

DRAFT Independent Sexual 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 Sexual Violence Advisors (ISVAs). It is intended to provide an outline of the role and key functions of ISVAs to improve the consistency of the support they offer and to increase the awareness of ISVAs among other agencies, so they can operate in the most effective way to support victims. It also conveys principles and promotes best practice for ISVAs, training for the ISVA role and working with other agencies.
2. The guidance applies to England and Wales. [*Placeholder for devolution position: In accordance with the requirement in [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 ISVAs themselves have regard to this guidance. The term 'relevant professionals' could include, but is not limited to, the following when they are 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);
 - early years, childcare, schools, colleges, and higher education settings;

¹The 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) continues to work with the 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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- HM Courts and Tribunals Service;
 - HM Prison and Probation Services;
 - 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
 - sexual abuse services including by and for services, those working on violence against women and girls more broadly, and services for men and boys;
 - Registered Intermediaries (RIs) in the criminal courts and intermediaries in the civil and family courts;
 - Youth Offending Services;
 - 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 sexual 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 continue to monitor and assess the impact of this guidance through engagement with the sexual violence and abuse support sector, other government departments, and relevant agencies and organisations following publication.

Terminology

7. In this document, 'sexual abuse' is used to reference any recent or non-recent sexual violence and sexual abuse, and conduct is captured regardless of whether a report about it has been made to the police. This covers a wide range of offences including rape, and child sexual abuse, as well as non-contact offences of a sexual nature.
8. This guidance focuses on support for victims of sexual abuse. Not everyone who has experienced sexual 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.

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Introduction

9. This guidance has three sections:

- **Section 1: The purpose, role, and functions of ISVAs** - this outlines the core elements that we would expect ISVAs 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 ISVAs can tailor their service while considering how victims' different needs and experiences may uniquely overlap.
- **Section 3: Effective working between ISVAs and other agencies** – this sets out how ISVAs 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:

- **ISVAs**, to provide a clear understanding 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.
- **ISVA managers and providers of ISVA services**, to enable a clear understanding of the role, training expectations and expectations for service provision and appropriate support for ISVAs.
- **Those who work with victims of sexual abuse**, to fully understand the ISVA role and 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 ISVA and ISVA services when commissioning. 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 ISVAs services. Funding of different support services must be considered based on decisions relating to local needs and the broad range of services available.

Wider support for victims of sexual abuse

12. The government recognises that there are other important forms of support for victims, and that differing interventions may be more appropriate to address the needs of some victims, depending on their unique characteristics, circumstances and experiences. Whilst this guidance is focused on ISVAs, it should be read with the understanding of the wider victim support sector and the differing forms of support available.

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Section 1: Core principles for ISVAs

13. For the purposes of the [*placeholder for Victim Support Role Regulations*] the role of an Independent Sexual Violence Advisor (ISVA) role is '*to provide support to individuals who are victims of criminal conduct of a sexual nature, where the support provided relates to that conduct.*' This provides the necessary flexibility for ISVAs to support any victim of a crime of a sexual nature, as they deem appropriate.
14. ISVA services are an important part of the sexual violence and abuse support sector. ISVAs are one form of support for victims of sexual abuse which play an important role in providing specialist support, should victims choose to engage with them. To improve consistency of the provision of support and to raise awareness of these vital roles this section of the guidance sets out:
- Who ISVAs support;
 - The purpose and role of an ISVA;
 - How ISVAs deliver a quality service;
 - Training and qualifications;
 - Other forms of support for victims of sexual abuse.
15. This section of the guidance sets out the core elements and functions of ISVAs so that the roles are consistently understood by those providing support and those working with ISVAs.
16. ISVA is an umbrella term under which various types of ISVA with additional specialisms can sit. For example, Children and Young Persons ISVAs (CHISVAs) support children and young people who have experienced sexual abuse. CHISVAs will have received specialist training on working with children and will work closely with education, family and care networks to ensure the child is well supported.

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

Who ISVAs support

17. ISVAs can provide support regardless of:

- whether a victim has chosen to report an offence to the police;
- a victim's age (ISVAs can support adult and child victims, where appropriate training has been completed);
- whether the abuse is recent or non-recent;
- whether they are victims of multiple offences alongside sexual abuse, such as domestic abuse and modern slavery.³ Where this is the case, ISVAs can work jointly with other specialised professionals, including Independent Domestic Violence Advisors (IDVAs).

Settings in which ISVAs provide support

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

19. ISVAs may be based within a variety of organisations, including organisations that provide specialist sexual abuse support and Sexual Assault Referral Centres (SARCs). This may be alongside other forms of support for victims of sexual abuse, such as counselling or therapeutic services.

20. ISVAs may also be 'co-located' with other organisations or services such as in a health setting or police stations. Some ISVAs provide services 'in-house' for example by being directly employed by a local authority. Where this occurs, they will still act independently from statutory services and on behalf of victims with specific policies and procedures that relate to the operational delivery of the ISVA service.

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

³ Domestic Abuse Act 2021. Available at: <https://www.legislation.gov.uk/ukpga/2021/17/contents/enacted>

OFFICIAL SENSITIVE – DRAFT POLICY**How ISVAs engage with victims**

22. An ISVA can work with the victim until a time at which they no longer need support and/or advocacy services, or support is no longer suitable.⁴ This can lead to some victims being supported by an ISVA for a few months while others may receive support for several years as they go through the court process and beyond.

Purpose and role of an ISVA

23. ISVAs support victims of sexual abuse in a trauma-informed way which aims to reduce risk, promote recovery, re-empowerment, and help victims navigate various systems and challenges through informed choices.

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

- **Being a sexual abuse victim support specialist:** ISVAs are subject matter experts in sexual abuse and understand the victim's experience, needs and the level of risk posed to them. They will have knowledge of the law and criminal justice processes relating to sexual abuse, including reporting processes, special measures and victims' rights. 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 empathetic support. Additionally, some ISVAs will have additional specialist knowledge and skills in working with victims with specific needs and vulnerabilities, for example child victims and victims from different backgrounds or deaf and disabled victims.
- **Working in a victim-centred way and tailoring support to individual needs of a victim:** sexual abuse can have a severe psychological, emotional, and physical impact. The extent of this impact will be different for each victim, and this impact and a victim's response to the sexual abuse may change over time. ISVAs work with focus on a victim's empowerment, choice and rights to ensure they are heard and understood while focusing on their safety and wellbeing. This allows ISVAs to tailor support to the identified needs of the victim. In order to identify the needs of a victim, an ISVA will complete needs and risk assessments, on an ongoing basis, accompanied by a tailored support plan.

⁴ 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, exploring options and delivering relevant support:** ISVAs will provide non-judgmental and impartial information to empower victims to make informed choices which reinforce the victim’s agency. ISVAs will support a victim to understand the options available to them but will not seek to influence their decision making.
- **Working on behalf of the victim – independent from, but working alongside, other agencies or organisations:** ISVAs are independent from the government and the interests of other organisations and agencies, which is critical to their success. Where appropriate, they may work alongside other professionals or organisations, such as the police or health services, to ensure that the victim’s voice is heard, and their needs are being addressed (including advocating on their behalf if this is in line with the victim’s preferences).

How ISVAs deliver their role

25. To deliver the core responsibilities that underpin the ISVA role, ISVAs will offer tailored support depending on the victim’s need and choice. Below is a non-exhaustive list of examples to show what may be expected from an ISVA across each of the core roles set out above.

26. To deliver a specialist, victim-centred service to victims of sexual abuse ISVAs should:

- **Be trauma-informed and responsive:** sexual 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. ISVAs will therefore take a trauma-informed approach to support victims, which means they understand, recognise and respond to the impact from and responses to trauma, and actively seek to prevent re-traumatisation, address these barriers, and empower victims.⁵

In practice, this may involve:

- understanding the impact sexual abuse can have on the victims’ families, wider society and professionals working with victims, including themselves.
- providing a safe and non-judgemental space for victims

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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- 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:** sexual abuse can have a significant impact on a person's life. When supporting victims of sexual abuse, ISVAs will consider and respond to the 'whole-person', which means understanding the unique characteristics and circumstances to provide tailored and holistic support. This will mean that victims' get the right support to manage and build resilience to move towards their particular goals.

In practice, this may involve:

- taking steps to understand the victim's background and circumstances including any protected characteristics and additional factors such as their work/occupation or education/schooling, community, or caring responsibilities. These should be considered alongside how they overlap with their experiences of sexual abuse, and any barriers they may face in accessing support, in order to provide effective and holistic support.
- Providing a range of information and supporting victims to empower victims to make informed choices about their circumstances.
- Working with victims to increase independence and safety in multiple aspects of their lives.

- **Work within professional boundaries:** When supporting victims, ISVAs will ensure the victim understands the role and remit of an ISVA including 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, where appropriate, noting that safeguarding responsibilities will require collaboration from other professionals involved. See Section 3 for further detail on working with other agencies.
- Not extending their role by assuming the responsibilities of others for example mental health professionals, lawyers and councillors/therapists. In situations where an ISVA is a qualified counsellor/therapist (as in, dual trained), they should not provide

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counselling or psychological therapy support to a victim to whom they are providing ISVA support. This ensures clarity of the professional boundaries of the ISVA role. Providing more than one role could lead to the victim misunderstanding the role and remit of an ISVA.

27. To work in a victim-centered way and tailor support to the individual needs of a victim ISVAs will:

- **Conduct needs assessments:** ISVAs should conduct a thorough needs assessment that should be reviewed regularly to identify the needs of each victim. This will enable the ISVA to facilitate and remain boundaried in providing support, including follow on support and onward referrals, or any specific needs that need be taken into consideration, for example a learning or physical disability.

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.

- **Conduct risk assessments:** risk assessments and frameworks are used to aid the understanding of and responses to sexual abuse to support the safety of the victim. ISVAs will understand the dynamic nature of risk and conduct thorough and regular risk assessments. Where risks are identified, it is the ISVA's responsibility to ensure appropriate referrals are made to manage the risk, and, where appropriate, to ensure that support is provided to reduce these risks. This is alongside other professionals who may conduct their own risk assessments and act accordingly. ISVAs and other professionals should ensure identified risks are sighted to relevant partners. In conducting risk assessments, ISVAs will also be alert to risks to children and other dependents in addition to the victim, where they are an adult. Risk assessment should encompass the ISVAs specialist professional judgement,

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victim perceptions of risk, along with additional indicators relevant to minority groups and potential escalation.

Examples of risks that an ISVA will be required to contribute to managing include;

- Any further risk from the alleged perpetrator or potential perpetrator;
- Community-based risks, such as ‘honour’-based abuse;
- Risks around lone working, vicarious trauma and burnout;
- Risks relating to sexual health and pregnancy;
- Risk to the investigation or criminal court case;
- Safeguarding issues in connection with any children or vulnerable adults in the care of the victim;
- Safeguarding physical and mental welfare.

- **Develop support plans.** ISVAs 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 ISVA as well as any necessary onward referrals. The support plan should consider any planned exit strategies from ISVA support, in addition to having appropriate regard to ongoing risk management and in the aim of reducing the impact of sexual abuse in the victim’s life.

28. To provide accurate and impartial information, explore options and deliver relevant support, ISVAs will:

- **Support victims to understand key processes and systems.** ISVAs can help victims to understand systems and processes relating to things such as victims’ rights, health, and wellbeing, reporting to the police, criminal justice processes and support services. They can also support to access and navigate other multi-agency support such as health or local authority services.

In practice, this may involve:

- understanding the services available to the victim both nationally and locally, making referrals and signposting as appropriate. In addition to supporting victims to engage with or access services such as sexual health, education providers, housing services, benefits agencies, therapeutic counselling, and mental health services where appropriate;
- outlining the victim’s entitlements as set out in the Victim’s Code;⁶

⁶ 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 information on key processes and timelines, such as engaging with the civil, family or criminal court processes, (and/ or in cases of police-perpetrated abuse with the police misconduct system), or how long a victim may need to wait for health or counselling services;
- outlining reporting options, such as anonymous, formal reporting or attending a SARC;
- supporting a victim to report an offence to the police, if they choose to engage with the criminal justice system;
- assisting victims to communicate with employers or schools for example in relation to time off to attend police meetings/court, negotiating a phased return to work or school or ongoing sick leave.

Criminal justice processes and knowledge of evidence relating to offences

There are rules that require those supporting victims (including but not limited to ISVAs) 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.⁷ 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 (ABE) guidance.⁸ ISVAs should be aware of this guidance before supporting victims in in criminal court settings.

This does not prevent ISVAs from understanding information about the victim’s experience that is required to make an informed risk assessment, help assess support needs and develop a support plan.

In practice, when there is a criminal case ongoing, this may see ISVAs:

- 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.
- Supporting a victim to prepare to attend ABE interviews by talking through practical arrangements such as travel, childcare, and time off work, to offer emotional support.
- Explaining to a victim who has indicated that they would like an ISVA with them to provide a witness statement or discuss their case,

⁷ 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.

⁸ Ministry of Justice, NPCC (2022), *Achieving Best Evidence guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/164429/achieving-best-evidence-criminal-proceedings-2023.pdf

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that they may want to consider using an alternative ISVA or witness supporter to do so. This would ensure they can continue to assist the 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.

- **Provide emotional reassurance.** ISVAs can create a space for victims to talk without judgement and to feel heard; help them to understand the potential impact of their experiences on their health and wellbeing; and dispel myths and stereotypes surrounding sexual abuse to normalise and understand trauma responses such as feelings of shame and blame. ISVAs are not trained to provide therapeutic or specialist mental health support but they can support victims to access appropriate mental health support where needed, more information about working with health services can be found in Section 3.
- **Support access to appropriate legal advice, where available.** ISVAs are not legally trained and should not provide legal advice. Where legal support is required, ISVAs can signpost the victim to relevant support options provided by specialist legal advisors.
- **Provide support before, during and after criminal court proceedings.** ISVAs can provide vital support to victims through criminal justice processes. However, ISVAs equally support victims who have decided not to engage with the justice system or whose cases have closed (for example, following a conviction or acquittal, or a police decision to take no further action). In cases of police-perpetrated abuse, this may also involve supporting victims engaged with the police misconduct system.

In practice, this may involve:

- supporting a victim to report an offence to the police, if they choose to engage with the criminal justice system.
- making the victim aware of their rights while their case is progressing through the criminal justice process, such as Victims' Right to Review.
- providing accurate and impartial information on the prosecution process and what will happen in the courtroom. For example, facilitating pre-trial familiarisation visits or requesting special measures, which are series of provisions that help vulnerable and

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intimidated witnesses give their best evidence in court such as installing screens in court to shield the victim from the defendant or other party. ISVAs should discuss special measures with the victim and ensure that any application has been considered by the criminal court by liaising with the Crown Prosecution Service (CPS);

- making the police and CPS aware of the ISVA role in supporting the victim;
- providing support to attend court or stay up to date with a case/trial;
- providing information about the Criminal Injuries Compensation Scheme (CICS).⁹

- **Support friends, family, and other appropriate individuals.** Where appropriate and with the consent of the victim, an ISVA may signpost friends, family and others as appropriate (such as employers or school staff) to relevant information and support. ISVAs cannot support family members who are also witnesses in the victim's case.

In practice, this may involve:

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

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

- **Ensure their independence**, by: only sharing information with the consent of the victim (subject to safeguarding responsibilities such as those set out in the Children Act 2004 and the Care Act 2014); operating only in the interest and needs of the victim, rather than any particular organisation's purposes; being managed and supported by a support organisation, regardless of whether they are co-located in other settings, for example NHS services or police stations; and keeping notes confidential and stored on secure IT so that they are not accessible by other agencies or professionals.

[placeholder: testimony on importance of independence]

⁹ More information available at: <https://cica-criminal-injury-uk.com>

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

31. To effectively deliver the ISVA role as detailed in Chapter 1, ISVAs should receive specialist training so they have the right skills and knowledge 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, the core training should include the core principles outlined in the above section “how ISVAs deliver a quality service”. Listed below requirements which training should meet in order for these roles to be recognised as an ISVA:

Core principles of the ISVA role	<ul style="list-style-type: none"> • Case management; • Communication; • Delivery of support; • Record keeping; • Referral 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"> • The different court stages, types of hearing and special measures; • Family proceedings including, non-molestation and occupation orders, divorce, and child contact; • Police investigations; • The potential outcomes of hearings/trials; • The role of the Crown Prosecution Service (CPS); • The role of the probation service.
Understanding risk and support needs	<ul style="list-style-type: none"> • Understanding and assessing risk; • Developing and implementing safety plans.
Understanding the impact of sexual abuse	<ul style="list-style-type: none"> • Types and dynamics of sexual abuse; • Impact of sexual abuse on victims (including child victims); • Trauma-informed support.

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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"> civil, family, or criminal justice remedies; housing options; mental health support; Sexual Assault Referral Centres (SARCs).
Working with other agencies and professionals	<ul style="list-style-type: none"> Effective multi-agency working (see Section 3).

32. The abuse that children and young people experience may look different to the abuse that adults experience. ISVAs who work with children and young people 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 child sexual abuse.

33. ISVAs, commissioners, funders and employers of ISVA services should consider the benefit of additional training beyond an ISVA's core role to gain specialised and advanced skills to support the specific needs of their local area or their organisation's focus. For example, additional specialised training may help ISVAs 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.

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

Continual professional development and support, supervision, and oversight

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

36. ISVAs 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

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relevant legislation and an opportunity to reflect on personal practice and effectiveness.

37. Many ISVAs 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. ISVAs and their employers should take joint responsibility for identifying and completing appropriate ongoing development and training opportunities.
38. ISVAs should also be supervised by a senior practitioner or ISVA manager who will provide oversight of their caseload, development, and wellbeing. Appropriate support and supervision are important for ensuring that ISVAs feel safe and supported in delivering this challenging role, and that victims receive a consistent and high-quality service.
39. It is important that ISVAs 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.

Section 2: How ISVAs support the different needs of victims

Chapter 4: Introduction

40. Victims of sexual abuse have unique needs when accessing support services. Their individual experiences will differ and ISVAs should provide tailored support to address these needs.
41. 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 sexual abuse they have experienced, and who the perpetrator is;
 - Their past experiences and interactions with support services or statutory systems, such as the criminal justice system or health and social care system.
42. These characteristics, circumstances and experiences may combine and overlap and lead to victims having particular needs. 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 live with a disability, be pregnant and have been abused by a person in a position of power, all of which can impact their needs and how they engage with services. 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.¹⁰

Examples of contextual factors and risks

- Addictions or substance misuse;

¹⁰ 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.

43. ISVAs 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 ISVA.

Other specialist support provision

In some cases, victims may be better supported by ISVAs working with or referring victims on to other specialist services. For example, support from 'by and for' services that are led, 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.

44. ISVAs should be aware of other local and national specialist services and the support they can provide. ISVAs should engage those services and, where necessary, work together to provide support, including assessing whether referrals to specialist services may be appropriate.

45. Commissioners and funders should also remain aware of the value and role of specialist support beyond ISVA services when assessing how best to distribute funding to support local need.

Chapter 5: How ISVAs may respond to different needs

46. As set out above, to assess and support needs, vulnerabilities and safety, ISVAs 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 ISVAs may respond to different needs to effectively support a range of victims.

Tailoring communication

47. 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 sexual abuse, which could result in victims struggling to speak about their experiences or risk them being overlooked. It is important for ISVAs 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. ISVAs 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 with accessible language, adopting a non-discriminatory, non-judgemental and trauma-informed approach, and remaining considerate of the victim's experience, particularly with the following groups:

- **Children and young people** will have different communication needs to adults and may be less aware that they have experienced 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.¹¹ ISVAs working with children and young people, including CHISVAs should use age-appropriate communication with children to ensure that they are providing information in a way that can be understood.
- **Victims who have been abused by people in positions of power**, trust or authority may struggle to trust institutions and authorities when seeking support.¹² ISVAs should be clear to emphasise their independence and that they will present impartial options for the victim's consideration.

¹¹ Centre of expertise on child sexual abuse (2022), *Communicating with children: A guide for those working with children who have or may have been sexually abused*. Available at: <https://www.csacentre.org.uk/documents/communicating-with-children-guide/>

¹² Independent Inquiry into Child Sexual Abuse (2023), *Executive Summary*. Available at: <https://www.iicsa.org.uk/reports-recommendations/publications/inquiry/final-report/executive-summary.html>

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- **Victims from ethnic minority backgrounds** may fear that biases and stereotyping will lead to discrimination from those who do not share their background.¹³ This may lead to victims feeling unable to share their experiences fully or accurately. ISVAs 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 areas in which they work. Recognising the individual as the expert on their own culture, ISVAs can and should enquire to the victim’s cultural needs by asking considerate and non-judgemental questions.
- **Victims with insecure immigration status** may fear having their information shared with statutory services, which perpetrators may exploit as part of their abuse.¹⁴ ISVAs 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. *[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].*
- **Some victims may experience communication challenges**, such as those who are deaf, hard of hearing, blind or visually impaired, have a speech impediment, or have a learning disability, and may need additional support to understand processes and procedures. ISVAs 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.

48. **Some victims’ experiences may challenge commonly held conceptions** of sexual abuse, which could result in victims struggling to speak out or being overlooked. In particular, ISVAs should be mindful of these in relation to:

¹³ 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>

¹⁴ 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>

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- Female victims due to myths and misconceptions that they are to blame for sexual abuse (because of what they are wearing, or if they have been drinking or taken drugs), cannot be a victim if they are in a relationship with the perpetrator, or that they may be lying in order to get attention or revenge.¹⁵
- Male victims, due to stereotyping, myths, and misconceptions around masculinity and societal expectations, can lead to wrong assumptions that they cannot be victims of sexual abuse.⁶
- LGBT victims due to stereotyping and stigma about sexual abuse, such as the misconception that sexual abuse does not happen in same-sex relationships.¹⁶
- Older victims due to ageist attitudes and stereotypes, which falsely suggest victims of sexual abuse are young and typically assaulted by a stranger. This misconception can prevent older victims from recognising abuse or prevent them from reporting their experiences due to the fear of not being believed.¹⁷
- Those who work in the sex industry who may face stigma and stereotyping, which may impact their relationships with agencies and ability to engage with support or other professionals. It can also lead to misunderstandings and misidentification of the sexual abuse that those involved in the sex industry may experience, and its impact.

Maintaining a flexible service

49. Some victims will have different needs or preferences around how they work with ISVAs. For example, meeting in person or in a particular location may be challenging because of accessibility requirements.
50. Tailoring the ISVA 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; 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 practices, such as times of prayer or periods of fasting, and celebrations might impact when victims can engage with support services.

¹⁵ Rape Crisis England & Wales (n.d.), *Myths vs facts*. Available at: <https://rapecrisis.org.uk/get-informed/about-sexual-violence/myths-vs-realities/> [accessed 06/03/24]

¹⁶ '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.; The 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 06/03/24]

¹⁷ The British Journal of Criminology (2015), *Rape of Older People in the United Kingdom: Challenges the "Real-rape" stereotype*. Available at: <https://academic.oup.com/bjc/article/57/1/1/2566697?login=true>

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51. Victims with multiple needs such as homelessness, substance misuse, or severe mental health problems may find engaging with services particularly difficult. They may feel isolated or may struggle to access location-based services or keep track of appointments.¹⁸ ISVAs should consider creative and flexible approaches for victims with multiple needs, which could include providing the victim more opportunities to contact services before closing a case or working with other services which may have more regular contact with the victim, such as community centres, foodbanks and shelters, to provide holistic, wrap-around and ongoing support.

Delivering practical support

52. Practical support provides immediate and tangible help for victims of sexual abuse, within the boundaries of the ISVA role. This can take many forms, such as making referrals on behalf of victims to other support organisations (such as therapy and counselling), accompanying victims to medical or other appointments, or assisting victims to communicate with employers or education providers. 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.

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

- Some adult victims may be in the care of, 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. ISVAs 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.¹⁹
- 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. ISVAs should proactively ask what victims need to engage with services, rather than the

¹⁸ 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]

¹⁹ 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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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.

- 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, ISVAs should consider the victim's preference for the sex of a translator to prevent further victim re-traumatisation.
- Pregnant victims may require practical support making or attending medical appointments, and accessing trauma-informed medical care.

Working with others to provide holistic support

54. Some victims will have 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. ISVAs should therefore be aware of relevant support services involved such as voluntary organisations working in sexual abuse, Sexual Assault Referral Centres (SARCs), drug and alcohol teams or, in the case of a child victim, their non-abusing family members, and where relevant work with them to provide holistic and tailored support.

55. Below are some examples of ways in which ISVAs can work with others in order to address victim needs:

- To best support a child or young person, ISVAs may need to adopt a 'whole family approach'. This approach recognises that the impacts of sexual abuse can affect the entire family unit which may require support from an ISVA or other specialist services, as appropriate in order to create a safe environment for the child or young victim. ISVAs 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 ISVA 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 may 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.²⁰ ISVAs should work closely and

²⁰ 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]

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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. ISVAs should keep victim information confidential and only disclose information when relevant to a safeguarding context.
- Some victims may prefer to receive culturally specific support. ISVAs may wish to seek advice from by and for organisations who can enhance the provision of holistic support for victims, particularly where the ISVA is not familiar with the relevant culture or where there are fears of discrimination.

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Section 3: Effective working between ISVAs and other agencies

Introduction

Terminology

56. Where the term ‘professional’ or ‘other professional’ is used within this document this is being used to distinguish from the ISVA 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

57. Independent Sexual Violence Advisors (ISVAs) 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 ISVAs engage with will be dependent on the victim’s needs and circumstances.
58. This section outlines how ISVAs and other professionals can best work together to effectively support victims of sexual abuse.
59. Effective collaboration is essential in ensuring that victims are properly supported and safeguarded, while preventing re-traumatisation, as they access support and navigate systems.
60. To help enable this effective collaboration other professionals should regard ISVAs as a key partner in the support of victims and have a clear understanding of the ISVA role – including their independence – as outlined in Section 1.
61. This section outlines how ISVAs and other professionals can collaborate effectively and address known challenges to cross-agency working which can impact victims’ experience of seeking support. Below are the key principles and best practice to consider when working together to support victims:

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

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

Who this section is for

62. As set out in the introduction of Section 1, [*Placeholder for Victim and Prisoners Act*] requires that relevant professionals working with victims have regard to this guidance. Such readers are encouraged to consider and implement the outlined best practices and recommendations.
63. Content within this section will be relevant for anyone working with victims of sexual abuse. However, this is mainly aimed at ISVAs, ISVA employers and those directly working with victims of sexual 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 ISVAs (a non-exhaustive list is provided at Annex B).
64. For examples of key roles within that work directly with victims of sexual abuse and therefore may interact with ISVAs, see Annex A.

Chapter 6: Referrals to ISVA services

65. All professionals have a role to play in providing a whole system response to victims of sexual abuse. Professionals should understand and undertake their own actions, one of which may be a referral to an ISVA service. The referral will be the first step, beyond which professionals and ISVAs will need to work closely together to ensure a holistic response.
66. Wherever possible, referrals should be person centred and consent led. To determine if a referral is needed, professionals first need to know how to recognise sexual abuse. Where professionals are unsure of the steps to take to make a referral they should engage with a sexual abuse service for advice – this may be an ISVA service. Sexual abuse specialists, such as ISVAs, will have the necessary experience and knowledge to appropriately assess the needs and risks posed to the victim.

Making a referral

67. If a victim consents to a referral for ISVA support, a formal referral should be made as soon as possible. Referral mechanisms vary locally and ISVAs and other professionals should ensure they familiarise themselves with their local referral pathways and practices (where the ISVA role is co-located or integrated into services, the referral pathway should be reflected in internal policy/process).
68. Referrals into ISVA services can be made at any time and by any professional engaging with a victim. Some ISVA services accept self-referrals by victims themselves, which some victims may prefer as they seek to regain some control in their lives.
69. Information on how to refer a victim to an ISVA service can typically be found on an ISVA service provider's website with an accompanying referral form or contact number.
70. Local authority and Community Safety Partnership websites will generally have information about local ISVA services and other sexual abuse services. Where this is not the case, a list of helplines and specialist providers can be found on GOV.UK.²¹
71. Professionals considering referrals for children should contact the ISVA service to check whether they provide CHISVAs (Children's ISVAs) or other specialised services for child victims and, if they do not, the referrer should seek or ask to be

²¹ Available at: <https://sexualabusesupport.campaign.gov.uk/>

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signposted to a service which suits the child’s age and needs. 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 safeguarding child partnership.

72. The following steps will be helpful when referring a victim into an ISVA service (also see Figure 1). Where ISVAs are co-located or working within statutory services they may be alternative processes for making referrals.

Seeking consent and clearly explaining the ISVA role	<p>Professionals should seek consent from the victim to make a formal referral. For child victims, it may be necessary to seek consent from a safe parent or guardian.</p> <p>When seeking consent, professionals should explain in full the role and benefits of the ISVA support so that the victim can make an informed decision. Section 1 sets out the key elements of the ISVA role which can be used to aid this conversation.</p> <p>Where a victim chooses not to be referred to an ISVA 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.</p>
Including sufficient information within referrals	<p>To make a referral, professionals should follow the local ISVA service referral protocol. If a referral form is required, the professional should ensure it is <u>fully</u> completed. This will ensure all relevant information is included and the victim can be appropriately safeguarded and supported. This helps to avoid unnecessary repetition and reliance on victims to have to repeat their story, in line with adopting a trauma-informed approach.²²</p>

²² 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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This should include:

- information provided by the victim about their contact preferences and when it is safe to contact them;
- if requested, information about disability or accessibility requirements (including the need for an interpreter) which is important to ensure the ISVA service is able to engage with the victim in a timely and appropriate manner;
- a needs/risk assessment, safety plan, or safeguarding actions (if conducted), alongside any relevant details.

For further clarity about what information is useful, professionals should contact a relevant ISVA 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.

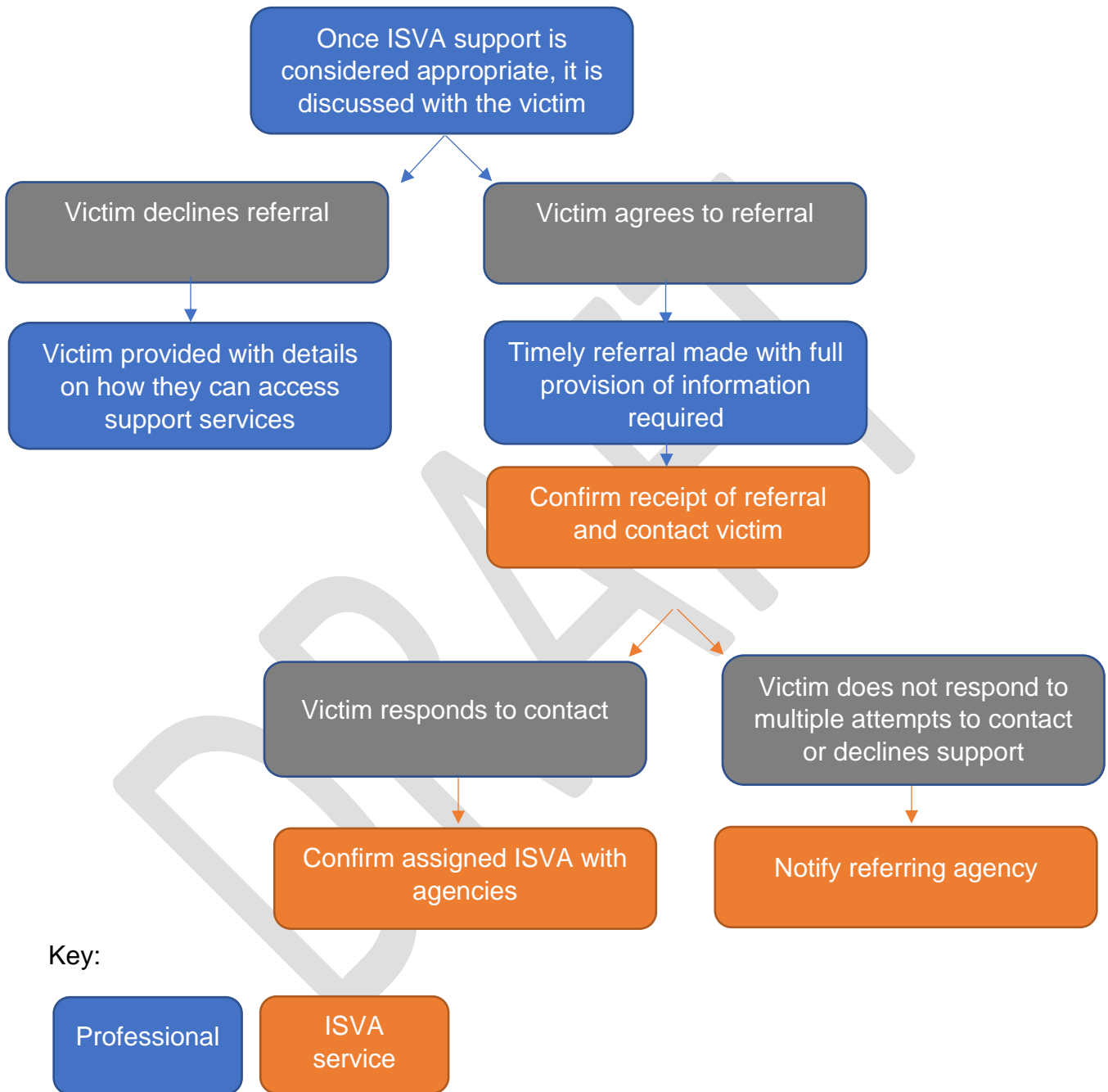
Confirming receipt and action to be taken

ISVA services should confirm with the referring professional when a referral has been received and actioned. The details of the allocated ISVA should be securely shared with the professional making the referral. If the victim consents, the ISVA should proactively reach out to any services that are working with the victim to make it known that they are the victim's allocated ISVA.

Multiple attempts and methods should be considered in efforts to contact the victim with consideration of their communication preferences. Where the ISVA service has not been able to contact the victim, this should also be communicated to the referring professional.

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Figure 1: Process map for referrals into ISVA services



Chapter 7: Information sharing

73. 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.
74. 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 necessary, relevant and proportionate to the intended purpose.²³

Understanding of information sharing requirements

75. 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 securely 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.
76. Professionals and ISVAs 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), 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 appropriate – guidance published by their professional regulator.²⁴ Professionals

²³ 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>

²⁴ Data Protection Act 2018. Available at: <https://www.legislation.gov.uk/ukpga/2018/12/contents>; NHS Digital (2013), *A Guide to Confidentiality in Health and Social Care: references – 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>; 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>

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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.

77. 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 should 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 of Education has produced additional guidance on data sharing for professionals providing safeguarding services to children, young people, parents and carers.²⁵

Lawful bases for sharing information

78. 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.²⁶ 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.

79. Article 6 of UK GDPR sets out the lawful bases on which information can be shared.²⁷ 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).

80. 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

²⁵ 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>

²⁶ Article 5 of GDPR: Principles relating to processing of personal data. Available at: <https://www.legislation.gov.uk/eur/2016/679/article/5>

²⁷ 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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interests that are essential for the protection of someone's life so it can only be used in limited circumstances.

81. 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.
82. In addition to Article 6, 'special category data' requires more protection due to its sensitive nature. More information on what is included in special category data and the conditions for processing or sharing can be found on the ICO website.²⁸
83. Where a victim has provided information, such as health information, 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.²⁹

Developing and implementing information-sharing protocols

84. To facilitate effective information sharing, ISVA services and other agencies should establish protocols which set out what each agency can share and how. Where multi-agency information-sharing agreements are already in place, they should include ISVA services.

²⁸ 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>

²⁹ More information 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 8: Effective communication

It is essential that there is effective communication between ISVAs 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

85. The extent to which ISVAs and other professionals will communicate are dependent on the needs and circumstances of the victim. On first contact, the ISVA 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 ISVA as a single point of contact

86. 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 ISVA, or the victim may prefer to liaise with the ISVA 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.

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

88. Whilst the ISVA SPOC may communicate on behalf of the victim, they will not be 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.³⁰

³⁰ In circumstances where an ISVA is aware that there are risks to the victim's children, ISVAs should establish if there is a 'lead practitioner' in place, such as a social worker, who is responsible for coordinating support around the family. Where there is a 'lead practitioner' in place they will often act

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

The ISVA should:

- Where 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 ISVA 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 ISVA a lead practitioner responsible for co-ordinating support.

Where it has been agreed that the ISVA will act as a SPOC other professionals should respect this communication preference. However, on occasions where it is not possible to reach the ISVA 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 to share updates through them (for example, discussion of evidence; medical information; or to communicate the rationale for a “No Further Action” decision), efforts should be made to make the ISVA aware so they can meet

as a key point of contact with the victim and their family in relation to wider support services. For more information on ‘lead practitioners,’ refer to:

- 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/65cb4349a7ded0000c79e4e1/Working_together_to_safeguard_children_2023_-_statutory_guidance.pdf

Where an ISVA is aware that the victim has multiple support needs, such as around mental health issues, homelessness or substance use, they should establish who is the most appropriate practitioner with a relationship to the victim, who can coordinate support around these needs

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jointly with the victim and the professional, provide support to the victim afterwards and/or advise on how best to communicate with the victim (for example, time of day to contact, preferred contact method).³¹

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

Providing simultaneous updates

89. In some circumstances where a victim has not chosen for their ISVA to act as a SPOC, other professionals should explain to the victim their duty to share safeguarding concerns with the ISVA and establish whether the victim consents to their ISVA receiving simultaneous updates, where appropriate and practical. These updates ensure that an ISVA 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 ISVA role in multi-agency settings

90. To assist with communication and improve outcomes for victims, other professionals should routinely invite ISVAs to all relevant multi-agency meetings. ISVAs will determine whether they should be in attendance on a case-by-case basis. When in attendance ISVAs should have parity of status with other agencies. It is best practice for professionals working with a victim to invite the ISVA to all relevant multi-agency meetings, regardless of whether the victim has agreed to engage with the ISVA.

91. ISVAs crucially represent the victim and their voice in these forums to ensure that the voice is heard. They also are able to provide trauma-informed expertise and specialist knowledge of the impact of sexual abuse. Such forums include but are not limited to those listed in the following table:

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
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³¹ There will be certain instances where a victim requests for “No Further Action” decisions to be communicated via their ISVA and this should be discussed and agreed as part of the initial conversation between the ISVA and victim.

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	<p>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 coordinated action plan. These agencies share relevant information to inform the coordination of an action plan aimed at reducing the risk posed to victims, including children, as well as other family members. ISVAs may be present at these forums where sexual abuse has occurred.</p>
Multi-Agency Public Protection Arrangements (MAPPA)	<p>Multi Agency Public Protection Arrangements (MAPPA) is the set of arrangements through which the police and HM Probation and Prison Services work together with other agencies to manage the risks posed by violent, sexual and terrorist offenders living in the community in order to protect the public. MAPPA are supported by guidance which states that ISVAs must be invited to all level 2 and 3 meetings.³²</p>
Multi-Agency Tasking and Coordination (MATAC)	<p>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.</p>
Multi-Agency Safeguarding Hub (MASH)	<p>The Multi-Agency Safeguarding Hubs (MASH) allow 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.³³</p>
Child Protection Conferences	<p>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 ISVA to meet with the perpetrator/suspect so professionals should consider separate meetings.³⁴</p>

³² 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>

³³ Some local areas may call multi-agency safeguarding structures by a different name.

³⁴ 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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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.
Multi-agency child exploitation meetings (MACE)	MACE meetings bring together agencies, including children's services, police, youth services and education professionals to develop and maintain strategies to address and prevent child exploitation. The purpose is to gather, share and understand information and intelligence in order to identify potential risks and to put in place strategies for prevention.
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 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. ISVA service providers should identify if they attend a scrutiny panel - and if not, should determine the value-add in 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 ISVAs to attend where the victim has substance or mental health needs.
Primary Care / General Practice	Practice safeguarding meetings allow practice staff to share information, identify concerns and agree management plans for complex safeguarding cases.

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Safeguarding Meetings

There may also be an opportunity to meet with multidisciplinary partners who can help safeguard the practice's registered patients.

92. Where the suspect or perpetrator is due to attend the meeting, professionals should consider the safety of the ISVA 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. Separate meetings may need to be considered.
93. 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). The professional sharing this information should make it clear where this information should be withheld.

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Chapter 9: Using the expertise of ISVAs

94. ISVAs are experts in sexual abuse and work closely with victims to understand the victim's experience, needs and the level of risk posed to them. Other professionals should consider using the expertise of ISVAs to enhance the support provided to victims and ensure that their actions are informed by a clear understanding of sexual abuse.
95. 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 10.

Drawing on an ISVA's insights

96. Professionals should recognise and consider where they can actively use the ISVA's expertise and insight into the wider context and circumstances of the victim.
97. 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. ISVA could assist other professionals to conduct or develop needs or risk assessments, safeguarding plans or support plans. Professionals should be mindful of an ISVA's independence at all times as set out in Section 1 of this guidance.

Drawing on ISVA support

98. Through the relationship that an ISVA 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.
99. Because of this, depending on the victim's preference, it is always best practice for other professionals to consider including ISVAs when they need to directly engage with victims. This may include key meetings, appointments and visits.
100. In circumstances (including those outlined below) where it is not deemed appropriate for the ISVA to be in the room for a meeting, appointment or visit, professionals should share a clear rationale with the victim and ISVA, as well as sharing the time/location with the ISVA so they can provide support before and after, if needed.

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

This is not intended to be a comprehensive list, and agency professionals should continually consider where the presence of the ISVA will enhance support and improve a victim's experience.

These examples will not be relevant to all victims, depending on victim consent, their circumstances and the agencies they are engaging with.

- **Meeting with the Crown Prosecution Service (CPS)**– Under the updated Victims' Code, the CPS will offer a meeting to adult victims of rape and other serious sexual offences once a 'not guilty' plea has been entered and it is known that a case will be proceeding to trial.³⁵ This provides the victim with an opportunity to speak about next steps and what to expect from the trial process, as well as discuss any applications for special measures to achieve best evidence. Guided by victim's preference the CPS should consider inviting the ISVA to be present at this meeting in order to best support victim.
- **Meetings with family solicitor/barrister** – Where the victim is accessing the family justice system, the ISVA can help them give their best evidence by providing emotional reassurance and practical support. ISVAs 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 ISVA aware of when a parole hearing will take place and when parole hearing decisions will be made, so that additional support can be offered at these stages. VLOs should also, with the victim's consent, make the ISVA aware of when an offender may be released.
- **Pre-trial visit** – Pre-trial visits allow the victim to 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 ISVA is in place. The relevant service can then arrange mutually convenient time so that the ISVA can attend the pre-trial visit to support the victim through the process. Alternatively, the ISVA can liaise directly with the Witness Service to organise a pre-trial visit.
- **Schools, colleges, universities and employers** – The ISVA may offer support to improve professionals understanding of sexual abuse and the victim's safeguarding needs, for example, ISVAs supporting children can

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work closely with education safeguarding leads to enhance the young person's access to support and improve on their safety and educational experience.

- **Witness statements** – Providing a witness statement for a police investigation can be a distressing time for victims. Officers should liaise with the ISVA to establish a convenient time for the victim to attend. However, where the victim would like their ISVA to continue supporting them through the criminal justice system, the ISVA will not be able to be present whilst the statement is being taken (see Section 1p.19) 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 ISVA is attending in person, they should be present for this discussion.³⁶ If they are not present, they should be informed of the special measures discussion which has taken place.

ISVA support at court

101. As set out in Section 1, where applicable, an ISVA will support a victim through the justice system. ISVAs will most commonly support in criminal court proceedings, however there may be circumstances where the victim requires

³⁶ 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>

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support in the civil or family court. 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 ISVA.

[PLACEHOLDER: CASE STUDY ON BENEFIT OF HAVING AN ISVA AT COURT]

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

Supporting with Protective Orders	The ISVA 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. ³⁷ Where a victim has experienced both sexual and domestic abuse perpetrated by their partner, the ISVA should consider if the victim requires additional support from other specialised professionals, including Independent Domestic Violence Advisors (IDVAs).
Support with logistics	The ISVA should liaise with the relevant witness service beforehand (for example at the pretrial visit, if applicable) to ensure they know which entrance and exits are appropriate to avoid having contact the perpetrator and any family/friends. The ISVA 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	There are ‘court rules’ which set out the overarching principles for who can be in the courtroom. These rules set out that the family and criminal court will allow the ISVA to sit next to or near the victim in the courtroom or any other place where the victim takes part, unless

³⁷ 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 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>

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victim whilst giving evidence in court or in the live-link room (subject to judicial approval)	there is good reason for the judge/magistrate to refuse Where a victim would like support of their ISVA this will need to be requested in advance (see figure 2)
Explaining the court process, and aiding interaction, where appropriate, with professionals	ISVAs 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 ISVA is present, with the victim's consent.
Keeping the victim updated on how the case/trial is progressing	ISVAs should work closely alongside court staff and the Witness Service to keep the victim updated on how the case/trial is progressing, for example, when they will give evidence.

103. For court proceedings to run smoothly so that the case can be heard it is necessary to observe the appropriate rules. For example:
- While an ISVA may sit next to the victim, they must not speak on behalf of the victim in the courtroom or interrupt the hearing;
 - While the ISVA may know the victim's experience of sexual abuse they must not discuss the evidence. See page 19 in Section 1 for more information;
 - While an ISVA can make them 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.
104. 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 ISVA will have developed with the victim they will often be best placed to support the victim in court giving evidence, rather than witness services. However, the ISVA and witness services should ensure they work closely together due to the

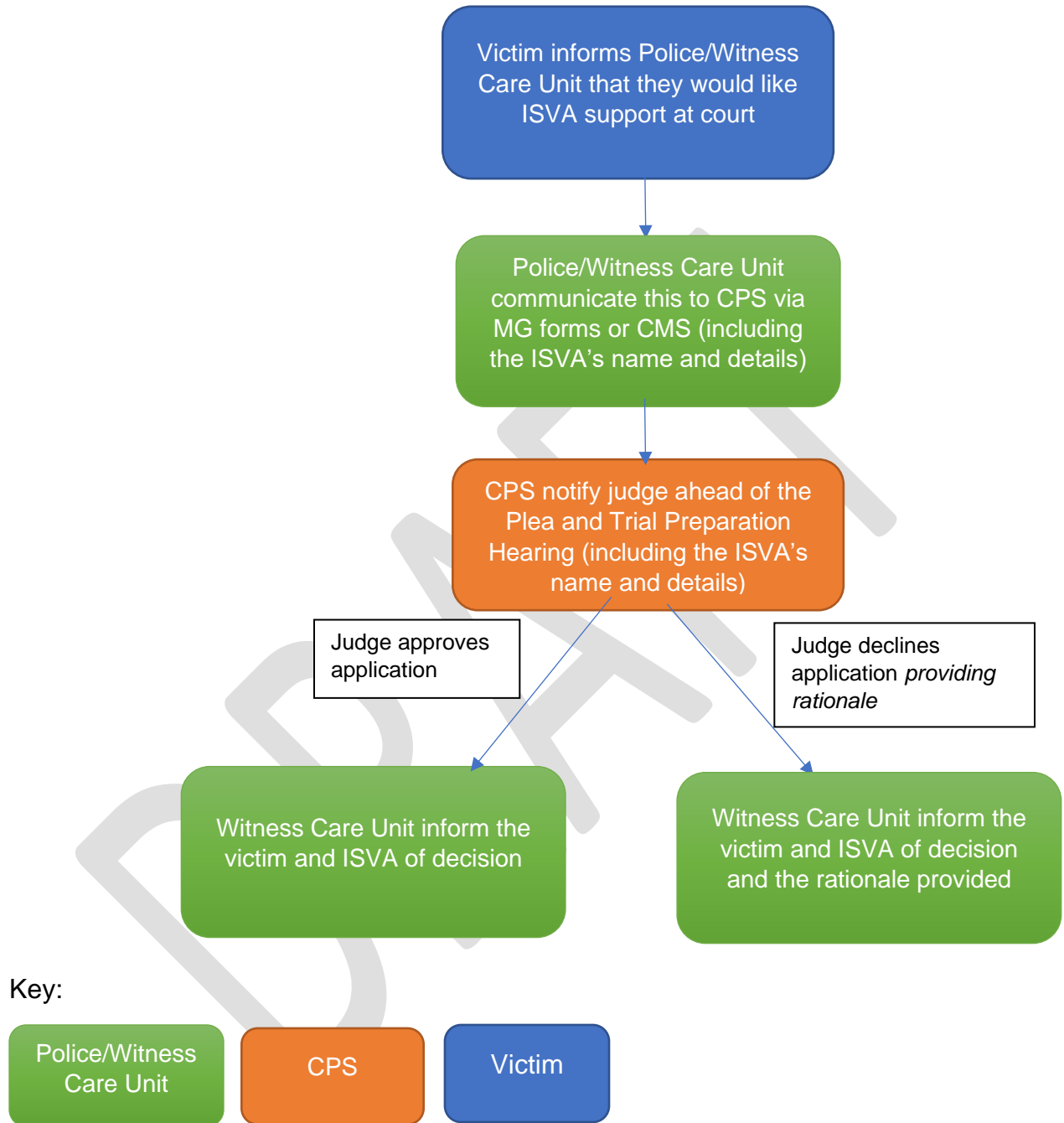
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operational knowledge of the courts the witness services will have. The ISVA and Witness Service should agree who is best placed to provide this support.

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Figure 2: Flow chart for notification of ISVA support in criminal court



Chapter 10: Institutional advocacy

105. Institutional advocacy is the term for providing advocacy support and advice at an institutional rather than individual level, and covers activity ISVA services may carry out which involves raising systemic issues that impact victims' experiences. This 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 sexual abuse.
106. ISVA 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.
107. Institutional advocacy can include a variety of activities such as:
- If suitably qualified, providing training to other organisations on recognising and understanding sexual abuse;
 - Highlighting issues at senior or strategic level 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, or sex ;
 - Where appropriate, ISVA services can support the inclusion and trauma-informed participation of victims in relevant forums to support sustainable institutional advocacy across the sexual abuse policy landscape.
108. 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 ISVAs and/or ISVA service managers to attend local strategic forums, including, but not limited to, the following:
- Local Criminal and/or Family Justice Boards;
 - Community Safety Partnerships;
 - Local multi-agency safeguarding arrangements (MASA) for children and adults;
 - Joint commissioning groups;
 - Scrutiny panels;
 - Integrated Care Partnerships;

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- Place based partnerships.
109. Outside of such forums agencies could also consider utilising strategic leads or single points of contact to enable ISVAs to raise issues and suggestions.
110. Institutional advocacy contributes significantly to systemic and sustainable change in sexual 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 that ISVAs may engage with

Placeholder - Annex B: Existing frameworks for working with ISVAs

Placeholder - Annex C: Further Resources

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