



<b>Project Title</b>	Strengthening Knowledge and Awareness in Family Services of Domestic Abuse (SKAFADA)
<b>Research team (organisations)</b>	University of Central Lancashire and King's College London
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<b>Research type/ summary</b>	This study aims to provide evidence about the knowledge, understanding and skills of the Early Help and Family Support workforces in England in respect of domestic abuse.

### Study plan version history

Version	Date	Reason for amendment
1.0 (original version)	28-4-23	First draft submitted by UCLan
1.1	05/05/2023	Review of the first draft by WWEICSC
1.2	11/05/2023	Second draft submitted by UCLan, incorporating WWEICSC feedback
1.3	19/05/2023	Final Review by WWEICSC
1.4	22/05/2023	Final draft submitted by UCLan

*Please note that any major changes to the study plan must be approved and agreed upon with WWEICSC before implementation. Please describe any changes to the study plan i.e., research questions, methods, etc., and the rationale for this.*

## Summary

The research study presented in this Protocol takes the form of a rapid scoping study. We are adopting a case study approach that provides both depth and breadth and allows both quantitative and qualitative methods to be used to address the research questions. The Protocol provides information about the research, context, and background to the study, together with an overview of the research questions and how we propose to respond to these in the design of the study.

Early Help and Family Support practitioners have high levels of contact with families at risk of experiencing domestic abuse, but little is known about their readiness and capacity to work with children and families living with domestic abuse. This study aims to provide evidence about the knowledge, understanding, and skills of the Early Help and Family Support workforces in England in respect of domestic abuse. It is designed to capture data through a quantitative survey of Early Help and Family Support Practitioners and qualitative interviews with practitioners, managers, and service heads. Documentary analysis and interviews with national stakeholders with domestic abuse expertise will also be completed. The research will use a case study approach and will be undertaken in five local authorities selected to provide a diverse sample. Additional local authorities have been recruited to the study to ensure a high return to the survey.

The fieldwork will launch on 15<sup>th</sup> May and will end on 31<sup>st</sup> July 2023.

Data analysis begins on 12<sup>th</sup> June and will continue until mid-September when the draft of the final report will be available.

The Protocol includes a discussion of the methods we intend to use to answer the research questions, our approach to sampling and participant recruitment, together with information about the local authorities (LAs) whose staff will participate. We provide information about our analytical approach to the data, the limitations of the study, and how we propose to disseminate the findings of our research.

This study is being undertaken by researchers based at the University of Central Lancashire (UCLan) and at King's College London (KCL). The Protocol contains information about the team and their roles in this study.

The risks and our mitigation are addressed in the Protocol, together with information about the approach to Ethics and Data Protection.

The study survey tool, interview schedules and information for participants, all of which have been submitted to the University of Central Lancashire Research Ethics Committee, are included in the Annexes.

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## Research Protocol

### Abbreviations

CPD: Continuing Professional development  
 DA Domestic Abuse  
 DP: Data Protection  
 DSA: Data Sharing Agreement  
 EH: Early Help  
 FS: Family Support  
 KCL: King's College London  
 LAs: Local Authorities  
 NICE: National Institute for Clinical Excellence  
 NVQ: Non Vocational Qualifications  
 UCLan: University of Central Lancashire

## Context and background

The Government's Plan for Tackling Domestic Abuse (2022) reiterates the NICE (2014) Guidance on Domestic Violence and Abuse in emphasising the importance of training in identifying and responding to domestic abuse (DA) for frontline professionals in a range of health and social care services. The Early Help and Family Support (EH/FS) workforces have high levels of contact with families who are known to be at risk of experiencing DA (1), and local authorities (LAs) in England are increasingly providing case work services at an Early Help threshold in response to increased numbers of referrals (2). Early help and family support services can play an important role in reducing risk of statutory social care interventions, improving family relationships, signposting and increasing take-up of additional support services to meet families' needs (3). The Government's response to the Review of Children's Social Care (4) sets out proposals to increase family help and enable a broader range of practitioners to be case holders for children in need (5). The response also emphasises the need to strengthen the skills of this workforces, underscoring the need to understand the current knowledge base in relation to DA among the family support and early help workforces.

Experience of DA can have a significant impact across the life course (6,7) and may also impact children in different ways as they develop (8). DA can affect the quality of care infants receive in their first three years of life, particularly when parents did not receive high-quality care themselves as children (9). Research also indicates a link between exposure to DA and later sexual victimisation and harmful sexual behaviours for young people (10). DA is known to be a key factor in half of the Children in Need assessments in England (11) and in a similar proportion of serious case reviews (12). However, the Child Safeguarding Practice Review Panel's (2022) review of cases (12) where a child died or was seriously harmed *and* where DA was a factor found a lack of understanding of coercive control. The Panel recommended a DA-informed approach that 'names the source of the harm and describes the behaviours of the abuser and the impact on adults and children'.

Learning from case reviews where children experienced DA (17) suggests that professionals need a better understanding of the dynamics of abuse and its effects on children, including post-separation contact, and that responding to the needs of children living with DA must be prioritised. However, there is limited evidence available regarding the knowledge and practice of UK EH/FS workers both generally (13) and in respect of families living with DA. Some studies of social work practice in this field have included family support workers' views and accounts (14) and there is evidence for the impact of specific interventions (1), including some recent UK work by UCLan's Connect Centre (15,16).

## Aims and research questions

To reach a better understanding of the knowledge/skills and experiences of the Early Help/Family support workforce we will adopt a case study approach which will provide both depth and breadth and allows both quantitative and qualitative methods to be used to address the research questions (see below).

### Research Questions

1. What are the skills and knowledge of domestic abuse in the early help/family support workforces
2. What training/CPD on domestic abuse is currently provided to the early help/family support workforces?
3. How is the current identification/referral/knowledge /skills/ and understanding of domestic abuse assessed?
4. What are the gaps in the knowledge/skills/understanding of domestic abuse in the early help/family support workforces?
5. What specific domestic abuse topics/skills need to be included in training/development for the early help/family support workforces?

6. How do specialist domestic abuse staff interact with the early help/family support workforces?

7. What multi agency practice models are currently used in early help/family support domestic abuse work?

## Definition and scope

For the purposes of this study, Early Help and Family Support (EH/FS) practitioners in Children's Social Care (CSC) are case-holding practitioners or practitioners undertaking assessments and/or providing support services to children and families and/or delivering groupwork programmes. Practitioners may be located in a range of settings including social work teams, early help or family hubs, edge of care services, schools, family, neighbourhood or children's centres, youth services, housing associations etc. This study will reach those practitioners employed directly by local authorities and those working in commissioned EH/FS services in the third/voluntary sector. This study will not include qualified social workers working in statutory services.

Early Help and Family Support (EH/FS) practitioners provide one-to-one, family, and groupwork support, advice, advocacy, and practical, emotional help to children, young people (up to the age of 18), parents, carers, and families from pregnancy through to parenthood. These practitioners may not have a professional social work or clinical qualification, but they may hold university degrees in subjects including Children, Schools, and Families (Early Years Graduate Practitioner Pathway), as well as Health and Social Care/Social Sciences degrees and other vocational qualifications, such as Non-Vocational Qualifications (NVQs) or apprenticeships in, for example, Early Years, Family Support and Working with Parents.

## Methods

### Sample and Recruitment

A maximum of twelve local authorities (LAs) will participate in the study. They will comprise five case study LAs, Lancashire, Hertfordshire, Luton, Lewisham, and Nottingham City. In the case study sites both quantitative and qualitative data will be collected. We will recruit a maximum of seven survey-only sites. These survey-only sites include Manchester, Wandsworth, Buckinghamshire, and Sandwell, and negotiations are underway with Cornwall, Hampshire, and Rotherham. In the LAs where the survey only will be implemented, the aim is to ensure a high number of completions. We plan to achieve 500 completed surveys which will allow for analysis using key factors such as participants' age, gender, ethnicity, level of experience, and job setting. The LAs have been selected to provide a diverse sample in respect of geographical spread, urban/rural settings, ethnicity, and social deprivation (see Table 2). A number of networks, including the research team's own contacts, have been drawn on to recruit LAs. These include Research in Practice's network for Principal Social Workers in CSC and the Early Help network in SE England. At the time of writing, ten LAs have confirmed their participation. All LAs have been asked to sign a Memorandum of Understanding articulating the expectations of both participating LAs and the research team.

## Training module

As an incentive for LAs’ participation in the research, their EH/FS practitioners will be offered free access to an online training package co-designed with SafeLives, a national domestic abuse training provider. The training package of approximately two hours in length is being developed by SafeLives Pioneers – experts by experience with previous experience in developing training programmes. The survey will be integrated with the training package with practitioners completing the survey as a first stage prior to accessing the online training. They will also complete a short online survey post-training to provide an evaluation of this programme. The training offers a prototype for developing future training for these workforces.

## Data collection

The data collection strategy is designed to address the research questions as laid out below in Table 1:

Table 1: Quantitative and qualitative indicators aligned to research questions	
Indicators	Method
<b>Research Question 1: What are the skills and knowledge of domestic abuse in the early help/family support workforces</b>	
Identify practitioners’ knowledge and awareness of DA	Survey – to be completed by all staff participating in the training package co-designed by SafeLives.
Establish the levels of experience and qualifications family support and early years practitioners bring to their posts.	Survey and interviews with 5 case-holding frontline staff and 3 middle managers in each case study site. Interviews with EH/FS practitioners.
Identify what specific DA skills are required for early help and family support posts.	Documentary Audit: content analysis of job descriptions, person specifications from each case study site.  Interviews with senior managers and middle managers in all case study sites, interviews with representatives of specialist DA organisations. Manager and stakeholder interviews.
<b>Research Question 2: What training/CPD on domestic abuse is currently provided to the early help/family support workforces?</b>	
Identify training and professional development needs and experiences to date.	Survey – to be completed by all staff participating in the training package co-designed by SafeLives.



Consider wider training and professional development approaches used locally and what is perceived to be effective.

Interviews with 5 case-holding frontline staff, and 3 middle managers in each case study site. Interviews with EH/FS practitioners.

Consider the strategy for developing family support and early help services and workforce's skills and capacity in respect of DA.

Interviews with 3 senior managers (Director/Deputy Directors of Children's Social Care, PSWs for children and families, and Training Leads) in each case study site. Interviews with representatives of specialist DA organisations and training providers.

Identify what specialist training on DA is currently provided to early help and family support workers.

Survey and 5 interviews with specialist DA organisations and training providers. Interviews with EH/FS practitioners.

Identify what models are available for developing such training.

5 interviews with specialist DA organisations and training providers.

Summarise core messages and specific learning from established guidance and approaches to training and skills development in respect of DA.

Consideration of Welsh Government VAWDASV training framework and the NICE and BASW DA published guidance for social workers and related practitioners. Documentary Audit

**Research Question 3: How is the current identification/referral/knowledge /skills/ and understanding of domestic abuse assessed?**

Identify access to supervision, support, and specialist DA staff/expertise.

Survey –completed by all staff participating in the training package co-designed by SafeLives, interviews with 5 case-holding frontline staff, 3 middle managers in each case study site.

Identify opportunities for reflective practice.

Interviews with 5 case-holding frontline staff, and 3 middle managers in each case study site.

Summarise core messages and specific learning from established guidance and approaches to training and skills development in respect of DA.

Consideration of Welsh Government VAWDASV training framework and the NICE and BASW DA published guidance for social workers and related practitioners. Documentary Audit.

**Research Question 4: What are the gaps in the knowledge/skills/understanding of domestic abuse in the early help/family support workforces?**

Identify current levels of and gaps in skills, knowledge, and awareness in respect of DA.

Survey completed by all staff participating in the training package co-designed by SafeLives:

Consider whether understanding of DA and its relevance for practice is evenly spread across the workforces

Survey completed by all staff participating in the training package co-designed by SafeLives. Interviews with 5 case-holding frontline staff, 3 middle managers, and 3 senior managers in each case study site.

**Research Question 5: What specific topics do the early help/family support workforces need in terms of their knowledge/skills and capabilities regarding domestic abuse?**

Consider whether particular groups of practitioners need higher levels of training and supervision and identify specific topics that the EH/FS workforces need in terms of their knowledge/ skills and capabilities regarding DA.

Survey –completed by all staff participating in the training package co-designed by SafeLives. Interviews with 5 case-holding frontline staff, 3 middle managers, and 3 senior managers in each case study site.

Consider wider training and professional development approaches used locally and what is perceived to be effective.

Interviews with 5 case-holding frontline staff and 3 middle managers, in each of the 5-case study site.

**Research Question 6: How do specialist domestic abuse staff interact with the early help/family support workforces?**

Consider the role of specialist DA providers and practitioners within the multi-disciplinary landscape.

Interviews with 3 senior managers, 3 middle managers, and 5 practitioners in each case study site. 5 interviews with specialist DA organisations and training providers.

Identify where practitioners with specialist expertise are located in multi-agency family help services.

Interviews with 3 senior managers and 3 middle managers in each case study site.

## Research Question 7: What multi-agency practice models are currently used in early help/family support domestic abuse work?

Consider the role of specialist DA providers and practitioners within the multi-disciplinary landscape.

Interviews with 3 senior managers, in each case study site. 5 interviews with specialist DA organisations and training providers.

Identify where practitioners with specialist expertise are located in multi-agency family help services.

Interviews with 3 senior managers, in each case study site. 5 interviews with specialist DA organisations and training providers.

Summarise core messages and specific learning from established guidance and approaches to training and skills development in respect of DA.

Consideration of Welsh Government VAWDASV training framework and the NICE and BASW DA published guidance for social workers and related practitioners. Documentary Audit of LA EH/FS plans/strategies.

### Survey

Distribution of the link to the survey and training package and identification of potential interview participants will be organised via a named contact person in all LAs participating in the study. They will distribute the survey by email to all EH/FS staff both in the LA and in commissioned relevant partner agencies. These contact persons include service leads, Heads of Staff Development and those leading on Improvement. Communication and liaison with LAs will be facilitated by allocating a named researcher to each site. Since the request to participate in the study is likely to be cascaded through departments in some LAs rather than sent to a single list, we will not know the full distribution figures for the survey and will therefore be unable to calculate a response rate.

The survey will be completed online as the preliminary stage to taking part in the training module. Following the training, participants will be asked to complete a short evaluation of the training module. The survey has been designed to elicit demographic information and details of participants' work experience and job roles. Questions on previous DA training and on knowledge, attitudes, skills, and confidence in relation to work with children and families living with DA are included in the survey. The survey is being piloted to ensure its accessibility and acceptability.

### Semi structured interviews

In each of the five case study sites, semi-structured interviews will be undertaken via telephone or online Teams with 3 middle managers and 5 Early Help/Family Support practitioners. We will also interview 3 senior managers, with the aim of including interviews with: a CSC Director/Deputy Director, a PSW for children and families, and a Training Lead in each case study site.

An additional 5 interviews will be completed with representatives of 5 specialist DA organisations and training providers in England to provide a national picture of the needs and current specialist training and specialist DA support available to these workforces. These participants will be identified and contacted via the Connect Centre’s extensive networks in the DA sector. In selecting specialist organisations for interview, we will focus on those with a history of developing and delivering training and consultation to CSC.

### Documentary Audit

We will also analyse job descriptions and person specifications for EH/FS posts in all five case study sites with a view to determining whether and what level of DVA knowledge and awareness are specified. Where case study sites make these documents available, we will analyse any relevant policy or training strategies that address the EH/FS workforces’ training and/or practice in respect of DA.

Table 2: Key Characteristics of LA Sample

Local Authority	Population Size (Census 2021)*	Predominantly Rural/Urban/Mixed	Ethnicity (Census 2021)*	Social Deprivation (Index of Multiple Deprivation 2019)**	Any other CSC interventions or programmes	Other DA training
Hertfordshire (County) E10000015	1,198,798	Mixed	Asian, Asian British or Asian Welsh 8.6% Black, Black British, Black Welsh, Caribbean or African 3.7% Mixed or Multiple ethnic groups 3.8% White 81.8% Other ethnic group 2.1%	Overall ranking 135 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 0.14%/rank: 129 Rank of Average rank: 135 Rank of Average Score: 134 IDACI average rank: 126	Family Safeguarding Model	As part of Family Safeguarding Model
Lancashire (County) E10000017	1,235,354	Mixed	Asian, Asian British or Asian Welsh 8.1% Black, Black British, Black Welsh, Caribbean or African 0.6% Mixed or Multiple ethnic groups 1.6% White 88.9% Census says 86.6% Other ethnic group 0.7%	Overall ranking 78 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 15.08%/rank: 47 Rank of Average rank: 78 Rank of Average Score: 70 IDACI average rank: 87	Family Safeguarding Model	As part of Family Safeguarding Model

Lewisham E09000023	300,553	Urban	Asian, Asian British or Asian Welsh 9.0% Black, Black British, Black Welsh, Caribbean or African 26.8% Mixed or Multiple ethnic groups 8.1% White 51.5% Other ethnic group 4.7%	Overall ranking 28 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 2.96%/rank: 98 Rank of Average rank: 28 Rank of Average Score: 49 IDACI average rank: 18	Signs of Safety  Part of the Family Hubs and Start for Life programme	
Luton E06000032	225,262	Urban	Asian, Asian British or Asian Welsh 37.0% Black, Black British, Black Welsh, Caribbean or African 10.1% Mixed or Multiple ethnic groups 4.3% White 45.2% Census is 31.8% Other ethnic group 3.5%	Overall ranking 41 <sup>st</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 3.31%/rank: 95 Rank of Average rank: 41 Rank of Average Score: 54 IDACI average rank: 46	Signs of Safety  Part of the Family Hubs and Start for Life programme	
Nottingham City Data for Nottingham Local Authority E06000018	824,822	Urban	Asian, Asian British or Asian Welsh 14.9% Black, Black British, Black Welsh, Caribbean or African 10.0% Mixed or Multiple ethnic groups 5.9% White 65.9% Other ethnic group 3.3%	Overall ranking 10 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 30.77%/rank: 13 Rank of Average rank: 10 Rank of Average Score: 10 IDACI average rank: 2	Signs of Safety  Part of the Family Hubs and Start for Life programme	Commissioned training on DA
Manchester City Council (Locality) Data for Manchester Local Authority E08000003	551,938	Urban	Asian, Asian British or Asian Welsh 20.9% Black, Black British, Black Welsh, Caribbean or African 11.9% Mixed or Multiple ethnic groups 5.3% White 56.8% Census is 66.7% Other ethnic group 5.1%	Overall ranking 2 <sup>nd</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 43.26%/rank: 5 Rank of Average rank: 2 Rank of Average Score: 6	Signs of Safety  Part of the Family Hubs and Start for Life programme	

				IDACI average rank: 3		
Wandsworth and Richmond Data for Wandsworth Local Authority E09000032	327,506	Urban	Asian, Asian British or Asian Welsh 11.7% Black, Black British, Black Welsh, Caribbean or African 10.1% Mixed or Multiple ethnic groups 6.3% White 67.8% Other ethnic group 4.1%	Overall ranking 108 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 0.0%/rank: 130 Rank of Average rank: 108 Rank of Average Score: 113 IDACI average rank: 96	Family Safeguarding Model	
Buckinghamshire (Local Authority) E06000060	553,078	Rural / mixed	Asian, Asian British or Asian Welsh 12.4% Black, Black British, Black Welsh, Caribbean or African 2.6% Mixed or Multiple ethnic groups 3.5% White 79.9% Other ethnic group 1.6%	Overall ranking 145 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 0.0%/rank: 130 Rank of Average rank: 145 Rank of Average Score: 146 IDACI average rank: 144	Use their own collaborative working model: Early Help Partnership Strategy	
TBC Hampshire (County) E10000014	1,400,899	Rural / mixed	Asian, Asian British or Asian Welsh 3.8% Black, Black British, Black Welsh, Caribbean or African 1.0% Mixed or Multiple ethnic groups 1.9% White 92.6% Census is 93% Other ethnic group 0.8%	Overall ranking 136 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 0.84%/rank: 118 Rank of Average rank: 136 Rank of Average Score: 135 IDACI average rank: 138	Use their own practice Framework – Transforming social care	
Rotherham (Local Authority) E08000018	265,806	Urban	Asian, Asian British or Asian Welsh 5.3% Black, Black British, Black Welsh, Caribbean or African 1.1% Mixed or Multiple ethnic groups 1.4% White 91.0%	Overall ranking 40 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 21.56%/rank: 30	Part of the Family Hubs and Start for Life programme	

			Other ethnic group 1.1%	Rank of Average rank: 40 Rank of Average Score: 35 IDACI average rank: 45		
Sandwell (Local Authority) E08000028	341,832	Urban	Asian, Asian British or Asian Welsh 25.8% Black, Black British, Black Welsh, Caribbean or African 8.7% Mixed or Multiple ethnic groups 4.3% White 57.2% Other ethnic group 4.0%	Overall ranking 8 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 19.89%/rank: 36 Rank of Average rank: 8 Rank of Average Score: 11 IDACI average rank: 5	Signs of Safety  Part of the Family Hubs and Start for Life programme	
Cornwall (Local Authority) E06000052	570,305	Rural	Asian, Asian British or Asian Welsh 0.7% Black, Black British, Black Welsh, Caribbean or African 0.2% Mixed or Multiple ethnic groups 1.2% White 96.8% Other ethnic group 1.1%	Overall ranking 60 <sup>th</sup>  Proportion of LSOAs in the most deprived 10% nationally (decile 1): 5.21%/rank: 82 Rank of Average rank: 60 Rank of Average Score: 72 IDACI average rank: 76	Signs of Safety  Part of the Family Hubs and Start for Life programme	
<b>Census 2021 Total Population England</b>	56,490,048		Asian, Asian British or Asian Welsh 9.6% Black, Black British, Black Welsh, Caribbean or African 4.2% Mixed or Multiple ethnic groups 3.0% White 81.0% Other ethnic group 2.2%			

\*Census 2021 data as reported by 2021 Census Profile for areas in England and Wales. Nomis official census and labour market statistics, Office for National Statistics, [https://www.nomisweb.co.uk/sources/census\\_2021/report](https://www.nomisweb.co.uk/sources/census_2021/report)

\*\* Data Proportion of LSOAs in the most deprived 10% nationally, rank of average rank and average score, and Income Deprivation Affecting Children Index (IDACI) taken from File 11:

### **Liaison with local authorities**

The named contact persons recruiting staff to the survey and interview on behalf of the study will be asked to ensure that those participating in the study are employed as or managing EH/FS posts. The survey will ask for participants' job roles, so providing a second means of checking their eligibility. Named contacts in all LAs will be asked to emphasise that participation in both the research and the training is voluntary and they will be provided with an email template for recruitment making this clear (see Annex 3).

### **Participant Information**

The recruitment process for participation in both the survey and interviews with LA staff will include the provision of an information sheet (see Annex 3 for information sheets and consent forms). This will be distributed to staff by the identified LA contacts through their communication systems. For the interviews with national DA organisations, a designated member of the research team will contact the national organisations and provide them with an information sheet about the study. Consent to participate in the survey will be provided prior to practitioners starting the online survey and interview participants will be asked to complete a consent form prior to their interview, to be revisited prior to the start of the interview.

### **CPD certificates**

All staff who complete the surveys will be offered the option to request a Continuing Professional Development (CPD) certificate representing a three-hour contribution to research.

### **Accessibility of research and equality and diversity**

All participants will be employed in professional roles in LAs, third sector or national organisations and it is anticipated that they will have reading and language skills to enable them to respond to the interview and survey questions. Thus, literacy and language should not be barriers to participation in the study. The research team will ensure that the language of the survey and interview questions is clear, and that jargon is avoided; concepts will be well defined and explained for participants. The survey is being piloted with EH/FS practitioners in non-participating LAs to ensure accessibility. Should interview participants require a sign interpreter, the research team will work with the relevant LA to make this available.

### **Participant well being**

It may be the case that some participants have experienced or been victims of DA. Previous research has found that some members of the social care workforce have experienced DA in their private /personal lives – and this is sometimes what motivates them to work in this field. We will ask this question in the survey (with the option to state 'Prefer not to say') and a note has been added on the survey information sheet (see Annexes) at the end of the survey providing details of where respondents may seek support if affected. All of the research team are skilled and experienced interviewers and able to recognise and respond sensitively and ethically to signs of distress or discomfort. The survey tool and interview schedules have been designed to ensure that participants know we will ask sensitive questions, and these are appropriately positioned in the research tools.



## Diversity of Local Authority sample

The research team has been able to draw on recent census data to identify the ethnic mix of the local population in each research site. LAs have been selected for participation in the study with the aim of creating a diverse sample. The survey will collect key data on EDIE, which will capture the diversity of the workforces and may be incorporated into the analysis. In recruiting staff to interviews, the team will work with key contact persons in the LAs to construct diverse samples and we will ensure that we collect a range of demographic data from interview participants.

## Data Collection

Data collection will take five forms:

1. **Online survey for EH/FS practitioners** using Qualtrics software. As noted above, the first part of the survey will precede the online training package. The second part of the survey (which will be a short evaluation of the training) will follow it. The survey will be completed anonymously with an identifier used only to identify the LA site and distinguish one survey response from another. This is in accordance with data protection requirements and means that we will not be able to match pre- and post-surveys. We aim to achieve a total of 500 responses to the first part of the survey and we have recruited LAs accordingly (see above).
2. **Semi-structured telephone or online interviews with practitioners, managers, and senior managers** in five case study sites. Interviews with representatives of specialist DA organisations and training providers. All interviews will be recorded and transcribed with participants' informed consent.
3. **Documentary analysis of job descriptions** and person specifications for five case study sites.
4. **Analysis of LAs' policy or training strategies** that address the EH/FS workforces' training and/or practice in respect of DA in five case study sites.
5. **Core messages and relevant guidance** will be extracted and summarised from the Welsh Government VAWDASV training framework and the NICE and BASW DA published guidance for social workers and related practitioners.

Method	Sample size	Time point
Survey	To be completed by all staff participating in the training package co-designed with SafeLives (total N = c 500)	12 <sup>th</sup> June to 31 <sup>st</sup> July 2023
Interviews	5 case-holding frontline staff (N= 25) and 3 middle managers (N=15) in each of the 5 case study sites (total N= 40)	15 <sup>th</sup> May – 12 <sup>th</sup> June 2023
	3 interviews with Director/Deputy Directors of Children's Social Care, PSWs for children and families, and Training Leads in each case study site (total N = 15)	12 <sup>th</sup> June – 31 <sup>st</sup> July 2023
	5 interviews with representatives of specialist DA organisations & Training Providers (N=5)	12 <sup>th</sup> June – 31 <sup>st</sup> July 2023

Content analysis	Content analysis of job descriptions and person specifications for a sample of 10/12 early help and family support worker roles from each of the 5 case study sites.	15 <sup>th</sup> May – 31 <sup>st</sup> July 2023
	Analysis of LA's policy or training strategies that address the EH/FS workforces' training and/or practice in respect of DA in five case study sites. Consideration of Welsh Government VAWDASV training framework and the NICE and BASW DA published guidance for social workers and related practitioners.	15 <sup>th</sup> May – 31 <sup>st</sup> July 2023

## Analysis

The size of the final sample has been estimated in order that analysis can take account of factors such as age, gender, ethnicity, job role and levels of experience and qualification. Such analysis will inform understanding of whether awareness and knowledge of DA and confidence in responding to it is evenly spread across the workforces and whether particular groups of practitioners need higher levels of training and supervision. Analysis of survey data will be supported by specialist input from Dr Leslie Humphreys, a UCLan statistician with extensive experience in quantitative analysis in the field of DA research.

### Survey analysis

There will be three stages to the analysis. SPSS will be used.

#### Phase 1: data checking and preparation

All variables will be checked for missing values and internal validity. This process will allow us to make decisions about the inclusion/exclusion of variables for analysis that will enable us to answer our research questions, and to determine the need for further recoding (deriving new variables from the original variables) and re-categorising.

#### Phase 2: descriptive statistics (numerical and graphical)

Descriptive statistics will enable us to summarise the sample and their responses to questions that address the research aims.

#### Phase 3: analysis – exploratory and inferential

This phase of the analysis will provide more nuanced insights into the research questions. It will allow us to understand differences in the themes outlined below in terms of personal characteristics, job role and experience; levels of training, and perceptions of this training (RQ 2); the nature and extent of DA that staff deals with (i.e., the information captured by questionnaire questions 1-5):

- Knowledge of relevant policy (questionnaire questions 6-8; RQ 1)
- Levels of knowledge around DA generally, its effect on victim survivors, and how to respond to victim-survivors and their children (questionnaire questions 9-23; RQ 1)
- Attitudes/beliefs around causes of DA (questionnaire questions 24-30; RQ 1)
- Actions are taken when responding to DA (questionnaire question 31; RQ 6)
- Knowledge of/access to services and support (questionnaire questions 32-35; RQ 3)

- Perceptions of the extent to which training is needed or not (questionnaire questions 36-46; RQ 4 and 5)

Initial exploratory analysis will be carried out using bivariate hypothesis tests on these themes (e.g., differences in levels of knowledge around DA according to experience; differences in levels of knowledge around DA according to the job role).

The exploratory analysis will inform the inferential statistical analysis. The inferential analysis will involve fitting a series of multiple regression models that will address research questions 1-5. For example, we will fit a model to estimate the effect of all variables of interest on access to support (RQ3). Variables of interest include job role/experience, level of training, etc. All other variables will be controlled for in the model. We will choose an appropriate modelling method from the family of generalised linear models. These methods will be determined after examination of the distribution of the outcome variables of interest.

### Interview analysis

All interviews will be recorded with the participants' permission and professionally transcribed. Following this, the interview data will be initially analysed. We plan to use a framework approach (18) to the analysis of qualitative data with the framework constructed to incorporate themes and sub-themes that reflect the key research questions (see above). Interview transcripts will be coded against these themes with relevant passages of text entered into the framework. Research team members will work on the analysis of interview data in pairs to allow opportunities for discussion and sense-checking (19). Professor Stanley will provide quality assurance in this process.

## Limitations

### Timeframe

The main limitation of this study is the tight timeframe of five months which stretches over the summer holiday period when data collection is difficult. The need to recruit LAs rapidly to the study has meant that the research team has needed to rely on their own and other networks for recruitment, but this is often the case when recruiting study sites for research. The rapid nature of the study requires us to rely on LAs to distribute the survey on our behalf. A short extension has allowed the timetable to be adjusted to enable qualitative interviews to be completed with practitioners in case of study sites prior to distributing the survey, so avoiding any contamination of interview data by the training.

### Inclusion of third and voluntary sector organisations

The EH/FS workforces are increasingly multi-disciplinary (20) and third-sector organisations may be contracted by the LA to deliver EH/FS services. The survey will aim to reach those EH/FS practitioners employed out with LAs. However, reliance on key LA contacts to distribute the survey to those organisations means that we cannot be confident that all relevant staff in third sector/voluntary organisations will receive the request to participate in the survey. Survey questions about job role and sector have been designed to ensure that it is possible to identify these staff and to check they meet the study's definition of EH/FS practitioners. Any practitioners responding from specialist DA organisations will be identified and excluded from the sample.

## Response rates

A cascade approach to distributing the survey across LAs means that we will not be able to calculate response rates. There are very limited data available currently on the EH/FS workforces or their service users (13), so it will not be possible to provide an accurate check on the extent to which the population surveyed is representative of the national picture. However, including a substantial number of LAs in the survey increases the likelihood of achieving a sample that is representative of these workforces in England.

## Individual matching of pre and post surveys

Data protection concerns mean that we will not be able to match pre-and post-surveys, but the evaluation of the prototype training programme is not a major component of this study and is not included in the research questions. Nevertheless, the inclusion of a brief evaluation of the training can be used to inform future work on developing the skills and knowledge of these workforces in relation to DA.

## Outputs and dissemination

We will deliver monthly progress reports, a short research protocol, and a final report (with the potential for producing these in flexible formats to assist speed and accessibility). Additionally, we will produce short headline finding reports for each case study and survey-only site, peer-reviewed articles, and papers for relevant conference audiences such as ISPCAN. We will draw on our extensive networks to ensure comprehensive dissemination of findings. The Connect Centre has a membership of over 500 local and national practitioners, researchers, policy developers, and commissioners while the KCL and UCLan Making Research Count networks encompass over 20 local authorities. Both the Connect Centre and HSCWRU deliver regular workshops and webinars to practitioners, reaching over 15,000 participants annually.

## Project management

### Personnel

Name/title	Role	Research activity	Key dates / Milestones
Professor Joanne Westwood	Principal Investigator UCLan	Research design, ethics application, liaison with LAs, reporting to commissioners. Data analysis & synthesis; write-up & dissemination. Research team management and coordination.	1 <sup>st</sup> April – 15 <sup>th</sup> May  12 <sup>th</sup> June – 30 <sup>th</sup> September
Professor Nicky Stanley	Research team member UCLan	Research design, quality appraisal, liaison with specialist DA organisations. Data synthesis, write-up & dissemination. Mentoring of Prof Westwood.	1 <sup>st</sup> April – 15 <sup>th</sup> May  12 <sup>th</sup> June – 30 <sup>th</sup> September

Dr Helen Richardson Foster	Research team member UCLan	Survey design, liaison with LAs, data collection, survey analysis, write-up & dissemination.	1 <sup>st</sup> April – 12 <sup>th</sup> June 1 <sup>st</sup> August – 30 <sup>th</sup> September
Dr Sophie Hallett	Research team member UCLan	Liaison with SafeLives training provider on developing the online training module. Liaison with LAs. Interviews with stakeholders/training providers Interviews with Practitioners. Qualitative data analysis, write-up & dissemination.	1 <sup>st</sup> April – 31 <sup>st</sup> July  15 <sup>th</sup> May – 12 <sup>th</sup> June
Dr Mary Baginsky	Research team member KCL	Liaison with LAs, and interviews with Managers. Qualitative data analysis, data synthesis, write-up & dissemination.	12 <sup>th</sup> June -31 <sup>st</sup> July  1 <sup>st</sup> August – 30 <sup>th</sup> September
Dr Nicole Steils	Research team member KCL	Interviews with Practitioners. Qualitative data analysis, data write-up & dissemination. Documentary analysis	12 <sup>th</sup> June -31 <sup>st</sup> July  1 <sup>st</sup> August – 30 <sup>th</sup> September

## Risks

Risk	Mitigation	High / Medium / Low
Significant pressures on LAs reduces number of case study sites.	<ul style="list-style-type: none"> <li>We are able to leverage our existing networks and relationships established through social work education, through the Connect Centre for International Research on Interpersonal Violence and Harm's networks through the Making Research Count network. Other relevant networks have been contacted to assist recruitment of LAs.</li> <li>Negotiations with a number of LAs opened early - they have found the offer of a free training package attractive.</li> <li>Initial invitations provide clear information about time and resource implications, and the value of taking part, including the offer of feedback in respect of training needs and outcomes.</li> <li>The recruitment of survey-only LAs to the study offers potential to adopt these sites as</li> </ul>	Medium

	replacements to address any possible attrition.	
Delays due to difficulties in appointing staff or drawn-out ethics processes	<ul style="list-style-type: none"> <li>The pooled resources of two research centres with a range of skills have allowed staff to move on to this project swiftly. UCLan will use staff with established posts in this study.</li> <li>UCLan's ethics committee commits to responding to applications within 2 weeks.</li> </ul>	Low
Staff sickness or other absence	<ul style="list-style-type: none"> <li>Resilience is built into the team structure to ensure that any staff absence could be covered by members of the team. Both research centres have a wider capacity that can be harnessed to cover any unexpected longer-term absences.</li> </ul>	Low
Low interview uptake and low survey responses	<ul style="list-style-type: none"> <li>Regular monitoring of the survey completion by each LA is built into the project.</li> <li>Completion rates will be discussed in ongoing liaison with LAs.</li> </ul>	Medium
Training developed by the SafeLives pioneers is delayed	<ul style="list-style-type: none"> <li>Regular communication with SafeLives and ongoing review of the training.</li> </ul>	Medium
Risk of contamination between the research and the evaluation survey/training strands of the study.	<ul style="list-style-type: none"> <li>Interviews with practitioners have been scheduled to precede survey and training completion, to reduce the risk of contamination. A small number of practitioners completing the survey will have already completed interviews with the research team, but these will be few in number: potentially 25 in a sample of c500 (c5%).</li> </ul>	Medium

## Compliance

### Registration

This study will be registered with the Open Science Framework (OSF).

### Ethics

An application for ethical approval for the study was submitted to UCLan's research ethics committee by the Principal Investigator 19<sup>th</sup> April 2023 and amendments were submitted on 6<sup>th</sup> May and 10<sup>th</sup> May 2023. Two of the LAs have requested Research Governance

applications (Cornwall and Hertfordshire). Cornwall have confirmed approval for the study, and we await the outcome of the Hertfordshire Research Governance panel.

LAs will provide their staff with an information sheet about the survey (designed by the research team, see Appendix 5) and disseminate this to their staff through their current systems. Participants in the survey will be able to see the information again at the start of the online survey.

LAs will provide LA practitioners and managers with information sheets about the research and its objectives (designed by the research team, see Appendix 6 and 7) and identify staff to participate in interviews. Informed consent procedures will be used (see Appendix 1).

All survey responses will be anonymous with respondents identified by a numerical identifier which includes a code for their employing LA. Interviewees will also be anonymised. The survey asks respondents a direct question about their personal or family experience of DA and it is possible that such questions and a broader discussion of DA knowledge and awareness might evoke distress. We will therefore provide all survey participants with information about relevant sources of support should they require them.

The research team meets regularly, and team members will be able to raise any issues regarding their well-being with the PI or the KCL lead who will be able to signpost them to the University well-being services if required.

A designated member of the research team will contact the national DA organisations and provide them with information about the study and follow this up with an invitation to participate. Informed consent procedures will be adopted as above.

## Data Protection

Our overarching 'Research Data Protection Statement' is available here. The below is specifically relevant to the project to which this document applies. Any questions about this section can be submitted to [dpo@theevidencequarter.com](mailto:dpo@theevidencequarter.com) with a reference to the Data Protection Identifier (DPID) found in the table below.

Regulatory framework	
Relevant legislation	UK Data Protection Act 2018 (DPA) UK General Data Protection Regulation (GDPR)
Data Protection Identifier (DPID)	#3047
DPIA outcome/ risk level	Low
Type of data processing	To set up interviews and have a link to a survey sent out (which collects anonymous data).
Categories of data subjects	<ul style="list-style-type: none"> <li>• Early Help and Family Support Practitioners = Approx. 500</li> <li>• Allied Professionals (DA providers) = 60</li> </ul>
Privacy notice (PN)	Bespoke PN written by WWEICSC to be provided to all data subjects whose data will be processed.
Personal data	

Lawful basis	The lawful basis for processing personal data shall be in accordance with GDPR Article 6.1(e) "public task"
Justification for the lawful basis	<p>What Works for Early Intervention and Children's Social Care (WWEICSC) is acting upon the instructions from the DfE in accordance with Annex K of the Grant Offer Letter to WWEICSC, where it is stated that WWEICSC acting as a Processor on behalf of the DfE as Data Controller, and the subject matter of the processing "is needed in order that the Processor [WWEICSC] can effectively deliver the grant to provide a service to the Children's Social Care sector".</p> <p>WWEICSC is therefore acting under the authority vested upon it by the DfE as its funder which appropriately corresponds to WWEICSC conducting its research under Article 6.1(e) of the UK GDPR:</p> <p style="text-align: center;">"Processing is necessary for the performance of a task carried out in the public interest."</p>
Special category data	
Lawful basis	N/A (no special categories processed)
Justification for the lawful basis	N/A
Roles	
Data controller(s)	What Works for Early Intervention and Children's Social Care (WWEICSC), University of Central Lancashire (UCLan) and King's College London (KCL)
Data processor(s)	Suppliers to the data controllers governed under UK GDPR Article 28. E.g., transcription services, storage and communication service providers etc.
Data sharing mode	<ol style="list-style-type: none"> <li>1. Limited access given to a secure MS <a href="#">OneDrive</a> Folder</li> <li>2. Limited access given to a secure MS Teams Site (<a href="#">via a link sent to the transcriber</a>)</li> </ol>
Archiving	
Archiving	N



Archive used for this project	N/A
Linking to NPD and use of SRS	
Name of the organisation(s) submitting data to the NPD team	N/A - No children's data collected in this research
Name of the organisation(s) accessing the matched NPD data	N/A - No children's data collected in this research
Retention and Destruction	
Expected date of report publication	September 2023
Expected date of data destruction	August 2030

If you are looking for further clarification regarding our data protection notification requirements, they will either be found in the project-specific Data Privacy Notice and/or our Privacy Policy on our website. If you have any further questions about either of these please submit them to [dpo@theevidencequarter.com](mailto:dpo@theevidencequarter.com) with a reference to the Data Protection Identifier (DPID) found in the above table.

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**Research Protocol  
SKAFADA**  
**Research team (institution):**  
**Principal investigator(s):**

Template Version: 1.1  
Template last updated: April 2023

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## **APPENDICES**

### **Annex 1: Draft Survey**

Appendix 1: Survey pre and post training survey

### **Annex 2: Interview schedules**

Appendix 2: Interview schedule-Support and practitioners

Appendix 3: Interview schedule-Managers

Appendix 4: Interview schedule-Stakeholders

Appendix 5: Information sheet

### **Annex 3 Information e mail, sheets and consent forms**

Appendix 6: Interview info for practitioners

Appendix 7: Interview info for managers

Appendix 8: Stakeholder training information

Appendix 9: Participant consent form

Appendix 10: Email invitation