

Section 4 Integrated Impact Assessment - 2017CEO128

Summary Report Template

Audit Risk level

(Risk level will be added by Equalities Officer)

Each of the numbered sections below must be completed

Interim report	✓	Final report	
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 (Tick as appropriate)

1. Title of plan, policy or strategy being assessed

DOMESTIC ABUSE SERVICE RE-DESIGN: DEVELOPING A CO-ORDINATED COMMUNITY RESPONSE TO DOMESTIC ABUSE

2. What will change as a result of this proposal?

Proposal

Edinburgh services are being re-shaped to provide a co-ordinated community response to domestic abuse and will include a city-wide review of all statutory agencies, commissioned services and grant provision. Co-ordination is necessary given the large number of specialist and universal services that provide support to those affected by domestic abuse. It is also essential, given limited and reducing resources, to ensure the efficient use of funding and best outcomes for service users. Service re-design would provide:

- Development of a flexible pathways from identified need to service provision.
- Proportionate support at the right time, particularly for those families in crisis and those who fail to meet the threshold for child or adult protection.
- Less duplication and complexity of service provision and professionals.
- Implementation of shared principles and ethos across services.
- A focus on prevention and early intervention.
- Clearer and long term funding streams and outcomes framework.
- Increased partnership working to prevent working in silos.
- Improved services and reduced costs.

- Greater co-operation between services.
- Greater co-operation with specialist services, including services that provide support with substance misuse and mental health.

3. Briefly describe public involvement in this proposal to date and planned consultations

A consultation group of existing providers was established in January 2016 and meets bi-monthly to review the progress of the project.

In 2016, a series of consultation events was carried out across Edinburgh with service users and other stakeholders. In total, the consultation exercise engaged with 458 people – 192 service user engagements; 266 staff engagements. These consultations were carried out by online questionnaire; focus groups; individual interviews and discussion groups.

4. Date of IIA –

5. Who was present at the IIA? Identify facilitator, Lead Officer, report writer and any partnership representative present and main stakeholder (e.g. NHS, Council)

Name	Job Title	Date of IIA Training	Email
Pauline McKinnon	Strategic Planning & Commissioning Officer – Facilitator/report writer	23.11.16	pauline.mckinnon@edinburgh.gov.uk
Caroline Smith	Commissioning Officer – Safer and Stronger Communities, City of Edinburgh Council		caly.smith@edinburgh.gov.uk
David Maguire	Principal Officer, Engagement & Involvement, Children & Families, City of Edinburgh		david.maguire@edinburgh.gov.uk

Name	Job Title	Date of IIA Training	Email
	Council		
Kirsten Adamson	Commissioning Officer, Children & Families, City of Edinburgh Council		kirsten.adamson@edinburgh.gov.uk
Nick Croft	Corporate Policy and Strategy Manager, City of Edinburgh Council		nick.croft@edinburgh.gov.uk
Maria Arnold	Senior Development Officer - Adult Health and Wellbeing, EVOC		maria.arnold@edinburgh.gov.uk
Rona Fraser	Sector Manager, Groupwork Services, City of Edinburgh Council		rona.fraser@edinburgh.gov.uk
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Rose Turnbull	Manager, Cranston Street Hostel		rose@keymoves.org.uk
Alison Davis	Manager, Saheliya		alison@saheliya.co.uk ;
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Linda	Chief Executive Officer, Edinburgh		lindarodgers@edinwomensaid.co.uk ;

Name	Job Title	Date of IIA Training	Email
Rodgers	Women's Aid		

6. Evidence available at the time of the IIA

Evidence	Available?	Comments: what does the evidence tell you?
Data on populations in need	Yes	<p>In 2014/15, in Edinburgh, the number of domestic abuse incidents recorded by Police Scotland was 5802, with the vast majority of incidents involving female victims whilst the perpetrators are predominantly male. However, it is difficult to obtain an accurate number of people affected as there are high levels of under-reporting. (VAWP Strategic Assessment, 2015)</p> <p>In the same period, a third of the concern forms passed to Social Care Direct were due to domestic abuse and, on a single day, it was identified in over 50% of child protection registrations. Domestic abuse significantly contributes to homelessness and is costly both in human and financial terms. In 2009, the cost of domestic abuse to the Scottish public purse was £2.3 billion. The costs are high, principally, because opportunities for early intervention and prevention are routinely missed, leading to more expensive interventions later. (VAWP Strategic Assessment, 2015)</p> <p>There is a lack of statistical data relating to need and needs being met</p>

Evidence	Available?	Comments: what does the evidence tell you?
		<p>for BME populations in Edinburgh. However, Fearless - a new project set up in Edinburgh to support minority and hard to reach groups affected by domestic abuse – has identified that there is enough specialist provision for these groups in Edinburgh. (Edinburgh Women’s Aid, 2017).</p> <p>What is known is that there is a lack of reporting of domestic abuse in BME communities due to specific issues which can be faced by all victims of domestic abuse, but some are specific to BME communities, e.g.</p> <ul style="list-style-type: none"> • no knowledge or understanding of human rights or a right to safety; • limited English language skills so they can’t get help or access information on what help or support services exist; • experience or fear of racism when trying to access services; <p>(Saheliya, 2017)</p> <ul style="list-style-type: none"> • Lack of service provision for women with no recourse to public funds – fear of being deported <p>An additional complexity for professionals working with BME families is that standard practice with Scottish families may increase risk. The aim to ‘engage with all family members’ usually means working with the two partners and their children, and possibly extended family. However, when working with BME cases of</p>

Evidence	Available?	Comments: what does the evidence tell you?
		<p>domestic abuse, one should consider the family dynamics with in the these communities, especially South Asian, where other family members are not only involved in the perpetration of abuse but also in the contact/custody disputes and mainly support the man. Mediation is a preferred solution of the family members to protect honour of both families and the community – emphasis is to protect the honour rather than safety of the women and children.</p> <p>Engaging all family members in a BME community could mean the two partners, their children, both partners’ parents and the siblings of the two partners, sometimes either all of them or some of them living under the same roof, or some may be living outside the UK. There are occasions when wider family members are involved in perpetrating, or are complicit in, the abuse. There were concerns raised by staff in agencies working with BME women that agencies may become involved in ‘mediation’ between family members which could be a risk to some women, children and young people. They advised caution when engaging with the wider family. (Shakti, 2017)</p>
Data on service uptake/access	Yes	See p13
Data on equality outcomes	Yes	Edinburgh’s Domestic Abuse Strategy and Improvement Plan (2017) provides evidence of work with equality groups – women; disabled women; BME women;

Evidence	Available?	Comments: what does the evidence tell you?
		<p>women with complex needs; male and LGBT victims; children and young people; those without children and those who remain in relationships. However, the Strategy also recognises that some of these groups/people are hard to reach and there are gaps in addressing the inequalities which contribute to their difficult situations. The needs of these groups will inform the re-design of Edinburgh services.</p>
Research/literature evidence	Yes	<p>The Christie Commission (2011) reported that a new, more radical approach to domestic abuse service provision is required, and that this approach should focus on place, with a shift towards prevention.</p> <p>Edinburgh's Domestic Abuse Strategy and Improvement Plan (2017) proposes a radical re-design of services and states that clarification of domestic abuse care pathways is required and that these should focus on early intervention and prevention. The Strategy also states that service provision should be co-ordinated, victim-centred and respond to the needs of the person, rather than the process. Research by The Big Lottery (2016) demonstrates that lack of a joined up approach can lead to domestic abuse falling between the gaps in service provision, resulting in a lack of sharing of vital information (Big Lottery, 2016).</p> <p>There would appear to be little understanding of domestic abuse and why it is so difficult for people to leave abusive partners. The consultation</p>

Evidence	Available?	Comments: what does the evidence tell you?
		<p>exercise carried out in 2016 showed that service users require workers to listen, be non-judgemental, compassionate and able to provide emotional support. Feedback from BME service users is that they require culture sensitive emotional support in their mother tongue. Agencies should be able to respond to victims and accept the choices they are making about their lives and relationships and pathways to services need to remain open so that they can return to request further help.</p> <p>.</p>
Public/patient/client experience information	Yes	<p>Full feedback of the city-wide consultation exercises, which took place in 2016, is available in Edinburgh's Domestic Abuse Strategy and Improvement Plan (2017, pps 5-27). One respondent said:</p> <p>"A non-judgemental service is required which offers emotional and practical support to build confidence, access to safe housing and provide opportunities to make positive steps in rebuilding life" (p9).</p>
Evidence of inclusive engagement of service users and involvement findings	Yes	<p>See above.</p> <p>A key workstream within the improvement plan includes the development of a service user forum. This will be lead by the Violence Against Women Partnership Reference Group, which consists of service providers across Edionburgh, including hard to reach groups, for example BME</p>

Evidence	Available?	Comments: what does the evidence tell you?
		service providers.
Evidence of unmet need	Yes	<p>Domestic Abuse Care Pathway The Strategic Needs Assessment of the Violence Against Women Partnership (VAWP) 2015-17 identified that Edinburgh’s response to domestic abuse has weaknesses:</p> <ul style="list-style-type: none"> • an over-emphasis on separation and failure to protect models; • the need to understand diversity and the impact on BME women and LGBT groups; • increased demand and reduced resources; • the need to develop: <ul style="list-style-type: none"> ○ a shared understanding of domestic abuse and the gendered analysis; ○ a clear pathway for victims and a coordinated response; ○ a shared risk assessment. <p>The VAWP recommended:</p> <ul style="list-style-type: none"> • increased co-ordination and efficiency; • increased training capacity; • increased nuance to deliver services to minority communities. <p>No recourse to public funds Many women come to the UK, often legally, in the hope of improving their lives. They may come on temporary work permits, student visas or spousal visas. Some women come to the UK to marry. The ‘no recourse to public funds’ rule says that a woman in this position – even if she’s married to a British citizen – is not entitled to certain state</p>

Evidence	Available?	Comments: what does the evidence tell you?
		<p>benefits, including housing benefit and income support. Without these benefits a woman might struggle to get, or maintain, a place in refuge if she needs to escape abuse, or to access other domestic abuse services. Women's refuges rely on rental income and do not have the funds to provide for living costs.</p> <p>Some women may be eligible for public funds, but it takes time for service providers to establish their status or for applications to be processed. Women with no recourse may be eligible for funds if they have dependent children, are a vulnerable adult or can access the Destitute Domestic Violence Concession. All these issues take time to resolve and women require support whilst this is happening. How the local authority interprets the rules impacts on how flexibly services can respond. These are on-going and unresolved issues for service providers. (Shakti, 2017)</p> <p>The Scottish Census Information provided by the Scottish Census can be misleading in relation to Scottish BME communities:</p> <ul style="list-style-type: none"> • the percentage of BME residents in Scotland is much higher in cities, especially in Glasgow, Edinburgh, Dundee, and Aberdeen; • the settlement patterns and history of BME in each city are different, and communities vary

Evidence	Available?	Comments: what does the evidence tell you?
		<p>greatly in each city;</p> <ul style="list-style-type: none"> • many people who arrive in the UK/Scotland to seek asylum do not fill out the Census forms so are not fully represented; • limited English language skills lead many people to ignore the Census or to misunderstand its purpose; • many people in established, and in new BME (i.e. refugee) communities, especially women, are functionally illiterate in any language; • many communities (e.g. Somali) have a gender imbalance (75% of Somalis seeking asylum in Scotland over several years were women). In those communities, women are less likely than men to have ever gone to school, or not attended for long, and have fewer points of contact with the mainstream community. Therefore, they have more limited English language skills and literacy, (especially as few ESOL classes exist with consistent childcare and women-only). This results in further 'skewing' of the figures (e.g. especially important for mapping of communities affected by Female Genital Mutilation); • lack of collection of statistics/data on refugees, e.g. post-status; settlement patterns; • lack of figures on refugees who gain asylum in other parts of

Evidence	Available?	Comments: what does the evidence tell you?
		<p>Europe or the UK and then move to Scotland (one in four of our Somali and one in five of our Sudanese service users). (Saheliya, 2017).</p>
Good practice guidelines	Yes	<p>Good practice guidance developed by Scottish Women's Aid and COSLA.</p> <p>There are few best practice guidelines for working with domestic abuse. A workstream within the improvement plan will be developing clear training and policies which aim to ensure that different professionals are aware of their roles and responsibilities in relation to domestic abuse.</p>
Environmental data	N/A	
Risk from cumulative impacts	Yes	<p>The risk of not implementing the service re-design is that service provision will continue to be fragmented, which will be detrimental to the needs of those experiencing domestic abuse, and will be financially costly to the public purse.</p> <p>There is a risk of challenge to the renewal of existing contracts, which have never previously been tendered, by Providers interested in delivering these services. However, proposals and timescales are in place for the development of new services.</p> <p>There is a small risk that some current Providers may not want to renew</p>

Evidence	Available?	Comments: what does the evidence tell you?
		existing contracts. If necessary, this risk could be mitigated by increasing other contracts to cover any terminations.
Other (please specify)		
Additional evidence required		

Data on Service Uptake/Access

The following data was provided by Edinburgh's Violence Against Women Partnership's Strategic Needs Assessment (2015-17) and the Domestic Abuse Strategy and Improvement Plan (2017)

Website hits	2011/12	2012/13	2013/14	2014/15
Number of hits on domestic abuse landing page	1163	1321	1479	1226
Number of hits on domestic abuse content pages	2610	3558	3851	2289

Social care direct	2011/12	2012/13	2013/14	2014/15
Number of child concern forms sent to social care direct with domestic abuse as a concern	453	498	3186	3314
Total number of concern forms sent to social care direct			9630	9756
Number of children registered on 31 July	227	262	312	
Of the children registered on 31 July % of children who had domestic abuse concern identified at registration	36% (82)	51% (133)	57% (178)	
Of all the children registered throughout the year the % of domestic abuse of all concerns identified	13%	17%		
Number of contacts to H&SC social care direct with category 'person affected by domestic abuse'	124	109	93	354
Number of contacts to Children and Families social care direct with category 'person affected by domestic abuse'	428	361	2672	515
Number of contacts to Criminal Justice social care direct with category 'person affected by domestic abuse'	76	52	81	253

Number of types of abuse recorded against certain relationships of perpetrator in adult protection module in swift– cohabite/partner/ex-partner/spouse		111	115	120
Of these the number of financial abuse		8	8	11
Of these the number of physical abuse		52	55	66
Of these the number of psychological abuse		12	12	22
Of these the number of sexual abuse		9	8	14

Scottish Children's Reporter Association	2013/14	2014/15
Number of referrals to Children's Reporter with the grounds that the child has a close connection with a person who has carried out domestic abuse	134	134
Percentage of total referrals to Children's Reporter with the grounds that the child has a close connection with a person who has carried out domestic abuse	16	16
Percentage of children referred who were less than 12 months old	15	15
Percentage of children referred who between 1 and 5	50	50

Gender based violence routine enquiry in maternity services Feb 2014 to Jan 2015	2014/15
Number of deliveries	9547
Number of routine enquiry questionnaires completed	7598
Number of women in January 2015 who had completed routine enquiry	596
Number of women in January 2015 who disclosed abuse or were marked as suspected	37

Edinburgh Women's Aid	2013/14	2014/15
Number of women accessing Women's Aid Services		964
Number of children and young people provided refuge	50	60
Number of women in refuge	108	130
Of these, the number of women in complex needs refuge		56

Average number of days spent in refuge		118
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MARAC	2012/13	2013/14	2014/15
Number of referrals to EDDACS	178	343	
Number of women referred to EDDACS in year	143	262	1092
Number of repeat referrals to EDDACS	43	105	371
% repeat referrals to EDDACS	24%	31%	33%
Number of women whose risk checklist placed them at high risk			344
Number of cases discussed at MARAC	n/a	106	197
Number of repeat cases discussed at MARAC	n/a	19	
% repeat cases discussed at MARAC	n/a	18%	
Number of cases considered at risk review for discussion at MARAC	n/a	149	

Safer Families Edinburgh	2014/15
New men referrals	116
New women referrals	50
Number of children of new referrals	119

Housing

The number of homeless applications due to domestic abuse has remained at about 10% of total applications over the last two years. In 2013/14 domestic abuse was the single biggest reason given for homelessness for women aged 18-59. Women represented 83% of the homeless applications for domestic abuse in 2014/15 and 88% the previous year. Around two thirds of these were placed in temporary accommodation and on average they stayed just under four months. On average, just over 55% of the women who presented as homeless have children in the household. 60% of the women who were accommodated at Cranston Street Women's Hostel were fleeing domestic abuse. Of these women, 30% had a diagnosed mental health problem and 38% had a substance misuse issue.

Given the large percentage of women who approach housing in relation to domestic abuse, the Housing Options Team has employed a specialist domestic abuse housing officer.

In February 2014, a 15.3% reduction in the Council's housing support services budget was approved. This will reduce the annual budget for the Domestic Abuse work stream from approximately £1.17 million to £1.01 million over the next two years. In November 2013, it agreed to undertake a collaborative pilot with the current providers of services. A consultation process has taken place with stakeholders and service providers and a new service specification will be agreed and 18 month pilot will commence in November 2015.

Innovative projects like the Domestic Abuse Home Safety Initiative, which build on the successful pilot Safe as Houses, allow victims of domestic abuse to stay safely in their own homes by providing adaptations such as lock changes or alarms systems. This is currently only available to council tenants however plans are being discussed to widen this to registered social landlords as measures for preventing homelessness.

Evidence suggests that there is a need to extend training on domestic abuse for housing staff to ensure that they understand the issues faced by victims of domestic abuse and are equipped with relevant skills to provide those affected with the effective support or signpost them to relevant services. Consideration is being given on how to ensure that housing officers have the effective training to deal with domestic abuse in Edinburgh.

7. In summary, what impacts were identified and which groups will they affect?

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>Positive</p> <p>The re-design of Edinburgh’s domestic abuse services will improve provision and strengthen care pathways for those experiencing domestic abuse, including perpetrators, and will improve the lives and life chances of those affected. The service re-design will ensure that service users are offered high-quality, inclusive provision and will not be discriminated against because of histories which may include offending, substance misuse, perpetrating domestic abuse and other complex issues.</p> <p>Evidence from the consultation exercise carried out in 2016 demonstrates that before service users can think about issues such as housing, they need assistance with mental and emotional issues in settings which are non-judgemental. Many of those who either experience or perpetrate domestic abuse will have experienced health inequalities. The health and wellbeing of those affected by domestic abuse will be a major focus of the service re-design, including physical, mental and emotional health, and the effects of complex trauma on the victims, their children and the perpetrators of domestic abuse.</p> <p>The consultation exercise also evidenced that physical security is one of the main issues for women who have been victims of domestic abuse and their children. Often they are the ones who have to leave their home and move into temporary accommodation. The service re-design will consider how to support women to improve their physical security, e.g. ensuring that housing needs are met effectively and managing perpetrator harassment/contact in order to protect this vulnerable group.</p> <p>Assistance will be provided to service users to address basic needs such as access to food and funds. Service users will be supported to access community supports, live independently, where appropriate, and have choice</p>	<p>People who have experienced domestic abuse, harassment and victimisation, both victims and perpetrators. The people affected could be from the following populations: children and adults; male and female; those who have a physical or learning disability; those from LGBTQ or non-binary groups; pregnant women; women who have children; those from white or BME communities; those who have offending backgrounds; people who have experienced complex trauma; those who have health and economic inequalities.</p>

and control. Victims and perpetrators of domestic abuse will be assisted with regard to legal rights, e.g. community justice and court processes.

In order to improve people's life chances, access to education and learning opportunities will be offered to those affected by domestic abuse. The service re-design will consider that productive and valued activities can be key in assisting people to take back control and live productive lives, e.g. employability, training, volunteering, peer mentoring. These options can provide opportunities to escape lifestyles influenced by poverty and deprivation.

Negative

The re-design of Edinburgh's domestic abuse services will be a challenging process for those involved in the implementation of the new structure, those working within the new structure and service users. The re-design will involve review and consolidation of existing, long-standing provision and will be the first re-structure and procurement that this group of services has experienced. The re-structure will result in a change in ethos and remit and some services may have difficulty in engaging with the changes. The re-design is a major undertaking and will be concluded over a period of years, rather than months, so the change process will not be concluded quickly.

It is intended that the re-design will improve and strengthen care pathways and make the system more efficient, including financially. However, the re-design will demonstrate gaps in provision which will have to be addressed to meet the expectations of Edinburgh's Domestic Abuse Strategy, including how to reach out and work with hard-to-reach groups, e.g. minority ethnic communities, LGBT, male victims and male and female perpetrators. Addressing these gaps could negatively impact on the anticipated financial efficiencies as expressed on paper, for example, the additional complexities of working with people who have complex needs may mean that these service users require longer-term support. This will be addressed during the

<p>development of Service Specifications. In terms of outcomes for people, it is far more efficient to understand and consider the full range of their needs.</p> <p>Edinburgh's Domestic Abuse Strategy and the re-design of service provision are intended to improve the situations for those who experience and perpetrate domestic abuse. However, their effectiveness may be influenced by systems which are not responsive to the needs of the service user group and this, together with the impact of social stigma and inequalities, may continue to contribute to the oppression of those who experience domestic abuse.</p>	
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<p>Environment and Sustainability</p> <p>Positive</p> <p>N/A</p> <p>Negative</p>	<p>Affected populations</p>
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8. Is any part of this policy/ service to be carried out wholly or partly by contractors and how will equality, human rights including children's rights , environmental and sustainability issues be addressed?

The council has awarded grants and has contracts with the voluntary sector to provide high-quality service provision to those who have experienced/perpetrated domestic abuse. Services are also offered through in-house provision. Expectations around promotion and implementation of equality and human rights for adults and children are contained in contracts and reviewed through quarterly and annual monitoring arrangements.

9. Consider how you will communicate information about this policy/ service change to children and young people and those affected by hearing loss, speech impairment, low level literacy or numeracy, learning difficulties or English as a second language? Please provide a summary of the communications plan.

A communications plan has been developed and 8000 posters and postcards were disseminated widely across Edinburgh to inform people of the proposed re-design of services and to invite participation in the consultation events and/or complete the online questionnaire. People from groups with protected characteristics were involved, e.g. BME communities, LGBT, young people, and any specific needs were catered for. For example, women who had experienced complex trauma and who could not participate in a focus group were offered one-to-one consultations; information was produced and delivered in plain English to take account of people who had cognitive difficulties, learning disabilities or where English was not their first language.

Following the consultation and development of the strategy, a communications plan for the ongoing strategic developments is being carried out.

10. Is the policy a qualifying Policy, Programme or Strategy as defined by The Environmental Impact Assessment (Scotland) Act 2005? (see Section 4)

No.

11. Additional Information and Evidence Required

If further evidence is required, please note how it will be gathered. If appropriate, mark this report as interim and submit updated final report once further evidence has been gathered.

12. Recommendations (these should be drawn from 6 – 11 above)

It is recommended that the re-design of Edinburgh's domestic abuse services proceeds. However, with the caveat that the re-design may not meet the needs of all women affected, but that voluntary sector organisations will engage to enable the process.

To date, the work carried out on the re-design of Edinburgh's Domestic Abuse Services has identified the following:

- domestic abuse affects a high number of people, including victims perpetrators and children;

- complex trauma has lasting effects for those who experience domestic abuse;
- a modern, co-ordinated system of support is required, which is efficient and effective, and which will include models of prevention and early intervention;
- a clear care pathway should be developed which has a shared understanding of domestic abuse and the gendered analysis;
- there is a gap which requires to be addressed in meeting the needs of harder to reach communities;
- there is a high cost to the public purse in managing and addressing the effects of domestic abuse.

Therefore, it is recommended that the re-design:

- responds to the needs of the individual in a non-judgemental manner which is inclusive and accepts service users' choices;
- takes into account the needs of those in harder-to-reach groups where inequalities are more prevalent;
- uses the feedback from the city-wide consultation events to address gaps, unmet need and weaknesses in the current care pathway;
- develops a workforce which understands the effects of domestic abuse and delivers provision effectively in partnership with those affected by domestic abuse;
- addresses increased demand and reducing resources.

13. Specific to this IIA only, what actions have been, or will be, undertaken and by when? Please complete:

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and contact details)	Deadline for progressing	Review date

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and contact details)	Deadline for progressing	Review date

14. How will you monitor how this policy, plan or strategy affects different groups, including people with protected characteristics?

The city-wide consultation exercise carried out 2016 provides information on gaps in the current care pathway for people affected by domestic abuse, including those people who have protected characteristics as reported at no. 7 above. The expectations of the new model will include quarterly performance reporting by services and regular service user feedback.

15. Sign off by Head of Service

Name Harry Robertson

Acting Head of Safer and Stronger Communities

Date 27 October 2017

16. Publication

Send completed IIA for publication on the relevant website for your organisation. [See Section 5](#) for contacts.