

Report to the National Stakeholder Advisory Group on Sexual Violence and Abuse

Independent Sexual Violence Advisors: Is practice matching expectations?

Feedback from National Seminar, 30th June 2008

Participants

Participants included Service Managers and ISVAs representing 15 agencies (13 in England and 2 in Wales) operating Home Office funded ISVA services.

Summary of Recommendations:

- Standardised job descriptions, person specifications and recommendations on pay scales
- National Occupational Standards linked to pay scales
- Awareness campaign throughout all agencies
- Training developed and delivered by sexual violence and abuse sector agency
- Protocols for joint working between IDVAs and ISVAs
- Maintaining separate roles for IDVAs and ISVAs
- Agreed referral protocols and direct referral routes formally integrating the ISVA role
- A public awareness campaign targeting attitudes and also highlighting access to services
- A formalised ISVA network
 - National ISVA steering group
 - Regional ISVA groups
 - Full range of IT and new media support packages for ISVAs - ISVA webpage, e-bulletin, forum
- Including ISVAs on SOLO/SOIT training would build links and support good practice
- Training for first response officers to ensure appropriate responses and referrals
- Guidance from the Home Office on how much information to share
- A sector champion or National ISVA Champion, funded by the Home Office
- An awareness day for Ministers and Government Officials



Combined totals for feedback from the ISVA survey reveal that half of ISVAs believe that practice is matching their expectations for support for their role as outlined in the Cross Government Action Plan on Sexual Violence and Abuse, Tackling Sexual Violence; Guidance for Local Partnerships; and Police and CPS Protocol: Achieving Best Evidence. A third believe their role is not supported and 16% are unsure of support.

Independent Sexual Violence Advisors – Is Practice Matching Expectations?

The format for the Seminar was based around a presentation on the policy context the ISVA role is set against followed by focus group discussions addressing five key headings:

1. Is practice matching expectations?
2. What is not working?
3. What is working well?
4. Developing the ISVA role
5. Taking ISVA work into 2009

In addition participants were invited to identify issues they wished to be addressed during the course of the seminar, which produced the following list:

- Uniformity in practice
- Sharing positives
- How ISVAs have accessed services
- Transition from IDVA to ISVA
- Sharing intelligence
- Facebook/IT – impact of new media on patterns of sexual exploitation
- ISVA networking
- Pay scales
- Funding
- Evaluation of ISVAs
- Training issues

Government Policy Context

The Seminar focused on the three main policy documents which make reference to the role of the ISVA:

- The Cross Government Action Plan on Sexual Violence and Abuse (April 2007)
- Tackling Sexual Violence: Guidance for Local Partnerships (June 2006)
- Police and CPS Protocol - Achieving Best Evidence CJS (2007)

Cross Government Action Plan on Sexual Violence and Abuse

The Ministerial Foreword to the Action Plan on Sexual Violence and Abuse set out the approach adopted towards tackling sexual violence and abuse as follows:

“The Action Plan on Sexual Violence and Abuse includes work from across the whole of Government, reflecting the wide-ranging implications of these crimes. As members of the inter-departmental Ministerial Group on Sexual Offending, we are committed to working with our delivery partners and stakeholders to ensure the plan’s effective implementation over the course of the coming year.”

With specific reference to advocacy and support, the Action Plan states that the Home Office funded evaluation of Sexual Assault Referral Centres published in 2003 found the **flexible support and advocacy provided by the support worker at St Mary’s SARC, Manchester, to be the “most vital support function” a**

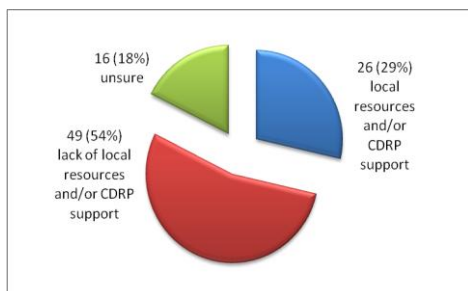
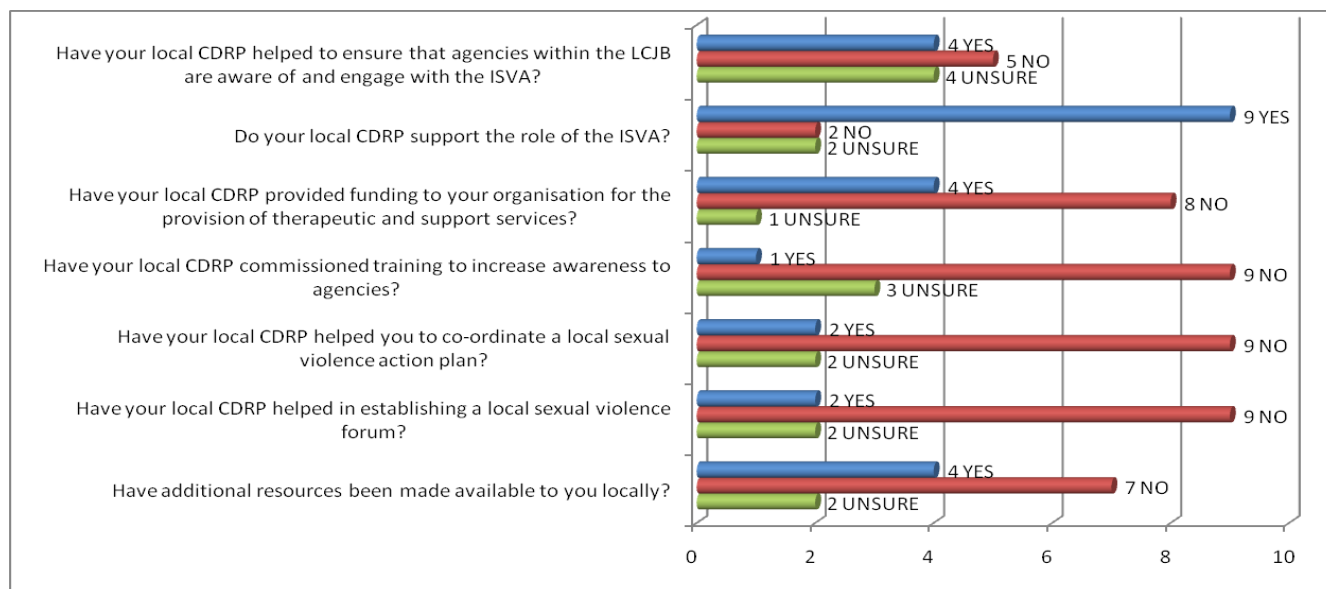
SARC can offer. Clients welcomed the pro-active contact and support and this was associated with reduced withdrawals from Criminal Justice System processes.

The Action Plan further identifies voluntary and community sector organisations as a crucial source of long-term counselling and support for victims of recent and historical sexual violence and childhood sexual abuse. “These groups have first-hand experience of victims’ needs and how these can be met effectively”. Voluntary sector services “are crucial to the delivery of support to victims of sexual violence and childhood sexual abuse. **The expertise and knowledge of the sector should be drawn upon in the development of local strategies and action plans**”.

The Implementation Guide for the Action Plan further states “Although this sector is independent, and not all organisations operate the same services, the purpose of including them in this guide is to illustrate the kinds of activities that the sector can do to contribute to the action plan objectives. Due to significant financial restraints in this specialist sector, **additional resources should ideally be made available locally to enable organisations to contribute to this work.**”

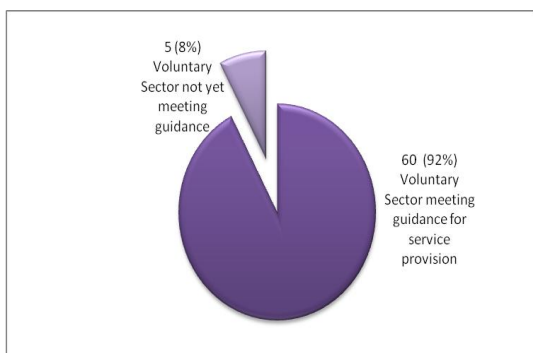
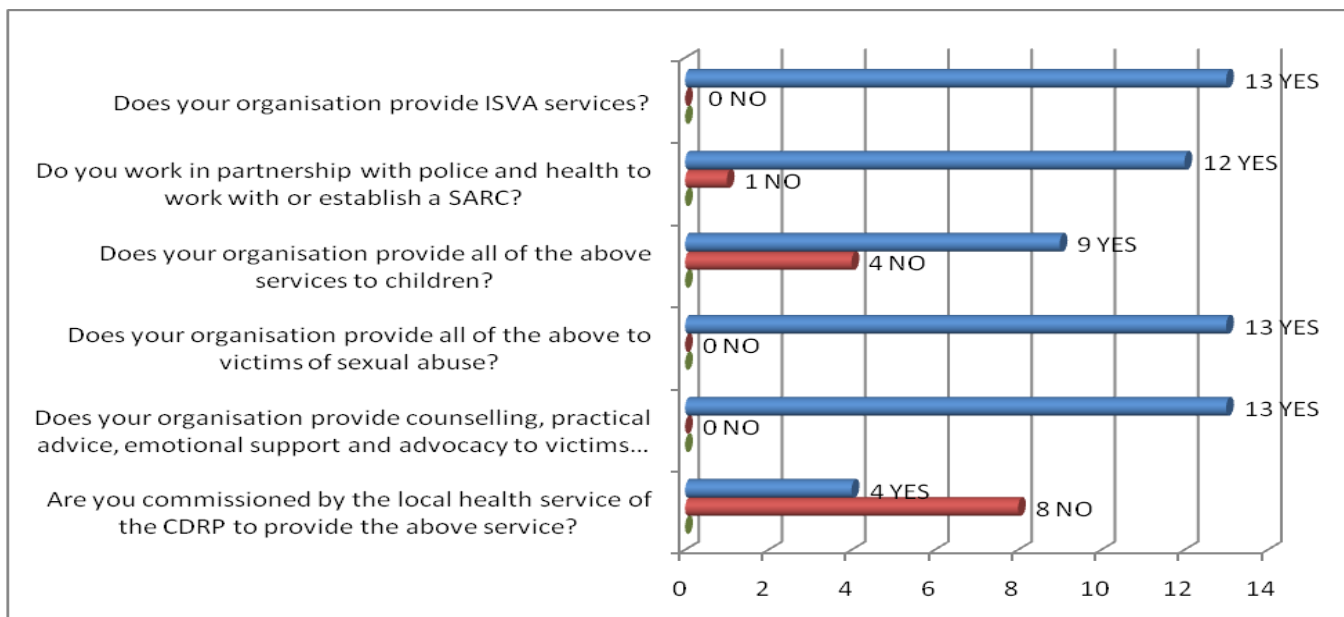
Implementation Guide - Partnerships and Boards (CDRPs/CSPs)

Support for ISVA work from Crime and Disorder Reduction Partnerships



Overall, almost a third of the ISVAs felt that their CDRP is meeting the requirements from the Cross Government Action Plan. Although CDRPs are in the majority of cases very supportive of the ISVA role, the majority do not commission therapeutic and support services or commission training and have not supported a local sexual violence forum or contributed to a local sexual violence action plan.

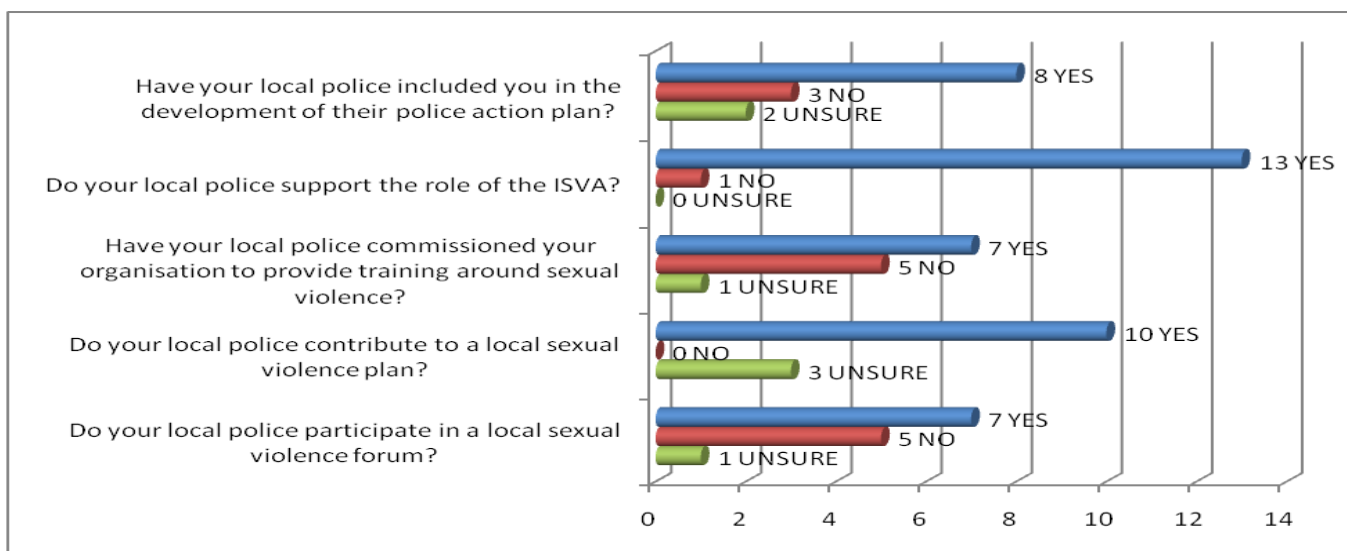
Implementation Guide – Sexual Violence Voluntary Sector (proviso – these actions are suggestions. The Voluntary sector are not required to undertake these actions)

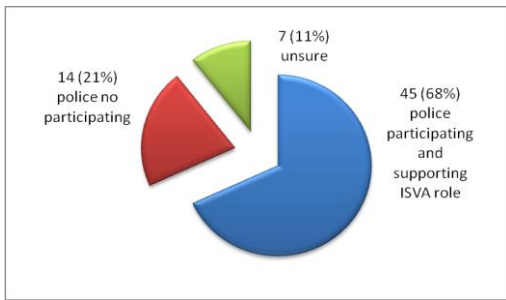


Although the Implementation Guide included the proviso that the Voluntary and Community Sector Actions were not requirements but were only suggestions, feedback indicates that the sector is meeting 92% of the requirements. The main factor affecting this is provision of services to children.

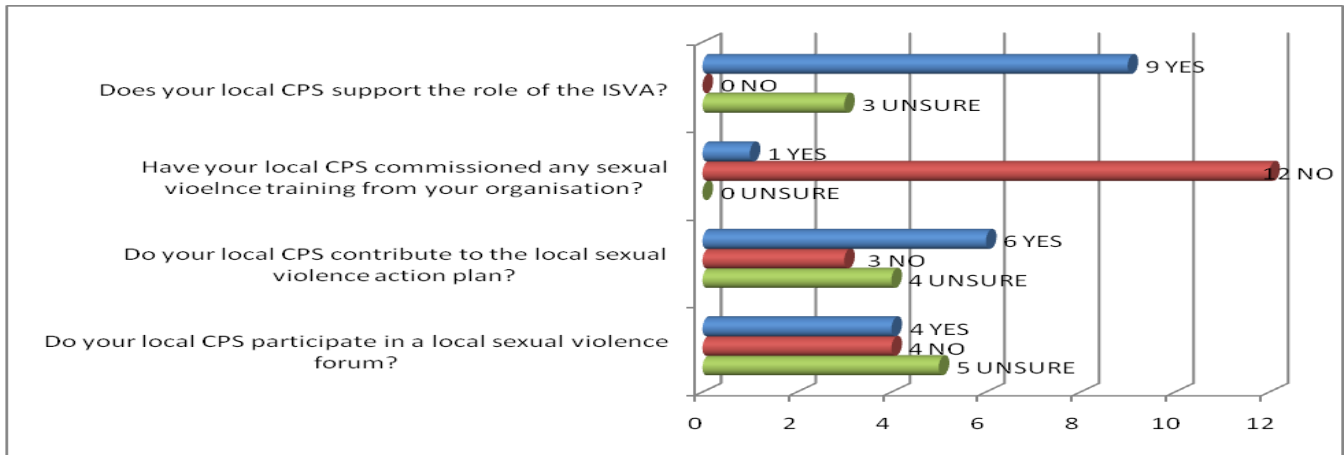
Two thirds of ISVAs indicated that their service is not commissioned to provide services by the local health service or CDRP.

Implementation Guide – Police participation and support for ISVAs

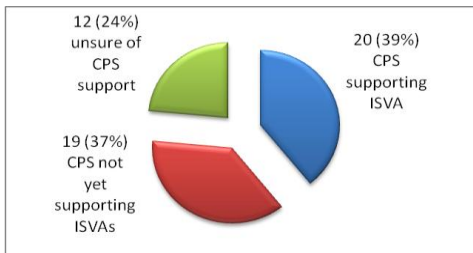




Most ISVAs felt that police support for their role is good, with only one ISVA reporting lack of support. Local police forces were found to be meeting 68% of their actions under the Implementation Guide, notably in contributing to the local sexual violence plan and sexual violence forums. The police are also most active in commissioning training from the sexual violence and abuse voluntary sector.

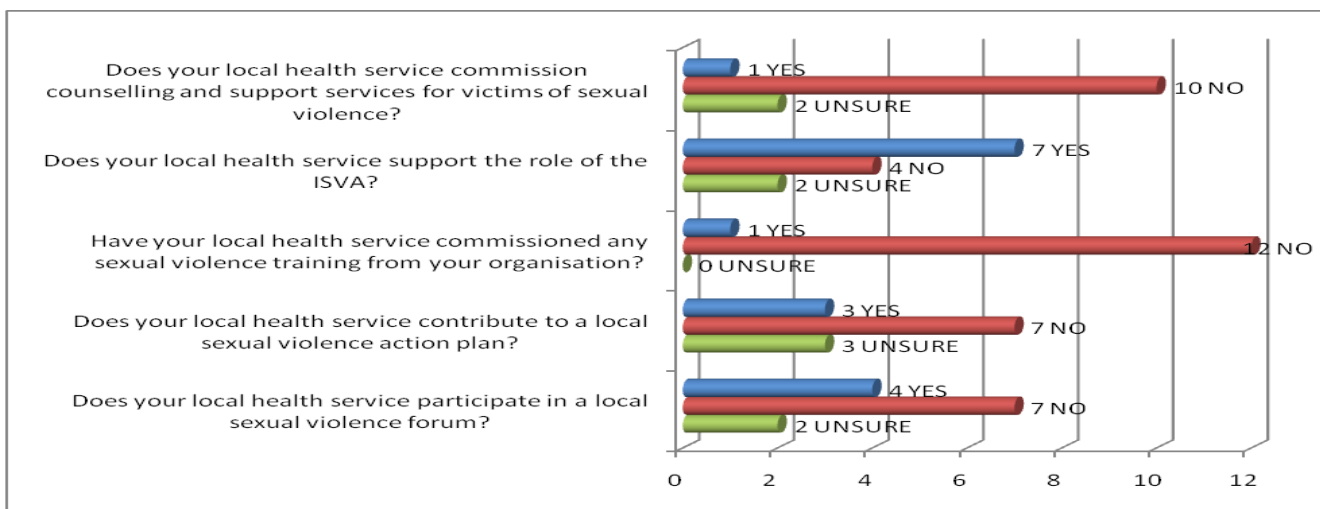


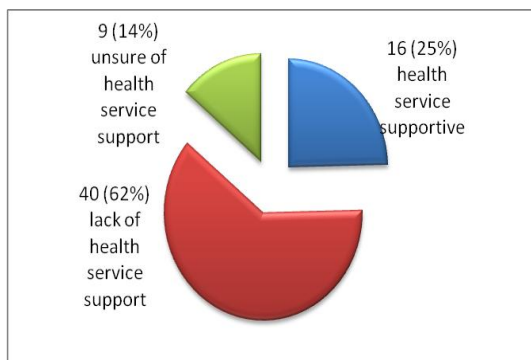
Implementation Guide - CPS Participation and support



Less than half of ISVAs felt that CPS participation and support for their role was meeting the Implementation Guide actions. 37% reported that CPS were not actively participating or supporting their role and a further 24% were unsure of support or participation from CPS. In terms of the role of the ISVA, this is a notably weak area so far.

Implementation Guide - Health Service participation and support

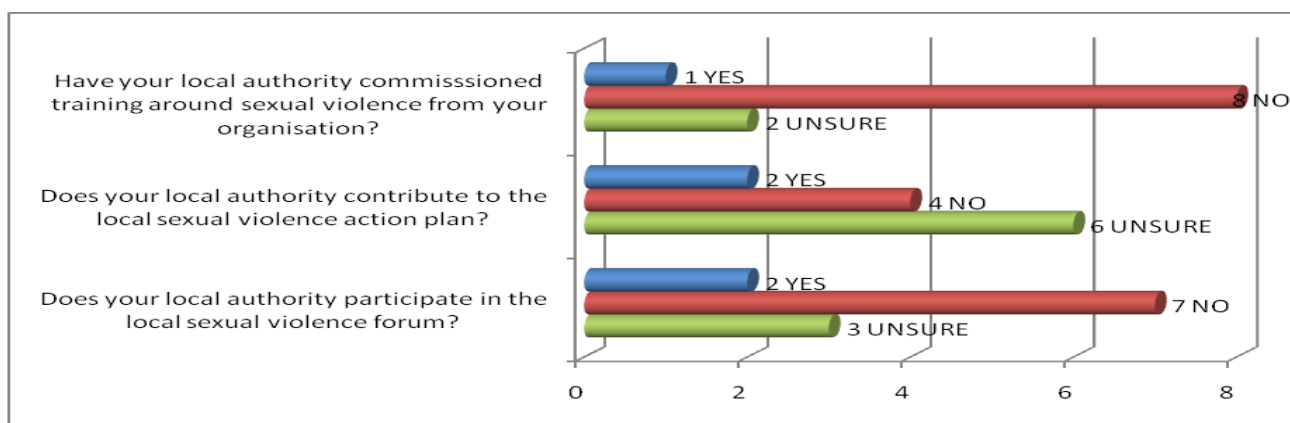




In total, three quarters of the ISVAs reported either a complete lack of health service support (62%) or were unsure of health service support (14%). Two areas specifically highlighted in the Cross Government Action Plan on Sexual Violence and Abuse are the expertise the sexual violence and abuse voluntary sector has in working with victims of sexual violence and abuse, and their crucial role in delivering services. These are unfortunately the two areas where health services are notably least supportive, with only one ISVA reporting commissioning for services or training.

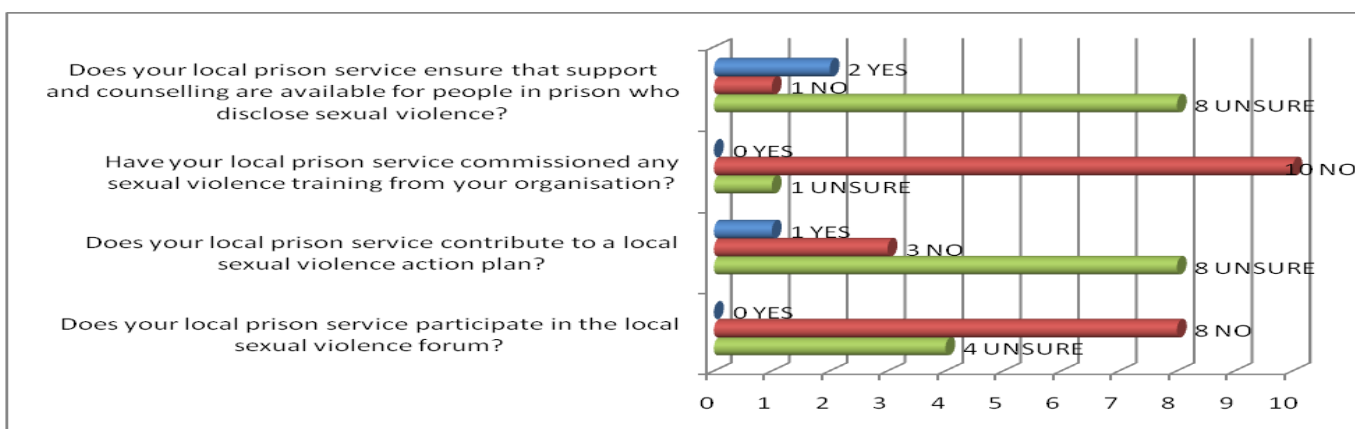
One ISVA commented that although the local PCT is her employer, she has no contact or support from them.

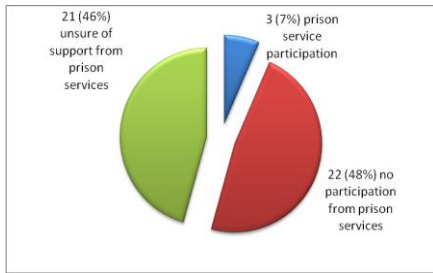
Implementation Guide - Local Authority participation and support



Again, despite acknowledgement of the expertise within the sector, the majority of ISVAs report that their local authorities are not commissioning training. Only two ISVAs stated that their local authority had contributed to the local sexual violence action plan and participated in the local sexual violence forum. Only 5 ISVAs (14%) felt that their local authority was actively supportive of their work.

Implementation Guide - Prison services participation and support

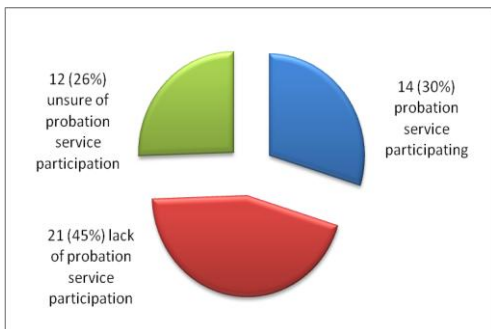
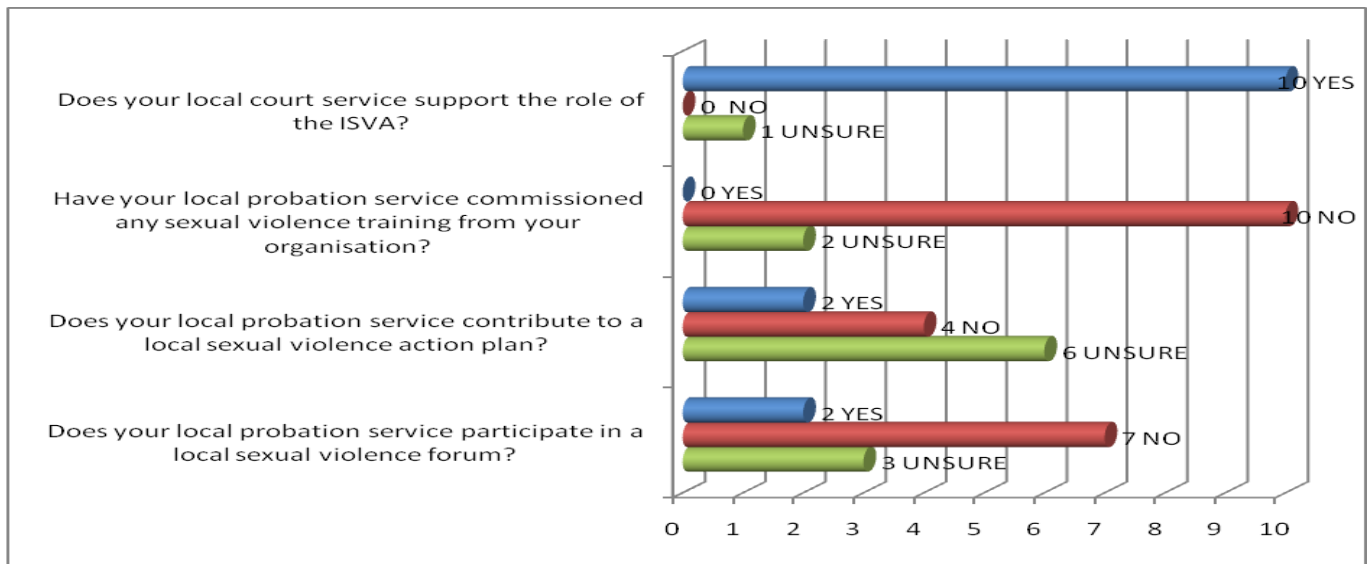




Only 3 ISVAs reported involvement with a local prison service, with only 1 stating that this included contributing to a local sexual violence action plan.

93% of the ISVAs reported either no participation from the prison service or were unsure of their involvement.

Implementation Guide - Probation Service Participation and Support



All but 1 ISVA reported that their local court service supports their role. However, only 2 ISVAs noted probation service involvement in the local sexual violence forum or towards the local sexual violence action plan.

Despite recognised and researched links between sexual violence and abuse and offending (non-sexual) behaviour, prostitution and drug and alcohol related offences, voluntary services are not being commissioned to provide training.

Tackling Sexual Violence – Guidance for Local Partnerships – June 2006

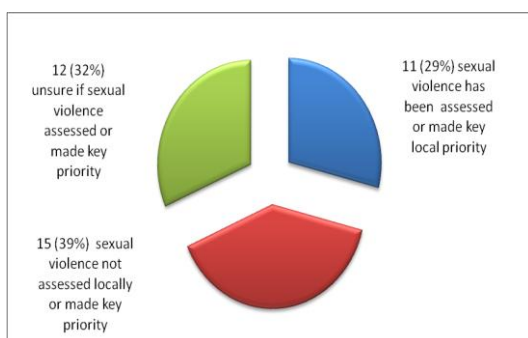
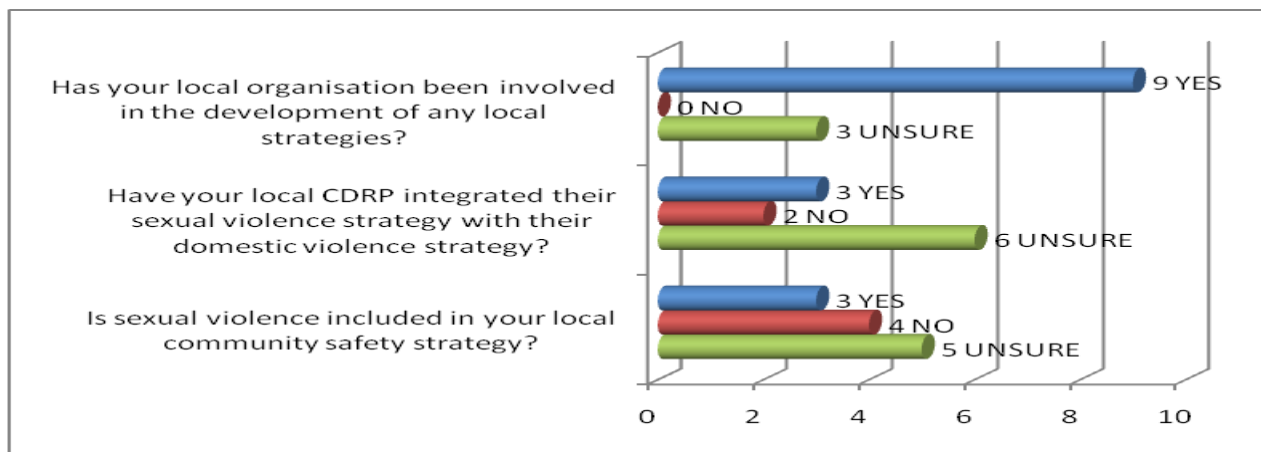
In March 2006, the Government announced a £2.5 million package to tackle sexual and domestic violence, made up of two main components, both of which “require the involvement of local partnerships”. The Guidance identifies the roles of IDVAs and ISVAs and included start-up funding for SARCs. The Guidance for Local Partnerships recommended that sexual violence could have a stand-alone strategy or be included in a wider strategy to combat violence, stating that CDRPs might consider integrating sexual violence strategies with a domestic violence strategy. The Guidance states that voluntary groups should be closely involved in the development and implementation of strategies.

Funding issues are addressed in the Guidance, stating that Partnerships may choose to spend monies from the Safer and Stronger Communities Fund on tackling sexual violence once partners have assessed the nature and extent of sexual violence in their area and have agreed it is a 'key local priority'. Partners involved in tackling sexual violence should ensure they are actively engaged in the process of negotiating and delivery LAAs.

With specific regard to ISVAS, the Guidance for Local Partnerships identifies the development of 'advocacy' services for victims: a clearly designated individual who is responsible for tracking cases and keeping victims informed of developments. It is recommended that Partnerships develop the role of ISVAs either from a similar existing post or by recruiting a suitable individual, using the Home Office funding available.

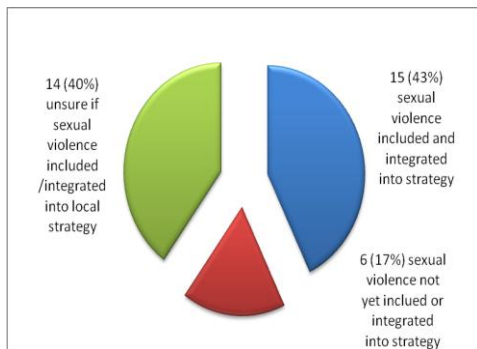
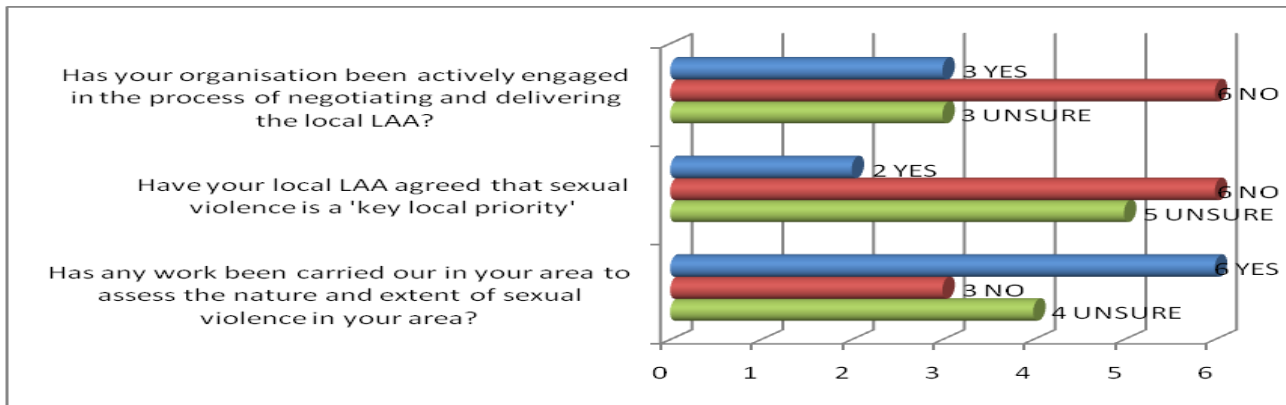
The Home Office ISVA funding was aimed at bringing together existing good practice to develop accredited standards for training and service delivery, build capacity in the sexual violence sector to deliver these services and evaluate their impact.

Tackling Sexual Violence – Guidance for Local Partnerships



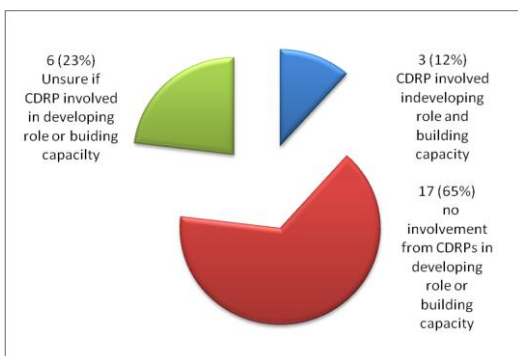
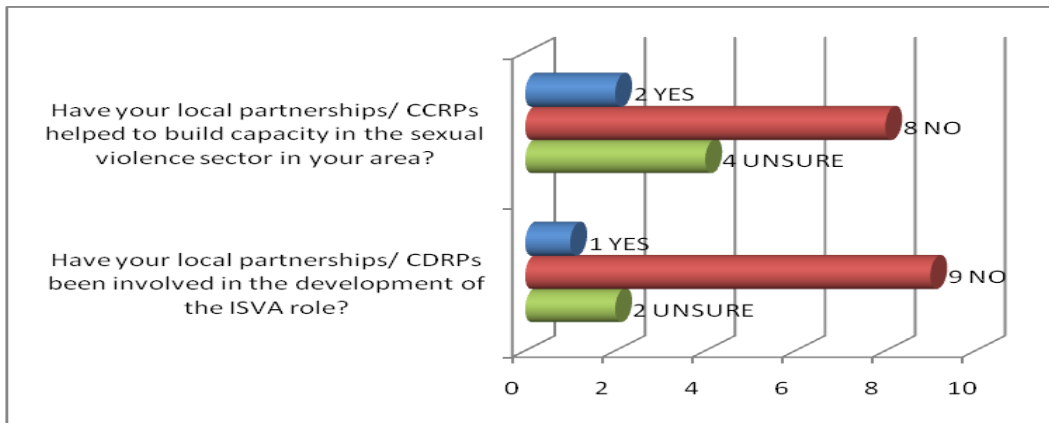
Only 3 ISVAs reported that sexual violence is included in their local community safety strategy, even though 9 ISVAs reported that their agency had been involved in the development of local strategies. 3 ISVAs stated that the CDRP had integrated sexual violence strategy and domestic violence strategy.

Tackling Sexual Violence – Guidance for Local Partnerships - Local Area Agreements – Local assessments/key priorities



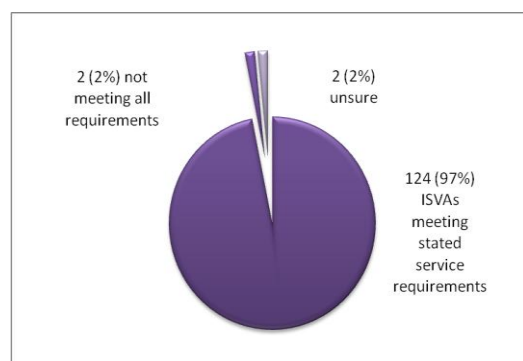
Around half of ISVAs responding said that some work had taken place around the nature and extent of sexual violence in the area. 3 ISVAs reported that their agency had been actively engaged in the negotiations and delivery of the LAA and 2 ISVAs reported that sexual violence has been agreed as a 'key local priority'. There is still a lot of uncertainty in this area, with 17% of those responding still stating that sexual violence is not included in local strategy and a further 17% unsure of its inclusion.

Tackling Sexual Violence – Guidance for Local Partnerships - Guidance for Local Partnerships/ISVAs



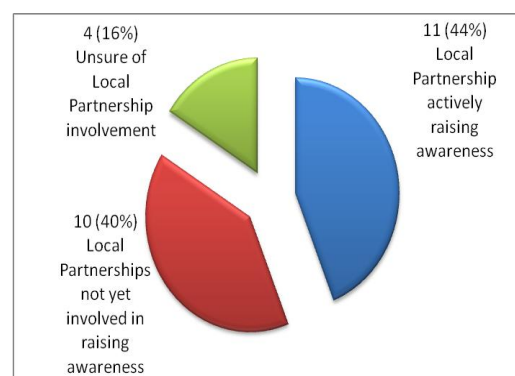
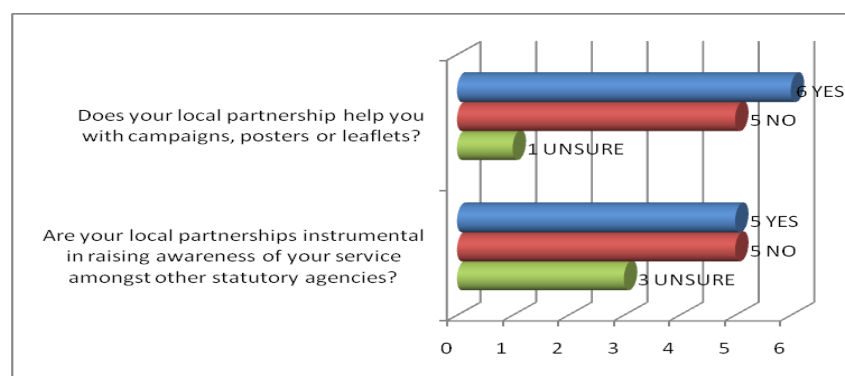
Difficulties with performance indicators and local targets have already been discussed and noted in the Funding Sub-group Report and Recommendations to the Stakeholder Advisory Group. It is still disappointing to note a 65% response rate for no involvement from the CDRP in developing the ISVA role or building capacity, and a further 23% responding that they are unsure of CDRP involvement. An overall rate of 78% reporting either uncertain or no CDRP involvement.

Tackling Sexual Violence – Guidance for Local Partnerships – the role of the ISVA



In contrast to preceding figures, 97% of ISVAs reported that their services are meeting the Guidance for the role of the ISVA. The 3% variation arises where agencies do not provide housing support or are unable to co-ordinate childcare arrangements.

Tackling Sexual Violence – Guidance for Local Partnerships – Local Partnership involvement in awareness raising



Whilst 44% of ISVAs reported that the Local Partnership is actively supporting awareness raising through posters and leaflets, 40% reported no involvement and 16% were unsure of Local Partnership involvement.

Protocol between the Police and CPS in the Investigation and Prosecution of Allegations of Rape (2008) – Achieving Best Evidence

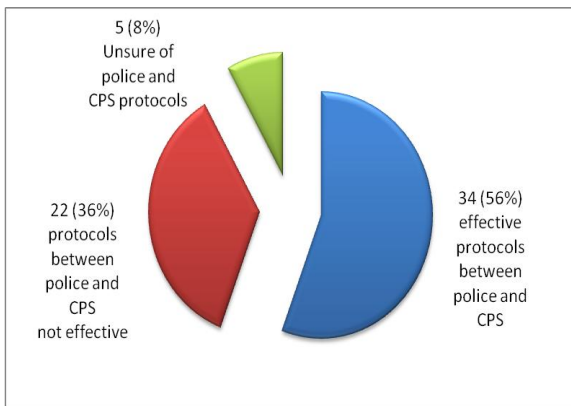
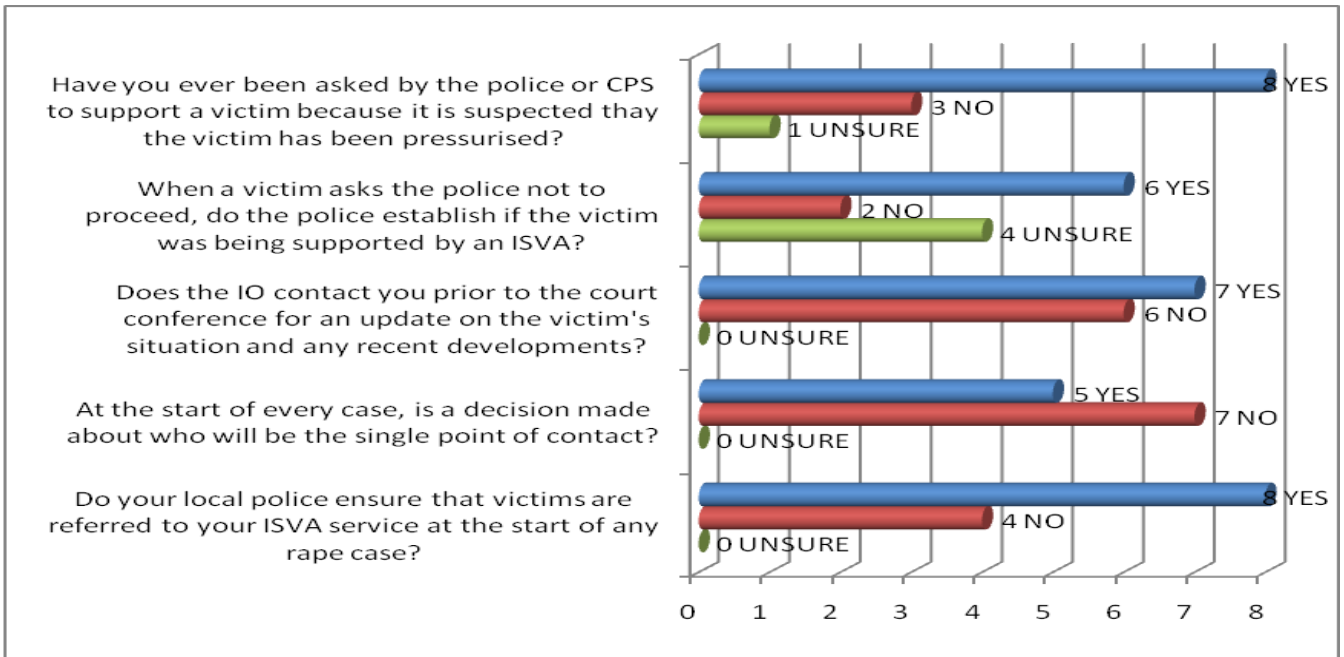
The aims of the Protocol are to ensure national ACPO and CPS policy is reflected locally and ensure that the recommendations of *Without Consent* are adopted:

- To achieve improved and consistent performance in the investigation and prosecution of rape
- To improve the service to, and increase confidence in the Criminal Justice System for victims of rape

With regard to ISVAs, the Police and CPS Protocol states:

- At the start of any rape investigation the police will ensure that victims are referred to local specialist support services including, where available, ISVAs
- In every case that is subject to charge an individual should be identified to provide a single point of contact with the victim including, where available, an ISVA

- A conference with the trial advocate, the rape specialist, the IO, CPS caseworker and the FP (where appropriate) should be held in every rape case. Prior to the conference, the IO will contact the ISVA for an update on the victim’s situation and any recent developments
- When a victim asks the police not to proceed or withdraws the complaint, the police will provide a report that among other things will say if the victim is supported by an ISVA
- If it suspected that the victim has been pressurised or is frightened, the police will investigate further and assess any support that has been offered and whether the intervention of an ISVA could make a difference. The CPS will, if appropriate, ask the Court to delay any hearing to enable this to be done.



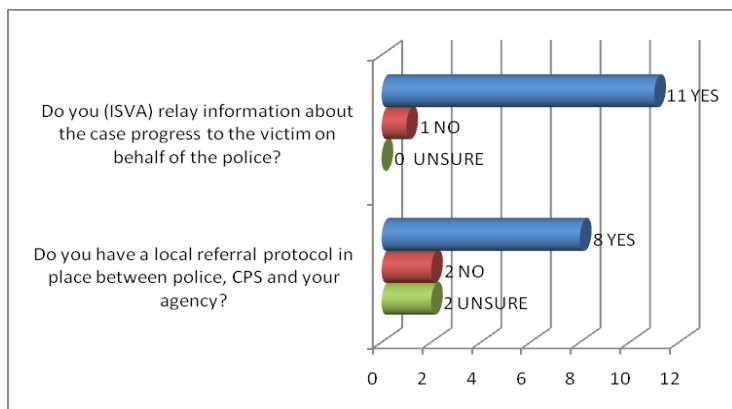
Police and CPS protocols will undoubtedly be improved by the current review. The decision around who will be the single point of contact is where most uncertainty is felt, with more than half reporting that no decision is taken at the outset of a case. In areas where SOITs or SOLO officers are operating alongside Witness Support Services and Victim Support, it can be difficult for an ISVA to establish with other agencies that they are the most appropriate single point of contact.

Overall, 56% of ISVAs reported that the Police and CPS Protocol was effective in their area.

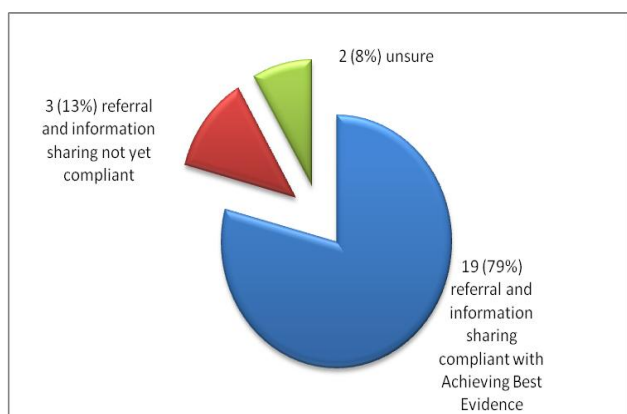
Achieving Best Evidence – Recommendations for Referrals and Information Sharing

The Protocol between Police and CPS recognises that victims of sexual violence and abuse may have multiple support and safety needs. The Protocol states that in areas where there are ISVAs to co-ordinate support and risk management for victims, generally based in voluntary sector organisations, they should be

responsible for the provision of pre-trial visits and support at court. Where local protocols can be agreed, it is recommended that ISVAs are well placed to relay information about the case progress to the victim on behalf of the police and CPS.



Only 1 ISVA reported that they were not relaying information about the case progress to the victim on behalf of the police. Two thirds of the ISVAs stated that a local referral protocol was now in place between police, CPS and their agency.



Overall, the findings of the Seminar were that 79% of ISVAs reported that referral and information sharing protocols are compliant with Achieving Best Evidence.

Consensus Feedback from Small Group Discussions

Definition of ISVA role

Participants agreed on the following definition of the ISVAs role:

- To advise and support through CJS
- To refer across sectors
- To facilitate informed choice for victims

Is practice matching expectations?

- There was general agreement that ISVA practice is mostly matching expectations of the role. However, some differences in pay scales and responsibilities were identified. Some ISVAs support under 18s, others do not. It was agreed that guidelines would be useful. A related question was raised over whether ISVAs are in a position to apply for pay increments.

- Although titled 'Independent' it was felt that Advisors are not actually independent. In particular, if they are managed by an agency or based in a SARC there are often restrictions on practice. Some ISVAs are not allowed to travel with clients or to meet with clients externally.
- Referral pathways are not always clear cut, and knowledge of ISVAs amongst other agencies is variable. Provision of training to other agencies would help with awareness.
- The group noted that the ISVA role takes time to learn in addition to any training attended.
- Some areas have specially trained officers, others do not – this can make a big difference in relation to officers' motivation, attitude and knowledge.
- The group agreed that the impact of the ISVA role is under-estimated.

What is not working?

- Pay and employment conditions were identified as causing most concern. Pay scales are limited by funding availability. Variations in pay scales were reported of up to £10,000 per annum. This is clearly unacceptable for workers undertaking the same roles.
- A major concern was insecurity of ongoing funding. With some cases taking up to 18 months or more to reach court, it is obviously essential that there is continuity in employment to enable an agency to provide ISVA support (and ideally by the same ISVA). In cases where funding is not secured, there is a dual stress experienced both by the victim and the ISVA.
- Lack of funding has meant that many ISVAs have left their initial posts.
- Job descriptions for ISVAs varied between agencies and it was agreed that standardising practice would be helpful. Some ISVAs feel supported by their agency, whilst others do not.
- Agency policies are generally not tailored to ISVA work resulting in differences in practice – some ISVAs meet and travel with clients externally whilst others are restricted in this through agency policies.
- In some areas, Witness Support Services regard ISVA work as duplicating their services and there is therefore confusion over referrals and responsibilities for information sharing and single point of contact.
- Victim Support services, who receive automatic referrals from police, may also regard ISVAs as duplicating their services and therefore do not refer on.
- There is also some confusion over ISVA/SOLO crossover of work, not yet addressed by local protocols.
- Magistrates Courts are not aware of ISVA role.
- Networking between ISVAs was identified as a crucial area of support enabling sharing of best practice, support and back-up.
- Quality sexual violence training was identified as an essential need to develop ISVA work.

What is working well?

- Witness care units.
- Victim focused work with increased levels of support is particularly valued by victims.

Two of the ISVAs had received commendations from their local police authorities for their work supporting victims.

Developing the ISVA role

The Seminar agreed that a key factor in developing the ISVA role is to establish it as a professional occupation. In particular this would assist ISVAs in challenging the practice of other professionals whilst also maintaining positive relationships with other individuals/agencies. Judgemental attitudes continue to cause difficulties.

Some practical issues were seen as important to developing the role:

- Formally integrating ISVAs into CJS
- Awareness of ISVAs throughout all levels police, CPS, health, social services, probation
- Referral protocols
- Direct referral routes (named consultants, PEP, morning after pill)
- Engaging properly with CPS
- Awareness raising for general public with stronger messages than used previously targeting negative attitudes and awareness about accessing services
- Rape champions – information sharing – feed advocacy issues through rape champions not individuals

Taking ISVA role into 2009

Unfortunately, many ISVAs commented that they felt their role was not valued and the statutory sector is seen as 'looking down' on the voluntary sector. Many recommendations therefore focused on standardising and professionalising the ISVA role. The group agreed that developing ISVAs as a professional body/group would support acceptance and integration of the role.

- A standardised job description and person spec for standard ISVA. Job descriptions and person specs for senior ISVAs and/or centre managers.
- National Occupational Standards linked to pay scales.
- A formalised network
 - National ISVA steering group
 - Regional ISVA groups
- Full range of IT and new media support packages for ISVAs - ISVA webpage, e-bulletin, forum
- Sharing intelligence on perpetrators was identified as an important new way of identifying repeat offenders and reducing repeat offences. However, guidance from the Home Office is needed on how much information to share.
- Practice developments are being identified and this process would be supported by a National ISVA Steering Group – for instance, using more than one ISVA to support a family; provision of outreach work, advice clinics.
- A sector champion or National ISVA Champion, funded by the Home Office.
- An awareness day for Ministers and Government Officials. Including ISVAs on SOLO/SOIT training would build links and support good practice.
- Training for first response officers – front-line staff – to ensure appropriate responses and referrals.

Domestic Violence – Sexual Violence

One of the areas for discussion raised during the Seminar was 'the transition from IDVA to ISVA'. This topic generated a lot of concern amongst participants, in particular regarding current training for ISVAs.

Seminar participants unanimously agreed that current training does not include sufficient focus on sexual violence for someone who has no previous knowledge of issues around sexual violence and abuse to develop the necessary knowledge base for operating effectively as an ISVA.

It was noted that domestic violence and sexual violence have been increasingly linked together and appear now to be regarded by many to be the same. However, whilst the seminar participants acknowledged that there are overlaps between domestic violence and sexual violence, it was felt very strongly that the two areas must be kept separate.

Whilst the majority of domestic violence victims also suffer sexual violence and abuse, the majority of sexual violence and abuse victims do not correspondingly currently suffer from domestic violence or in most cases define their experiences as domestic violence. This means that the respective client groups for domestic and sexual violence advisors approach services with a different set of needs and risk factors. A key aspect of work with domestic violence victims is around risk assessments and safety. However, with victims of sexual violence and abuse, it is more appropriate to undertake a needs assessment. One agency has developed a risk assessment protocol which covers the risk of the case not going to court and the risk of an unsuccessful prosecution and the consequent impact on the victim.

Participants felt that rather than integrating the two roles, protocols for joint working between IDVAs and ISVAs would be more helpful.

Training

The Issues around current and ongoing training for ISVAs were a theme which ran throughout the whole Seminar and the cause of most concern.

- Participants agreed that current training is not sufficiently focused on sexual violence to meet the needs of an individual who has no existing background or training in working with victims of sexual violence and abuse.
- Further workshops to support existing ISVAs were identified as essential. In particular, further training around meeting the needs of adult survivors of childhood sexual abuse who represent the largest client group of victims of sexual violence. These clients are regarded as hidden victims, since they largely do not report the offence/s.
- ISVAs felt very strongly that specialist sector training should be developed from within the sexual violence and abuse sector with a focus specifically on sexual violence rather than domestic violence.
- Training should result in a recognised qualification outlining routes to accreditation.
- Provision of stepped training would ensure ISVA practice work could be managed alongside training.
- The training provider should be specific to the sexual violence and abuse sector.

Funding

In the week following the Seminar, Survivors Trust was contacted by agencies based in the West Midlands who reported delays in receiving ISVA funding which should have been released at the start of the financial year to meet the costs of operating the service.

Survivors Trust has been informed that delays have occurred because responsibility for managing the funding has been devolved to GOWM who have now requested monitoring information and contact details

from the agencies before funding can be issued. GOWM have also stated that funding will be issued quarterly in arrears instead of in one payment in advance.

The current situation is that agencies have been providing ISVA services since April 2008 and providing detailed monitoring on service provision without funding to cover their costs, including ISVA salaries.

Survivors Trust has contacted five agencies involved to ask about the impact of not receiving funding on time and

Agency 1 - Currently funding the service through reserves – this has seriously drained resources and is compromising the sustainability of the entire service which now has funding in place until December. The agency is having to look elsewhere for funding, which has so far not been forthcoming. Info has been completely lacking from the HO about the situation – the agency has had to chase around for all info they have received about the funding,

Agency 2 - The delay has affected some areas of their service and has resulted in delays and alterations to service provision. The agency has managed to get some other funding and paid the ISVA from that. This means that restricted funds are having to be used to cover the costs of operating the ISVA funding. Additionally, the other funding is local and one-off so does not solve the problem in the longer-term.

The agency thinks the situation is unfair because they made the effort to prioritise HO rules and submitted all returns, database etc. on time – they feel penalized for those who didn't. They also think that it is not fair on the ISVA, who has been trained and made efforts to establish the service, but who doesn't know about the future status of their employment – "in limbo".

Agency 3 - The problem is that their ISVA service is in its 4th month and already running into funding issues. They have had to eat into other restricted funds to cover costs of the ISVA service. This is a concern for when these funds need to be spent for their designated purpose if the ISVA money has still not been received. The agency states that the funding is not Compact compliant.

Communication has been poor – the agency didn't know there was a problem until last week – there had been no communications from local Gov't until last week. They had a letter from HO to confirm the funding and so didn't suspect there would be any other issues.

Agency 4 – Funding for the ISVA service is having to come out of restricted funds for other projects. This is causing concern and anxiety around employment. Ongoing funding for the ISVA has not been agreed with the local CDRP.

Agency 5 – the delay in releasing ISVA funding has meant that reserves and restricted funds have had to be used. The agency feels that this is unacceptable when salary payments have to be made and detailed monitoring returned. The agency managed to secure matched funding from the CDRP for the current year, but has already been informed that this funding will not be continued in the next financial year.

None of the agencies reported that funding for their ISVA service was secured beyond March 2009 with potential impact on their ability to offer the service beyond that date. Three of the five agencies reported numerous failed funding applications to national lottery and grant making trusts over the past six months.

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