



# SUCCESSFUL COMMISSIONING

a guide for commissioning  
services that support  
women and children  
survivors of violence



# Contents

---

The National Quality Framework: Background and Context	3
On Track: Women's Paths to Safety	11
Summary: Women's Aid Federation of England National Accredited Quality Standards	12
Summary: Imkaan Accredited Quality Standards	14
Summary: The Rape Crisis National Service Standards	16
Guidance for Commissioners	18
20 Questions for Commissioners of Services for Women Experiencing and Escaping Violence	21
Developing a Local Violence Against Women and Girls Commissioning Strategy	23
Model Tender Document	29

## Acknowledgements

With thanks to the Imkaan and Women's Aid Capacity Building Partnership team, Janet McDermott, Camille Kumar, Katy Taylor and Hilary Fisher, and to the specialist services and commissioners who provided invaluable feedback.

### Published by:

Women's Aid Federation of England,  
PO Box 391, Bristol, BS99 7WS  
© Women's Aid 2014  
ISBN 978-0-907817-87-1

**Design:** Susannah Marwood

**Women's Aid** is the national domestic violence charity that supports over 300 local services working to end domestic violence against women and children in England. Our member services are integrated domestic violence service providers delivering a range of holistic services for women experiencing domestic violence and for their children. Keeping the voices of survivors at the heart of its work, Women's Aid campaigns for better support for women and children, and provides training and resources for professionals.

Women's Aid delivers a package of 24 hour lifeline services including: publications (available in 11 languages, including English), websites ([www.womensaid.org.uk](http://www.womensaid.org.uk) and [www.thehideout.org.uk](http://www.thehideout.org.uk)) and the Freephone 24 Hours National Domestic Violence Helpline (run in partnership with Refuge) on 0808 2000 247.

**Imkaan** is a UK-based, black feminist organisation dedicated to addressing violence against women and girls. As a second-tier human rights charity, with national membership, Imkaan represents the expertise and perspectives of frontline specialist women's services that work to prevent and respond to violence against black and minority ethnic (BME) women and girls. A core aspect of our work is engagement with a range of agencies to improve policy and practice responses to BME women and girls.

Imkaan also delivers a unique package of support which includes: accredited training and peer education; sustainability support to frontline BME organisations; and facilitation of space for community engagement and development. Our research activities support the on-going development of a robust evidence-base around the needs and aspirations of BME women and girls, as well as promising effective practice approaches to addressing violence.



# The National Quality Framework: Background and Context

---

## Challenging times, difficult choices

In today's challenging economic times, commissioners have a difficult job. Central funding only covers a small proportion of local provision, local funding is severely reduced and there is no single commissioner with a statutory duty to address violence against women and girls (VAWG). Decision-making to ensure consistent provision of quality support for survivors is an increasingly complex task.

The negative impact of cuts to funding has been aggravated by some commissioning processes that have failed to take account of service user need or the contribution of specialist services. This is coupled with limited capacity in the specialist VAWG sector to fully engage in commissioning processes. Investment has consequently focused on the "tip of the iceberg" – victims assessed as being at high risk of being murdered or those that choose to report to the police – and a disinvestment in the services which provide earlier intervention, longer term recovery, and help prevent re-victimisation.

As national VAWG organisations, Imkaan, Women's Aid and Rape Crisis England and Wales (RCEW) are committed to assisting commissioners with their task by raising awareness among their members about the importance of engaging effectively with commissioners. They can provide commissioners with practical support, advice and guidance about service user need in local areas and commissioning appropriate services to meet it. See page 9 for contact details.



## The need for specialist support services

The statistics evidencing the extent of violence against women and girls in England and Wales are well known:

- ▶ In 2012/13 there were 7.1% of women who reported having experienced any type of domestic violence in the last year, equivalent to an estimated 1.2 million female victims of domestic violence<sup>1</sup>.
- ▶ Overall, 30% of women had experienced any form of domestic violence since the age of 16, equivalent to an estimated 4.9 million female victims of domestic violence<sup>2</sup>.
- ▶ On average two women a week are killed by a partner or ex-partner in England and Wales<sup>3</sup>.
- ▶ On average the police receive an emergency call relating to domestic violence every 30 seconds<sup>4</sup>.
- ▶ A study based on 2001 census data in England and Wales estimated that 23,000 girls under the age of 15 could be at risk of FGM each year, and nearly 66,000 women are living with its consequences<sup>5</sup>.
- ▶ Approximately 85,000 women are raped and 400,000 women are sexually assaulted every year, and one in five women (aged 16 - 59) has experienced some form of sexual violence since the age of 16<sup>6</sup>.
- ▶ The Forced Marriage Unit recorded 1,485 cases of forced marriage across the UK in 2012<sup>7</sup>.
- ▶ Domestic violence costs society nearly £16 billion per year<sup>8</sup>.

**1.2 million**  
female victims

**30%**  
experienced  
domestic violence

**2** women a  
week killed

**1** call to  
police every  
**30 seconds**

**£16 billion**  
cost to society

**1 serious  
case review**  
costs a local  
authority  
**£20-25k**

1 Office of National Statistics (February 2014) *Focus on Violent Crime and Sexual Offences*, 2012/13 Release.

2 *Ibid.*

3 Women's Aid: [www.womensaid.org.uk](http://www.womensaid.org.uk). Accessed 20.02.14.

4 HMIC (March 2014) *Improving the police response to domestic abuse*.

5 Efa Dorkenoo, Linda Morrison and Alison Macfarlane (2007) *A Statistical Study to Estimate the Prevalence of Female Genital Mutilation in England and Wales*, London: FORWARD with The London School of Hygiene and Tropical Medicine and City University.

6 A joint commission (2013) *An Overview of Sexual Offending in England and Wales: Statistics bulletin*. Ministry of Justice, Home Office & the Office for National Statistics.

7 Forced Marriage Unit, Statistics January-December 2012, [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/141823/Stats\\_2012.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/141823/Stats_2012.pdf).

8 Walby, S (2009) *Cost of domestic violence*. Lancaster University.



- ▶ **One in 20 children has been sexually abused; 18,915 sexual crimes against children under 16 were recorded in England and Wales in 2012/13<sup>9</sup>.**
- ▶ **Violence against women was a factor in the deaths of at least 15 children in 2012, a third of children killed that year<sup>10</sup>.**
- ▶ **One serious case review costs the local authority an average of £20-25,000<sup>11</sup>.**

Women and children require support at every stage of their journey: from disclosure of abuse to accessing safety and support, and coping with and recovering from the abuse. Leaving a violent relationship or situation, or disclosing experiences of abuse, can take many months, even years. The support of specialist organisations is often critical in helping women through periods of crisis, whilst also supporting them around understanding and recognising the dynamics of abuse, coping with and recovering from their experiences of violence. This is important for practical concerns such as safety planning but is also essential around other areas such as emotional well-being. A six week period of support within the criminal justice system will not achieve these objectives; it is not designed to. Specialist services, however, ensure support from disclosure to recovery and throughout the criminal justice system as well<sup>12</sup>. The Government's recently updated national VAWG prevention plan explicitly acknowledges: "...we must ensure that victims who do not wish to formally report offences receive the support and services they need."<sup>13</sup>

In funding independent dedicated specialist services, whose primary purpose is to address and prevent VAWG, commissioners can be assured of a holistic approach to addressing VAWG in their area. As dedicated services, specialist organisations strive to be agents of social change: as well as supporting survivors, they seek to change public attitudes, raise professional awareness, educate children and young people, hold perpetrators to account and prevent violence in the future. Black and minority ethnic (BME) led services engage communities and individuals who may face multiple barriers to accessing statutory and non-specialist voluntary services, improving access and reducing isolation for marginalised people and communities. The Government's *End Violence Against Women and Girls Action Plan 2014* states:

*We also need to recognise that attitudes which are entrenched in some segments of society need to be tackled to make a real sustainable change – attitudes which foster ongoing gender inequality, that provide cultural excuses or exemptions for illegal activity and attitudes of ambivalence and it being someone else's problem or responsibility.<sup>14</sup>*

9 Radford, L., Corral, S., Bradley, C., Fisher, H., Bassett, C. and Howat, H. (2011) *Child abuse and neglect in the UK today* London: NSPCC.

10 Ingala-Smith, K. (2013) *Child Killers*. <http://kareningalasmith.com/2013/04/14/child-killers-2/>. Accessed 20.02.14.

11 Walby, S. (2004) *The Cost of Domestic Violence*. University of Leeds.

12 Westmarland, N. and Hester, M. (2005) *Tackling Domestic Violence: effective interventions and approaches*. London: Home Office Research Study 290.

13 HM Government (2014) *A Call to End Violence against Women and Girls: Action Plan 2014*, p.14.

14 *Ibid.* p.13.



## Legal duties and guidance

National and international legal duties that have a bearing on the commissioning of violence against women services include:

- ▶ **EU Directive on the rights, support and protection of victims of crime:** the EU Directive sets minimum standards of service provision to support victims of crime. Article 8 outlines duties to establish specialist support services in addition to, or as part of, the more general victim support services. As with general support services, access to specialist support should not depend on whether the crime has been reported.
- ▶ **The Public Sector Equality Duty:** the Equality Duty is a duty on public bodies, covering both direct service provision and the commissioning of services, to consider the needs of people with protected characteristics including sex, race and sexual orientation. The Act allows services to be provided separately for men and women, or to be provided to one gender only (Schedule 3, part 7). Commissioning for equality can lead to better business outcomes since services that are more tailored to users' needs tend to result in better long term outcomes and are more cost effective for the state.
- ▶ **The Public Services (Social Value) Act 2012:** places a duty on commissioners and procurers to consider social value ahead of procurement. *“The authority must consider how what is proposed to be procured might improve the economic, social and environmental well-being of the relevant area, and how, in conducting the process of procurement, it might act with a view to securing that improvement”*<sup>15</sup>

## The need for services led by and for women

While men and women experience domestic and sexual violence and harmful practices, the overwhelming majority of victims are women and the perpetrators men. 89% of victims of domestic violence who have experienced repeat victimisation (over 4 incidents) are women, and are victims of a repeated pattern of coercive control; women are also much more likely to be killed by their partners or former partners than men<sup>16</sup>. Men who have been victims of violence have different needs and due consideration can be given to their needs without compromising the specialisms of women's services. A detailed, balanced analysis of need should include all victims but this will not show the same demand for the same services, and it is the data from this needs analysis which should drive commissioning<sup>17</sup>.

<sup>15</sup> The Public Services (Social Value) Act 2012.

<sup>16</sup> Stark, E and Flitcraft, A (1996) Preventing Gendered Homicide in Stark and Flitcraft, *Women at Risk: Domestic Violence and Women's Health*. London: Sage.

<sup>17</sup> *Respect position statement: gender and domestic violence*. Accessed 20.02.14. Respect is a national membership organisation that develops, delivers and supports effective services for men who are victims of abuse.



The Equality Duty does not mean one service for everyone. As the Equality and Human Rights Commission notes:

*The public sector Equality Duty does not mean that single sex services should be cut, have funding withdrawn or that any new services should not be funded. Neither does it mean that services should necessarily be provided on the same scale for both men and women. For example, because women make up the majority of victims of domestic violence and rape it may not be appropriate for a local council to fund or provide refuge services on an equal basis for men and for women.<sup>18</sup>*

## The need for services led by and for black and minority ethnic women

The specialist black and minority ethnic (BME) women's sector has played an essential part in addressing violence against women and girls, yet BME organisations are often marginalised at both local and national levels. Specialist BME VAWG organisations are designed to respond to the needs of BME women who have experienced violence and will reach communities and individuals who face multiple barriers to accessing statutory and other voluntary services. Such organisations are independently developed, led and delivered by BME women for BME women<sup>19</sup> thus promoting social and community cohesion, as detailed in the Compact 2010<sup>20</sup>.

*For many BME women and girls, support and advice from a specialist BME advocate and frontline service is often a critical component... Language support is not always the primary presenting need. BME women and girls are likely to value other aspects of provision. BME VAWG services provide women and girls with the choice to access spaces they identify with, where they feel accepted, safe and less isolated.<sup>21</sup>*

*... the [BME women's refuge] understand my culture and I feel comfortable looking for support in my own community. (Survivor)<sup>22</sup>*

Part of the reason for outsourcing public services to the voluntary sector is its greater accessibility, overcoming the stigma and fear often attached to accessing statutory services, and the consequent

18 Equality and Human Rights Commission, <http://www.equalityhumanrights.com/advice-and-guidance/public-sector-equality-duty/faqs-on-the-equality-duty/>. Further information on this can be found in the Commission's guidance on the Equality Act.

19 Larasi (2013) A fuss about nothing?: Delivering Services to Black and Minority Ethnic Survivors of Gender Violence—the Role of the specialist Black and Minority Ethnic Women's Sector in Rehman et al. *Moving in the Shadows: Violence in the lives of minority women and children*. Ashgate.

20 HM Government (2010) *The Compact*. London: Cabinet Office, Commitment 5.2.

21 Roy, S. & Thiara, R.K. (2012) *Vital Statistics*. London Imkaan.

22 Imkaan (2013) *Beyond the labels: women and girls' views on the 2013 mayoral strategy on ending violence against women and girls*, p.24. London.



enabling of earlier intervention and more effective work with an engaged population of service users. For women who have experienced domestic violence and/or sexual violence and/or harmful practices, the fear of statutory agencies is often particularly strong, and is compounded by a need to receive a service from other women and, in the case of BME women, from women from a similar black or minority ethnic background.

*It's important to build a human relationship with providers, trust is really important and encourages me to go back, and if they are clinical then I am less likely to go. (Survivor)<sup>23</sup>*

*When you've got that women-only space then you can really breathe out and you know it's a different atmosphere and you can speak to other women who might be going through the same stuff and help each other, support each other. (Survivor)<sup>24</sup>*

By taking a needs-led, rather than a risk-led, approach to service commissioning, commissioners will naturally “improve the availability of local women-only services which are specialist in their approach and respond to women and girls’ individuality of experience and identity.”<sup>25</sup> Research has shown that the provision of such services will reduce long term costs for statutory services:

*The societal benefits per woman of the women’s community services are between three and fourteen times the costs of the services.<sup>26</sup>*

## Working with specialist, local services in the commissioning process

The range of specialist VAWG organisations need to be consulted early on in the commissioning cycle so they have the time and resource to come together to present a clear offer to the commissioner demonstrating the history, expertise, skills and local reputation of each member of the collaboration. Local organisations will also be a mine of information for needs analysis which can help shape the tender process.

Imkaan and Women’s Aid are committed to consortia building and jointly supporting local specialist organisations to work together where they identify that this would ensure the best possible services for women and child survivors in their area. The Imkaan and Women’s Aid Capacity Building Partnership can also provide practical support to commissioners to involve specialist services in the commissioning processes in a fair and balanced way, to identify suitable commissioning criteria for their area and to support the implementation of innovative and best practice in their area. Please see page 9 for contact details.

<sup>23</sup> *Op. cit.* Imkaan (2013) p.21. London: Imkaan.

<sup>24</sup> *Ibid.*

<sup>25</sup> *Ibid.* p.7.

<sup>26</sup> Nicholles N. and Whitehead S. (2012) *Women’s Community Services: A Wise Commission*, p. 17. Funded by the Ministry of Justice (MoJ) and the Corston Independent Funders Coalition (CIFC) through the Women’s Diversionsary Fund (WDF)





## How it helps you

# The National Quality Framework for services supporting women and children survivors of domestic violence

The National Quality Framework provides a clear set of quality standards for specialist provision that meet the needs of women and children. It will assist commissioners to provide the best possible services for survivors of violence and abuse in their area. Use of the National Quality Framework will enable commissioners to demonstrate that the commissioning process has been informed by service user need, and that funding has been allocated to meet the diversity of that need. It will also help ensure they meet their legal Social Value and Equalities obligations<sup>27</sup>.

The National Quality Framework forms a part of government-supported work across the VAWG sector *“to develop a standards framework to assist local commissioners to make informed choices about local sexual violence and domestic violence services”*<sup>28</sup>. It is a set of integrated tools for measuring the performance and assessing the quality of VAWG services.

### For further information on the Quality Framework and/or commissioning support contact:

Hilary Fisher, Director of Policy, Voice and Membership, Women’s Aid:  
[h.fisher@womensaid.org.uk](mailto:h.fisher@womensaid.org.uk)

Dorett Jones, Development and Training Manager, Imkaan:  
[dorett@imkaan.org.uk](mailto:dorett@imkaan.org.uk)

For information about services specifically addressing the needs of survivors of sexual violence or the National Rape Crisis Service Standards contact Katy Taylor, Membership Co-coordinator, Rape Crisis England & Wales: [rcwmembership@rapecrisis.org.uk](mailto:rcwmembership@rapecrisis.org.uk)

Next Page ▶▶▶

**What the National Quality Framework comprises**

27 Commissioning services quality assured by their national professional body means funding organisations which are: community based, so statutory money and additionally sourced funds remain in the local area; accessible to diverse and marginalised communities; responsive to and shaped by survivor need; focused on holistic service provision; highly likely to provide additional training and volunteering opportunities for survivors helping ensure longer term independence.

28 HM Government (2014) *A Call to End Violence against Women and Girls: Action Plan 2014*, p.8.



## The National Quality Framework comprises:

- ▶ **On Track: Women's Paths to Safety.** This is a comprehensive set of survivor-identified outcomes against which services can document and measure their inputs, outputs and the progress of the survivors they support. This information will be available to inform local authority and other funders' commissioning processes. *"The collection and analysis of good data is a fundamental tool in our fight to combat violence against women and girls."*<sup>29</sup>
- ▶ **Database & case management systems for recording & measuring outcomes,** specially designed around violence against women and girls which enable easy collection of service-specific, regional and national data on a wide range of aspects of domestic violence provision.
- ▶ **Women's Aid National Quality Standards & Accreditation Process.** These standards offer a quality standard mark for Women's Aid services that rolls out best practice and ensures consistent quality of service delivery by accredited providers across England.
- ▶ **Imkaan Accredited Quality Standards for dedicated BME women's services.** These standards form a set of criteria through which dedicated specialist BME services addressing domestic violence and harmful practices, including forced marriage, honour based violence and female genital mutilation, can evidence their quality.
- ▶ **Information about the Rape Crisis England & Wales (RCEW) National Service Standards.** Survivors of sexual violence and childhood sexual abuse are best supported by dedicated independent sexual violence services. The RCEW National Service Standards form a set of criteria through which these services can evidence their quality. RCEW holds its own database and case management system for recording and measuring outcomes relating to the support of survivors of sexual violence and child abuse.
- ▶ **National Guidance for Commissioning Violence Against Women and Girls' Services:** a model commissioning strategy and a model tender document for commissioning VAWG services.

---

<sup>29</sup> Ibid, p.14



# On Track: Women's Paths to Safety

**Vision:** All women and girls can exercise and enjoy human rights and fundamental freedoms on a basis of equality.

- Overarching objectives:**
1. Enabling women and girls to cope and recover from experiences of violence and abuse
  2. Ending violence against women and girls
  3. Ensuring women and girls have the opportunity to enable them to attain their full development and advancement

**Key Themes:** Prevention, Early Intervention, Protection, Provision, Stability, Resource Development, Resilience, Autonomy, Leadership, Voice.

**1** **DOMAIN 1: SAFETY**  
**Objective:** Women and children's rights to safety and justice are upheld.

**Key Outcomes:**

- Survivors<sup>1</sup> are safer now and better resourced to remain safe.
- Survivors have increased access to justice.
- Survivors retain/regain sense of autonomy and control.
- Survivors have strong and resilient support networks.
- Survivors believe they can live free from violence.

**3** **DOMAIN 3: STABILITY, RESILIENCE, AND AUTONOMY**  
**Objective:** The full development and advancement of women and girls.

**Key Outcomes:**

- Survivors are working towards regularising their immigration status.
- Survivors have increased financial stability and independence.
- Survivors have more stable accommodation.
- Survivors have increased access to education and employment support.
- Survivors have hope and goals for the future.

**5** **DOMAIN 5: PREVENTION**

**Key Outcomes:**

- Improved awareness and response from cross sector professionals around violence against women and girls (VAWG).
- Children and young people are better educated around healthy relationships and ethics in sexual relationships.
- Schools and employers have improved ending VAWG strategies.

**2** **DOMAIN 2: HEALTH**  
**Objective:** Women and children's rights to the highest attainable standards of physical, sexual, reproductive and mental health are upheld.

**Key Outcomes:**

- Survivors develop increased resilience and resources to prevent further experiences of violence.
- Survivors have improved mental and emotional health and resources to maintain good mental and emotional health.
- Survivors have improved physical health and resources to maintain good physical health.
- Survivors have improved sexual and reproductive health and resources to maintain good sexual and reproductive health.
- Survivors have enhanced sense of agency around sex and relationships.

**4** **DOMAIN 4: CHILDREN**  
**Objective:** Children's rights to safety and family life are upheld.

**Key Outcomes:**

- Child survivor/s are safer and better resourced to remain safe.
- Adult survivors are better resourced around parenting.
- Adult and child survivors are reunited.

**Objective:** End violence against women and girls.  
**Objective:** Women and girls' voices are heard.

- Increased platform for women and girls to address root causes of VAWG.
- Increased ability to identify and respond to emerging survivor needs.
- Children and young people have a deeper understanding of issues around power and control in relationships and society.

<sup>1</sup> Unless otherwise written, 'survivor' refers to adult survivors



# Summary: Women's Aid Federation of England

women's aid  
until women & children are safe

## National Accredited Quality Standards

for services supporting women and children survivors of domestic violence

The Women's Aid Standards form a set of accredited criteria through which dedicated specialist services addressing domestic violence perpetrated against women and children can evidence their quality.

### Principles

- ▶ The core outcomes for services are prevention of violence against women and girls, and safety and lasting recovery for survivors.
- ▶ Promoting recovery for women and children survivors involves building stability, resilience and autonomy and requires a multi-faceted and needs-led response within a feminist and human rights framework.
- ▶ Domestic violence is a gendered form of violence<sup>1</sup> and is both a cause and a consequence of women's inequality. Men are the abusers in most incidents of domestic violence<sup>2</sup> and form the overwhelming majority of perpetrators of domestic homicide, including child homicide. Gender is therefore the most significant risk factor for domestic violence<sup>3</sup>.
- ▶ An understanding of the complex dynamics of gender is vital to prevention and to building effective responses to survivors<sup>4</sup>.
- ▶ The impacts of abuse on survivors are exacerbated by additional structural inequalities of race, social and economic class, sexual orientation, ability and age.
- ▶ Power and control dynamics operate through silencing, isolation and internalised oppression and will transfer from individuals into organisations unless transparent democratic structures are in place.
- ▶ Recovery and rebuilding of lives for women and children survivors is facilitated in women-only spaces and environments of mutual respect.
- ▶ The recovery of women and children survivors is best promoted by dedicated specialist women's services working in partnership to offer complementary services, while valuing and supporting each other's specialisms.
- ▶ The experiences and needs of male victims differ from those of female victims and are best met in dedicated specialist men's services, not by specialist services for women and children.

1 Convention on the Elimination of All Forms of Discrimination against Women Committee, General Recommendation 19, Article 1 (11th session 1992, Preamble, Council of Europe Istanbul Convention 201).

2 Walby, S and Allen, J (2004) *Home Office Research Study 276, Domestic violence, sexual assault and stalking: Findings from the British Crime Survey*, Home Office Research, Development and Statistics.

3 Stark, E and Flitcraft, A (1996) Preventing Gendered Homicide in Stark and Flitcraft, *Women at Risk: Domestic Violence and Women's Health*. Sage.

4 Respect (2008) *Respect position statement: gender and domestic violence*.



---

## The Standards

### 1. Safety, security and dignity

The organisation offers prompt targeted responses within a safe environment, maximising service user engagement and reducing short and medium term risk.

### 2. Rights and access

The organisation promotes equality and diversity and operates within a human rights framework, ensuring access for those most in need and maximising disclosure and recovery.

### 3. Physical and emotional health

The organisation addresses the immediate and longer term physical and mental health needs of service users, reducing their need to access health services in the future and promoting long term recovery and well-being.

### 4. Stability, resilience and autonomy

The organisation supports service users to develop stability, resilience and a sense of agency for their lasting independence and recovery, and to prevent future harm and need for services.

### 5. Children and young people

Where services are delivered to women with children, or to young people, the organisation addresses the safety, educational and health needs of children and young people living with domestic violence and its effects, reducing their need for services in the future and equipping them to move on to adult lives free from violence.

### 6. Prevention

The organisation works in partnerships to challenge social tolerance of gender inequality and domestic violence and improve responses to survivors in order to reduce the long term prevalence of violence against women and girls.

### 7. Accountability and leadership

Transparent decision-making and meaningful service user involvement secure the trust and engagement of service users and achieve positive long term outcomes for women and children.



# Summary: Imkaan Accredited Quality Standards

*imkaan*

for services working with black and minority ethnic women and girls and harmful practices: forced marriage, female genital mutilation and 'honour-based' violence

---

The Imkaan Accredited Quality Standards (IAQS) for working with violence against black and minority ethnic (BME) women provide a quality framework that captures the expertise and on-going development of specialist BME violence against women and girls (VAWG) organisations. They focus on specific forms of violence that disproportionately affect BME women and girls and are sometimes referred to as 'harmful practices', specifically forced marriage, female genital mutilation and 'honour-based' violence, and are also applicable to all forms of violence against women and girls experienced by BME women.

The Imkaan Accredited Quality Standards were successfully piloted in January 2014 and the full standards were officially launched in March 2014.

## Key elements

- ▶ Quality
- ▶ Equalities & human rights
- ▶ Specialist BME VAWG services
- ▶ Harmful practices set within the wider context of VAWG
- ▶ Standardisation
- ▶ Expertise
- ▶ Accreditation

## The Standards

### 1. Knowledge

**Standard outcome:** The agency demonstrates appropriate knowledge and approaches to violence against women and girls within an equality framework that understands and recognises the impact and dynamics associated with forced marriage, female genital mutilation and 'honour-based' violence as harmful practices and forms of violence against black and minority ethnic women and girls.

### 2. Needs assessment

**Standard outcome:** The agency provides formalised approaches to identifying, assessing and managing overall need within a holistic continuum, and prioritises particular safety aspects for staff and service users, including risk assessment methods that integrate and respond to the complexities of community, familial and multiple perpetrator risk.

---



---

### 3. Woman-centred

**Standard outcome:** The agency adopts a woman-centric approach and promotes the gendered context of forced marriage, female genital mutilation and 'honour-based' violence as harmful practices and forms of violence against women and girls. Agency also ensures refuge provision, advocacy, support, outreach and other services are provided for BME women and girls and staffed by BME women within a safe, woman-centred environment.

### 4. Ethnocultural relevance

**Standard outcome:** The agency's services are appropriate and accessible to the diversity of black and minority ethnic women and girls. Service provision recognises the implications and impacts of colonisation and patriarchy, and demonstrates an understanding of the impact of racism and discrimination in the lives of women and girls within the context of violence.

### 5. Case management and support

**Standard outcome:** The agency provides independent support and/or case management that recognises the particular barriers faced by black and minority ethnic women and girls who experience harmful practices and forms of violence that impact on their overall well-being and health.

### 6. Prevention

**Standard outcome:** The agency promotes and engages in preventative approaches to harmful practices and violence against black and minority ethnic women and girls, which focus on early identification and intervention, community engagement, training and skills development for all staff.

### 7. Monitoring and evaluation

**Standard outcome:** The agency has a framework in place for consistent effective monitoring and evaluation of black and minority ethnic women and girls experiencing harmful practices to improve detection and ensure the delivery of effective, high quality co-ordinated responses.

### 8. Integrated approaches

**Standard outcome:** The agency actively promotes and participates in multi-agency partnerships or working to ensure appropriate coordinated and effective collaborative responses to harmful practices and violence against women and girls.

### 9. Accountability and governance

**Standard outcome:** The agency provides effective governance and quality service delivery. Management structures and processes should promote effective leadership from black and minority ethnic leaders who are accountable for the agency and the quality of service received by black and minority ethnic service users. In addition, the agency provides support to a skilled staff team and accounts for quality assurance outcomes.



# Summary: The Rape Crisis National Service Standards



for services working with women and girl survivors of any form of sexual violence

---

The Rape Crisis National Service Standards (RCNSS) were developed in recognition of the need to have in place service standards that are specific to sexual violence services, provide a benchmark for excellence and that set out what it is that makes Rape Crisis services different from non-specialist support services. Much of what distinguishes a Rape Crisis approach relates not only to the quality of the services provides, but to the value base and feminist ethos which underpins all of the work.

The RCNSS were piloted by three Rape Crisis Centres and were the subject of a robust consultation process with the network of member Centres. An online self-assessment tool has been designed and built to support Rape Crisis Centres as they work towards meeting the RCNSS. This was also piloted by three Centres.

## Core principles underpinning the standards

- ▶ Understanding sexual and domestic violence and its impact. Organisations demonstrate an appropriate and informed approach, relevant to their service users, that recognises and understands the dynamics and impact of sexual violence, within an equalities and human rights framework.
  - ▶ Safety, security and dignity. Organisations ensure that all interventions prioritise the safety, security and dignity of service users and staff/volunteers.
  - ▶ Diversity and fair access to services. Organisations respect the diversity of service users and positively engage in anti-discriminatory practice, and service users are supported and assisted to access services on an equitable basis.
  - ▶ Advocacy and support. Organisations provide independent institutional/individual advocacy and/or support to promote the needs and rights of service users.
  - ▶ Empowerment and participation. Organisations promote empowerment and self-help to enable service users to take control of their lives and inform the delivery and development of services.
  - ▶ Confidentiality. Organisations respect and observe service users' right to confidentiality and all service users are informed of situations where that confidentiality may be limited.
  - ▶ A co-ordinated, multi-agency response. Organisations operate within a context of relevant inter-agency cooperation, collaboration and coordinated service delivery.
  - ▶ Challenging social tolerance of sexual and domestic violence and holding perpetrators accountable. In all aspects of what they do, organisations challenge social tolerance of sexual violence and work from the core belief that it is preventable.
-





- 
- ▶ Accountability and governance. Management is effective so that users receive a high quality service from appropriately skilled staff.

## The RCNSS are divided into nine sections:

### 1. Organisational requirements

Relates to key areas of an organisation's compliance with the law.

### 2. Values

About the principles and ethos that underpin the organisation's work with service users and the wider community.

### 3. Strategy and governance

About longer-term planning and financial sustainability for the whole organisation.

### 4. Managing services

About planning, defining, monitoring and evaluating individual services.

### 5. Working with service users

Describes ways of working with individual service users and how Rape Crisis values and principles are incorporated.

### 6. Protecting service users and staff/volunteers

About taking steps to safeguard those who use and deliver your services and how you handle information about them.

### 7. Diversity, equality and access

About how the organisation works with diverse service users and staff/volunteers in ways that maximise accessibility of its services.

### 8. Service user involvement and participation

About responding to feedback from service users and involving service users in decision-making in order to develop services, policy or practice and influence social change.

### 9. Developing the organisation

Covers role definition, training, support, supervision and appraisal of staff and volunteers, both individually and collectively.



# Guidance for Commissioners

---

The Imkaan and Women's Aid Capacity Building Partnership has developed a National Quality Framework for services addressing violence against women and girls and a package of support for commissioners who wish to ensure that services addressing violence against women and girls, including intimate partner violence, forced marriage, honour based violence and female genital mutilation, are of sufficient quality to deliver long term improvements in their area<sup>1</sup>.

This guidance outlines the core minimum standards we recommend for the provision of services supporting women and children survivors of violence against women and girls. They have been developed in line with the Home Office strategy, 'A Call to End Violence Against Women and Girls'<sup>2</sup> and the Ministry of Justice 'Victims' Service Commissioning Framework'<sup>3</sup>.

In the 2009 cross-government consultation on the Home Office strategy, the Women's National Commission recommended that:



*Women's services that are independent of statutory provision and that specialise in responding to violence against women need to be available in every area. These services need to be accessible for the most marginalised and vulnerable women, and provide timely, safe services that respond to complex and multiple needs, which focus on women's safety and empowerment without labelling or judging women or limiting the service to times of crisis or high risk.<sup>4</sup>*

The standards below reflect this vision and are based on the Council of Europe Minimum Standards for Violence Against Women Support Services<sup>5</sup> and the Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence (Istanbul Convention)<sup>6</sup>.

- 
- 1 As an Imkaan and Women's Aid resource, this National Quality Framework does not address the detail of commissioning sexual violence services outside of intimate partner relationships, although some summary information is included. When funding services to meet the needs of survivors of sexual violence, commissioners should seek the expertise of Rape Crisis England & Wales.
  - 2 Home Office (2013) *A Call to End Violence Against Women and Girls: Action Plan 2013*. London.
  - 3 Ministry of Justice (2013) *Victims' Services Commissioning Framework*, London.
  - 4 Women's National Commission (2009) *Still we rise: Report from WNC Focus Groups to inform the Cross-Government Consultation "Together We Can End Violence Against Women and Girls"* WNC, London.
  - 5 Council of Europe (2008), *Combating violence against women: minimum standards for support services*, Strasbourg.
  - 6 Istanbul Convention (2011), Articles 22, 23, 24, 25.



## I. Funding

- ▶ National and local governments should have identified funding streams for violence against women and girls services.
- ▶ National and local governments should have identified funding streams for specialist services for the most marginalised groups, including BME women, disabled and lesbian, bisexual and transgender women, and identified funding streams for work with children and young people affected by domestic abuse.
- ▶ Provision should be funded on the basis of enabling survivors to access safety from perpetrators, regardless of local or regional boundaries, and should not restrict access on residence criteria.

## 2. Distribution of provision

The following are aspirational benchmarks based on the Council of Europe Minimum Standards for support services<sup>7</sup>. Women's Aid will be conducting research with services across England in 2014 and will issue specific evidence-based recommendations for England later in the year:

<b>Refuge provision</b>	At least one specialist violence against women refuge in every urban centre or region
<b>Family spaces in refuge</b>	One per 10,000 women
<b>Violence Against Women Helpline</b>	One helpline in every region
<b>Rape Crisis Centre</b>	One per 500,000 women
<b>Sexual Assault Centre</b>	One per 500,000 women

Where the need is identified, this should also include specialist services for victims of forced marriage, 'honour-based' violence and female genital mutilation.

<sup>7</sup> Council of Europe (2008), *Combating violence against women: minimum standards for support services*, Strasbourg



### 3. Nature of provision

- ▶ Services are independent of statutory provision.
- ▶ Services in women's refuges, outreach services, and sexual violence services to female service users should be provided by female staff.
- ▶ Services should ensure the safety of service users, staff and volunteers and offer secure women-only spaces.
- ▶ There should be 24 hour access to a phone referral line for all women who need help.
- ▶ Refuge service should not be restricted to service users from specific geographical areas but should allow survivors to travel the distance needed to be safe from their abusers in order to contribute to an effective national network of refuges.
- ▶ Specific tailored services should be provided to survivors of sexual violence. These are best provided by independent dedicated specialist sexual violence organisations.
- ▶ All services should be provided in comfortable environments with space available for confidential support.
- ▶ Specific tailored services should be provided for BME women and women with other additional needs.
- ▶ Services for BME women and other groups with specific additional needs should be led and managed by women from those groups or identities.
- ▶ Services should be holistic, and include
  - legal advice/advocacy;
  - practical support;
  - information and referral;
  - assistance with compensation.
- ▶ Service providers should be mindful of the needs of children of service users and their specific responsibilities with respect to girls and young women.
- ▶ The experiences and needs of male victims differ from those of female victims and are best met in dedicated specialist men's services, not by specialist services for women and children.

### 4. Training

Staff should be appropriately qualified and trained:

- ▶ Minimum initial training and minimum levels of ongoing training should be part of employment contracts.
- ▶ Initial training should include understanding of the gendered dynamics of violence, awareness of the different forms of violence against women, anti-discrimination and diversity, legal and welfare rights.
- ▶ This standard also applies to all relevant professionals in statutory and voluntary agencies. Specialist women's organisations working to address violence against women and girls should lead delivery of this training and be paid appropriately.



# 20 Questions for Commissioners of Services for Women Experiencing and Escaping Violence<sup>1</sup>

## About the process

- 1 How have the commissioning process and documents been informed by an understanding of local need and the existing specialist knowledge and skills in the locality developed to meet that need?
- 2 Which frontline specialists in violence against women are you consulting during the commissioning process to identify local needs and the range of current provision?
- 3 Which other commissioning bodies are you consulting during the commissioning process to know what other services are likely to be available?
- 4 What research has informed your understanding of the needs of different groups of survivors and the evidence base for different interventions?
- 5 What do service users from marginalised or socially excluded groups say about how best to meet their needs?
- 6 What is your price – v – quality ratio?
- 7 What help will you give to tenderers to ensure a level playing field, particularly for smaller specialist providers, including those led by marginalised groups? Are you allocating specific provision for BME women and girls in line with your locality demographics?
- 8 What support are you providing for the development of partnerships, alliances or consortia to preserve diversity, expertise and specialisms?
- 9 What will be the lead-in time for the successful bidder to begin to achieve the results sought?
- 10 What are the objectives for the service and how does the commissioning model used (competitive tendering, grant-making, other) specifically support achievement of these objectives?
- 11 Have the long-term cost implications of any reductions in funding been considered?

<sup>1</sup> This list is an amended version of that first produced by Anthony Wills of Standing Together for the APPG on Domestic and Sexual Violence on 9th September 2013.



## About the services

- 12** Are the organisations who are bidding for the contract active<sup>2</sup> members of their national professional, specialist violence against women bodies, e.g. Women's Aid, Imkaan and Rape Crisis England and Wales? Does your commissioning area contain an existing BME service?
- 13** What evidenced track record do organisations bidding for the contract have of meeting the specific holistic needs of service users in the locality?
- 14** What feedback is available from service users who are survivors of violence about the organisations bidding?
- 15** Is the primary purpose of the bidding organisation to address violence against women and girls?
- 16** What evidenced track record do the organisations bidding have of enabling survivors from more marginalised, less visible/heard or poorly served communities to access their services?

## About the impact of tendering

- 17** What impact might the tender have on local partnerships and working relationships?
- 18** How will existing agencies relate to each other after your decision?
- 19** How will you measure success and review your decision?
- 20** Will the planned contract period allow services adequate time to plan and develop?

<sup>2</sup> Able to demonstrate adherence to the core principles of their national professional organisation and engaged in on-going practice development.



# Developing a Local Violence Against Women and Girls Commissioning Strategy

---

Before embarking on a process to commission specific services for survivors of violence against women and girls (VAWG), commissioners will be involved in a consultation process to develop a local strategy that will identify local need and provide the framework for a strong, resilient and sustainable response to violence against women and girls.

The strategy will incorporate the aims of the Home Office national strategy, 'End Violence Against Women and Girls' to:

- ▶ prevent violence against women and girls from happening in the first place, by challenging the attitudes and behaviours which foster it and intervening early to prevent it;
- ▶ provide adequate levels of support where violence occurs;
- ▶ work in partnership to obtain the best outcomes for victims and their families;
- ▶ take action to reduce the risk to women and girls who are victims of these crimes and ensure that perpetrators are brought to justice<sup>1</sup>.

The local strategy will articulate the common needs and issues experienced by all survivors of VAWG, and the integration of the local strategy into the national network of provision that ensures women and children can find safety away from perpetrators in any part of the country necessary to preserve life and prevent harm<sup>2</sup>.

## Contents of the strategy<sup>3</sup>

The strategy is likely to include:

1. Purpose
2. Audience
3. Approach and context
4. Local need, identified through consultation
5. Priorities
6. Delivering the strategy
7. Relationships with voluntary and community organisations
8. Legal duties
9. Evaluating the strategy / measures of success

---

1 Home Office (2014) *A Call to End Violence Against Women and Girls: Action Plan 2014*.

2 Bowstead J. (2013) *The extent and implications of women's forced migration journeys to escape domestic violence*. London: Metropolitan University.

3 Based on the Essex Voluntary and Community Sector Commissioning Strategy 2013-16.



## Purpose

A strategy is needed:

- ▶ to establish a consistent, multi-agency approach to commissioning services for women and girls escaping violence and the provision of support to survivors;
- ▶ to clarify how the future commissioning landscape will operate with co-ordination between commissioners;
- ▶ to devolve control and power to survivors so they can make use of all public assets to make the journey from coping with violence to recovery from abuse;
- ▶ to support innovation and meaningful survivor involvement within service provision;
- ▶ to support the development of community capacity, whilst recognising the need for continued support for evidenced core VAWG services;
- ▶ to ensure that commissioning of VAWG organisations is transparent, fair and Compact compliant;
- ▶ to ensure alignment between external finance levered-in by the women's sector and the desired outcomes of public sector funding of voluntary and community organisations - very often the biggest funders for certain issues of violence against women and girls are the women's sector providers themselves, developing pioneering work on child sexual exploitation, trafficking, support for women involved in prostitution and work with survivors of VAWG who are dependent on substances;
- ▶ to influence organisational strategies and action plans that impact on procurement, commissioning and engagement between the sectors;
- ▶ to achieve strategic relationships rather than outline an operational plan for local implementation.

## Audience

The strategy is intended for use by the public sector and voluntary and community sector, including:

- ▶ commissioners and funders of public sector services;
- ▶ voluntary and community sector organisations working to prevent, address, and support survivors of, violence against women and girls;
- ▶ organisations providing capacity building, development and support to the voluntary and community sector;
- ▶ local business organisations and groups;
- ▶ elected councillors and politicians.





## Approach and context

Commissioning can be understood as an on-going process divided into four broad activities:

1. Identify and quantify service user needs for the general population in an area.
2. Align and plan resources to meet needs.
3. Secure an appropriate solution.
4. Evaluate the impact and lessons from the process.

The commissioning strategy will be informed by a number of key developments, including local Compacts, Domestic Homicide Reviews, public health strategies, and national violence against women and girls and victims' services strategies and will be informed by local and national research on:

- ▶ the number of women and girls likely to be experiencing abuse in the area<sup>4</sup>;
- ▶ demographics of the population and thus the estimated demographic of need;
- ▶ patterns in reported police figures;
- ▶ research into the impact on outcomes of support from services led by and for women<sup>5</sup> including women with protected characteristic such as black and minority ethnic (BME) women<sup>6</sup>.

## Local need

Commissioning is outcome focused, with the needs of service users and their families at its core and not the needs of service providers. It sets out a framework for deciding how best to deploy resources strategically in order to achieve objectives, making best use of the strengths of the statutory, voluntary and private sectors. However commissioners recognise that service providers have a full part to play in developing innovation and co-commissioning, particularly where they are close to the end user, are survivor-led and have a dual role in advocacy and service provision. In developing the strategy the public sector engages the local VAWG sector in the commissioning process by:

- a) carrying out consultation events to identify emerging needs with:
  - ▶ existing service user forums, including specific groups of BME women and girls;
  - ▶ dedicated specialist providers of violence against women and girls services;
  - ▶ other local women and children's specialist health, advice and community organisations;
  - ▶ other local voluntary and statutory partners such as children's services, health services and specialist police units.

4 This figure can be arrived at using the Home Office Violence Against Women and Girls Ready Reckoner.

5 Nicholles N. and Whitehead S. (2012) *Women's Community Services: A Wise Commission* London: Nef.

6 Women's National Commission (2009) *Still we rise: Report from WNC Focus Groups to inform the Cross-Government Consultation, "Together We Can End Violence Against Women and Girls"* WNC.



b) identifying the contribution commissioned service providers will make to the wider environment, including contributions to:

- ▶ multi agency risk assessment conferences (MARACs);
- ▶ multi agency adult and child safeguarding;
- ▶ wider community safety strategies/action plans;
- ▶ multi agency safeguarding hubs;
- ▶ public health strategies;
- ▶ education strategies;
- ▶ environmental policy.

By harnessing survivor-led, customer-focused services in developing the strategy, commissioners will achieve wider social and economic objectives such as higher levels of volunteering, increasing local skills bases, and promoting a greater sense of community ownership of local issues.

In order to remove barriers to engagement in the process experienced by smaller VAWG organisations, especially those led by and those that support marginalised women, such as BME and disabled women, the public sector has a responsibility to support capacity building within the VAWG sector, as it does with the wider voluntary sector, and ensure the infrastructure that supports small organisations is fit for purpose.

## Priorities

The objectives of the strategy are to:

- a) ensure the needs of women and girls who are at risk of, have experienced, or are experiencing violence are met in a way that encourages them to seek help, and meets their needs;
- b) bring coherence and clarity to the commissioning of organisations supporting survivors of VAWG;
- c) ensure organisations supporting survivors of VAWG, as part of the local voluntary sector, are able to comment on and influence public sector strategies, in order to develop reliable and robust strategies that reflect community needs;
- d) manage and use resources to achieve the delivery of strong, sustainable public services across the area;
- e) create mechanisms to build capacity in the sector creating a sustainable and diverse women's voluntary and community sector that is equipped to meet future challenges;
- f) ensure a fair and equitable commissioning framework that reflects competing priorities;
- g) ensure transparency and accessibility of data covering information about relationships with violence against women and girls organisations.



## Delivering the strategy

The public sector will enable the objectives of the strategy to be met by:

- ▶ communicating and committing to deliver its strategic intent;
- ▶ complying with local Compact arrangements and valuing the role of infrastructure organisations;
- ▶ being honest and open about the challenges that lie ahead and finding solutions collaboratively with women's voluntary sector organisations;
- ▶ valuing and respecting the women's voluntary sector, including smaller providers, for what it has to offer;
- ▶ improving communication between sectors;
- ▶ ensuring the length and size of contracts preserves specialism and track record within the sector and local connections with more marginalised groups;
- ▶ encouraging women's voluntary sector organisations to work together where it would be beneficial to do so;
- ▶ weighting for consortia or "supply chains" that sustain specialisms through collaboration and sub-contracting between VAWG providers;
- ▶ being open and transparent with information and proactively sharing where possible, such as upcoming procurement and funding opportunities.

## Relationships with voluntary and community organisations

The strategy seeks to provide a framework for the future relationship between the public sector and the voluntary sector providing services addressing violence against women and girls.

Specialist VAWG organisations tend to be small, community-based, service user led organisations, often with little capacity outside frontline service delivery. The strategy will address this through capacity building and infrastructure priorities.



## Legal duties

In recent years, government emphasis on social enterprises has placed the concept of social value at the heart of strategies for meeting communities' needs. New regulations and guidance such as the Public Services (Social Value) Act 2012, the Public Sector Equality Duty (PSED) in the Equality Act 2010, and Best Value Statutory Guidance set the legal framework to achieve this change. The Equality Act 2010 is particularly significant as it identifies the need to “advance equality of opportunity” by taking steps to meet the needs of groups with protected characteristics<sup>7</sup>. Women are identified as a group experiencing discrimination and the act supports the role of women-only services in reducing the discrimination inherent in all forms of violence against women and girls.

## Evaluating the strategy / measures of success

Success should be measured against individual action plans but some generic success measures may include:

- ▶ reference to and use of national outcomes data collection and quality standards generated by the VAWG sector;
- ▶ an increase in involvement and engagement of the VAWG sector in public sector commissioning;
- ▶ capacity building within the VAWG sector, increasing the sustainability of the sector;
- ▶ the voluntary and community sector feel more included in the commissioning process and able to be involved on an equal footing.

## Case Study

Birmingham City Council Public Health Department was tasked with commissioning Sexual Health Services for the city of Birmingham. The specifications for the new £25 million contract were consulted on with specialist providers in secondary care, primary care and the third sector. Birmingham Public Health opened a dialogue with the violence against women and girls groups in the city working in the sexual violence field and the specifications arising from this dialogue included, for the first time, specialist services and pathways for those presenting with experiences of sexual violence, coercion, domestic violence and sexual exploitation. Providers were brought together for the first time to develop new collaborations and engage with a funder that historically in this locality had had no interest or involvement in commissioning VAWG services. This has been a good example of a competitive process managed in consultation with, and influenced by, the specialist VAWG sector.

<sup>7</sup> Equality Act 2010



# Model Tender Document

---

This document is a guide to essential components in designing a tender for services for survivors of violence against women and girls (VAWG) and is intended to be read in conjunction with:

- ▶ Home Office (March 2014) A Call to End Violence Against Women and Girls: Action Plan 2014
- ▶ The National Quality Framework: Background and Context
- ▶ On Track: Women's Paths to Safety
- ▶ Women's Aid Federation of England National Service Standards
- ▶ Imkaan Accredited Quality Standards
- ▶ Rape Crisis England & Wales National Service Standards
- ▶ 20 Questions for Commissioners of Services for Women Experiencing and Escaping Violence
- ▶ Developing a Local Violence Against Women and Girls Commissioning Strategy

## This document provides guidance on:

1. Developing a violence against women and girls strategy
2. Essential service specification
3. Service user outcomes
4. Tender questions

## Context for the tender: violence against women and girls strategy

The tender specification and bid application form are the final stage of the commissioning process and will be preceded by a period of research and consultation on national policy direction and local identification of the needs of women and children survivors of violence and abuse. This will lead to the formation of a local strategy on violence against women and girls, or domestic and sexual violence.

The tender specification will arise from and refer to the local strategy and will commission services to deliver the service user outcomes specified in the strategy. Effective service provision is embedded in the local situation and guided by a local strategy. Please refer to the document, 'Developing a Local Violence Against Women and Girls Commissioning Strategy'.



## 2

### Essential service specification

The commissioner/locality sets out the current model of service provision, reasons for going to tender and the rationale for the changes they want to make, including the benefits to service users and communities, improved effectiveness, ability to evidence impact, etc. of the new model proposed.

**The National Service Standards of Imkaan, Women's Aid and Rape Crisis England and Wales enable the commissioner/locality to outline the standard of service provision they expect, covering the areas of:**

- ▶ Safety, security and dignity
- ▶ Rights and access
- ▶ Physical and emotional health
- ▶ Stability, resilience and autonomy
- ▶ Children and young people
- ▶ Prevention
- ▶ Leadership and accountability

**The description of what will be commissioned is likely to include some of the following, which will include provision delivered by and for BME women:**

- ▶ Refuge
- ▶ Helpline
- ▶ Outreach/floating support, community based advice services
- ▶ Resettlement support service
- ▶ Sexual violence support service
- ▶ Children and young people's service
- ▶ Specialist service for survivors of domestic abuse dependent on drugs or alcohol
- ▶ Specialist services for survivors with complex mental health needs
- ▶ Specialist services for survivors with limited or no English language or literacy skills
- ▶ Therapeutic group work with adult survivors
- ▶ Therapeutic group work with children and young people
- ▶ Volunteering/employment project supporting service users to move into voluntary work, training and employment
- ▶ Childhood sexual abuse support/counselling service
- ▶ Domestic violence counselling service
- ▶ User led support group



The service specification also sets out the requirements with which the provider must comply in the provision of the services to service users. It will include details of the nature of the service(s) to be commissioned and should be read in conjunction with terms and conditions and other schedules. Any favourable position towards consortium bids is outlined here. Any favourable position towards services that are accredited and/or validated by their national professional bodies can also be outlined here.

The commissioner/locality outlines the service user outcomes they would like the service providers to evidence in their track record and to describe how they will achieve and measure in the new contract.

### 3

## Service user outcomes

'On Track: Women's Paths to Safety' provides a comprehensive set of outcomes, grouped under five domains, that survivors have identified as key outcomes they want and need from service providers. It is important to note that not all services will be delivering on all outcomes. A helpline will only be able to evidence one or two of these outcomes where a refuge is able to demonstrate more. The commissioner can ensure realistic application of outcomes to services through consultation with providers and service users.

## SAFETY

**Objective: Women and children's rights to safety and justice are upheld.**

Key Outcomes:

- ▶ Survivors<sup>1</sup> are safer and better resourced to remain safe.
- ▶ Survivors have increased access to justice.
- ▶ Survivors retain/regain sense of autonomy and control.
- ▶ Survivors have strong and resilient support networks.
- ▶ Survivors believe they can live free from violence.



**HEALTH**

**STABILITY,  
RESILIENCE AND  
AUTONOMY**

**CHILDREN**

**PREVENTION**

<sup>1</sup> Unless otherwise written, 'survivor' refers to adult survivors



## HEALTH

**Objective:** Women and children's rights to the highest attainable standards of physical, sexual, reproductive and mental health are upheld.

Key Outcomes:

- ▶ Survivors develop increased resilience and resources to prevent further experiences of violence.
- ▶ Survivors have improved mental and emotional health and resources to maintain good mental and emotional health.
- ▶ Survivors have improved physical health and resources to maintain good physical health.
- ▶ Survivors have improved sexual and reproductive health and resources to maintain good sexual and reproductive health.
- ▶ Survivors have enhanced sense of agency around sex and relationships.

## STABILITY, RESILIENCE AND AUTONOMY

**Objective:** The full development and advancement of women and girls.

Key Outcomes:

- ▶ Survivors are working towards regularising their immigration status.
- ▶ Survivors have increased financial stability and independence.
- ▶ Survivors have more stable accommodation.
- ▶ Survivors have increased access to education and employment support.
- ▶ Survivors have hope and goals for the future.

## CHILDREN

**Objective:** Children's rights to safety and family life are upheld.

Key Outcomes:

- ▶ Child survivors are safer and better resourced to remain safe.
- ▶ Adult survivors are better resourced around parenting.
- ▶ Adult and child survivors are reunited.





## PREVENTION

**Objective: End violence against women and girls.**

**Objective: Women and girls' voices are heard.**

Key Outcomes:

- ▶ Improved awareness and response from cross sector professionals around violence against women and girls.
- ▶ Children and young people are better educated around healthy relationships and ethics in sexual relationships.
- ▶ Schools and employers have improved ending VAWG strategies.
- ▶ Increased platform for women and girls to address root causes of VAWG.
- ▶ Increased ability of agencies to identify and respond to emerging survivor needs.
- ▶ Children and young people have a deeper understanding of issues around power and control in relationships and society.

## 4

### Tender questions

Following basic questions profiling the applicant, the core tender questions will be scored and weighted in accordance with the commissioner/locality's priorities.

A suggested weighting is 20:80 ratio of cost to service quality. The breakdown might be as follows:

Sub Categories	Weightings
Identification of survivor need	7%
Your organisation	15%
Service delivery	20%
Equality, diversity and inclusion	8%
Safeguarding	7%
Monitoring and evaluation	7%
Service user involvement	8%
Added value	8%
Cost	20%



## IDENTIFICATION OF SURVIVOR NEED

### Question 1

Who will your service address?

- ▶ What are the needs of the people you intend to address?
- ▶ How will your service meet these needs?

*Include references to research or evidence that you have used or conducted into the needs of the people you will be working with.*

### Question 1.2

- ▶ How will you ensure people will access your project from across the locality?
- ▶ What existing referral routes/contacts/experience with local networks in each area do you have?

## YOUR ORGANISATION

### Question 2

- ▶ How does your organisation meet all the service principles and ethos outlined below:
  - ▶ Track record of meeting local need
  - ▶ Evidence of added value/social return on investment
  - ▶ Quality partnership/collaborative work
  - ▶ A clear focus on equalities
  - ▶ Survivor-led organisations
  - ▶ An understanding of the gender dynamics of violence
  - ▶ Evident investment in staff and volunteers
  - ▶ Quality assurance measures/accreditations



## SERVICE DELIVERY

### Question 3.1

- ▶ Describe the activities that will be delivered by your project (the outputs) and how these are directly linked to the survivor outcomes listed in the service specification

Proposal to include:

- ▶ the service model;
- ▶ referral arrangements;
- ▶ strategy and plan with key milestones and timescales for implementation;
- ▶ staffing arrangements and support mechanisms for delivery of the outcomes, including how the service user outcomes will be embedded into needs assessment and support planning processes;
- ▶ how the service will effectively engage with and motivate survivors in identifying and working towards their (and their children's) identified outcomes.

Figures should be added (for example, numbers of people, sessions, hours, etc) and you should state if these are per month or per quarter (for example, 'The project will deliver 40 hours of advice to 20 young people at risk of homelessness per month.')

Include the unit cost (number of outputs divided by the total funding sought)<sup>2</sup>.

### Question 3.2

- ▶ How will the service you propose engage within the locality and partner with other providers to best meet survivor needs?
- ▶ How will the service work with other agencies to ensure needs are met out of hours?

Proposals should outline:

- ▶ the service solution to supporting access to emergency accommodation and supporting survivors to remain safely in their own home where possible and chosen;
- ▶ where relevant, how the service will access school/nursery provision within the locality;
- ▶ how the service will link in to local training/education and employment;
- ▶ knowledge of geographic/demographic challenges within the locality and how these will be met – e.g. travel/transport issues;
- ▶ community and cultural specific requirements;

---

<sup>2</sup> There are a number of complexities of unit costing for BME services and commissioners are encouraged to contact Imkaan directly for assistance with unit costing.



- ▶ how floating support will be delivered;
- ▶ how the service will support partners in their work with mental health, substance misuse, identified vulnerable young people, and prevention work in education and community settings;
- ▶ links to Multi-Agency Risk Assessment Conferences (MARACs);
- ▶ links to locally defined Safeguarding Hubs;
- ▶ work and experience with local court;
- ▶ understanding of Domestic Homicide Reviews and local action plans for improvements.

### Question 3.3

- ▶ What is your organisation's record of delivering services to this client group?
- ▶ What experience do you have locally?

### Question 3.4

- ▶ What is your organisation's record of delivering similar activities and achievements?

*Proposals should outline recent (within the last three years) experience of successfully delivering a project of a similar scale and nature including:*

- ▶ *the nature of services provided;*
- ▶ *the dates of the provision;*
- ▶ *the average numbers of service users involved;*
- ▶ *the value of the business;*
- ▶ *the location of the provision;*
- ▶ *the general profiles of the service users.*

### Question 3.5

- ▶ Please set out how the project will be delivered over X years.

*Please include a project plan in the appendices that contain unit costs of the service you propose i.e. number of outputs divided by the total funding sought.*

- ▶ How will the project meet the specific requirements?
- ▶ How will you identify any risks or challenges in achieving this delivery?
- ▶ How will you mitigate these risks or challenges?

*Proposals should outline their health and safety policies and practice with regards to service delivery and buildings.*



### Question 3.6

- ▶ Please describe the staffing structure for the proposed project.

*Please include an organisational chart in the appendices.*

- ▶ What experience/ skills do staff have or need?
- ▶ How will staff be recruited and inducted?
- ▶ How will volunteers be recruited and retained?
- ▶ How will staff (paid and volunteers) be managed to deliver the project effectively?
- ▶ How will you ensure that staff are accountable to the governing body and what commitments will you be making to report achievements and issues to users, funders and management bodies?

## EQUALITY, DIVERSITY AND INCLUSION

### Question 4

- ▶ How will your project help the Locality meet its responsibilities under the Public Sector Duty outlined in the Equality Act 2010?
- ▶ Please include information specifically on access to/by disabled people and your strategy for reaching people with the other protected characteristics and women and children with limited English language skills..
- ▶ How will you know if the service is meeting the needs of people with protected characteristics?

*Proposals should include references to all protected characteristics.*

## SAFEGUARDING

### Question 5

- ▶ Describe your organisation's processes, policies and procedures for assessing and managing the Safeguarding of Children and Adults.
- ▶ How will you ensure your staff are all aware of these policies and procedures and act in accordance with them?

*Proposal should include references to multiagency approaches to safeguarding adults, children and staff and data protection policies and practice.*



## MONITORING AND EVALUATION

### Question 6.1

- ▶ How will you know that change has taken place?
- ▶ How will you measure the changes - what outcomes indicators will be used to measure change?

### Question 6.2

- ▶ How will you monitor and evaluate the project as a whole? What key questions will this address?
- ▶ How will you demonstrate the quality of your services? What accreditations or quality marks have you achieved/ are you working towards?
- ▶ How will you demonstrate improved outcomes through collaborative working with stakeholders and partners?
- ▶ How will stakeholders help shape the delivery of your project?

## SERVICE USER INVOLVEMENT

### Question 7.1

- ▶ How will you support clients to develop and sustain user led groups and activities including the promotion of volunteering and peer support?

### Question 7.2

- ▶ Do you have a written complaints policy and procedure?
- ▶ How will you ensure that clients are aware of it and empowered to use it effectively?
- ▶ How are service users informed about the impact of their input?
- ▶ How will lessons be learned?

*Proposal should include an example of how service user consultation has influenced service provision.*

### Question 7.3

- ▶ How will service users be supported to engage with policy making and service-development opportunities?



## ADDED VALUE

### Question 8

- ▶ What added value will your project bring to the local area?
- ▶ What partnerships will enhance the service delivery?
- ▶ If a consortium is applying, what will the supply chain be for delivering the contract?

**Successful commissioning: a guide for commissioning services  
that support women and children survivors of violence**

Women's Aid Federation of England  
PO Box 391, Bristol, BS99 7WS  
T: 0117 944 4411 F: 0117 924 1703

E: [info@womensaid.org.uk](mailto:info@womensaid.org.uk) W: [www.womensaid.org.uk](http://www.womensaid.org.uk) [www.thehideout.org.uk](http://www.thehideout.org.uk)

0808 2000 247

Freephone 24 Hour National Domestic Violence Helpline  
(run in partnership between Women's Aid and Refuge)