

HAMPSHIRE COUNTY COUNCIL

Executive Decision Record

Decision Maker:	Executive Member for Public Health
Date:	25 July 2018
Title:	Domestic Abuse Services
Report From:	Director of Public Health

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1. The decision:

1.1. That the Executive Member for Public Health gives approval to spend for Domestic Abuse Victim and Perpetrator Services up to the maximum value of £13,459,800, for a maximum contract term of 7 years (5 years with an option to extend for a period or periods of up to a total of 2 years) commencing on 1 April 2019.

2. Reasons for the decision:

2.1. The public health strategy outlines a key strand of work about reducing the impact of violence for the population of Hampshire.

2.2. It is known that investing in domestic abuse services makes a difference for victims and their families and that for every victim there is a perpetrator. Compared to the number of victims, a small number of perpetrators are participating in prevention and/or behavioural change programmes and a large proportion (approx. 30%) of both victims and perpetrators are repeat cases, whether that is multiple incidents of abuse within one relationship or a perpetrator moving from one relationship to another, resulting in multiple victims over time. Unless perpetrator behaviour is addressed, victimisation will continue.

2.3. The contracts for services will be between the County Council and the commissioned providers. The OPCC and SCC have confirmed that formal approval has been obtained for their funding contribution for the initial 5 year period. A formal legal agreement will be put in place with the Police and Crime Commissioner and Southampton City Council to cover arrangements for the payment of funding contributions over the life of the contract. Both the agreement with partners and the contract with the provider will stipulate that the value of any extension beyond the initial 5 years will be subject to available funding arrangements between the three organisations. The formal legal agreement with partners is expected to be in place prior to the publication of the tender in September and will be concurrent to the contract

with the provider. The contract with the provider will not be signed until the formal agreement with partners is signed.

3. Other options considered and rejected:

3.1. The following options were considered and rejected.

- To no longer fund domestic abuse services.
- To significantly reduce the existing level of funding beyond the expected efficiency savings planned as part of the anticipated savings to the Public Health Grant by 31 March 2020

3.2. Domestic abuse is a significant problem which can affect people from any background, at any age. High prevalence in age groups of people most likely to have dependent children means of course that a large number of children directly affected. We know that children who experience adversities in childhood go on to have higher rates of mental and physical health problems, and evidence suggests that children who see domestic abuse and violence in the home are more likely to become victims or perpetrators themselves.

3.3. The significant reduction or removal of specialist support services will have an impact upon the identification, harm reduction advice, targeted interventions and onward referral to specialist services provided to the residents of Hampshire. This could result in increased physical and emotional distress and an increase in mortality for victims of domestic abuse with associated crime, anti-social behaviour, adult and children's safeguarding issues, housing problems and homelessness which increase health inequalities and lead to higher demand on statutory services.

4. Conflicts of interest:

4.1. Conflicts of interest declared by the decision-maker: None

4.2. Conflicts of interest declared by other Executive Members consulted: None

5. Dispensation granted by the Conduct Advisory Panel: None.

6. Reason(s) for the matter being dealt with if urgent: Not applicable.

7. Statement from the Decision Maker:

Approved by:

Date:

25 July 2018

**Executive Member for Public Health
Councillor Patricia Stallard**