

# Victims and Survivors Service Review Report April to September 2020

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#### **Summary**

- 1. The Executive Office has requested that the Commission for Victims and Survivors Northern Ireland reviews the progress of the Victims and Survivors Service and produce reports commenting on that progress.
- 2. This report focuses on data provided for July to September 2020, with limited cumulative data for comparative purposes for April to September 2020. This is as a result of the temporary cessation of some services and the suspension of monitoring and evaluation requirements on funded organisations to reduce organisational pressures as a result of COVID-19. To provide some comparative context when possible, this report will refer to cumulative figures identified for the second quarter of 2020/21.
- 3. As a direct result of COVID-19 (and ensuing Government advice and restrictions which came into place 10 days prior to the commencement of the financial year), this reporting period was disrupted with considerable implications for the work and services of both the Victims and Survivors Service and funded organisations. During this reporting period, the Victims and Survivors Service indicated that their teams adapted quickly in preparation for remote working and introduced resource guides for programmes, providing funded organisations with advice and guidance for online services and allowing for flexibility in service delivery and expectations.
- 4. Where possible, work adapted and continued with a focus on the ongoing delivery of its needs-based service delivery model; continued embedding of the Health and Wellbeing Caseworker and Case Manager Network; delivery of the Advocacy Support Programme; and, the ongoing development of monitoring and evaluation processes. The Victims and Survivors Service highlighted the strong partnership working with community and voluntary partners during this period.
- 5. While face-to-face counselling and some complementary therapies resumed for some in July 2020, there was a cessation of services again shortly after this reporting period (on 16 October 2020). Consequently many organisations continued delivering these and other areas with online sessions, which had proved to be popular and practical. Alternative services were devised. This included online meditation, listening ear/telephone befriending and check-ins offered in place of the reduced demand and offering of complementary therapies which did not return to the same level of delivery during this period. Innovative approaches to social support activities during this period included novel initiatives such as socially distanced gardening, online coffee mornings and baking competitions.
- 6. During this reporting period, in August 2020, the tenure of Commissioner Thompson ended.<sup>1</sup> Communication and interaction between the Commission and the VSS advanced incrementally in key areas, led by the CEOs of both organisations. This included the provision of information to the sector for working arrangements in the absence of a Commissioner. Since the Commissioner's departure, there has been a

<sup>1</sup> A Commissioner for Victims and Survivors was only in office for a portion of this reporting period. Consequently references to information or advice that issued from the CVSNI during this reporting period was given within the context of 'advice' being only applicable to the statutory duty and powers of a Commissioner. Therefore the terms 'advice' and 'information' are applied to denote the governance context of this reporting period.

focus on governance, strategic planning and operational responses to external social and political developments (including COVID-19) were the foundations for the interaction between both organisations which included oral and written input from staff from both organisations regarding: ongoing delivery of the PEACE IV-funded research programme and collaborative planning for the PEACE PLUS programme; the implementation of the Troubles Permanent Disabled Scheme; operational imperatives for the Regional Trauma Network; and, the implications for the sector of any changes to legacy mechanisms in light of the Secretary of State's 18 March 2020 statement.

#### Recommendations

7. All policy-related matters during this period were addressed through information requests and operational and strategic engagements detailed in the Memorandum of Understanding. The Commission does not propose any recommendations to the Executive Office.

#### **Background**

- 8. In line with the framework of strategic relationships outlined in the Strategy for Victims and Survivors, the Commission for Victims and Survivors Northern Ireland (CVSNI, or 'the Commission') reports quarterly on the progress of services delivered by the Victims and Survivors Service (VSS, or 'the Service') to the Executive Office (TEO, or 'the Department').<sup>2</sup>
- 9. The requirement to produce Review Reports is detailed in Outcome 2.3 of the Commission's 2020/21 Outcome Delivery Plan.
- 10. This is the first Review Report of 2020/21. This report follows the format of previous reports, but as a result of the operational disruption caused by COVID-19, with data combined into a six monthly review period. This report provides an update on the operation of the VSS during the period from April to September 2020.
- 11.In order to compile this report the Commission has collated information from a number of sources. The primary source of information is supplied directly from the VSS through agreed information sharing processes.

<sup>&</sup>lt;sup>2</sup> The provision of these review reports represents a key component of the Commission's responsibility to 'keep under review the adequacy and effectiveness of services provided for victims and survivors by the Victims and Survivors Service' as outlined within the Strategy for Victims and Survivors: Office of the First Minister and deputy First Minister (2009) *Strategy for Victims and Survivors*, Belfast: The Stationery Office, p.7.

#### Impact of VSS Services

- 12. Reporting data provided by the VSS, for services delivered through the Individual Needs Programme (INP), Victims Support Programme (VSP) and PEACE IV continue to be reviewed against a collective set of strategic outcomes for victims and survivors:
  - Improved health and wellbeing of victims and survivors;
  - Improved access to opportunities for learning and development.
  - Victims and survivors, and those most in need, are helped and cared for:
  - Victims and survivors, and their families, are supported to engage in legacy issues.
- 13. Information for this reporting period was provided to the Commission and TEO on 2 December 2020.<sup>3</sup>

#### Improved the health and wellbeing of victims and survivors

14. The VSS has provided the following headline figures for health and wellbeing support services up to the end of this reporting period:

Support	Prog.	Individuals (Q2 2020/21)	Year to date (cumulative)
Talking Therapies	VSP	488	1,372
Complementary Therapies	VSP	132	132
Social Support	VSP	378*	5,868*
Transgenerational Activities	VSP	57*	108*
Disability Aids	INP	24	39
Persistent Pain	INP	56	850
Psychological Support	INP	48	65
Trauma-focused Physical Activity	PEACE IV	69	69

<sup>\*</sup>Figures only cover the period to the end July 2020 (flexibility applied to monitoring and evaluation requirements due to COVID-19).

15. The headline figures provide insight into the range of support services delivered in the first two quarters of 2020/21 within the context of some services being suspended, changing and alternative services and service user responses to these. For example, of particular note were VSS indications that first and second quarter figures for those able to participate in Complementary Therapies dropped by 80% for those registering compared to the previous year's figures. Yet figures remain broadly in line with the previous overall figures as the rising need of a 93% increase in demand for Talking Therapies being met by additional appointments being scheduled to provide support via telephone during the same period.

<sup>3</sup> VSS Quarterly Outcomes and Monitoring and Evaluation Reports were delayed as a result of COVID-19 (VSS suspended monitoring and evaluation reporting in early April 2020 to relieve pressure on funded organisations).

<sup>&</sup>lt;sup>4</sup> Therapeutic interventions ceased in March 2020 as a result of COVID-19. The Commission notes that VSS recorded a significant increase in this quarter (to 173) of the number of clients receiving complementary therapy whose treatments stopped early. This does not reflect the need or uptake of services other than as a result of the lock down.

- 16. Since March 2020, dedicated communication methods were established by the VSS to support individuals with direct information relating to changing needs as a result of COVID-19. The VSS issued and updated Resource Guides in March 2020 to organisations to provide clarity on guidelines for client's accessing services through the INP, VSP and the Health and Wellbeing Caseworker Network in keeping with Government guidelines. This included age and vulnerable group specific information on resources, insurance, promoting social accessibility, close contact delivery regulations, re-allocation of budgets, awarded clients' invoices/receipts for direct payments, equipment and supplier availability, personal protective equipment, risk assessments, budgetary verification, volunteering opportunities. These were much needed responses to the emerging needs and Executive advice in relation to close contact and the provision of services for services being included/excluded from regulations.
- 17. Clinical Outcomes in Routine Evaluation (CORE Net) continues to be used by all organisations delivering Talking Therapies. The VSS has advised that 1,496 individuals completed their therapies in the initial database and the system was decommissioned by CORE Information Management Systems in January 2020. All new client episodes continue to be added to the new database, while ongoing therapies are being finished and closed down in the earlier version. The VSS has advised that 358 clients completed their therapies in quarter two of 2020/21 providing an overall sample of 701 for outcome monitoring of which 40% fewer clients commenced therapy than in the previous year.
- 18. The long-term trend result for Talking Therapies has witnessed the percentage of those showing a reliable improvement stay relatively static at around 60%. The previous year after a high start had reported a slight drop with the improvement trending towards 57%. As indicated above, the first quarter of 2020/21 saw 40% fewer clients commence therapy than in 2019/20 while the overall numbers receiving therapy leapt considerably with the introduction of therapists providing a significant telephone-based service to clients. The second quarter showed considerable improvement with a greater proportion of clients commencing therapy and the numbers receiving therapy above the previous year's total. The percentage showing a reliable improvement holding steady at around 65%.
- 19. During this reporting period, Psychological Support was delivered to 48 individuals. The VSS had advised that it anticipated 80 individuals would access this service during 2020/21. The Commission noted the steady increase in individuals engaged with this element of the INP framework from 61 the 2018/19 period to 271 in the period 2019/20 (an annual increase of 344.26%). It is anticipated that as in the previous year, the VSS 2020/21 figures may surpass predictions. This support clearly remains important for those unable to access support through statutory services or not wishing to engage with funded organisations.
- 20. The Commission recognises that in addition to the additional impact of COVID-19, there may be also many other reasons for a growth in service demand and for service users' desire for tailored services to be accessible to them in the least challenging of circumstances. This includes both met and unmet needs in relation to digital and online accessibility, and delivery from private practitioners sought out in particular geographical areas and jurisdictions in other parts of these islands and

elsewhere in Europe where there is limited community and public sector experience in specialist service delivery to those with c.PTSD and other conflict-related needs.<sup>5</sup> To aid service design and delivery and to provide an evidence base in this area experiencing significant growth, not just as a result of COVID-19, the Commission again reiterates that it welcomes and encourages an overview of any available outcome data being provided to the VSS in relation to private practitioners in different jurisdictions.

- 21. Measure Yourself Medical Outcome Profile (MYMOP) continued to be used by all organisations funded to deliver and monitor Complementary Therapies. Historically, this measure has registered that 80% of individuals have shown an improvement following therapy. During the 2019/20 period a low sample size (n = 1,819) indicated a trend throughout the year of around 77% with 78% in the final quarter. The VSS report that COVID-19 restrictions effectively shut down most Complementary Therapy delivery during 2020/21 with insufficient data available to give any reliable results but further notes that while the easing of restrictions in the second quarter improved the situation, the number of individuals completing Complementary Therapy activities during this quarter (132) was less than 25% of those seen in previous years. It is to be anticipated that this will have an impact on the VSS anticipated target of 1,000 for the year end.
- 22. The Disability Aids scheme continued to provide a personalised approach to assessing and improving the safety and independence of victims and survivors living with conflict-related physical injuries providing functional aids and equipment. By the end of the second quarter 2020/21, the scheme had provided help to 24 people resulting in a cumulative total for the year to date of 39. The target for 2020/21 is estimated to reach up to 100 individuals. It is noteworthy that the scheme continues to surpass the original estimation. The figures of 148 individuals in 2019-2020 marked a 49.22% growth in the provision of support provided from the period 2017-2018 (n. = 46) and a 16.3% growth on the figures for 2018-2019 (n.92). The Commission is pleased that the scheme has surpassed the initial estimates.
- 23. The Persistent Pain framework aims to improve the health and wellbeing of victims and survivors living with persistent pain. This is provided through interventions that include home heat, physiotherapy and complementary/alternative therapies. By the end of the second quarter, the VSS had already engaged with 850 individuals. The target for 2020/21 is to engage with 750 participants; indicating that the original target has already been exceeded by 100 (11.6%). The Commission welcomes the exceeded response rate to this programme and further notes that home heating awards had been pre-processed for 762 individuals during the 2019/20 period in preparation for payment at the start of the first quarter of 2020/21.
- 24. The VSS continued to employ the Work and Social Adjustment Scale (WSAS) to demonstrate the effectiveness of the Trauma-focused Physical Activity Scheme. The PEACE IV-funded Trauma-focused Physical Activity programme aims to help to promote self-management of symptoms and facilitation of association therapeutic processes aimed at promoting health and wellbeing. During 2019/20 this support service reached 395 individuals, a noteworthy increase of n.259 (52.51%) individuals

<sup>&</sup>lt;sup>5</sup> The Commission notes that 18 individuals living outside Northern Ireland accessed Psychological Support (Talking Therapies) through the Health and Wellbeing Caseworker network during 2019-2020 (figure accessed from the VSS on 23/07/2020).

- from 2018/19. The figures provided by VSS do not indicate that the Target of 150 for the period 2020-21 are on track at this stage as the second quarter and cumulative figures for the year indicate 69 beneficiaries to date.
- 25. Areas such as Psychological Support, Disability Aids and Trauma-focused Physical Activity have seen continued growth since 2019/20 and this is expected to continue throughout 2020/21 despite service adjustments required to comply with Government guidance and disruptions to monitoring and evaluation processes. The Commission welcomes the expansion such schemes and the efforts of VSS staff to help identify eligible victims and survivors who may not be aware of the support available to them.
- 26. The WSAS as an outcome metric is now well embedded with increased systems being applied to show efficiencies in the collection, capture and reporting of data. VSS anticipate its use to help identify eligible victims and survivors currently not aware of support available to them. In areas such as psychological support, disability aids and trauma—focused physical activity. 74% of those across all health and wellbeing needs-based support areas used the WSAS scale to record improvement with 10% showing no overall change.

## Victims and survivors, and those most in need, are helped and cared for

- 27. This strategic outcome aims to help victims and survivors through the provision of support to improve their financial position, providing assistance to help meet day-to-day needs, and through the provision of access to advice in relation to welfare entitlements through the Welfare Support and Self Directed Assistance elements.
- 28. The VSS has provided the following figures for welfare support and Self-Directed Assistance (year to date figures highlighted only, to assist with an accurate reflection of delivery):

Support	Prog.	Individuals (cumulative)
Self-Directed Assistance Payments	INP	5,741
Additional Needs Based Payments	INP	1,462
Transition Payments	INP	0
Welfare interventions	VSP	844

- 30. Key outcomes for this objective are considered difficult to measure, with annual surveys undertaken by a 10% sample of clients to provide attitudinal/satisfaction responses.
- 31. The Commission notes each year, a reduction in those eligible for Self-Directed Assistance and Transition payments is to be expected reflecting the unfortunate fact that some individuals eligible for these awards died before the awards could be made. The VSS advised that approximately 1,300 individuals received Transition Payments during 2017/18, 2018/19 and 2019/20. This support was in addition to Self-Directed Assistance payments and the value reduced each year from £200 in 2017/18 to £150 in 2018/19, and to £100 in the 2019/20 period. Having been operational for three financial years, Transition Payments ceased in the 2020/21 period onwards.

32. Welfare Support continues to be delivered by six organisations. This support service continues to play a vital role for individuals requiring assistance, particularly with the ongoing rollout of Welfare Changes across Northern Ireland. The VSS advised that there were 2,445 interventions during 2019/20. Whilst this indicates a decrease of n.311 (11.2%) from the previous year, it is noteworthy that the yearly figures of 2,445 indicates an increase of n.5 (.2 %) on the VSS anticipated figures of 2,400 interventions for the period. For the period 2020/21 there is a target of 2,400 interventions.

# Victims and survivors, and their families, are supported to engage in legacy issues

- 33. This strategic outcome aims to facilitate the engagement of victims and survivors in legacy issues with the assistance of community-based service deliverers.
- 34. Advocacy Support, delivered by eight organisations, has been assisted by PEACE IV funding. This additionality has led to the development of an advocacy support network consisting of 6 Advocacy Managers and 21.5 Advocacy Support Workers. During this period organisations continued to deliver support to individuals engaged with legacy-related bodies, information retrieval processes and inquests. As of 30 July 2020, 623 individuals had engaged in advocacy support. The VSS indicate anecdotal under reporting in the area of advocacy support with caseloads reporting individuals when family groupings are benefitting. With support organisations undertaking to review this practice, it is anticipated that there may be an increase in overall figures in due course.

#### Improved access to opportunities for learning and development

- 35. The key outcomes for this area include increasing confidence and reducing isolation, through acknowledgement and support; renewed relationships and trust within families and communities; and helping to improve mental health and social networks.
- 36. The VSS has provided the following details for personal development during his reporting period:

Support	Prog.	2020/21 Cumulative
Personal and Professional Development	VSP	245
Education and Training	INP	105
1-1 Literacy and Numeracy	PEACE IV	3
Social Isolation	PEACE IV	46
Volunteering	PEACE IV	6

37. Personal and Professional development continues to be delivered by 23 organisations. Outcomes in these areas are measured through case studies, interviews and the WSAS. Whilst the Social Isolation and Volunteering frameworks continue to be developed, the VSS reports that 67% of individuals availing of support through Education and Training or the 1-1 Literacy and Numeracy frameworks recorded a positive change using the WSAS metric.

#### **Standards**

#### Compliance

- 38. Following engagement between the VSS CEO and Commissioner, it was agreed that a schedule should be developed, focused on identified Standards areas, and shared on a quarterly basis. It was subsequently confirmed that once a process had been developed and confirmed reporting would be taken forward through Trilateral meetings. In September 2020, VSS and Commission staff engaged to discuss options for developing a process that could be initiated for 2021/22.
- 39. Prior to a reporting schedule being agreed, the VSS continued to provide a verbal update at Trilateral meetings, in line with the terms of reference for the meetings (on 10 June and 8 September 2020).

# Communications and Engagement

#### Commissioner and VSS Board

40. During this reporting period the Commissioner met with the VSS Board five times during this period (9 April, 13 and 27 May, 10 June and 6 August 2020).

#### **Collaborative Design**

41. In this reporting period there were no Collaborative Design engagements.

## **Trilateral Meetings**

42. During this reporting meeting there were two Trilateral meetings (10 June and 8 September 2020).

#### **Victims and Survivors Forum**

43. The Victims and Survivors Forum met with the VSS Board and senior management on 7 August 2020.

#### **Victims and Survivors Practitioners Working Groups**

44. There were no meetings during this reporting period.

# Health and Wellbeing Caseworker and Advocacy Support Networks

During this reporting period he Health and Wellbeing Caseworker Network met on 7 July 2020 and the Advocacy Support Network meetings took on 26 June and 29 September 2020.

#### Informing advice on a new strategy for victims and survivors

45. During this reporting period, the Commission continued to develop its paper on informing the development of a new strategy for victims and survivors.

#### **Conclusions**

- 46. Review Reports are an important element of the Commission's responsibility to keep under review the adequacy and effectiveness of law and practice affecting the interests of victims and survivors. Prior to her departure during this reporting period, the reports were used by the Commissioner in line with her statutory duties, to keep under review services provided for victims and survivors. That monitoring and review role continues to be undertaken in the absence of a Commissioner by Commission staff as they continue to provide a useful reference point for those with an interest in how support is delivered to victims and survivors and to complement strategic planning for the Commission and its partners in preparation for the out workings of a new strategy and PEACE Plus developments.
- 47. As a result of the COVID-19 pandemic, organisations across the public and voluntary sectors continue to work under extreme pressure. Workloads have been compounded by new internal procedures and controls as a number of practices and safeguards are at risk of being compromised by disruptions to their existing and otherwise strong audit and risk and other governance functions. From a service delivery perspective, the VSS and funded organisations were able to react swiftly by reshaping how support could be delivered in these uncertain times. Throughout this reporting period and for the rest of the 2020/21, the focus for all those engaged in supporting victims and survivors will be ensuring that services continue to be delivered in the most appropriate way along with consideration and development of new approaches.
- 48. The Commission remains committed to partnership working with the Department, Service and the wider sector to ensure that everyone delivers the best for victims and survivors, enabling an effective support service for those accessing support. This collaborative approach is essential in the planning stages of developing a new strategy for victims and survivors, the ongoing delivery PEACE IV-funded additionality and potential support under PEACE PLUS arrangements in the absence of a Commissioner. The Commission will continue with its partnership working to provide informed responses to departmental consultations on matters directly and indirectly impacting victims and survivors. The provision of expert lived experience of victims and survivors, along with the theory and practice of academic research, is a key component of how the Commission and its partners apply key sectoral information for the purposes of policy development. In the absence of a Commissioner, the learning and information from these activities, data capture and analytical research continue to be essential components of how the Commission fulfils its statutory function. To that end the Commission continues to build, monitor and maintain its relationship building and consolidation brokering communication and engagements for, with and on behalf of victims and survivors.

**Ends**