencies and professionals	<ul style="list-style-type: none"> • Effective multi-agency working (see Section 3).

33. The abuse that children and young people experience may look different to the abuse that adults experience. IDVAs who work with children and young people, including CHIDVAs, should receive specialist training to:

- appropriately respond to disclosures of abuse from children and young people;
- assess risk and safety plan in a multi-agency context;
- communicate with children and young people;
- understand legislation relating to children such as the Children Act 1989;
- understand the dynamics of domestic abuse for children and young people.

34. IDVAs and commissioners, funders, and employers of IDVA services should consider the benefit of additional training beyond an IDVA's core role to gain specialised and advanced skills depending on the needs of their local area or their organisation's focus. For example, additional specialised training may help IDVAs provide more specialist support to victims with specific needs such as older victims, disabled victims, male victims, or LGBT victims. More detail on victims' needs can be found in Section 2.

35. Where new professionals are in the process of being trained as an IDVA, they should be supervised and supported by trained colleagues when engaging with victims and be clear they are an IDVA in training. They should access an induction from the service they are employed by, receive training in risk assessments and safe working practices, have appropriate caseloads and be supported with their case management.

Continual professional development and support, supervision, and oversight

36. Being an IDVA is a vital, but challenging, role because of the complexities of working with individuals during crisis and working across varied caseloads.

37. IDVAs should continue to learn and develop within the role following initial training to ensure they continue to have the knowledge and skills needed for victims to receive a quality service. This should include updates and changes in relevant legislation and an opportunity to reflect on personal practice and effectiveness.

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38. Many IDVAs will gather additional skills to support the delivery of this role beyond 'formal' training, such as on-the-job learning and development, as well as through formal training and qualifications. IDVAs and their employers should take joint responsibility for identifying and completing appropriate, ongoing development and training opportunities.
39. IDVAs should also be supervised by a senior practitioner or IDVA manager who will provide oversight of their caseload, development, and wellbeing. Appropriate support and supervision are also important for ensuring that IDVAs feel safe and supported in delivering this challenging role, and that victims receive a consistent and high-quality service.
40. It is important that IDVAs also receive regular separate clinical supervision. This is distinct from management supervision in that it provides support for staff to identify, clarify and address the emotional and psychological impact deriving from the work in which they are engaged. It can be individual or group supervision and should be at least quarterly, on a mandatory or opt-out basis. Best practice would see this delivered by an external provider to ensure a separation between the confidential relationship and management structures.

Chapter 3: Other forms of support for victims of domestic abuse

41. This guidance focuses on the role of IDVAs in supporting victims of domestic abuse. However, they are not the only form of domestic abuse support available and some of the functions delivered by an IDVA are not exclusive to the IDVA role.
42. Those working with victims of domestic abuse should be aware of different forms of support a victim may need to access, including IDVAs, who will often work alongside these other roles. In some cases, victims may be better supported by IDVAs working with or referring victims on to other specialist services.
43. Types of community-based support domestic abuse victims may seek in addition to the 1:1 support from IDVAs and others is set out in the Domestic Abuse Commissioner's report and includes:
- Counselling and therapeutic support;
 - Drug and alcohol support;
 - Group support;
 - Help to make own home safer (such as a sanctuary scheme);
 - Help to stay in work/education or to get a new job;
 - Helpline, for example, advice over the phone or online (chat or email) support;
 - Immigration advice;
 - Legal support or advice for family or criminal court;
 - Mental healthcare;
 - Physical healthcare;
 - Support to access safe accommodation.¹¹
44. Other forms of 1:1 support exist to address specific needs or circumstances. These support roles are likely to work alongside the IDVA and may provide similar functions. Some examples of other 1:1 support role include but are not limited to:
- Caseworkers, support workers, or outreach support;
 - Refuge or safe accommodation workers;
 - Resettlement support;
 - Domestic Abuse Prevention Advocate (DAPA).
45. **These support roles (as well as IDVA roles) may be provided within 'by and for' organisations**, which are those that are designed and delivered by and for people who are affected by these crimes with specific backgrounds or protected characteristics (including race, disability, sexual orientation, gender reassignment, religion or age). These services and roles enable victims to see themselves reflected in the staffing, management and governance structures.

¹¹ Domestic Abuse Commissioner (2022), *A patchwork of provision: how to meet the needs of victims and survivors across England and Wales*. p7. Available at: https://domesticabusecommissioner.uk/wp-content/uploads/2022/11/DAC_Mapping-Abuse-Survivors_Long-Policy-Report_Nov2022_FA.pdf

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They may include wrap-around holistic recovery and support to address a victim's full range of needs, beyond a primary focus on domestic abuse support. While by and for organisations may provide support which aligns with the IDVA model, they may also provide support via different models to address the needs of the victims they work with.

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Section 2: How IDVAs support the different needs of victims

Chapter 4: Introduction

46. Victims of domestic abuse have unique needs when accessing support services. Their individual experiences will differ and IDVAs should provide tailored support to address these needs.
47. A victim's needs may be affected by:
- Relevant protected characteristics and/or multiple needs relating to life circumstances or life experiences (see Box 1);
 - The nature of the domestic abuse they have experienced, including the nature of the relationship with or the status of the perpetrator;
 - Their past experiences and interactions with support services or statutory systems, such as the criminal justice system or health and social care system.
48. These characteristics, circumstances and experiences will also combine and overlap and lead to victims having particular needs or being at greater risk. These needs may be present from birth or develop over the course of their life, and may fluctuate and change over time. For example, a victim may be subject to coercive control and be isolated by their abuser, not have access to resources such as housing and independent finance, live with a disability and be part of a religious community who may disapprove of separation from the abuser. These factors can impact each other and require rounded consideration by those providing support.

Box 1: Examples of characteristics, contextual factors, and risks that may influence a victim's needs when accessing support services. This list is non-exhaustive.

Protected characteristics in the Equality Act 2010:

- Age;
- Disability;
- Gender reassignment;
- Marriage and civil partnership;
- Pregnancy and maternity;
- Race;
- Religion or belief;
- Sex;
- Sexual orientation.¹²

Examples of contextual factors and risks

- Addictions or substance misuse;

¹² Equality Act 2010. Available at: <https://www.legislation.gov.uk/ukpga/2010/15/contents>

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- Being a victim of crime, including modern slavery, trafficking, and sexual violence;
- Disabilities or learning difficulties;
- English not being a first language;
- Having an offending history or being an offender;
- Homelessness, sleeping rough, or having no fixed address;
- Immigration status;
- Living in rural and isolated areas or away from local areas, family and friends;
- Physical and mental health conditions;
- Socio-economic status;
- Transitioning from children and young people’s care services to adult care services.

49. IDVAs should consider each victim’s relevant experiences, circumstances, and characteristics in order to deliver their core role effectively but do not undertake additional duties and specialist work of other professions, for example social workers, health practitioners and therapists while delivering the role of an IDVA.

Chapter 5: How IDVAs may respond to different needs

50. To assess and support needs, vulnerabilities and safety, IDVAs should be aware of how characteristics, circumstances and experiences can affect the way that victims access and use support. Below are some examples of how IDVAs may respond to different needs to effectively support a range of victims.

Tailoring communication

51. Some victims may be more reluctant to raise issues or aspects of their experience because of personal and societal factors, such as stereotyping, stigma or mistrust of services. Some victims' experiences may challenge commonly held conceptions of domestic abuse, which could result in victims struggling to speak about their experiences or risk them being overlooked. It is important for IDVAs to acknowledge and appropriately tailor their communication to help build a trusting relationship with each victim and foster a safe environment for them to engage. IDVAs should ensure that their role, remit, and independence is clearly explained to reassure and set expectations with victims (and, where necessary, other professionals). They should communicate openly and with accessible language, adopting a non-discriminatory, non-judgemental and trauma-informed approach, and remaining considerate of the victim's experiences, in particular with the following groups:

- **Children and young people** will have different communication needs to adults and may be less aware of signs of abuse or may face difficulties in speaking about abusive behaviour. They may find it difficult to speak to authority figures or may be reluctant to speak about their needs, particularly where it has happened or is happening in their family unit.¹³ IDVAs working with children and young people, including CHIDVAs, should use age-appropriate communication to ensure that they are providing information in a way that it can be understood, and to build trust.
- **Victims from ethnic minority backgrounds** may fear that biases and stereotyping will lead to discrimination from those who do not share their background.¹⁴ This may lead to victims feeling unable to share their experiences fully or accurately. IDVAs should regularly seek to develop and/or maintain their knowledge and understanding of different cultures and how this might impact on the dynamics of the abuse they are experiencing, particularly those cultures in the areas in which they work. Recognising the individual as

¹³ More information can be found at: <https://www.womensaid.org.uk/information-support/the-survivors-handbook/i-feel-trapped/#howcanikeepmychildrensafe> [accessed 28/02/24]

¹⁴ Thiara, R., Roy, S. (2020), *Reclaiming Voice: Minoritised Women and Sexual Violence Key Findings*. pp23-33. Available at:

<https://static1.squarespace.com/static/5f7d9f4addc689717e6ea200/t/621d2268b8dfac09dc68894b/1646076524316/2020+%7C+Reclaiming+Voice+-+Minoritised+Women+and+Sexual+Violence+%5BKey+Findings%5D.pdf>

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the expert on their own culture, IDVAs can and should enquire to the victim's cultural needs by asking considerate and non-judgemental questions.

- **Victims of police-perpetrated domestic abuse (PPDA)** may not trust that they will receive an impartial police response or may fear repercussions of disclosing abuse or seeking support, particularly if the victim is also a police officer.¹⁵ IDVAs should be clear about their independence from the criminal justice system and outline the relevant procedures for reporting police-perpetrated abuse, should the victim wish to engage with the justice system.
- **Victims with insecure immigration status** may fear having their information shared with statutory services, which perpetrators may exploit as part of their abuse.¹⁶ IDVAs should clarify that victims do not need to make a report to the police in order to access victim support services and should explain when support services must share data with particular agencies or organisations.¹⁷ *[Placeholder for a signpost to the Migrant Victim Protocol (MVP). The protocol, due to be implemented by [DATE], will set out that no immigration enforcement action will be taken against that victim while investigation and prosecution proceedings are ongoing, and the victim is receiving support and advice to make an application to regularise their stay. Immigration enforcement action would proceed if relevant at the conclusion of an investigation.]*
- **Victims experiencing communication challenges**, such as those who are deaf, hard of hearing, blind or visually impaired, have a speech impediment, or a have learning disability, may need additional support to understand processes and procedures through adapted communication plans with easy-to-read documents. IDVAs may adapt a communication plan to include easy-to-read documents, locate translated versions of documents, or engage with translation services such as British Sign Language or other languages, where available.

52. Some victims' experiences may challenge commonly held conceptions of domestic abuse, which could result in victims struggling to speak about their

¹⁵ College of Policing, HM Inspectorate of Constabulary and Fire & Rescue Services, Independent Office for Police Conduct (2022), *Police perpetrated domestic abuse: report on the Centre for Women's Justice super complaint*. Available at: <https://www.gov.uk/government/publications/police-super-complaints-force-response-to-police-perpetrated-domestic-abuse/police-perpetrated-domestic-abuse-report-on-the-centre-for-womens-justice-super-complaint>

¹⁶ Step Up Migrant Women UK (2018), *Safe reporting of crime for migrants with insecure immigration status – Step Up Migrant Women*. Available at: <https://stepupmigrantwomenuk.files.wordpress.com/2018/06/lawrs-safe-reporting-roundtable-report.pdf>

¹⁷ As outlined in the Code of Practice for Victims of Crime in England and Wales ("the Victims Code"): You have the Right to be referred to services that support victims, which includes the Right to contact them directly, and to have your needs assessed so services and support can be tailored to address your needs. If eligible, you have the Right to be offered a referral to specialist support services and to be told about additional support available at court, for example special measures. This Right applies regardless of whether you have reported to the police. More information available at: <https://www.gov.uk/government/publications/the-code-of-practice-for-victims-of-crime/code-of-practice-for-victims-of-crime-in-england-and-wales-victims-code>

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experiences or being overlooked. In particular, IDVAs should be mindful of these issues in relation to:

- Female victims, due to often being made to discredit their experiences of abuse by being labelled by the perpetrator as mentally unwell, unstable or over-emotional.¹⁸
- Male victims, due to stereotyping, myths, and misconceptions around masculinity and societal expectations, which can lead to wrong assumptions that they cannot be victims of domestic abuse.¹⁹
- LGBT victims, due to stereotyping that abuse is limited to mixed-sex couples and that men are often the perpetrator.²⁰
- Older victims, due to ageist attitudes, stigma and stereotyping which may impact the recognition of domestic abuse, including the misidentification of signs of abuse (such as becoming withdrawn or evidence of bruising) as symptoms of aging.²¹

Maintaining a flexible service

53. Some victims will have different needs or preferences as well as safety concerns which IDVAs should consider. For example, meeting in person or in a particular location may be challenging because of accessibility requirements, or access or use of mobile phones may be limited due to safety concerns (for example, where a perpetrator monitors the victim's phone). When meeting victims, IDVAs should ensure that any communication is factored into safety planning and will not put the victim, IDVA or anyone else at further risk of harm.

54. Tailoring the IDVA service may require flexibility, such as: providing support outside of standard working hours; meeting in different venues, such as a child's school, a health centre or community centre; or using technology such as video calling, instant messaging, or other adaptive equipment such as text-to-speech systems with those who are unable to attend in-person appointments. Religious

¹⁸ Hester, M., Walker, S.J., Williamson, E. (2021), *Gendered experiences of justice and domestic abuse: Evidence for policy and practice*. Available at: https://research-information.bris.ac.uk/ws/portalfiles/portal/282693397/FINAL_Gendered_experiences_WA_UoB_July_2021.pdf

¹⁹ Male Survivors Partnership (n.d.), *Myths and Facts: Male Sexual Abuse and Assault*. Available at: <https://malesurvivor.co.uk/support-for-male-survivors/myths-and-facts/> [accessed 28/02/24]

²⁰ 'LGBT victims' refers to victims of domestic abuse who identify as lesbian, gay, bisexual or transgender, or who has another minority sexual orientation or gender identity, or who are intersex;. Galop (n.d.), *Myths and stereotypes about abuse among LGBT+ people*. Available at: <https://galop.org.uk/resource/resource-d/> [accessed 28/02/2024]

²¹ SafeLives (2016), *Safe Later Lives: Older people and domestic abuse*. pp11-12. Available at: <https://safelives.org.uk/sites/default/files/resources/Safe%20Later%20Lives%20-%20Older%20people%20and%20domestic%20abuse.pdf>

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practices, such as times of prayer or periods of fasting, and celebrations might impact when victims can engage with support services.

55. Victims with multiple needs such as homelessness, substance misuse, or severe mental health problems may find engaging with domestic abuse services particularly difficult. They may feel isolated, or may struggle to access location-based services or keep track of appointments.²² They may not see escaping or challenging an abusive situation as their priority.²³ IDVAs should consider creative and flexible approaches for victims with multiple needs. This could include providing the victim more opportunities to contact services before closing their case or working with other services which may have more regular contact with them such as community centres, foodbanks and shelters to provide holistic, wrap-around and ongoing support.

Delivering practical support

56. Practical support provides immediate and tangible help for victims of domestic abuse, within the boundaries of the IDVA role. This can take many forms, such as providing support to access refuges or other forms of safe accommodation, help to secure financial support or legal protection, or providing practical advice on safety planning and risk management. Relevant and appropriate practical support will vary depending on the victim's needs, preferences, and capabilities, as well as on the availability of other relevant support services locally or nationally.

57. Some examples of additional considerations of where IDVAs may need to deliver practical support to address a victim's needs are listed below:

- Some victims may be in the care, or be the primary carer, of a perpetrator, which could impact their options for support. This may be the case particularly with older victims or victims with disabilities.²⁴ IDVAs should take this into account when providing impartial information, exploring options, and considering safeguarding issues.
- Some victims may prefer to be supported by a support worker of their own sex and may prefer to access single-sex services where these are available.²⁵

²² Agenda, AVA, Lloyds Bank Foundation (2019), *Breaking Down the Barriers: Findings of the National Commission on Domestic and Sexual Violence and Multiple Disadvantage*. Available at: <https://avaproject.org.uk/wp/wp-content/uploads/2019/02/Breaking-down-the-Barriers-full-report-.pdf>

²³ Crisis (n.d.), *Homelessness knowledge hub: health and wellbeing*. Available at: <https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/health-and-wellbeing/> [accessed 28/02/24]

²⁴ SafeLives (2016), *Safe Later Lives: Older people and domestic abuse*. pp14-15. Available at: <https://safelives.org.uk/sites/default/files/resources/Safe%20Later%20Lives%20-%20Older%20people%20and%20domestic%20abuse.pdf>

²⁵ Equality Act 2010, *Part 7: Separate and single services*. Available at: <https://www.legislation.gov.uk/ukpga/2010/15/notes/division/3/16/20/7>; Council of Europe (2011), *Convention on preventing and combating violence against women and domestic violence*. Available at: <https://rm.coe.int/168008482e>

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- Some victims with disabilities may require adapted services, for example: step-free access to buildings, for appointments to be scheduled at certain times of the day, or for materials to be translated into British Sign Language or Braille. IDVAs should proactively ask what victims need to engage with services, rather than the onus being on the victim to make this known. This may form part of a needs assessment which should be reviewed on an ongoing basis.²⁶
 - Victims whose first language is not English may need appropriate independent interpretation and translation support, which should be done through a formal translation service. Translation through the use of family or community members is not appropriate as it could influence the victim's interaction with professionals and their ability to disclose information, and may risk inaccurate translations. Additionally, IDVAs should consider the victim's preference for the sex of a translator to prevent further victim re-traumatisation.
 - Some pregnant victims of domestic abuse go on to experience perinatal loss or choose to have an abortion, and may benefit from specialised mental health support, including post-abortive counselling.²⁷
 - Migrant victims may benefit from specific support mechanisms, as detailed in Domestic Abuse Statutory guidance.²⁸ This includes the Migrant Victims of Domestic Abuse Concession (MVDAC) which gives eligible partners a period of three months' leave to remain outside the Immigration Rules independent of the abusive partner, and the provisions which give eligible partners immediate settlement under Appendix Victim of Domestic Abuse to the Immigration Rules.²⁹
58. Victims whose perpetrator holds a position of authority, such as being a member of the police, emergency services or Armed Forces, may require assistance with relevant processes. For example, victims whose perpetrator serves in the Armed Forces may require support reporting the abuse to the Royal Military Police, or signposting to specialist military welfare providers.

²⁶ Public Health England (2015), *Disability and domestic abuse: Risk, impacts and response*, Available

at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/480942/Disability_and_domestic_abuse_topic_overview_FINAL.pdf

²⁷ Hall, M., Chappell, L.C., Parnell, B.L., Seed, P.T., Bewley, S. (2014), *Associations between intimate partner violence and termination of pregnancy*. Available

at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3883805/>

²⁸ Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

²⁹ For more information on the NRPF condition and how individuals with this status may be able to access support, see the Domestic Abuse Statutory Guidance, available at:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

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59. Those who have experienced police-perpetrated domestic abuse (PPDA) may need particular assistance and support with reporting a case.³⁰ Alongside criminal investigations, these cases may be investigated as allegations of police misconduct by either the force's Professional Standards Department or the Independent Office for Police Conduct (IOPC).³¹

- Victims of PPDA who are police officers themselves are less likely to report an offence through public channels, but informal disclosures to police colleagues carry a greater risk of not being recorded and responded to appropriately as allegations of crime and misconduct.³² Where the victim is seeking a criminal justice outcome, IDVAs can assist by discussing the option of formal reporting routes with victims.
- To address concerns about whether the investigating officer may have links to the perpetrator, IDVAs may explore the option for the victim, as a member of the public, to report via confidential systems such as Crimestoppers. Serving officers and police staff can use the Police Integrity Line which is also run by Crimestoppers.
- IDVAs may be able to support victims who have made a complaint and are dissatisfied with the handling or outcome of a police misconduct investigation to request an independent review of the outcome.³³

Working with others to provide holistic support

60. Some victims will have particular support networks of family, friends, or other individuals, and some will be involved with or may benefit from working with other professionals or support services where appropriate and possible. IDVAs should therefore be aware of relevant networks, for example, other support services involved such as drug and alcohol teams or, in the case of a child victim, their non-abusive family members, and, where relevant, work with them to provide holistic and tailored support.

³⁰ College of Policing, HM Inspectorate of Constabulary and Fire & Rescue Services, Independent Office for Police Conduct (2022), *Police perpetrated domestic abuse: report on the Centre for Women's Justice super complaint*. Available at: <https://www.gov.uk/government/publications/police-super-complaints-force-response-to-police-perpetrated-domestic-abuse/police-perpetrated-domestic-abuse-report-on-the-centre-for-womens-justice-super-complaint>

³¹ A criminal and misconduct investigation would not be conducted separately. Evidence gathering would be the same. For more guidance on investigations into police misconduct, please refer to IOPC guidance on the police complaints system, available at: https://www.policeconduct.gov.uk/sites/default/files/Documents/statutoryguidance/2020_statutory_guidance_english.pdf

³² Centre for Women's Justice (2020), *Super complaint: failure to address police perpetrated domestic abuse*. Available at: <https://static1.squarespace.com/static/5aa98420f2e6b1ba0c874e42/t/5e65fd0ba29cd069c4f3ca3c/1583742221663/super-complaint2+report.FINAL.pdf>

³³ Independent Office for Police Conduct (2020), *Statutory guidance on the police complaints system*. Available at: https://www.policeconduct.gov.uk/sites/default/files/Documents/statutoryguidance/2020_statutory_guidance_english.pdf

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61. Below are some examples of others ways in which IDVAs may need to work with in order to address victim needs:

- To best support a child or young person, IDVAs may need to adopt a ‘whole family approach’. This approach recognises that domestic abuse can impact the entire family unit which may require support from an IDVA or other specialist services, as appropriate, in order to create a safe environment for the child or young victim. IDVAs should balance this with engaging and listening to the child or young person, where possible, on a one-to-one basis to ensure their needs and safeguarding considerations are identified as some family dynamics may prevent a child or young person speaking up. An IDVA may also need to work with a child or young person’s school to help them understand the traumatic experience of the child, so that they can make adaptations for the child accordingly.
- Older victims may have a Lasting Power of Attorney (LPA) arrangement which provides an individual with the legal authority to make decisions on behalf of another person if they lose mental capacity.³⁴ IDVAs should work collaboratively with the Office of the Public Guardian where appropriate, as well as adult social services and other relevant professionals and individuals on matters such as consent, decision making, communication, and information sharing.
- Some people may not have disclosed their sexual orientation or gender identity to their friends, family, or wider community. IDVAs should keep victim information confidential and only disclose these when relevant to the safeguarding context.
- Some victims may prefer to receive culturally specific support. IDVAs may wish to seek advice from by and for organisations which can enhance the provision of holistic support for victims, particularly where the IDVA is not familiar with the relevant culture or where there are fears of discrimination.

³⁴ GOV.UK (n.d.), *Lasting power of attorney: acting as an attorney*. Available at: <https://www.gov.uk/lasting-power-attorney-duties> [accessed 28/02/24]

Section 3: Effective working between IDVAs and other agencies

Introduction

Terminology

62. Where the term ‘professional’ or ‘other professional’ is used within this document this is being used to distinguish from the IDVA role and encompasses, but is not limited to, those working in the above agencies and organisations. It includes those working in a voluntary capacity.

Overview of this section

63. Independent Domestic Violence Advisors (IDVAs) will need to engage with a number of other professionals to effectively carry out their role and ensure victims are provided appropriate, tailored support. The agencies and organisations which IDVAs engage with will be dependent on the victim’s needs and circumstances.

64. Effective collaboration is essential in ensuring that victims are properly supported and safeguarded, while preventing re-traumatisation, as they access support and navigate systems.

65. To help enable this effective collaboration other professionals should regard IDVAs as a key partner in the support of victims and have a clear understanding of the IDVA role – including their independence – as outlined in Section 1.

66. This section outlines how IDVAs and other professionals can collaborate effectively and address known challenges to cross-agency working which can impact victims’ experiences of seeking support. Below are key principles and best practice to consider when working together to support victims:

Making timely and full referrals to IDVA services	The guidance sets out key aspects to consider when professionals are making referrals into IDVA services.
Enabling IDVAs’ and other professionals’ access to necessary information	The guidance includes key principles to improve information sharing.

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Ensuring that relevant individuals are kept up to date on developments	The guidance sets out when IDVAs may have a single point of contact role (SPOC) and what can support effective communication between IDVAs and professionals.
Making use of the expertise of IDVAs when working with the victim	The guidance shows where other professionals can best use the insights and expertise of the IDVA role to enable holistic and quality support for victims. This includes on an individual as well as an institutional level.

Who this section is for

67. As set out in the introduction, Section 1 of [*Placeholder for Victims and Prisoners Act*] requires that relevant professionals working with victims have regard to this guidance. Such readers are encouraged to consider and implement the following outlined best practice and recommendations.
68. Content within this section will be relevant for anyone working with victims of domestic abuse. However, this is mainly aimed at IDVAs, IDVA employers and those directly working with victims of domestic abuse in the agencies and organisations listed in Section 1. This section should be considered alongside locally identified best practice and existing frameworks for working with IDVAs (a non-exhaustive list is provided at Annex B).
69. For examples of key roles within that work directly with victims of domestic abuse and therefore may interact with IDVAs, see Annex A.

Chapter 8: Referrals to IDVA services

70. All professionals have a role to play in providing a whole system response (for example, through a Coordinated Community Response) to victims of domestic abuse to keep victims safe and to prevent further abuse.
71. Wherever possible, referrals should be person-centred and consent-led, although there are occasions when consent is not required for safety reasons. To determine if a referral is needed, professionals first need to know how to recognise domestic abuse. For more information and guidance on how to recognise different forms of domestic abuse, professionals should refer to the Domestic Abuse Statutory guidance.³⁵
72. Where professionals are unsure whether a referral is needed or of the steps to take, they should engage with a domestic abuse service for advice – this may be an IDVA service. Domestic abuse specialists, such as IDVAs, will have the necessary experience and knowledge to appropriately assess the needs and risks posed to the victim which may not always be accurately detected through standardised assessments.

Making a referral

73. If an IDVA is considered an appropriate form of support, a referral should be made as soon as possible. Referral mechanisms vary locally and IDVAs and other professionals should ensure they familiarise themselves with their local referral pathways and practices (where the IDVA role is co-located or integrated into services, for example, a health-based IDVA, the referral pathway should be reflected in the relevant service's internal policy/process).
74. Referrals into IDVA services can be made at any time and by any professional engaging with a victim. Some IDVA services accept 'self-referrals' by victims themselves, which some victims may prefer as they seek to regain some control in their lives.
75. Information on how to refer a victim to an IDVA service can typically be found on an IDVA service provider's website with an accompanying referral form or contact number. Local authority and Community Safety Partnership websites will generally have information about local IDVA services and other domestic abuse services. Where this is not the case, a list of national providers can be found on

³⁵ Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

GOV.UK.³⁶

76. Professionals considering referrals for children who have seen, heard or experienced domestic abuse in their family or household should contact the IDVA service to check whether they provide CHIDVAs (Children’s IDVAs) or other specialised services for child victims. If they do not, the referrer should seek or ask to be signposted to a service which suits the child’s age and needs and runs in parallel with any services supporting the adult victim.
77. If a professional is concerned about a child’s safety, they must also consider a referral to local authority children’s services. For further advice about child safeguarding, professionals should seek advice from their local multi-agency child safeguarding partnership.
78. The following steps will be helpful when referring a victim into an IDVA service. Referrals made through multi-agency forum referrals (for example, via MARAC referrals) or where IDVAs are co-located or working within statutory services may involve alternative processes.

Seeking consent and clearly explaining the IDVA role

Professionals should seek consent from the victim before referring them to an IDVA service, unless there is an alternative legal basis for sharing their information (see Chapter 9 on information sharing). For child victims, it may be necessary to seek consent from a safe parent or guardian.

When seeking consent, professionals should explain in full the role and benefits of the IDVA support so that the victim can make an informed decision. Section 1 sets out the key elements of the IDVA role which can be used to aid this conversation.

Where a victim chooses not to be referred to an IDVA service, professionals should make clear that the victim can change their mind at any point and provide them with information on how they can access support services in the future.

³⁶ Available at: <https://www.gov.uk/government/publications/domestic-abuse-get-help-for-specific-needs-or-situations/domestic-abuse-specialist-sources-of-support>

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Working without consent	As set out in Chapter 9, there are lawful bases for sharing information without consent, including in high-risk cases. Where safe to do so, it is best practice to inform the victim before making the referral and to inform them of the information shared in the referral. It remains the victim's choice whether to engage with the IDVA support.
Including sufficient information within referrals	<p>Referrals should include as much relevant information as possible to ensure appropriate safeguarding and support. This helps to avoid unnecessary repetition and reliance on victims to have to repeat their story, in line with adopting a trauma-informed approach.³⁷ This should include:</p> <ul style="list-style-type: none"> • information provided by the victim about their contact preferences and when it is safe to contact them. For child victims, it may also be appropriate to include the contact details for a safe parent or guardian. • information about disability or accessibility requirements (including the need for an interpreter) are important to ensure the IDVA service is able to engage with the victim in a timely and appropriate manner. • information on the victim's age, race, sexual orientation, immigration status and access to public funds (where relevant) will help the IDVA service to provide an effective and tailored response, and to identify specific risks to consider. • a needs/risk assessment, safety plan, or safeguarding actions (if conducted), alongside any relevant details in relation to risk classification including the referrer's professional judgement or a record of an escalation in the frequency and/or severity of abuse. • information on any other agencies known to be in contact with the victim and the wider family, including Children's Social Care, drug and alcohol services, mental health teams, police, and probation.

³⁷ Office for Health Improvement and Disparities (2022), Working definition of trauma-informed practice. Available at: <https://www.gov.uk/government/publications/working-definition-of-trauma-informed-practice/working-definition-of-trauma-informed-practice>; Public Health Wales NHS Trust (2022), *Trauma-informed Wales: A societal approach to understanding, preventing and supporting the impacts of Trauma and adversity*. Available at: <https://traumaframeworkcymru.com/>

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For further clarity about what information is useful, professionals should contact the relevant IDVA service provider. If safe to do so, the referrer should share the information included in the referral with the victim to ensure accuracy and transparency.

Ensuring the victim is kept up to date

All referrals should be made as soon as possible. The victim should be kept up to date when referrals have been made and should be told what to expect next.

Confirming action to be taken

IDVA services should confirm with the referring professional when a referral has been actioned. The details of the allocated IDVA should be securely shared with the professional making the referral. Where the IDVA becomes aware that other relevant services are involved with the victim, they should proactively reach out to these services to make it known that they are the victim's allocated IDVA. Where possible, they should obtain the victim's consent in advance.

Due to the nature of domestic abuse, the IDVA should consider multiple attempts and methods in their efforts to contact the victim, with consideration of their communication preferences. Where the IDVA service has not been able to contact the victim, they should communicate this to the referring professional.

Chapter 9: Information sharing

79. Those supporting a victim will hold different relevant information which may not be known to other agencies. Effective sharing of appropriate information can help to build a holistic view of a victim's circumstances. This aids safety planning, risk management, and the identification of victim needs and necessary multi-agency support.
80. All professionals should consider the need to securely share relevant information throughout their support of the victim. Importantly, data protection regulations should never be a barrier to justified information sharing in the context of safeguarding. Instead they provide a framework for this information to be shared as long as it is lawful, necessary, relevant and proportionate.³⁸ Professionals should also be aware of how unintentional information sharing can increase the victim's risk of harm, for example, in cases where a victim and their perpetrator no longer live together, professionals should take all necessary steps to prevent the victim's new address from being disclosed to the perpetrator.

Understanding of information sharing requirements

81. This section does not provide detailed guidance for professionals but outlines key principles. For detailed guidance regarding information sharing, professionals should consult their internal policies. Where professionals are in doubt about a decision to share information, they should seek advice from relevant colleagues. This could be their manager or supervisor, or their organisation's Data Protection Officer, Caldicott Guardian, professional regulator or relevant policy or legal team.
82. Professionals and IDVAs should familiarise themselves with the legal requirements regarding information sharing to feel confident about when and how to securely share relevant information. This should be in line with data protection (UK General Data Protection Regulation (GDPR) and Data Protection Act 2018), the common law duty of confidentiality (in relation to information shared by a victim with a professional with an expectation of confidentiality), the Information Commissioner's Office's (ICO) Data Sharing Code of Practice, and – where relevant – guidance published by their professional regulator.³⁹ Professionals

³⁸ Department for Education (2024), *Information sharing: advice for practitioners providing safeguarding services*. Available at: <https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

³⁹ Data Protection Act 2018. Available at: <https://www.legislation.gov.uk/ukpga/2018/12/contents>; NHS England (2022), *Use and share information with confidence*. Available at: <https://transform.england.nhs.uk/information-governance/guidance/use-and-share-information-confidence/>; NHS England (2022), *Section 2: The Common law of confidentiality and consent*. Available at: [https://digital.nhs.uk/data-and-information/looking-after-information/data-security-and-information-governance/codes-of-practice-for-handling-information-in-health-and-care/a-guide-to-confidentiality-in-health-and-social-care/hscic-guide-to-confidentiality-references/section-2](https://digital.nhs.uk/data-and-information/looking-after-information/data-security-and-information-governance/codes-of-practice-for-handling-information-in-health-and-care/a-guide-to-confidentiality-in-health-and-social-care/hscic-guide-to-confidentiality-references/section-2;);

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should also be aware of safeguarding responsibilities set out in legislation such as the Children Act 2004 and the Care Act 2014.

83. Article 5 of the UK GDPR sets out the data protection principles to bear in mind when deciding what and how much information should be shared, and how to provide this in a secure way. Professionals also need to be aware of the additional considerations when processing children’s information. Further information (including an interactive toolkit for making decisions and a practical guide about data sharing and children) can be found on the ICO website and the Department for Education has produced additional guidance on data sharing for professionals providing safeguarding services to children, young people, parents and carers.⁴⁰

Lawful bases for sharing information

84. The principles set out in Article 5 of UK GDPR do allow for sharing information, when necessary, as long as there is a lawful basis for doing so.⁴¹ This includes consent, but consent is not the only lawful basis under UK GDPR for information sharing, and in cases involving safeguarding concerns it may not be appropriate. Professionals should be transparent about the circumstances in which they might securely share personal information with third parties.

85. Article 6 of UK GDPR sets out the lawful bases on which information can be shared.⁴² At least one of these criteria must be met before the personal data can be processed or shared, and sharing should always be proportionate (that is, no more than necessary).

86. You should select the most appropriate lawful basis for the sharing you are proposing. In some cases, it may be appropriate for consent to be the lawful basis but, in other cases, particularly where safeguarding is a concern, it is likely that public task, or legal obligation will be more appropriate bases for information sharing. While vital interests is also a lawful basis, it is only intended to cover interests that are essential for the protection of someone’s life so it can only be used in limited circumstances.

Information Commissioners Office (2022), *Data Sharing Code of Practice*. Available at: <https://ico.org.uk/media/for-organisations/data-sharing-a-code-of-practice-1-0.pdf>

⁴⁰ Information Commissioner’s Office (2023), *A guide to the data protection principles*. Available at: <https://ico.org.uk/for-organisations/uk-gdpr-guidance-and-resources/data-protection-principles/a-guide-to-the-data-protection-principles/>; Information Commissioner’s Office (2023), *A 10 step guide to sharing information to safeguard children*. Available at: <https://ico.org.uk/for-organisations/uk-gdpr-guidance-and-resources/data-sharing/a-10-step-guide-to-sharing-information-to-safeguard-children/>;

Department for Education (2024), *Information sharing: advice for practitioners providing safeguarding services*. Available at: <https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

⁴¹ Article 5 of GDPR: Principles relating to processing of personal data. Available at: <https://www.legislation.gov.uk/eur/2016/679/article/5>

⁴² The six bases are: consent, contract, legal obligation, vital interests, public task and legitimate interest. Article 6 of GDPR: Lawfulness of processing. Available at: <https://www.legislation.gov.uk/eur/2016/679/article/6>

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87. Where information is shared without consent, it is still best practice to inform the victim (unless doing so will put someone at risk) and explain why this information is being shared and what will happen next. For child victims, the professional should consider how they can explain the reasons for the referral in an age-appropriate way, so the child can understand what will happen next.

88. In addition to Article 6, 'special category data' (under Article 9) requires more protection due to its sensitive nature, for example, health related data. More information on what is included in special category data and the conditions for processing or sharing can be found on the ICO website.⁴³

89. Where information, such as health information, has been provided to relevant professionals with an expectation of confidentiality, professionals will need to ensure they have a lawful basis that meets the Common Law Duty of Confidentiality requirements before they consider the lawful bases set out in UK GDPR.⁴⁴ If it is inappropriate to seek explicit consent to share confidential information (for example, because seeking consent might put a person at risk of serious harm), one of the following criteria must be met:

- Disclosure is legally required (for example, legislation or a court order mandates information sharing);
- There is an overriding public interest justification (for example, where the sharing is necessary for safeguarding purposes) which outweighs the public interest in maintaining confidentiality, and where the disclosure is necessary and proportionate.

Developing and implementing information-sharing protocols

90. To facilitate effective information sharing and comply with legal requirements, IDVA services and other agencies should establish protocols which set out what each agency can securely share and how. Where multi-agency information-sharing agreements are already in place, they should include IDVA services.

⁴³ Information Commissioner's Office (2022), *A Guide to lawful basis: Special category data*. Available at: <https://ico.org.uk/for-organisations/uk-gdpr-guidance-and-resources/lawful-basis/a-guide-to-lawful-basis/lawful-basis-for-processing/special-category-data/-scd1>

⁴⁴ NHS England (2022), *Use and share information with confidence*. Available at: <https://transform.england.nhs.uk/information-governance/guidance/use-and-share-information-confidence/>; NHS England (2022), *Section 2: The Common law of confidentiality and consent*. Available at: <https://digital.nhs.uk/data-and-information/looking-after-information/data-security-and-information-governance/codes-of-practice-for-handling-information-in-health-and-care/a-guide-to-confidentiality-in-health-and-social-care/hscic-guide-to-confidentiality-references/section-2>

Chapter 10: Effective communication

91. It is essential that there is effective communication between IDVAs and other professionals. This will enable better support for victims, aid safety planning and support the victim's overall experience. Communication should be a two-way process with all parties providing appropriate updates where necessary.

Establishing frequency/method for communication

92. The extent to which IDVAs and other professionals will communicate are dependent on the needs and circumstances of the victim. On first contact, the IDVA and other professionals should establish how they will communicate going forward, including who they should remain in contact with (for example, for children, this may be a safe parent or guardian), the frequency (for example, after key decision points or on a regular basis), and the preferred method (for example, email or phone).

Establishing an IDVA as a single point of contact

93. Victims will often need to engage and communicate with several agencies, organisations and professionals. To simplify communication and prevent further re-traumatisation, some victims may benefit from someone acting as a single point of contact (SPOC). This could be the victim's IDVA, or the victim may prefer to liaise with the IDVA and other agencies through another trusted worker. As a SPOC, this person may communicate with other agencies and advocate for the victim on their behalf, where appropriate.

94. During initial engagement, the IDVA should establish if the victim would like them to act as a SPOC to facilitate wider communication and engagement with other services. The IDVA should make clear that the SPOC role can be adapted at the victim's request and the IDVA should consider how they can empower the victim to advocate for themselves, where possible.

95. While the IDVA SPOC may communicate on behalf of the victim, they are not responsible for coordinating all support services required by the victim. This role therefore differs from others, such as lead practitioners, who may also be involved if the victim has children and may coordinate support services for the whole family.⁴⁵

⁴⁵ In circumstances where an IDVA is aware that the victim has children, the IDVA should establish if there is a 'lead practitioner' in place, such as a social worker, who is responsible for co-ordinating support around the family. Where there is a 'lead practitioner' in place, they will often act as a key point of contact with the victim and their family in relation to wider support services. IDVAs will not usually act as Lead Practitioner, unless it is decided that this is in the family's best interests. For more information on 'lead practitioners,' refer to:

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Where a victim consents and would like their IDVA to act as a single point of contact (SPOC), the below actions should be followed:

The IDVA should:

- Unless not possible, record this preference in writing with signed agreement from the victim (this may be known as a client contact agreement);
- Agree with the victim about how to keep them informed about decisions and updates;
- Communicate this to other agencies who are engaged with the victim and state on onward referrals;
- Explain to the victim that they can amend this communication preference at any point;
- Ensure that all professionals are aware if they are no longer supporting the victim so that communication preferences can be updated.

Other professionals should:

- Record and adhere, where possible, to the agreed contact preference;
- Establish with the IDVA the best method for communication;
- Communicate this to other professionals who engage with the victim and state on onwards referrals/handovers, for example, from the police to the Witness Service;
- Note that this does not make the IDVA a lead practitioner responsible for co-ordinating support.

Where it has been agreed that the IDVA will act as a SPOC, other professionals should respect this communication preference.

However, on some occasions, it may not be possible to reach the IDVA within the necessary timeframes to communicate with the victim (for example, where a victim needs to be urgently notified for safeguarding reasons) or it may not be appropriate share updates through them (for example, discussion of evidence; social care investigations; medical information; or to communicate the rationale for a “No Further Action” decision). In these circumstances, efforts should be made to make the IDVA aware so they can meet jointly with the victim and the professional, provide support to the victim afterwards and/or

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- Department for Levelling Up, Housing and Communities, Department for Education (2022), *Early Help System Guide*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1078299/Early_Help_System_Guide.pdf;
 - HM Government (2023), *Working Together to Safeguard Children*. Available at: https://assets.publishing.service.gov.uk/media/65cb4349a7ded000c79e4e1/Working_together_to_safeguard_children_2023_-_statutory_guidance.pdf

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advise on how best to communicate with the victim (for example, time of day to contact, preferred contact method).⁴⁶

[PLACEHOLDER: CASE STUDY ON THE BENEFITS OF UTILISING A SINGLE POINT OF CONTACT]

Providing simultaneous updates

96. In some circumstances where a victim has not chosen for their IDVA to act as a SPOC, other professionals should explain to the victim their duty to share safeguarding concerns with the IDVA and establish whether the victim consents to their IDVA receiving simultaneous updates, where appropriate and practical. These updates ensure that an IDVA is aware of key decisions which may impact upon safety and the support required by the victim. This also removes the emphasis on the victim having to share updates themselves.

Involving the IDVA role in multi-agency settings

97. To assist with communication and improve outcomes for victims, other professionals should routinely invite IDVAs to all relevant multi-agency meetings. IDVAs will determine whether they should be in attendance on a case-by-case basis. When in attendance IDVAs should have parity of status with other agencies. Where possible, it is best practice for professionals working with a victim to invite the IDVA to all relevant multi-agency meetings, regardless of whether the victim has agreed to engage with the IDVA.
98. IDVAs crucially represent the victim in these forums ensuring that their voice is heard. They are also able to provide trauma-informed expertise and specialist knowledge of the impact of domestic abuse. Such multi-agency forums include but are not limited to those listed in the following table:

⁴⁶ There will be certain instances where a victim requests for “No Further Action” decisions to be communicated via their IDVA and this should be discussed and agreed as part of the initial conversation between the IDVA and victim.

OFFICIAL SENSITIVE – DRAFT POLICY**Multi-Agency Risk Assessment conference (MARAC)**

The purpose of the Multi-Agency Risk Assessment Conference (MARAC) is to manage risk and increase support and safety of victims through risk management plans including comprehensive information sharing and action planning processes. MARACs are held between representatives of local police, health, child and adult social care, housing practitioners, IDVAs, probation and other specialists from the statutory and voluntary sectors to share information about high-risk domestic abuse cases and create a co-ordinated action plan aimed at reducing the risk posed to the victim(s). Children aged 16 or over who are victims of abuse in their intimate relationship must be referred to MARAC if they are assessed to be at high risk. It is not necessary to refer children who are associated with a high-risk case in their family or household because they will be discussed at the same time as the adult victim.

In practice, as part of the MARAC, an IDVA will:

- represent the voice and needs of the victim, ensuring that their choices and views are respected and understood;
- provide information about the victim's risks and needs assessment including action already taken and proposed next steps;
- where agreed, work as the main point of contact for the victim and other professionals, to help streamline support and prevent re-traumatisation;
- with the consent of the victim, proactively implement relevant actions from the safety plans developed at MARAC, for example, making an onwards referral to mental health services or other holistic therapeutic services, as appropriate;
- provide appropriate challenge to agencies where needed to ensure the victim's safety and wellbeing.⁴⁷

Further information on MARACs can be found in the Domestic Abuse Statutory guidance.⁴⁸

Multi-Agency Public Protection Arrangements (MAPPA)

Multi Agency Public Protection Arrangements (MAPPA) is the set of arrangements through which the police, and HM Prison and Probation Services work together with other agencies to manage the risks posed by violent, sexual and

⁴⁷ SafeLives (2017), *10 Principles of an Effective Marac – Principle 4*. p5. Available at: <https://safelives.org.uk/sites/default/files/resources/The%20principles%20of%20an%20effective%20MARAC%20FINAL.pdf>

⁴⁸ Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

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	terrorist offenders living in the community in order to protect the public. MAPPA are supported by guidance which states that IDVAs must be invited to all level 2 and 3 meetings. ⁴⁹
Multi-Agency Tasking and Coordination (MATAC)	Multi-Agency Tasking And Coordination (MATAC) is focused on identifying and tackling serial perpetrators of domestic abuse. This forum aims to safeguard adults and children at risk of domestic abuse, preventing further domestic abuse related offending, and changing offender behaviour.
Multi-Agency Safeguarding Hub (MASH)	The Multi-Agency Safeguarding Hub (MASH) allows organisations with responsibility for the safety of vulnerable people to work together. Organisations share information and co-ordinate activities, often through co-locating staff from the local authority, health agencies and the police. Most safeguarding partner agencies support these arrangements so that they can identify risks to vulnerable children early. ⁵⁰
Child Protection Conferences	A child protection conference is a meeting between families and professionals that is held when there is a concern about the safety of a child. This forum seeks to make decisions about a child's future safety, health and development. It is not always appropriate or safe for a victim or IDVA to meet with the perpetrator/suspect so professionals should consider separate meetings. ⁵¹
Child Social Service Strategy Meetings	Child social service strategy meetings are a gathering of professionals involved in the care and protection of a vulnerable child or young person. The purpose is to agree next steps for safeguarding the child, which includes deciding whether the case meets the threshold for a child protection investigation.
Team around the Family meetings	Team around the Family meetings bring together groups of professionals and volunteers who work alongside the family to improve outcomes. They are led by a Lead Practitioner, but all members are active participants and their contribution equally valued. The team will be able to demonstrate good communication and co-ordination based on the family's plan and the family's feedback on the support provided should reflect this.
Local Scrutiny and Involvement panels	CPS Local Scrutiny and Involvement panels provide a platform for criminal justice agencies to work with community sector representatives to scrutinise decision-making and actions taken. Through this, agencies identify

⁴⁹ Ministry of Justice, National Offender Management Service, HM Prison Service (2023), *MAPPA guidance*. Available at: <https://www.gov.uk/government/publications/multi-agency-public-protection-arrangements-mappa-guidance>

⁵⁰ Some local areas may call multi-agency safeguarding structures by a different name.

⁵¹ Further details about child protection conferences are set out in *Working Together to Safeguard Children*. Available at: https://assets.publishing.service.gov.uk/media/65cb4349a7ded000c79e4e1/Working_together_to_safeguard_children_2023_-_statutory_guidance.pdf

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	and share best practice to inform policy, and to improve activity and victim outcomes. The purpose of these panels is not to discuss active cases. CPS Areas facilitate the panels. IDVA service providers should identify if they attend a scrutiny panel - and if not, should determine the value of their attending, and contact the local CPS Area to enquire about participation.
Substance/ Mental Health Multi-Disciplinary Treatment	A multi-disciplinary approach to drug and alcohol/mental treatment where individuals drawn from different disciplines come together to determine appropriate patient pathways, interventions or management plans. It may be appropriate for IDVAs to attend where the victim has substance or mental health needs.
Primary Care / General Practice Safeguarding Meetings	Practice safeguarding meetings allow practice staff to share information, identify concerns and agree management plans for complex safeguarding cases. There may also be an opportunity to meet with multidisciplinary partners who can help safeguard the practice's registered patients.

99. Where the suspect or perpetrator is due to attend the meeting, professionals should consider the safety of the IDVA and the victim, the victim's ability to discuss their experiences openly, and the benefits of holding separate meetings, in particular, for child protection meetings.
100. There may be occasions within these settings where it is necessary to withhold information from the victim (for example, personal information relating to the suspect or perpetrator). The professional sharing this information should make it clear where this information should be withheld.

Chapter 11: Using the expertise of IDVAs

101. IDVAs are subject matter experts in domestic abuse and work closely with victims to understand their needs and manage risk. Other professionals should consider using the expertise of IDVAs to enhance the support provided to victims and ensure their actions are informed by a clear understanding of domestic abuse.
102. This can be at an individual case level, as set out below, but also on a strategic or organisational level (known as 'institutional advocacy'). Further information on institutional advocacy can be found in Chapter 12.

Drawing on an IDVA's insights

103. Professionals should recognise and consider where they can actively use the IDVA's expertise and insight into the wider context and circumstances of the victim.
104. Making use of this expertise will help victims receive better support, including in developing other professionals' comprehensive understanding of how best to adequately safeguard, manage risk and provide appropriate, trauma-informed support. IDVAs could assist other professionals to conduct or develop needs or risk assessments, safeguarding plans or support plans. Professionals should be mindful of an IDVA's independence at all times, as set out in Section 1 of this guidance.

Drawing on an IDVA's support

105. Through the relationship that an IDVA establishes with a victim, they will often have a unique and in-depth insight into how best to support a victim, whether this be through emotional reassurance, practical support and/or advocacy. This may be particularly relevant for victims who have experienced multiple disadvantages or had negative experiences with agencies in the past.
106. Because of this, depending on the victim's preference, it is always best practice for other professionals to consider inviting IDVAs when they need to directly engage with victims. This may include key meetings, appointments and visits.
107. In circumstances (including those outlined below) where it is not deemed appropriate for the IDVA to be present in the room for a meeting, appointment or visit, professionals should share a clear rationale with the victim and IDVA, as well as sharing the time/location with the IDVA so they can provide support before and after, if needed.

OFFICIAL SENSITIVE – DRAFT POLICY*Box 2: Examples where IDVA support can help.*

This is not intended to be a comprehensive list, and professionals should continually consider where the presence of the IDVA will enhance support and improve a victim's experience. These examples will not be relevant to all victims, depending on a victim's consent, their circumstances and the agencies they are engaging with.

- **Healthcare professionals** – Some IDVAs, including health-based IDVAs who work in healthcare settings like hospitals, will often support victims in the immediate aftermath of a crisis. They may also support victims who need adjustments when attending medical appointments, for example, a female victim may require female-only staff for maternity appointments. Health-based IDVAs will also support healthcare professionals to increase their confidence and skills in responding to and asking about domestic abuse by routine enquiry. This can improve referral pathways from healthcare settings to community-based services.
- **Housing meetings** – Alternative housing options can be a key factor in whether a victim decides to stay or leave a perpetrator.⁵² Professionals should inform the IDVA of meetings with housing providers to support the victim through this process and advocate for them. In an emergency situation, this could include providing domestic abuse safe accommodation, such as a refuge.
- **Meetings with family solicitor/barrister** – Where the victim is accessing the family justice system, the IDVA can help them give their best evidence by providing emotional reassurance and practical support. IDVAs may be able to share their expertise on domestic abuse and its impact with the solicitor/barrister, and ensure that family lawyers are not expected to provide support beyond their expertise.
- **Parole hearings** – With the Victim's consent, Victim Liaison Officers (VLOs) should make the IDVA aware of when a parole hearing will take place, when the parole hearing decision is expected, and once it has been made, so that additional support can be offered at these stages. VLOs should also, with the Victim's consent, make the IDVA aware of when an offender may be released. Where the victim does not already have an IDVA supporting them, VLOs should discuss with the victim whether they wish to be referred to an IDVA service (in line with Chapter 8).
- **Pre-trial visit** – Pre-trial visits allow the victim see the courtroom and to ask any questions they might have about the criminal court process. Witness Care Officers should make the relevant service aware that an IDVA is in place. The relevant service can then arrange a mutually convenient time so that the IDVA can attend the pre-trial visit to support

⁵² Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

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the victim through the process.

- **Schools, colleges, universities and employers** – The IDVA may offer support to improve professionals understanding of domestic abuse and the victims' safeguarding needs. For example, an IDVA or CHIDVA supporting a child victim may help to negotiate a reduced school timetable.
- **Witness statements** – Providing a witness statement for a police investigation can be a distressing time for victims. Officers should liaise with the IDVA to establish a convenient time for the victim to attend. However, where the victim would like their IDVA to continue supporting them through the criminal justice system, the IDVA will not be able to be present while the statement is being taken (see Section 1) but the victim may wish them to be present for support before and after, where appropriate. As part of the statement-taking process, there should be a discussion with the victim about special measures - if the IDVA is attending in person, they should be present for this discussion. If they are not present, officers should inform the IDVA of the special measures discussion which has taken place.⁵³

IDVA support at court

108. As set out in Section 1, where applicable, an IDVA will support a victim through the justice system. Attending court proceedings can be a particularly challenging part of the justice process for a victim and one where they can benefit from the practical support and emotional reassurance of their IDVA.⁵⁴

109. *[PLACEHOLDER: CASE STUDY ON BENEFIT OF HAVING AN IDVA AT COURT]*

110. Examples of how an IDVA might support a victim in the court setting are set out in the table below:

Supporting with Protective Orders	The IDVA should help the victim decide whether applying for civil or family court protective order might be appropriate to improve their safety. This may include a non-molestation order, an occupation order or a prohibitive steps order. ⁵⁵
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⁵³ More information on special measures can be found in the CPS Guidance: CPS (2021), *Special Measures*. Available at: <https://www.cps.gov.uk/legal-guidance/special-measures>

⁵⁴ In some cases, this may be a court-based IDVA – refer to Section 1 for more detail on these roles.

⁵⁵ A non-molestation order can help protect an adult or child victim of domestic abuse from abuse or harassment by the perpetrator, including by preventing them from coming near to the victim's home. An occupation order allows the court to decide who should live in or return to the whole or part of a

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Supporting with logistics	The IDVA should liaise with the relevant witness service beforehand (for example, before the pre-trial visit, if applicable) to ensure they know which entrance and exits are appropriate to avoid having contact the perpetrator or their family/friends. The IDVA should work with the victim (and police, where relevant) to ensure the victim is able to get to and from court safely.
Providing practical support and emotional reassurance by sitting beside the victim while giving evidence in court or in the live-link room (subject to judicial approval)	There are ‘court rules’ which set out the overarching principles for who can be in the courtroom. These set out that the family and criminal court will allow IDVAs to sit next to or near the victim in the courtroom or any other place where the victim takes part, unless there is good reason for the judge/magistrate to refuse. ⁵⁶ Where a victim would like support of their IDVA, this will need to be requested in advance (see Figures 1 and 2).
Explaining the court process, and aiding interaction, where appropriate, with professionals	IDVAs can help in supporting victims in their understanding of what is happening during the court process. This can include supporting engagement between a prosecutor and the victim, advocating for the victim’s wishes in meetings with a prosecutor or family lawyer, and helping to challenge a lawyer if a decision taken could increase the risk faced by the adult victim and/or any child victims. When other professionals need to interact with the victim, it is best practice to ensure the IDVA is present, with the victim’s consent.
Keeping the victim updated on how the case/trial is progressing	IDVAs should work closely alongside court staff (and witness services in criminal courts) to keep the victim updated on how the case/trial is progressing, for example, when they will give evidence.

111. For court proceedings to run smoothly so that the case can be heard, IDVAs must observe the appropriate rules. For example:

shared home. Information on how to apply and who can apply for both can be found at:

<https://www.gov.uk/injunction-domestic-violence>

A prohibitive steps order can stop a child’s other parent from making a decision about the child’s upbringing. More information is available at: <https://www.gov.uk/looking-after-children-divorce/types-of-court-order>

⁵⁶ Family Division (2023), *Practice Direction 27C – Attendance of IDVAs and ISVAs*. Available at: https://www.justice.gov.uk/courts/procedure-rules/family/practice_directions/practice-direction-27c-attendance-of-idvas-and-isvas; The Criminal Procedure (Amendment) Rules 2024. Available at: <https://www.legislation.gov.uk/uksi/2024/62/rule/4/made>

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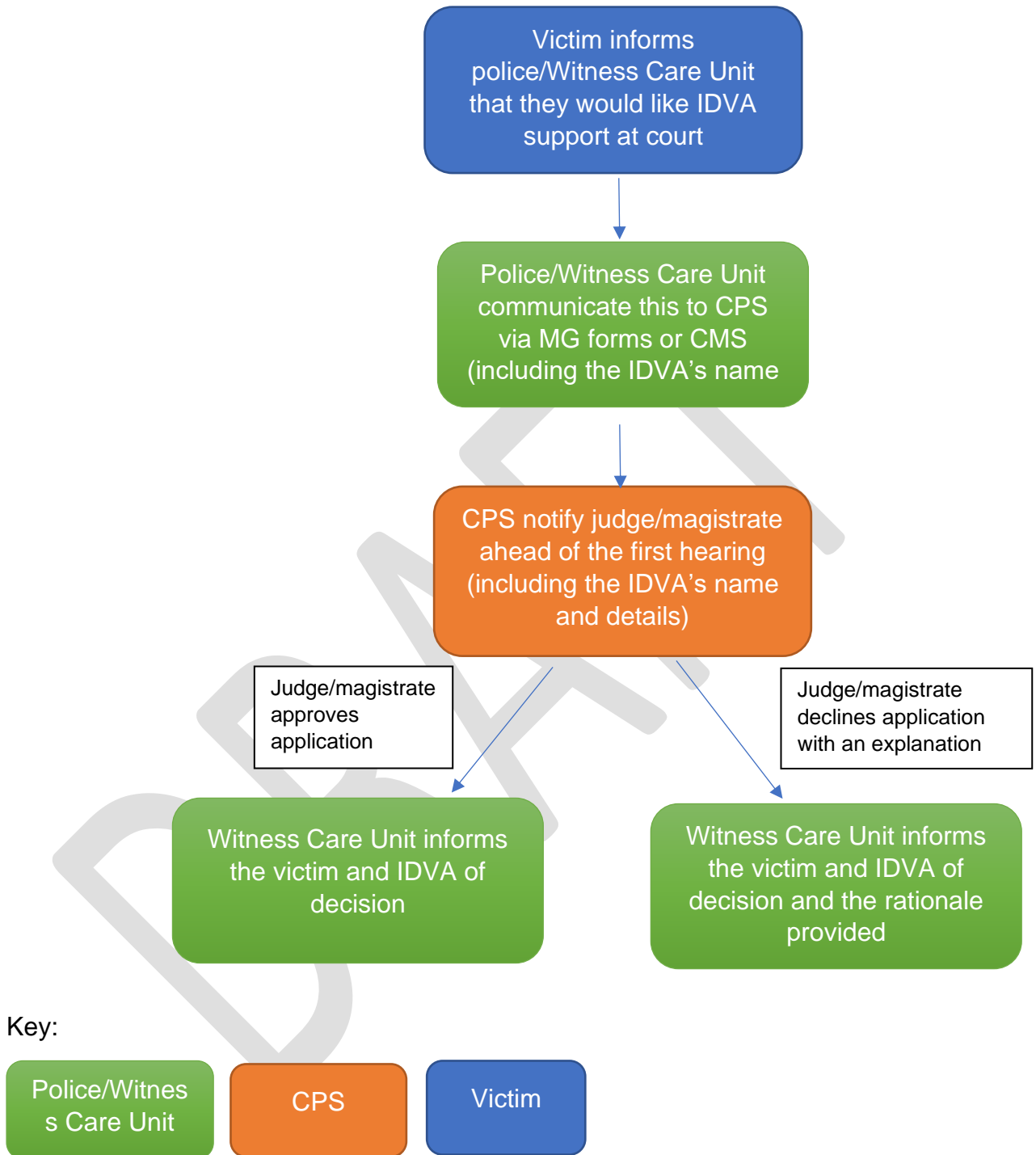
- While an IDVA may sit next to the victim, they must not speak on behalf of the victim in the courtroom or interrupt the hearing;
- While the IDVA may know the victim's experience of domestic abuse, they must not discuss the evidence. See page 14 in Section 1 for more information;
- While an IDVA can make the victim aware of the practical support available to assist them giving evidence, they are not qualified lawyers and must not provide the victim with legal advice.

112. For cases heard in the criminal courts, witness services are present to provide support for all victims and witnesses attending court. Due to the relationship the IDVA will have developed with the victim, the IDVA will often be best placed to support the victim in court giving evidence, rather than witness services. However, the IDVA and witness services should ensure they work closely together due to the operational knowledge of the courts the witness services will have. The IDVA and Witness Service should agree who is best placed to provide this support.

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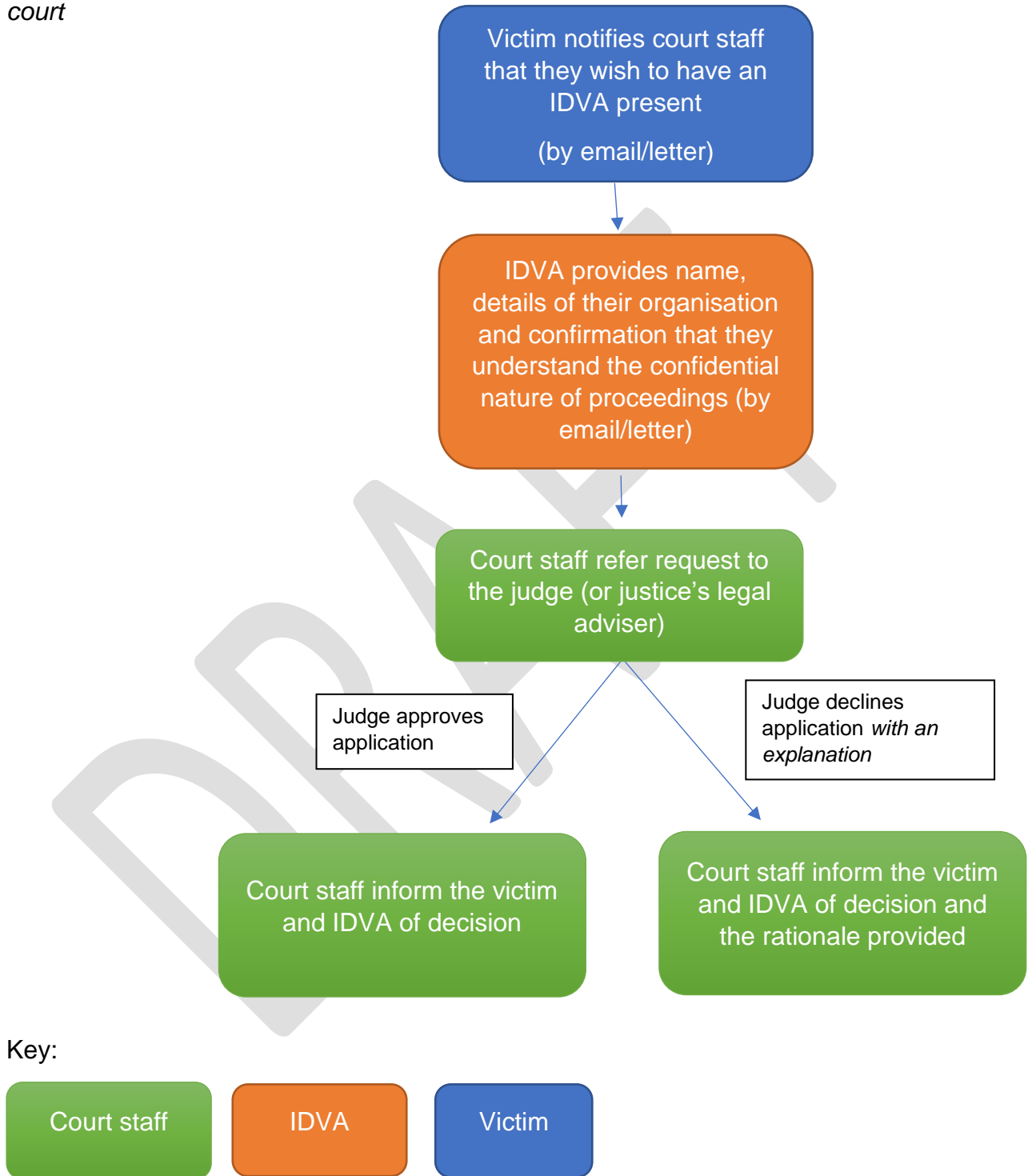
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Figure 1: Flow chart for notification of IDVA support while giving evidence in criminal court



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Figure 2: Flow chart for notification of IDVA support while giving evidence in family court



Chapter 12: Institutional advocacy

113. Institutional advocacy is the term for providing advocacy support and advice at an institutional rather than individual level and covers activity IDVA services may carry out which involves raising systemic issues that impact victims' experiences. It can help agencies and organisations improve their practices, including highlighting best practice and encouraging learning from good practice. It can also increase understanding and awareness of domestic abuse.
114. IDVA services have a unique multi-agency perspective as they support victims to navigate different systems. They are therefore well equipped to recognise gaps and barriers which victims may face and advocate for improvements to ways of working.
115. Institutional advocacy can include a variety of activities such as:
- If suitably qualified, providing training to other organisations on recognising and understanding domestic abuse;
 - Highlighting issues at senior or strategic levels to make overall improvements. For example, if multiple victims are experiencing issues with a referral pathway;
 - Contributing specialist knowledge in the development of strategic plans, service design and development. For example, to help shape improvements where particular groups of victims are facing barriers to support because of their language, race, sex or gender;
 - Supporting commissioners to understand the needs of local victims and ensuring services are shaped and commissioned to respond to this need.
116. Where appropriate, IDVA services can support the inclusion and trauma-informed participation of victims in relevant forums to support sustainable institutional advocacy across the domestic abuse policy landscape.
117. While institutional advocacy can be reactive, in direct response to arising issues, it is particularly effective within set forums or partnerships at a strategic level to work together, to draw on expertise and identify opportunities to implement best practice. Agencies should strongly consider inviting IDVAs and/or IDVA service managers to attend local strategic forums, including, but not limited to, the following:
- Local Criminal and/or Family Justice Boards;
 - MARAC Steering groups;
 - Community Safety Partnerships;
 - Domestic Abuse Local Partnership Boards;
 - Local multi agency safeguarding arrangements (MASA) for children and adults;
 - Joint commissioning groups;

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- Domestic Abuse Best Practice Framework meetings;
- Domestic Abuse Joint Justice Plan meetings;
- Integrated Care Partnerships;
- Place-based partnerships.

118. Outside of such forums, agencies could also consider utilising strategic leads or single points of contact to enable IDVAs to raise issues and suggestions.

119. Institutional advocacy contributes significantly to systemic and sustainable change in domestic abuse policy and practice. Commissioners should consider how they resource and encourage this when commissioning services.

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Placeholder - Annex A - Key roles an IDVA may engage with

Placeholder - Annex B: Existing frameworks for working with IDVAs

Placeholder - Annex C – Further resources

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