



Ministry
of Justice

Independent Domestic Violence Adviser Guidance

Statutory Guidance

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Background

Purpose and legal status

1. The Victims and Prisoners Act 2024 (“the Act”) requires guidance to be issued about victim support roles that are specified in regulations. This guidance is issued pursuant to Section 16 of the Act and the Victim Support (Specified Roles) Regulations 2025 which specify Independent Domestic Violence Advisers (IDVAs). It is intended to:
 - i. set out the role, functions and principles of IDVAs; the support they can offer victims through the criminal justice system; and expectations for the training that is necessary;
 - ii. provide guidance on how IDVAs should tailor their service according to victims’ different needs; and
 - iii. provide guidance on effective working between IDVAs and relevant professionals.
2. The 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. This duty excludes anyone acting in a judicial capacity (or on behalf of a person acting in a judicial capacity),¹ and devolved Welsh authorities.²
3. The term ‘relevant professionals’ includes the following bodies, when exercising functions of a public nature:
 - i. adult social care and children’s social care providers in England;
 - ii. Children and Family Court Advisory and Support Service (Cafcass and Cafcass Cymru);
 - iii. the Crown Prosecution Service (CPS);
 - iv. early years, childcare, schools, colleges, and higher education settings in England;
 - v. HM Courts and Tribunals Service;
 - vi. HM Prison and Probation Services;
 - vii. Integrated Care Boards & Integrated Care Partnerships in England;
 - viii. lawyers and legal services;
 - ix. local authorities in England;
 - x. local housing and homelessness teams, and registered social landlords in England;
 - xi. NHS England, NHS Trusts & NHS Foundation Trusts;

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

² These are listed in schedule 9A to the Government of Wales Act 2006.

- xii. police forces and Police and Crime Commissioners (PCCs);³
 - xiii. Registered Intermediaries (RIs) in the criminal courts and intermediaries in the civil and family courts;
 - xiv. Youth Offending Services;
 - xv. the Witness Service, and the London Victim and Witness Service;
 - xvi. any other professional exercising functions of a public nature relating to victims or aspects of the criminal justice system.
4. This guidance applies to relevant professionals in England. It applies to relevant professionals in Wales insofar as it relates to matters in Wales that are reserved to the UK Government – this is primarily policing, and criminal, civil and family justice.
 5. Relevant professionals may also have specific statutory duties to safeguard victims of domestic abuse. This guidance should therefore be read in conjunction with other relevant guidance and codes of practice, several of which are signposted within this guidance.
 6. This guidance will also be relevant to IDVAs and IDVA services, as well as other domestic abuse services, including ‘by and for’ services, those working on violence against women and girls more broadly, and services for men and boys, and other relevant third sector organisations.

Terminology

7. In line with section 1(5) of the Act, domestic abuse is defined and referenced in line with the Domestic Abuse Act 2021, and conduct is captured regardless of whether a report about it has been made to the police. Although this guidance is directed at support for victims of domestic abuse amounting to criminal conduct, pursuant to the Act, other contexts may approach domestic abuse in a way that extends beyond criminal conduct and the reader should also be aware of wider behaviours and actions which may be considered domestic abuse which are not captured in the definition as set out in the Domestic Abuse Act 2021. More information on these forms of abuse can be found in the Domestic Abuse Statutory guidance.⁴
8. In this guidance the term ‘victim’ includes those who have experienced domestic abuse but choose to describe themselves as another term, for example, ‘survivor’.
9. For the purposes of this guidance, a child is defined as an individual under the age of 18.

³ Including Police, Crime and Fire Commissioners, and Mayoral Authorities.

⁴ Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

Introduction

10. This guidance has three chapters.

- i. **Chapter 1: The role, functions and principles of an IDVA** – this chapter outlines the core role, principle and functions of an IDVA, including the role of IDVAs in supporting victims through a criminal justice process and the training necessary to undertake the role.
- ii. **Chapter 2: Supporting specific needs of victims** – this chapter focuses on how IDVAs should tailor their service according to the different needs and experiences of victims they support.
- iii. **Chapter 3: Effective working between IDVAs and relevant professionals** – this chapter sets out how IDVAs and relevant professionals should best work together to support victims, outlining key principles and best practice for effective collaboration.

11. This guidance is for the following.

- i. **IDVAs:** on the core role, principles and functions of an IDVA; how to understand the different needs of victims; and how to effectively work with relevant professionals to support victims, with key principles and best practice for effective collaboration.
- ii. **IDVA managers and providers of IDVA services:** on best practice service provision and appropriate support for IDVAs.
- iii. **Relevant professionals:** on working effectively with IDVAs to deliver support for victims.

12. This guidance may also support those who commission victim support services to ensure needs of victims in a local area are understood and met.⁵ Commissioners should consider how they resource and encourage IDVA services to meet the best practice recommendations in this guidance. For example, commissioners should consider the benefit of additional training beyond an IDVA's core role to gain specialised and advanced skills to support the specific needs of their local communities or their organisation's focus. Commissioners and funders should also remain aware of the value and role of specialist support beyond IDVA services when assessing how best to distribute funding to support local need (see Section 6: Other forms of support for victims of domestic abuse).

13. The principles and functions of an IDVA as set out in this guidance may overlap with other similar roles which operate under different titles, where this overlap occurs, the same the principles and functions in this guidance may apply.

⁵ For further information on commissioning victims' services, see guidance: Ministry of Justice (2024), *Victims services commissioning guidance*. Available at: <https://www.gov.uk/government/publications/victim-services-commissioning-guidance/victim-services-commissioning-guidance>

Chapter 1: The role, principles and functions of an IDVA

Introduction

14. Chapter 1 is relevant to IDVAs, IDVA service managers and relevant professionals working with victims of domestic abuse. It sets out the role of an IDVA and the core minimum principles of training necessary to deliver that role. The aim is to ensure the IDVA role is consistently understood by those delivering IDVA support and by relevant professionals working alongside IDVAs.

Section 1: Role of an IDVA

15. For the purposes of the Victim Support (Specified Roles) Regulations 2025, the role of an Independent Domestic Violence Adviser (IDVA) role is 'to provide independent support to individuals who are victims of criminal conduct which constitutes domestic abuse, where the support provided relates to that conduct.'
16. IDVAs are one type of advocacy service, who often work with victims who are predominantly at high risk of harm. IDVAs should deliver specialist, victim-centred emotional and practical support to victims of domestic abuse, regardless of whether a victim has chosen to report an offence to the police, whether they have ended the relationship with the perpetrator, or whether they are victims of multiple offences.
17. IDVAs should be domestic abuse victim support specialists. They should have knowledge of the law and criminal justice processes relating to domestic abuse, including reporting processes, special measures and victims' rights.
18. IDVA is an umbrella term under which various types of IDVA with additional specialisms can sit, such as:
- i. Children and Young Persons IDVAs (CHIDVAs) support children and young people experiencing domestic abuse between adults in their household or within their own intimate relationships;
 - ii. Young Persons Violence Advisers (YPVAs) work with young people experiencing domestic abuse in their own intimate relationships.
 - iii. Older Persons Violence Advisers (OPVAs) generally work with older victims who are experiencing domestic abuse from an intimate partner or family members;
 - iv. Court IDVAs provide dedicated support for victims navigating courts by offering practical and emotional support throughout both public and private law

proceedings. Their role includes explaining the court process and the multiple options that are available, supporting with logistics, attending court with victims and liaising with court officials;

- v. Health-based IDVAs (HIDVA) provide support to victims of domestic abuse who are accessing healthcare, alongside providing training and case consultation assistance for health professionals to understand and respond to domestic abuse.

- 19. IDVAs should provide advocacy to help relevant professionals understand the victim's perspective, where appropriate.
- 20. An IDVA can work with the victim until a time at which they no longer need support and/or advocacy services. Some victims may only require support for a few months while others may need IDVA support for longer. Depending on the set up of the support service, an IDVA may provide more short-term support where a victim is assessed to be at high risk of harm. They may then refer to other domestic abuse support if, or when, risk decreases or needs change.

Section 2: Functions of IDVAs

- 21. IDVAs should fulfil the following core functions.

Information

- 22. **IDVAs should help victims to understand and systems and processes** relating to areas such as victims' rights, health and wellbeing, reporting to the police, criminal and family justice processes and accessing support services.

In practice, this may involve:

- outlining the victim's entitlements as set out in the Victims' Code;⁶
- providing information on key processes and timelines, such as engaging with civil, family and criminal processes or health or counselling services;
- supporting the victim to report an offence to the police if they choose to engage with the criminal justice system;
- providing accurate and impartial information on the prosecution process and what will happen in the courtroom. For example, facilitating pre-trial familiarisation visits or accessing special measures which are a series of provisions that help vulnerable and intimidated witnesses give their best evidence in court, such as installing screens in court to shield the victim from the defendant or other party;
- assisting the victim to communicate with employers, for example in relation to time off to attend police meetings/court, negotiating a phased return to work or ongoing sick leave;
- supporting the victim to engage with or access statutory and other services such as sexual health, education providers, housing services, benefits agencies, therapeutic counselling, and mental health services, where appropriate.

Identifying risk, need and support

23. IDVAs should undertake **needs assessments** which should be reviewed regularly. Where a victim has experienced other forms of victimisation, the IDVA should consider if they required additional support from other specialist professionals, including Independent Sexual Violence Advisers (ISVAs).

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>

Needs assessments may cover:

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

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

reviewed regularly, on an ongoing basis, following every contact with the victim as a minimum. The support plan should consider ‘planned exit’ strategies from IDVA support, in addition to having appropriate regard to ongoing risk management.

29. IDVAs should not provide legal advice (see Section 11 on IDVA support at court). Where legal advice is required, IDVAs should signpost the victim to relevant support options provided by specialist legal advisers.
30. IDVAs should support victims to **access safe accommodation**. IDVAs can help facilitate access to appropriate support across the full range of safe accommodation if needed. This includes specialist refuges, or other forms of relevant safe accommodation delivered under the Part 4 statutory duty in the Domestic Abuse Act 2021 and/or provided by local authorities. They may also support a victim to remain in their home by referring them to schemes, including ‘Sanctuary Schemes,’ which can provide additional security measures.

The IDVA role through criminal justice processes

31. **IDVAs can provide vital support to victims through criminal justice processes** including following a conviction or acquittal, or a police decision to take no further action. This support can include making the victim aware of their rights under the Victims’ Code, including as Victims’ Right to Review or providing information about the Criminal Injuries Compensation Scheme (CICS).⁷
32. There are rules that require those supporting victims (including, but not limited to, IDVAs) to avoid discussing the facts of the case and evidence that can be used in criminal cases with the victim, who will be giving evidence as a witness in the criminal case.⁸ This is to avoid giving rise to a challenge by the defence that the supporter has told the witness what to say (“witness coaching”). These rules are set out in the Achieving Best Evidence guidance.⁹ IDVAs should be aware of this guidance before supporting victims in criminal court settings.
33. This does not prevent IDVAs from understanding information about the victim’s experience that is required to make an informed risk assessment, help assess support needs and develop a safety and support plan. It also does not prevent their involvement in Multi-Agency Risk Assessment Conferences (MARACs).

⁷ More information available at: <https://cica-criminal-injury-uk.com>

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

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

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

- discussing how the victim feels about what has happened and the emotional impact it has had on them – but not asking victims to recount the details of the specific sequence of events that they have reported to the police;
- explaining to a victim who has indicated that they would like an IDVA with them to provide a witness statement or discuss their case, that they may want to consider using an alternative IDVA or witness supporter to do so. This would ensure they can continue to assist their victim moving forward and maintain their limited knowledge of the specific case evidence;
- notifying the victim that they have a responsibility to take a note of what is said and notify the police if the victim tells them previously undisclosed, in-depth details, or evidence, relating to the case. Such details could include information about other evidence such as forensic results, CCTV, enquiries about other witnesses, and evidence on social media.

Section 3: Principles of an IDVA

34. IDVAs should demonstrate the following principles.

- Independence.** IDVAs are independent from the government and the interests of other organisations and statutory agencies, which is critical to their success. IDVAs should operate in a way which centres the victim's needs, rather than any particular organisation's purposes. IDVAs should only share information with the consent of the victim (subject to safeguarding responsibilities).¹⁰ Where IDVAs work in statutory settings, they should ensure their notes are kept confidential and stored on secure IT so that they are not accessible by other agencies or professionals.
- Work alongside other statutory agencies.** Where appropriate, IDVAs may work alongside relevant professionals or organisations, such as the police, health services, or adult and children's social care to ensure that the victim's voice is heard, and their needs are being considered (including advocating on their behalf, if this is in line with the victim's preferences). See Chapter 3 for information on effective multi-agency working.
- Be trauma-informed and responsive.** Understand, recognise and respond to the impact from and responses to trauma, and actively seek to prevent re-traumatisation.¹¹

¹⁰ Children Act 1989. Available at: <https://www.legislation.gov.uk/ukpga/1989/41/contents>; Care Act 2014. Available at: <https://www.legislation.gov.uk/ukpga/2014/23/contents>; 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

¹¹ 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>

In practice, this may involve:

- providing a safe and non-judgemental space for victims;
- recognising domestic abuse patterns and typologies, such as coercive and controlling behaviour or economic abuse;
- 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.

- iv. **Take a whole-person approach.** Consider and respond to the ‘whole person’, which means understanding a victim’s unique characteristics and circumstances to provide tailored and holistic support (see Chapter 2). This should mean that victims get the right support to build resilience to recover.
- v. **Work with professional boundaries.** When supporting victims, IDVAs will ensure that the victim understands the IDVA’s role and the professional boundaries they must work within.

In practice, this may involve:

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

- vi. **Be part of a wider organisation.** IDVAs should be managed and supported by a support organisation, regardless of whether they work in other settings, such as an NHS service or police station.

Section 4: Settings in which IDVAs operate

35. IDVAs may operate within a variety of organisations, including organisations which provide domestic abuse support. This may be alongside other forms of support for victims of sexual violence and sexual abuse, such as counselling or therapeutic services.
36. Where IDVAs are operating in statutory settings such as health settings or courts, they may not routinely deliver the full range of services which IDVAs operating in community settings do. However, they operate with the same principles and utilise the same expertise to support victims of domestic abuse. Where this occurs, they should still act independently from statutory services and on behalf of victims, with specific policies and procedures relating to the operational delivery of the IDVA service.

Section 5: Training and qualifications for IDVAs

37. This section is not intended to be an exhaustive guide or training material but is designed to provide a starting point for IDVAs, commissioners and employers of IDVA services on what specialist training is necessary for IDVAs to undertake.
38. To effectively deliver the IDVA role as detailed in Chapter 1, IDVAs 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, which is relevant to their work supporting victims of domestic abuse. There will be variation in the name of the qualification and its assessment. Listed below are the core requirements which training should meet in order for these roles to be recognised as an IDVA.

Core principles of the IDVA role	<ul style="list-style-type: none">• Case management;• Communication;• Delivery of support;• Record keeping;• Referral processes;• MARAC processes.
Safeguarding	<ul style="list-style-type: none">• Safeguarding legislation (adults and children);• IDVA services' 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);• Professional boundaries.
Understanding and addressing victims' intersectional needs	<ul style="list-style-type: none">• Assessment and support of victim needs (including accessibility needs) and barriers or challenges to support (see Chapter 2).
Understanding civil, family, and criminal justice processes	<ul style="list-style-type: none">• Knowledge of the law and criminal justice processes relating to domestic abuse• The different court stages, types of hearing and special measures;• Civil and private family law proceedings including: Non-Molestation Orders, Occupation Orders, Child Arrangement Orders and divorce;• Police investigations;• The potential outcomes of hearings/trials;• The role of the Crown Prosecution Service (CPS);• The role of the probation service.
Understanding risk relating to domestic abuse	<ul style="list-style-type: none">• Understanding and assessing risk;• Developing and implementing safety plans.
Understanding the impact of domestic abuse	<ul style="list-style-type: none">• Types and dynamics of abuse;• Impact of abuse on victims (including child victims);• Trauma-informed support;

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

39. IDVAs who work with children and young people, including CHIDVAs, should receive specialist training to:

- i. appropriately respond to disclosures of abuse from children and young people;
- ii. assess risk and safety plan in a multi-agency context;
- iii. communicate with children and young people;
- iv. understand legislation relating to children such as the Children Act 1989 and the Domestic Abuse Act 2021;
- v. understand the legislation relating to information sharing and safeguarding;
- vi. understand the dynamics of domestic abuse for children and young people.

40. Additional, specialised training may help IDVAs provide more specialist support to victims with specific needs such as older victims, disabled victims, male victims, or LGBT+ victims.

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

Continual professional development and support, supervision, and oversight

42. IDVAs should take opportunities to 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 changes to relevant legislation and an opportunity to reflect on personal practice and effectiveness.

43. Many IDVAs will gather additional skills to support the delivery of this role beyond 'formal' training, such as on-the-job learning and development, as well as through formal training and qualifications. IDVAs and their employers should take joint responsibility for identifying and completing appropriate, ongoing development and training opportunities.

44. IDVAs should also be supervised by a senior practitioner or IDVA manager who will provide oversight of their caseload, development, and wellbeing. Appropriate support and supervision are also important for ensuring that IDVAs feel safe and supported in delivering this challenging role, and that victims receive a consistent and high-quality service. IDVAs should be feel confident to raise concerns with their line managers or via the organisation's whistleblowing policy.
45. It is important that IDVAs also receive regular separate clinical supervision. This is distinct from management supervision in that it provides support for staff to identify, clarify and address the emotional and psychological impact deriving from the work in which they are engaged. It can be individual or group supervision and should be at least quarterly, on a mandatory or opt-out basis. Best practice would see this delivered by an external provider to ensure a separation between the confidential relationship and management structures.
46. IDVAs and IDVA service managers should be familiar with their organisation's internal complaints policy and process. IDVAs should ensure victims are aware of the process and feel supported to raise a complaint against the IDVA service, where necessary.
47. The caseload for each IDVA should vary and is dependent on a number of factors, including the complexity of the needs of, and risks to, a victim and the resilience of a particular worker. The IDVA manager should consider these factors and determine a safe caseload structure.

Section 6: Other forms of support for victims of domestic abuse

48. This guidance focuses on the role of IDVAs in supporting victims of domestic abuse. However, they are not the only form of domestic abuse support available and some of the functions delivered by an IDVA are not exclusive to the IDVA role.
49. Those working with victims of domestic abuse should be aware of different forms of support a victim may need to access. For example, victims may be better supported by IDVAs working with or referring victims on to other specialist services.
50. Types of community-based support domestic abuse victims may seek in addition to the 1:1 support from IDVAs includes, but is not limited to:
 - i. Counselling and therapeutic support;
 - ii. Drug and alcohol support;
 - iii. Group support;
 - iv. Help to make own home safer (such as a sanctuary scheme);
 - v. Help to stay in work/education or to get a new job;
 - vi. Helpline, for example, advice over the phone or online (chat or email) support;
 - vii. Immigration advice;
 - viii. Legal support or advice for family or criminal court;
 - ix. Mental healthcare;

- x. Physical healthcare;
- xi. Support to access safe accommodation.

51. Other forms of 1:1 support exist to address specific needs or circumstances. These support roles are likely to work alongside the IDVA and may provide similar functions. Some examples of other 1:1 support role include but are not limited to:

- i. Caseworkers, support workers, or outreach support;
- ii. Refuge or safe accommodation workers;
- iii. Resettlement support;
- iv. Domestic Abuse Prevention Advocate (DAPA).

52. **These support roles (as well as IDVA roles) may be provided within ‘by and for’ organisations**, which are those that are designed and delivered by and for people who are affected by these crimes with specific backgrounds or protected characteristics (including race, disability, sexual orientation, gender reassignment, religion or age). These services and roles enable victims to see themselves reflected in the staffing, management and governance structures. They may include wrap-around holistic recovery and support to address a victim’s full range of needs, beyond a primary focus on domestic abuse support. While by and for organisations may provide support which aligns with the IDVA model, they may also provide support via different models to address the needs of the victims they work with.

Chapter 2: Supporting the differing needs of victims

Introduction

53. Chapter 2 is most relevant to IDVAs and IDVA service managers. It provides information to help IDVAs tailor their service according to the differing needs of the victims they support.
54. A victim's needs may be affected by relevant protected characteristics according to the Equality Act 2010 or contextual factor relating to life circumstances, such as:
- i. Addictions or substance misuse;
 - ii. Being a victim of other offences, including modern slavery, trafficking, and sexual violence and sexual abuse;
 - iii. Being in care or previously looked after;
 - iv. Disabilities or learning difficulties;
 - v. English not being a first language;
 - vi. Having an offending history or being an offender;
 - vii. Homelessness, sleeping rough, or having no fixed address;
 - viii. Immigration status;
 - ix. Living in rural and isolated areas or away from local areas, family and friends;
 - x. Physical and mental health conditions;
 - xi. Socio-economic status;
 - xii. The nature of the domestic abuse they have experienced, including the nature of the relationship with or the status of the perpetrator;
 - xiii. Their past experiences and interactions with support services or statutory systems, such as the criminal justice system or health and social care system;
 - xiv. Transitioning from children and young people's services to adult services.

Section 7: How IDVAs may respond to different needs

55. Below are some examples of how IDVAs may respond to different needs to effectively support a range of victims.

Tailoring communication

56. It is important for IDVAs to acknowledge and appropriately tailor their communication to help build a trusting relationship with each victim and foster a safe environment for them to engage. IDVAs should ensure that their role, remit, and independence is clearly explained to reassure and set expectations with victims (and, where necessary, relevant professionals). They should communicate openly and with accessible language, adopting a non-discriminatory, non-judgemental and trauma-informed approach, and remaining considerate of the victim's experiences, in particular with the following groups.

57. **Children and young people** will have different communication needs to adults and may find it difficult to articulate their needs, particularly where the violence or abuse has happened or is happening in a family setting. IDVAs working with children and young people, including CHIDVAs, should use age-appropriate communication with children to ensure that they are providing information in an accessible way.
58. **Victims who have been abused by people in positions of power, trust or authority** may struggle to trust institutions and authorities when seeking support. IDVAs should be clear to emphasise their independence and that they will present impartial options for the victim's consideration.
59. **Victims from ethnic minority backgrounds** may feel unable to share their experiences fully or accurately due to past discrimination or racism. IDVAs should be sensitive to this in enquiring about the victim's needs by asking considerate and non-judgemental questions.
60. **Victims awaiting an immigration decision** may fear having their information shared with statutory services, which perpetrators may exploit as part of their abuse.¹² IDVAs should clarify that victims do not need to make a report to the police in order to access victim support services and should explain when support services must share data with particular statutory agencies or organisations.
61. **Deaf, hard of hearing, blind or visually impaired victims** or those with a speech impediment or have a learning disability may need additional support to understand processes and procedures. IDVAs may adapt a communication plan to include easy-to-read documents, locate translated versions of documents, or engage with translation services, including British Sign Language interpretation, where available.
62. **Victims whose first language is not English** may require independent interpretation and translation support. Translation through the use of family or community members is not appropriate. IDVAs should check that the victim does not know the translator in advance of their name being shared with the translator. IDVAs should consider the victim's preference for the sex and gender of a translator to prevent further victim re-traumatisation.

Maintaining a flexible service

63. Some victims will have different needs or preferences around how they interact with IDVAs. Tailoring the IDVA service may require flexibility, such as:
- i. providing support outside of standard working hours;
 - ii. meeting in different venues, such as a child's school, a health centre or community centre; or using technology such as video calling, instant messaging, or other

¹²College of Policing, HM Inspectorate of Constabulary and Fire & Rescue Services, Independent Office for Police Conduct (2020), *Safe to Share? Report on Liberty and Southall Black Sisters' super-complaint on policing and immigration status*. Available at: <https://assets.publishing.service.gov.uk/media/5fdb0fa4e90e071be0347ac3/safe-to-share-liberty-southall-black-sisters-super-complaint-policing-immigration-status.pdf>

adaptive equipment such as text-to-speech systems with those who are unable to attend in-person appointments;

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

64. IDVAs should consider creative and flexible approaches for victims with multiple needs. This could include providing the victim more opportunities to contact services before closing their case or working with other services which may have more regular contact with them such as community centres, foodbanks and shelters to provide holistic, wrap-around and ongoing support.

65. When meeting victims, IDVAs should ensure that any communication is factored into safety planning and will not put the victim, IDVA or anyone else at further risk of harm.

Practical support

66. Listed below are some examples of additional considerations of where IDVAs may need to deliver practical support to address a victim's needs:

- i. Some adult victims may be in the care, or be the primary carer, of a perpetrator, which could impact their options for support. This may be the case particularly with older victims or victims with disabilities. IDVAs should take this into account when providing impartial information, exploring options, and considering safeguarding issues.
- ii. 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.¹³ IDVAs should work closely and collaboratively with the Office of the Public Guardian where appropriate, as well as with adult social care and other relevant professionals on matters such as consent, decision making, communication, and information sharing.
- iii. 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.¹⁴
- iv. Some victims with disabilities may require adapted services, for example: step-free access to buildings, appointments to be scheduled at certain times of the day. IDVAs should proactively ask what victims need to engage with services, rather than the onus being on the victim to make this known.
- v. Some pregnant victims of domestic abuse experience perinatal loss or choose to have an abortion, and may benefit from specialised mental health support, including post-abortive counselling.

¹³ GOV.UK (n.d.), *Lasting power of attorney: acting as an attorney*. Available at: <https://www.gov.uk/lasting-power-attorney-duties> [accessed 13/02/25]

¹⁴ 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>

- vi. Migrant victims may benefit from specific support mechanisms, as detailed in Domestic Abuse Statutory guidance.¹⁵ This includes the Migrant Victims of Domestic Abuse Concession (MVDAC) which gives eligible partners a period of three months' leave to remain outside the Immigration Rules independent of the abusive partner, and the provisions which give eligible partners immediate settlement under Appendix Victim of Domestic Abuse to the Immigration Rules.¹⁶

67. Victims whose perpetrator holds a position of authority, such as being a member of the police, emergency services or Armed Forces, may require assistance with relevant processes. For example, victims whose perpetrator serves in the Armed Forces may require support reporting the abuse to the Royal Military Police, or signposting to specialist military welfare providers.

68. Those who have experienced police-perpetrated domestic abuse (PPDA) may need particular support with reporting a case.¹⁷ This is particularly true of victims of PPDA who are police officers themselves as they are less likely to report an offence through public channels.

- i. Where the victim is seeking a criminal justice outcome, IDVAs can assist by discussing the option of formal reporting routes with victims. Alongside criminal investigations, these cases may be investigated as allegations of police misconduct by either the force's Professional Standards Department or the Independent Office for Police Conduct (IOPC).¹⁸
- ii. To address concerns about whether the investigating officer may have links to the perpetrator, IDVAs may explore the option for the victim, as a member of the public, to report via confidential systems such as Crimestoppers. Serving officers and police staff can use the Police Integrity Line which is also run by Crimestoppers.

¹⁵ Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

¹⁶ For more information on the NRPF condition and how individuals with this status may be able to access support, see the Domestic Abuse Statutory Guidance, available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

¹⁷ College of Policing, HM Inspectorate of Constabulary and Fire & Rescue Services, Independent Office for Police Conduct (2022), *Police perpetrated domestic abuse: report on the Centre for Women's Justice super complaint*. Available at: <https://www.gov.uk/government/publications/police-super-complaints-force-response-to-police-perpetrated-domestic-abuse/police-perpetrated-domestic-abuse-report-on-the-centre-for-womens-justice-super-complaint>

¹⁸ A criminal and misconduct investigation would not be conducted separately. Evidence gathering would be the same. For more guidance on investigations into police misconduct, please refer to IOPC guidance on the police complaints system, available at: https://www.policeconduct.gov.uk/sites/default/files/Documents/statutoryguidance/2020_statutory_guidance_english.pdf

- iii. IDVAs may be able to support victims who have made a complaint and are dissatisfied with the handling or outcome of a police misconduct investigation to request an independent review of the outcome.¹⁹

Working with friends, family and wider support networks

69. Where appropriate, and with the consent of the victim, an IDVA may be required to support the victim's friends, family or wider support network.
70. IDVAs working with children and young people, including CHIDVAs, may need to adopt a 'whole family approach'. This approach recognises that domestic abuse can impact the entire family unit which may require support from an IDVA or other specialist services, as appropriate, in order to create a safe environment for the child or young victim. IDVAs should balance this with engaging and listening to the child or young person, where possible, on a one-to-one basis to ensure their needs and safeguarding considerations are identified as some family dynamics may prevent a child or young person speaking up.

In practice, this may involve:

- assisting communication with the victim's employer or school, for example, to arrange time off for appointments;
- outlining civil, family and criminal justice processes;
- signposting to other appropriate support services, such as counselling or therapeutic support.

71. An IDVA may also need to work with a child or young person's school (for example, with the Designated Safeguarding Lead) to help them understand the traumatic experience of the child, so that they can make adaptations for the child accordingly.
72. Some victims face community-based risks, especially when experiencing honour-based abuse. In addition, some people may not have disclosed their sexual orientation or gender identity to their friends, family, or wider community. IDVAs should keep victim information confidential and only disclose information with consent or when relevant to a safeguarding context (see Section 9: Information sharing).

¹⁹ Independent Office for Police Conduct (2020), *Statutory guidance on the police complaints system*.

Available at:–

https://www.policeconduct.gov.uk/sites/default/files/Documents/statutoryguidance/2020_statutory_guidance_english.pdf

Chapter 3: Effective working between IDVAs and relevant professionals

Introduction

73. Chapter 3 is relevant to IDVAs, IDVA service managers and relevant professionals working with victims of domestic abuse. This chapter sets out how IDVAs and relevant professionals should best work together to support victims of domestic abuse, outlining key principles and best practice for effective collaboration. The aim is to improve multi-agency working and raise awareness of the IDVA role among relevant professionals.
74. This chapter should be considered alongside locally identified best practice and existing frameworks for working with IDVAs.

Section 8: Referrals to IDVA services

75. Relevant professionals and IDVAs have a role to play in providing a whole system response (for example, through a Coordinated Community Response) to victims of domestic abuse to keep victims safe and to prevent further abuse.
76. Wherever possible, referrals should be person-centred and consent-led, although there are occasions when consent is not required for safety reasons. To determine if a referral is needed, relevant professionals first need to know how to recognise domestic abuse. For more information and guidance on how to recognise different forms of domestic abuse, relevant professionals should refer to the Domestic Abuse Statutory guidance.²⁰
77. Where relevant professionals are unsure whether a referral is needed or of the steps to take, they should engage with a domestic abuse service for advice. Domestic abuse specialists, such as IDVAs, will have the necessary experience and knowledge to appropriately assess the needs and risks posed to the victim which may not always be accurately detected through standardised assessments.
78. If an IDVA is considered an appropriate form of support, the referring professional should make a formal referral as soon as possible. A victim can be referred into the IDVA services can be made at any time, by any professional engaging with them. Some IDVA services accept 'self-referrals' by victims themselves, which some victims may prefer.

²⁰ Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

79. Professionals considering referrals for children who have seen, heard or experienced domestic abuse in their family or household should contact the IDVA service to check whether they provide CHIDVAs (Children's IDVAs) or other specialised services for child victims. If they do not, the referrer should seek or ask to be signposted to a service which suits the child's age and needs and runs in parallel with any services supporting the adult victim. If a professional is concerned about a child's safety, they should notify local authority children's services. For further advice about child safeguarding, professionals should seek advice from their local multi-agency child safeguarding partnership and see *Working Together to Safeguard Children*.
80. The following steps will be helpful when referring a victim into an IDVA service (see also Figure 1). Referrals made through multi-agency forum referrals (for example, via MARAC referrals). Where IDVAs work in statutory settings, there may be alternative processes for making referrals.

Seeking consent and clearly explaining the IDVA role	<p>Professionals should seek consent from the victim before referring them to an IDVA service, unless there is an alternative legal basis for sharing their information (see Section 9: Information sharing). For child victims, it may be necessary to seek consent from a safe parent or guardian.</p> <p>When seeking consent, relevant professionals should explain in full the role and benefits of the IDVA support so that the victim can make an informed decision.</p> <p>Where a victim chooses not to be referred to an IDVA service, relevant 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>
Working without consent	<p>As set out in Section 9, there are lawful bases for sharing information without consent, including in cases of high-risk domestic abuse. Where safe to do so, it is best practice to inform the victim before making the referral and to inform them of the information shared in the referral. It remains the victim's choice whether to engage with the IDVA support.</p>
Including sufficient information within referrals	<p>To make a referral, professionals should follow the local IDVA service referral protocol. If a referral form is required, the professional should ensure it is fully completed. This should ensure all relevant information is included and the victim can be appropriately safeguarded and supported. This helps to avoid victims having to repeat their story, in line with adopting a trauma-informed approach.</p>

The referral should include, but is not limited to:

information provided by the victim about their contact preferences and when it is safe to contact them. For child victims, it may also be appropriate to include the contact details for a safe parent or guardian;

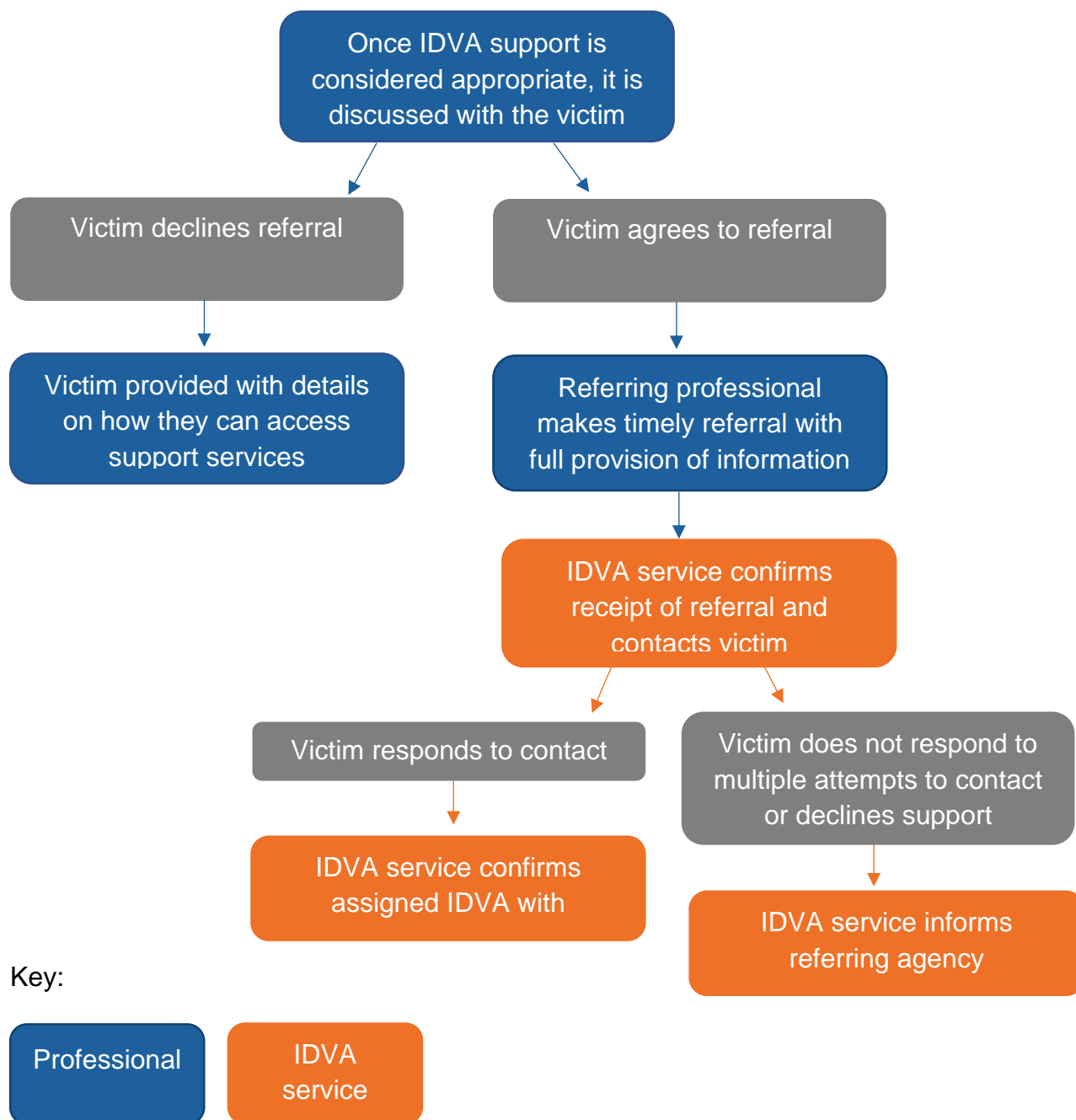
information about disability or accessibility requirements (including the need for an interpreter);

a needs/risk assessment, safety plan, or safeguarding actions (if conducted), alongside any relevant details in relation to risk classification including the referrer's professional judgement or a record of an escalation in the frequency and/or severity of abuse;

information on any other statutory agencies known to be in contact with the victim and the wider family.

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

Figure 1: Process map for referrals into IDVA services



Section 9: Information sharing

81. Relevant professionals and IDVAs 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.²¹
82. Relevant professionals should also be aware of how unintentional information sharing can increase the victim's risk of harm, for example, in cases where a victim and their perpetrator no longer live together, relevant professionals should take all necessary steps to prevent the victim's new address from being disclosed to the perpetrator.

Understanding of information sharing requirements

83. For detailed guidance regarding information sharing, relevant professionals and IDVAs should consult their internal policies. Where they are in doubt about a decision to share information, they should seek advice from relevant colleagues. This could be their manager or supervisor, or their organisation's Data Protection Officer, Caldicott Guardian, professional regulator or relevant policy or legal team.
84. Relevant professionals and IDVAs are bound by the UK General Data Protection Regulation (GDPR) and Data Protection Act 2018, the common law duty of confidentiality (in relation to information shared by a victim with a professional with an expectation of confidentiality), the Information Commissioner's Office's (ICO) Data Sharing Code of Practice, and – where relevant – guidance published by their professional regulator.²²
85. Relevant professionals and IDVAs should also be aware of the additional considerations when processing children's information. The Department for Education has produced additional guidance on data sharing for professionals providing safeguarding services to children, young people, parents and carers. Relevant professionals and IDVAs should also be aware of safeguarding responsibilities set out in legislation, such as the Children Act 2004, the Care Act 2014 and *Working Together to Safeguard Children*.

Lawful bases for sharing information

86. Relevant professionals and IDVAs should select the most appropriate lawful basis for information sharing. Consent is a lawful basis for sharing information under the

²¹ 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>

²² Data Protection Act 2018. Available at: <https://www.legislation.gov.uk/ukpga/2018/12/contents>; NHS England (2022), *Use and share information with confidence*. Available at: <https://transform.england.nhs.uk/information-governance/guidance/use-and-share-information-confidence/>; Information Commissioner's 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>

principles set out in Article 5 of UK GDPR.²³ However it is not the only lawful basis and, in cases involving safeguarding concerns, it may not be appropriate.

87. Where consent is not given, relevant professionals and IDVAs should be transparent with the victim about the limits of confidentiality and the circumstances in which they might securely share personal information with third parties. 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.

Developing and implementing information-sharing protocols

88. To facilitate effective information sharing, IDVA services and relevant professionals should establish protocols which set out what each agency can securely share and how. Where multi-agency information-sharing agreements are already in place, they should include IDVA services.

Section 10: Effective communication

Establishing frequency/method for communication

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

Establishing an IDVA as a single point of contact

90. Victims will often need to engage and communicate with several statutory agencies, organisations and relevant professionals. To simplify communication and prevent further re-traumatisation, some victims may benefit from someone acting as a single point of contact (SPOC). This could be the victim's IDVA, or the victim may prefer to liaise with the IDVA and relevant professionals through another trusted worker. As a SPOC, this person may communicate with relevant professionals and advocate for the victim on their behalf, where appropriate.
91. During initial engagement, the IDVA should establish if the victim would like them to act as a SPOC to facilitate wider communication and engagement with other services. The IDVA should make clear that the SPOC role can be adapted at the victim's request and the IDVA should consider how they can empower the victim to advocate for themselves, where possible.

²³ Article 5 of GDPR: Principles relating to processing of personal data. Available at: <https://www.legislation.gov.uk/eur/2016/679/article/5>

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

The IDVA should:

- 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 relevant professionals 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 relevant professionals are aware if they are no longer supporting the victim so that communication preferences can be updated.

Relevant professionals should:

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

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

However, it may not always be possible to reach the IDVA within the necessary timeframes to communicate with the victim (for example, where a victim needs to be urgently notified for safeguarding reasons). It may not be appropriate share updates through them (for example, discussion of evidence; social care investigations; medical information; or to communicate the rationale for a “No Further Action” decision).²⁴ In these circumstances, professionals should try to inform the IDVA so they can: advise on how best to communicate with the victim (for example, time of day to contact, preferred contact method); meet jointly with the victim and the professional; and/or provide support to the victim afterwards.

92. While the IDVA SPOC may communicate on behalf of the victim, they should not necessarily 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

²⁴ There will be certain instances where a victim requests for “No Further Action” decisions to be communicated via their IDVA and this should be discussed and agreed as part of the initial conversation between the IDVA and victim.

involved if the victim has children and may coordinate support services for the whole family.

93. In circumstances where an IDVA is aware of risks to the victims' child(ren), the IDVA should establish if there is a 'lead practitioner', such as a social worker, who is responsible for co-ordinating support around the family. Where there is a lead practitioner, they will often act as a key point of contact with the victim and their family in relation to wider support services.²⁵
94. Where an IDVA 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.

Providing simultaneous updates

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

Section 11: Using the expertise of IDVAs

96. Relevant professionals should regard IDVAs as a key partner in the support of victims and have a clear understanding of the IDVA role, including their independence, as outlined in Chapter 1.
97. Relevant professionals should consider using the expertise of IDVAs to enhance the support provided to victims and ensure that their actions are informed by a clear understanding of domestic abuse. 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 Section 12.

²⁵ 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

Drawing on an IDVA's insights

98. Relevant professionals should recognise and consider where they should actively use the IDVA's expertise and insight into the wider context and circumstances of the victim.
99. Making use of this expertise will help victims receive better support, including by developing relevant professionals' comprehensive understanding of how best to adequately safeguard, manage risk and provide appropriate trauma-informed support. IDVAs should also assist relevant professionals to conduct or develop needs or risk assessments, safeguarding plans or support plans. Relevant professionals should always be mindful of an IDVA's independence, as set out in Chapter 1.

Drawing on IDVA support

100. Through the relationship that an IDVA establishes with a victim, they will often have a unique and in-depth insight into how best to support a victim, whether this be through emotional reassurance, practical support and/or advocacy. This may be particularly relevant for victims who have experienced multiple disadvantages or had negative experiences with statutory agencies in the past.
101. If the victim consents, it is always best practice for relevant professionals to consider inviting IDVAs when they need to directly engage with victims. This may include key meetings, appointments and visits. In circumstances (including those outlined below) where it is not deemed appropriate for the IDVA to be present in the room for a meeting, appointment or visit, other professionals should share a clear rationale with the victim and IDVA, as well as sharing the time/location with the IDVA so they can provide support before and after, if needed.
102. Below are examples where IDVA support can help. This is not intended to be a comprehensive list, and relevant professionals should continually consider where the presence of the IDVA will enhance support and improve a victim's experience. These examples will not be relevant to all victims, depending on a victim's consent, their circumstances and the statutory agencies they are engaging with.
 - i. **Healthcare professionals:** Some IDVAs, including health-based IDVAs who work in healthcare settings like hospitals, will often support victims in the immediate aftermath of a crisis. They may also support victims who need adjustments when attending medical appointments, for example, a female victim may require female-only staff for maternity appointments. Health-based IDVAs will also support healthcare professionals to increase their confidence and skills in responding to and asking about domestic abuse by routine enquiry. This can improve referral pathways from healthcare settings to community-based services.

- ii. **Housing meetings:** Alternative housing options can be a key factor in whether a victim decides to stay or leave the relationship with the perpetrator.²⁶ Relevant professionals should inform the IDVA of meetings with housing providers to support the victim through this process and advocate for them. In an emergency situation, this could include providing domestic abuse safe accommodation, such as a refuge.
- iii. **Meetings with family solicitor/barrister:** Where the victim is accessing the family justice system, the IDVA can help them give their best evidence by providing emotional reassurance and practical support. IDVAs may be able to share their expertise on domestic abuse and its impact with the solicitor/barrister, and ensure that family lawyers are not expected to provide support beyond their expertise.
- iv. **Parole hearings:** With the Victim's consent, Victim Liaison Officers (VLOs) should make the IDVA aware of when a parole hearing will take place, when the parole hearing decision is expected, and once it has been made, so that additional support can be offered at these stages. VLOs should also, with the Victim's consent, make the IDVA aware of when an offender may be released. Where the victim does not already have an IDVA supporting them, VLOs should discuss with the victim whether they wish to be referred to an IDVA service (in line with Section 8).
- v. **Schools, colleges, universities and employers:** The IDVA may offer support to improve professionals' understanding of domestic abuse and the victims' safeguarding needs. For example, an IDVA or CHIDVA supporting a child victim may help to negotiate a revised school timetable to allow them to attend therapy or other services.
- vi. **Witness statements:** Providing a witness statement for a police investigation can be a distressing time for victims. Officers should liaise with the IDVA to establish a convenient time for the victim to attend. However, where the victim would like their IDVA to continue supporting them through the criminal justice system, the IDVA will not be able to be present while the statement is being taken (see Section 2) but the victim may wish them to be present for support before and after, where appropriate. As part of the statement-taking process, there should be a discussion with the victim about special measures - if the IDVA is attending in person, they should be present for this discussion. If they are not present, officers should inform the IDVA of the special measures discussion which has taken place.²⁷

²⁶ Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

²⁷ 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>

IDVA support at court

103. Court proceedings can be a particularly challenging part of the justice process for a victim and one where they can benefit from the practical support and emotional reassurance of their IDVA.²⁸
104. Examples of how an IDVA might support a victim in the court setting are set out in the table below.

Supporting with Protective Orders	The IDVA should help the victim decide whether applying for civil or family court protective order might be appropriate to improve their safety. This may include a non-molestation order, an occupation order or a prohibitive steps order. ²⁹
Meeting with the Crown Prosecution Service (CPS)	The CPS 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 proceed to trial. ³⁰ The meeting provides the victim with an opportunity to discuss 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 the victim's preference, the CPS should consider inviting the IDVA to be present at this meeting in order to best support the victim.
Supporting with pre-trial visits and arriving safely	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 IDVA is in place. The relevant service can then arrange a mutually convenient time so that the IDVA can attend the pre-trial visit to support the victim through the process. Alternatively, the IDVA should liaise directly with the Witness Service to organise a pre-trial visit.

²⁸ In some cases, this may be a court-based IDVA – refer to Section 1 for more detail on these roles.

²⁹ 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>

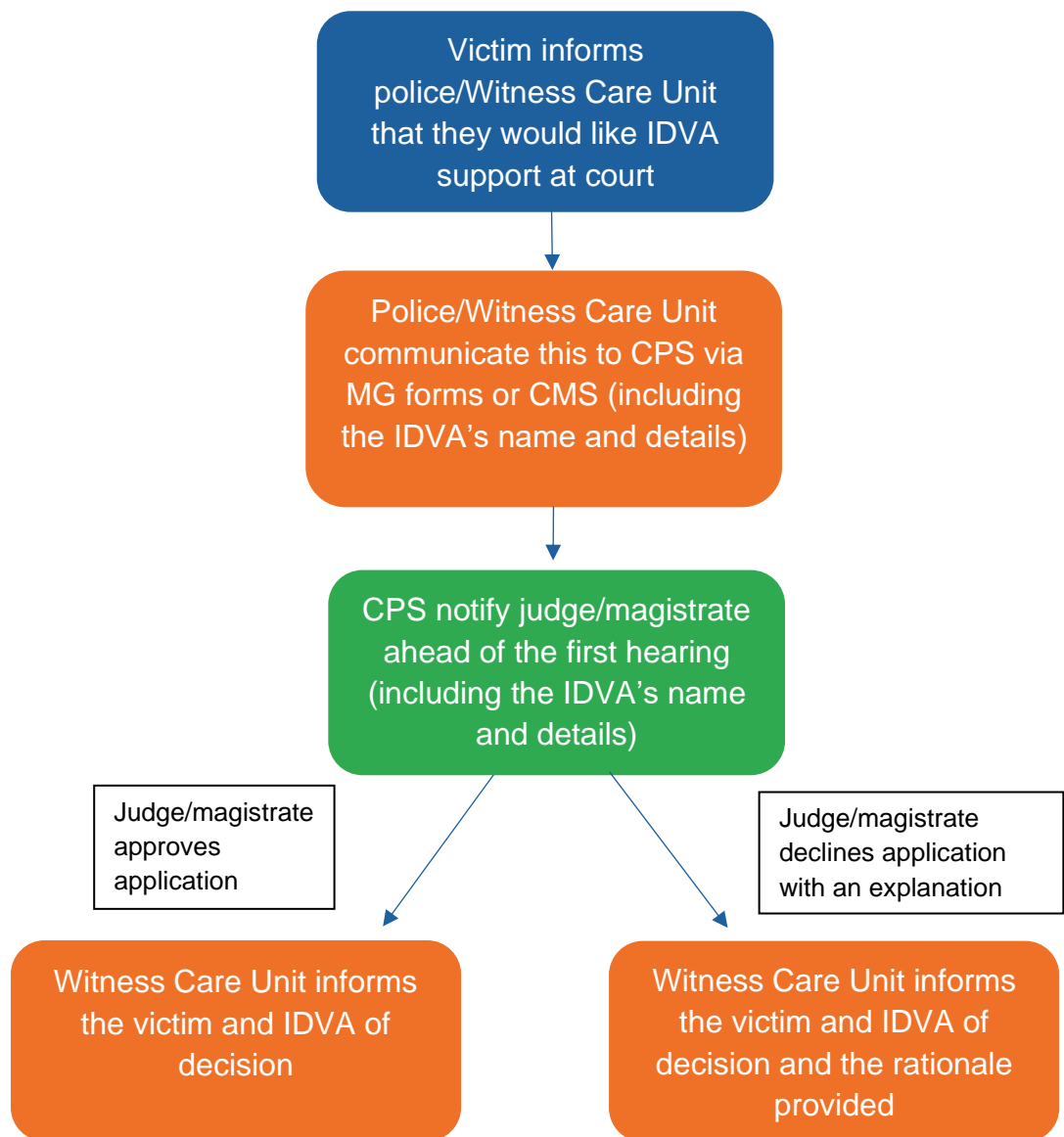
³⁰ Crown Prosecution Service (2024), *CPS pre-trial meetings for adult victims of rape and other serious sexual offences*. Available at: <https://www.cps.gov.uk/publication/cps-pre-trial-meetings-adult-victims-rape-and-other-serious-sexual-offences>

	<p>The IDVA should liaise with the relevant witness service beforehand (for example, before the pre-trial visit, if applicable) to ensure they know which entrance and exits are appropriate to avoid having contact the perpetrator or their family/friends. The IDVA should work with the victim (and police, where relevant) to ensure the victim is able to get to and from court safely.</p>
<p>Providing practical support and emotional reassurance by sitting beside the victim while giving evidence in court or in the live-link room (subject to judicial approval)</p>	<p>There are ‘court rules’ which set out the overarching principles for who can be in the courtroom. These set out that the family and criminal court will allow IDVAs to sit next to or near the victim in the courtroom or any other place where the victim takes part, unless there is good reason for the judge/magistrate to refuse.³¹ Where a victim would like support of their IDVA, this will need to be requested in advance (see Figures 2 and 3).</p> <p>While an IDVA may sit next to the victim, they must not speak on behalf of the victim in the courtroom or interrupt the hearing; while the IDVA may know the victim’s experience of sexual violence and sexual abuse, they must not discuss the evidence. See Section 2 for more information.</p>
<p>Explaining the court process, and aiding interaction, where appropriate, with relevant professionals</p>	<p>IDVAs should help support victims’ 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 relevant professionals need to interact with the victim, it is best practice to ensure the IDVA is present, with the victim’s consent.</p>
<p>Keeping the victim updated on how the case/trial is progressing</p>	<p>IDVAs should work closely alongside court staff (and Witness Service in criminal courts) to keep the victim updated on how the case/trial is progressing, for example, when they will give evidence.</p>

³¹ Family Division (2023), *Practice Direction 27C – Attendance of IDVAs and ISVAs*. Available at: https://www.justice.gov.uk/courts/procedure-rules/family/practice_directions/practice-direction-27c-attendance-of-idvas-and-isvas; The Criminal Procedure (Amendment) Rules 2024. Available at: <https://www.legislation.gov.uk/ukSI/2024/62/rule/4/made>

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

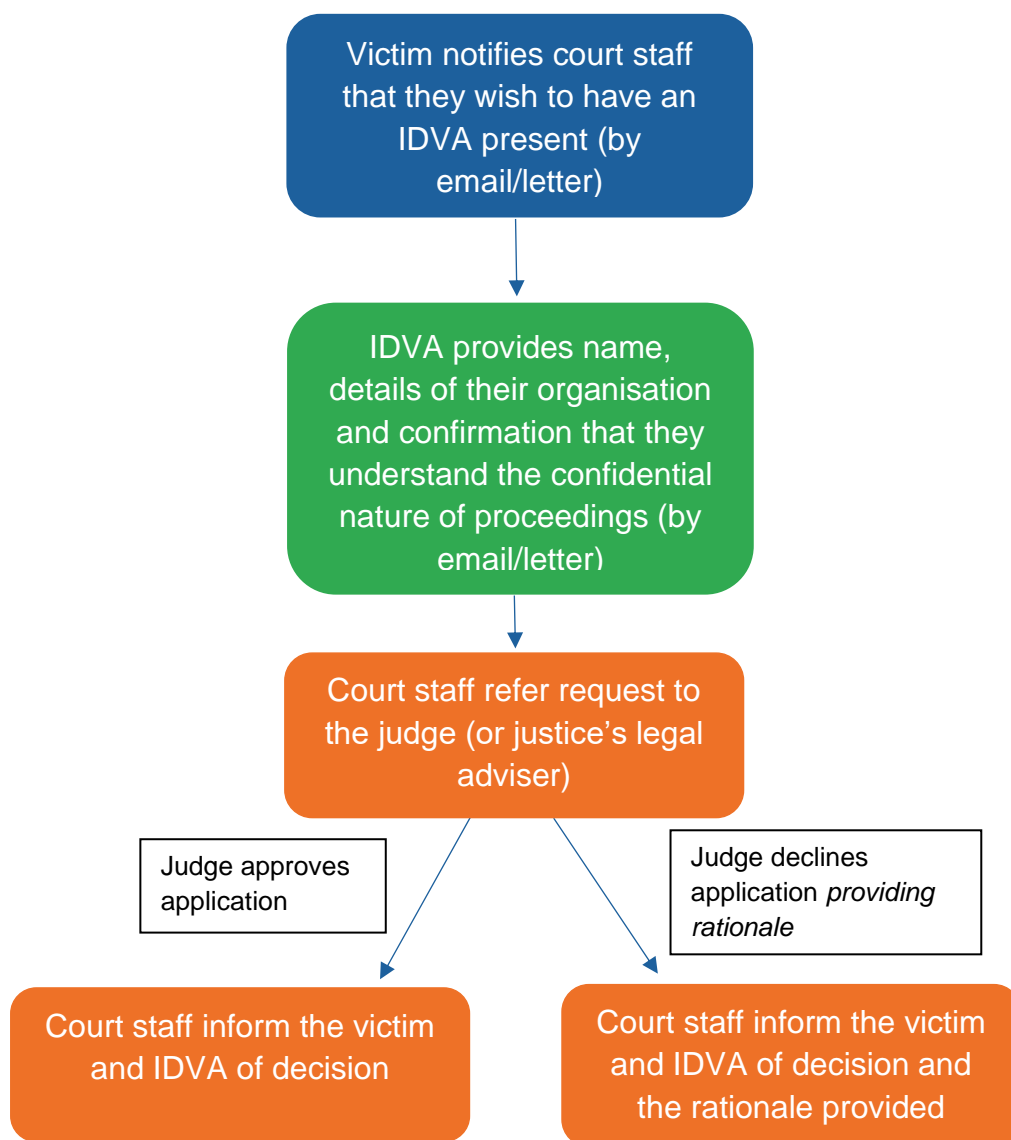
Figure 2: Flow chart for notification of IDVA support while giving evidence in criminal court



Key:



Figure 3: Flow chart for notification of IDVA support while giving evidence in family court



Key:



Involving the IDVA role in multi-agency settings

106. To assist with communication and improve outcomes for victims, relevant professionals should routinely invite IDVAs to all relevant multi-agency meetings. IDVAs will determine whether they should be in attendance on a case-by-case basis. When in attendance IDVAs should have parity of status with other relevant professionals. Such multi-agency forums include but are not limited to those listed in the following table.

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

- represent the voice and needs of the victim, ensuring that their choices and views are respected and understood;
 - provide information about the victim's risks and needs assessment including action already taken and proposed next steps;
 - where agreed, work as the main point of contact for the victim and other professionals, to help streamline support and prevent re-traumatisation;
 - with the consent of the victim, proactively implement relevant actions from the safety plans developed at MARAC, for example, making an onwards referral to mental health services or other holistic therapeutic services, as appropriate;
 - provide appropriate challenge to statutory agencies where needed to ensure the victim's safety and wellbeing.
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	Further information on MARACs can be found in the Domestic Abuse Statutory guidance. ³²
Multi-Agency Public Protection Arrangements (MAPPA)	Through MAPPA, the police, HM Probation and Prison Services and other agencies work together 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 IDVAs must be invited to all level 2 and 3 meetings. ³³
Multi-Agency Tasking and Coordination (MATAC)	MATAC is focused on identifying and tackling serial perpetrators of domestic violence and domestic abuse. This forum aims to safeguard adults and children at risk of domestic abuse, prevent further domestic abuse related offending, and change offender behaviour.
Multi-Agency Safeguarding Hub (MASH)	The MASH allows organisations with responsibility for the safety of vulnerable people to work together. Organisations share information and co-ordinate activities, often through co-locating staff from the local authority, health agencies and the police. Most safeguarding partner agencies support these arrangements so that they can identify risks to vulnerable children early.
Child Protection Conferences and Child in Need meetings	A Child Protection Conference or Child in Need meeting is a meeting between families and professionals held when there is a concern about the safety of a child. This forum seeks to make decisions and plans about a child's future safety, health and development. It may not be appropriate or safe for a victim or IDVA to meet with the perpetrator/suspect so professionals should consider separate meetings.
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.

³² Home Office (2022), *Domestic Abuse Statutory Guidance*. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1089015/Domestic_Abuse_Act_2021_Statutory_Guidance.pdf

³³ Ministry of Justice, National Offender Management Service and HM Prison Service (2024), *MAPPA Guidance*. Available at: <https://www.gov.uk/government/publications/multi-agency-public-protection-arrangements-mappa-guidance>

Team around the Family meetings	Team around the Family meetings bring together groups of professionals and volunteers who work alongside the family to improve outcomes. They are led by a Lead Practitioner but all members are active participants and their contribution equally valued. The team will be able to demonstrate good communication and co-ordination based on the family's plan and the family's feedback on the support provided should reflect this.
Local Scrutiny and Involvement panels	CPS Local Scrutiny and Involvement panels provide a platform for criminal justice agencies to work with community sector representatives to scrutinise decision-making and actions taken. Through this, agencies identify and share best practice to inform policy, and improve activity and victim outcomes. The purpose of these panels is not to discuss active cases. CPS areas facilitate the panels. IDVA service providers should identify if they attend a scrutiny panel and, if not, should determine the value of their attending, and contact the local CPS Area to enquire about participation.
Substance/ Mental Health Multi-Disciplinary Treatment	A multi-disciplinary approach to drug and alcohol or mental health treatment brings together individuals from different disciplines to determine appropriate patient pathways, interventions or management plans. It may be appropriate for IDVAs to attend where the victim has substance or mental health needs.
Primary Care / General Practice Safeguarding Meetings	Practice safeguarding meetings allow practice staff to share information, identify concerns and agree management plans for complex safeguarding cases. There may also be an opportunity to meet with multidisciplinary partners who can help safeguard the practice's registered patients.

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

Section 12: Institutional advocacy

109. Institutional advocacy is the term for providing advocacy support and advice at an institutional rather than individual level and covers activity IDVA services may carry out which involves raising systemic issues that impact victims' experiences. This should help statutory agencies and organisations improve their practices, by learning from shared best practice. It should also increase statutory agencies' understanding and awareness of domestic abuse. IDVA services have a unique multi-agency perspective as they support victims to navigate different systems. They are therefore well equipped to recognise gaps and barriers which victims may face and advocate for improvements to ways of working.
110. Depending on the availability of staff and their relevant expertise, IDVAs, IDVA service managers or other professionals working in the IDVA service may carry out institutional advocacy.
111. Where IDVA service availability allows, institutional advocacy may include a variety of activities such as:
- i. if suitably qualified, providing training to other organisations on recognising and understanding domestic abuse;
 - ii. highlighting issues at senior or strategic levels to make overall improvements, such as where multiple victims are experiencing issues with a particular referral pathway;
 - iii. contributing specialist knowledge in the development of strategic plans, service design and development. For example, IDVAs can help shape improvements where particular groups of victims are facing barriers to support because of their language, race, sex, or gender;
 - iv. supporting commissioners to understand the needs of local victims and ensuring services are shaped and commissioned to respond to this need;
 - v. where appropriate, IDVA services can support the inclusion and trauma-informed participation of victims in relevant forums.
112. 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. In these settings, statutory agencies and IDVAs should work together to draw on expertise and identify opportunities to implement best practice. Statutory agencies should strongly consider inviting IDVAs and/or IDVA service managers to attend local strategic forums, including, but not limited to, the following:
- i. Community Safety Partnerships;
 - ii. Domestic Abuse Best Practice Framework meetings;
 - iii. Domestic Abuse Joint Justice Plan meetings;
 - iv. Domestic Abuse Local Partnership Boards;
 - v. Integrated Care Partnerships;
 - vi. joint commissioning groups;
 - vii. Local Criminal and/or Family Justice Boards;

- viii. Local multi agency safeguarding arrangements (MASA) for children and adults;
- ix. MARAC Steering groups;
- x. place-based partnerships.

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