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## AN EVALUATION OF THE RESTORE PILOT PROJECT - YEAR ONE (APRIL 2015 – APRIL 2016)

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The Extent to which a Restorative Justice Approach Contributes to Successful Outcomes for Children and Young people who have been Sexually Abused, those who have harmed them and their Families.

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# Chapter 1 – Introduction

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## 1.1 Background & Overview

The R e s t Δ r e Pilot, led by The Green House in collaboration with the North Bristol NHS Trust Be Safe Service and the Bristol City Council Youth Offending Team (YOT) is a multiagency restorative justice pilot project.

The aim of the pilot is to enable children and young people who have experienced sexual abuse and have been harmed by another child or young person to access support to participate in a restorative justice approach, where this is assessed as in their interests and considered safe to do so.

The R e s t Δ r e Pilot combines the resources and expertise of three experienced Bristol based organisations in order to provide a more robust, considered and holistic approach to working with ‘*victims*’ of sexual abuse / those who have been harmed and those who initiate the abuse. We have chosen to use this latter terminology on the basis that children and young people who are victims of sexual abuse are much more than victims and are likely to have experienced various harmful impacts from the behaviour.

The Green House is a specialist sexual abuse counselling / therapy service, providing free therapy to children, young people, men and women affected by sexual abuse or sexual violence at any point in their lives. With over 30 years’ experience working in this area, the organisation has built up a strong reputation for making a difference to the lives of those who have experienced trauma through delivering professional services with proven outcomes.

The Be Safe Service works with children and young people who have engaged in problematic / harmful sexual behaviour and their parents / carers across Bristol and South Gloucestershire, offering advice, consultation and training to professionals, and direct assessment and intervention services to children, young people and their parents / carers and families. Be Safe is a specialist multi agency partnership commissioned by Community Children’s Health Partnership services and have been working in this area for over 8 years. Be Safe work closely with The Bristol Youth Offending Team (YOT) who make referrals to Be Safe.

The Bristol Youth Offending Team (YOT) is a criminal justice multiagency public organisation supervising young people who are also young offenders (and working with their parents / carers and their victims). Their aim is to prevent young people from offending or re-offending and this is achieved through developing consistent and effective responses to youth crime. In terms of reparative work the YOT can help young people to understand the impact of their offending by involving them with those who they have harmed and, where possible, arranging for them to address the damage caused as a result of their crimes. Staff at the Bristol YOT regularly use restorative justice approaches as part of practice and some staff are trained in using restorative justice approaches with young people who sexually harm. Daniel Smart (Team Leader for the North Area Resources Team) represents the Bristol YOT as part of the R e s t Δ r e multiagency partnership.

In 2015 Stephen Barry, Service Manager / Lead Clinician at the NHS Be Safe Service, approached Michelle Windle, Director of The Green House about the possibility of working collaboratively to apply a multiagency restorative justice approach to practice.

Commonly situations arise whereby The Green House supports children or young person who have been harmed and Be Safe offers intervention to the children or young person who have harmed them. Many incidents of sexual abuse taking place between children and young people happen within the context of the family or extended family unit.

Stephen identified that a joined-up approach to providing sexual abuse services, using a restorative justice model might contribute to more successful outcomes for the clients and families involved, through opportunities to resolve and restore the damage that has been caused as a result of the abuse, which would not usually be an option.

In April 2015 The Green House, in collaboration with The Be Safe Service and The Bristol YOT was awarded a Community Safety Grant from Avon & Somerset Police & Crime Commissioner to run a pilot of The R e s t Δ r e Project for one year from April 2015 to April 2016.

The R e s t Δ r e Pilot addresses a number of the key priorities highlighted in The Avon & Somerset Police & Crime Commissioner's Crime Plan for 2015 – 2017. 'Tackling domestic and sexual abuse' and 'Putting victims first' were introduced as two of the five main priorities outlined by Sue Mountstevens (Police & Crime Commissioner) in her plan.

In terms of 'Tackling domestic abuse and sexual abuse' the PCC Plan highlights that its approach for 2015-2017 will be to:

- *Improve the way agencies work together to provide efficient and effective support and prevent victimisation through early intervention*
- *Encourage victims to access the support services available to them*
- *Raise awareness and be a visible leader in the campaign against these forms of abuse and exploitation*
- *Support, monitor and oversee improvements in the consistency, quality and stability of critical services being provided to victims*

In terms of 'Putting Victims First' the PCC Plan highlights that its approach for 2015-2017 will be to:

- *Work closely with partners to ensure that victims experience high quality joined up support that is tailored to their need and that the voice of the victim continues to be heard in the criminal justice system*
- *Ensure all the services commissioned to support the most vulnerable victims of crime and anti-social behaviour are working effectively and helping victims to cope and recover from their experience*
- *To support a consistent approach to Restorative Justice across Avon and Somerset, directly commissioning Restorative Justice Services to ensure more victims are offered this resolution at a time that is appropriate to them*

The R e s t Δ r e Pilot aims to address the issue of sexual abuse from an innovative standpoint, through working closely as a multiagency partnership and drawing together a variety of expertise. The needs of those who have been harmed are put first and opportunities are provided for the incidents of sexual abuse which have occurred between children and young people to be viewed holistically, enabling those who have been harmed, those who have harmed them, and their families to move forward more positively through the use of a restorative justice approach.

Through delivering the pilot our aim is also to raise awareness about some of the issues surrounding sexual abuse. By the end of the pilot, we aim to be in a position to provide a model of service delivery which:

- Offers a multiagency approach
- keeps those who have been harmed at the centre
- And which can inform others about the way in which restorative justice approaches can be adapted for use with this client population

## 1.2 Aims of the Pilot

In April 2015, The Green House was awarded a grant (on behalf of the multiagency partnership) from The Police Crime Commissioner Community Safety Grant. An agreement was drawn-up between Bristol City Council Safer Bristol Crime, Drugs and Alcohol Partnership and The Green House to achieve the following aims, objectives, outputs and outcomes –

### **Pilot Aim**

To assess the extent to which a restorative justice approach contributes to successful outcomes for the partnership's clients aged 18 years and under.

### **Key Objectives**

- To ensure that all professionals involved in the pilot understand restorative justice and the pilot's aims and objectives, and to clarify the partners' roles and responsibilities.
- To ensure processes are in place to pilot and evaluate the impact of RJ in this context.
- To identify and prioritise the needs of the young people who have been harmed, who will participate in the pilot.
- To develop and implement an evaluation process to gather qualitative and quantitative evidence of the pilot's impact.

## Pilot Outputs

### Partnership

- Develop a multiagency partnership to support the delivery of the pilot.
- Meet as a partnership bi-monthly to review progress and identify emerging issues.
- Develop and agree professional guidance to support the professionals delivering the pilot.
- Identify and respond to professionals' learning needs in relation to restorative justice.

### Processes

- Develop and implement administrative, reporting and support processes.
- Develop and agree and pilot action plan.
- Develop and undertake a formative evaluation of the pilot.

### People

- Introduce and discuss the restorative justice approach with the young people who will participate in the pilot.
- Engage six victims aged 18 years and under, living in Bristol, to participate in the pilot between October 2015 and April 2016.

## Pilot Outcomes (immediate, intermediate and long term)

- Increased victims' sense of wellbeing
- Reduced victims' symptoms of trauma, anxiety and/or depression
- Decreased victims' risk taking behaviour and harm to self
- Improved victims' relationships
- To reduce repetition of harm.
- To empower victims while protecting their safety.
- To enhance the sense of responsibility of those who have harmed them for their actions, while increasing their awareness of the true impact.

## 1.3 Theoretical Basis for the Pilot

The majority of sexual abuse happens within the family (63% based on The Green House's client data) and statistics from The Home Office tell us that 30-35% of all sexual assaults are committed by young people under 18 years.

Relationships within the family unit are obviously deeply affected when interfamilial abuse occurs and family breakdown is a common occurrence with our clients.

An NSPCC review of services for victims of sexual abuse in 2009 concluded that there was *'a huge shortfall in counselling leaving thousands of sexually abused young people struggling to recover.'*

Henniker and Mercer (2007) rightly note that *'Victims of sexual abuse are often the forgotten element of statutory agencies charged with the responsibility of addressing sexual abuse. Until recently, victims have been ignored by mainstream criminal justice; in respect of victims of sexual offending this can have even more profound and far reaching consequences.'* They go on to note that sexual abuse can devastate individual lives, of both the abuser and the victim, but it can also have a devastating effect on all those affected by the behaviour; siblings, parents, carers, extended family & even the broader community... *'Restorative justice recognises the ripple effect of harmful sexual behaviours and puts the emphasis on restoration, repair and reintegration.'*

Bera when referring to sex offenders argues that *'victims and offenders are generally treated in a fragmented, inadequate and isolated manner, ignoring the context in which the abuse has occurred. ...Both victims and offenders verbalise and act on misattributions of responsibility, ...they can be most completely treated by bringing victims and offenders together in a carefully prepared, safe and controlled context...'*

A Youth Justice Board Restorative Justice source document (Sherman et. al., 2008) highlighted the value of restorative justice approaches in working in cases where there is a victim of more serious crime citing a Canberra study (Strang, 2002) of victims of young offenders noting that they are less likely to fear repeat victimisation, to suffer anxiety, to be angry at

their offenders, or to feel insecure and untrusting after they had had their violent or property crime dealt with in an RJ conference than before the conference. They noted clear benefits to victims and the importance of face to face communication and in some cases a reduction in the impact of PTSS.

Whilst we recognise that not all those who have been harmed sexually may wish to engage in a process which brings them together with the person who has harmed them, The R e s t Δ r e Pilot provides children and young people with an opportunity to consider their relationships with those involved and provides opportunities for the harm and impacts to be addressed openly within a supportive setting.

## 1.4 Why is a Restorative Approach Different?

*'Restorative justice works to resolve conflict and repair harm. It encourages those who have caused harm to acknowledge the impact of what they have done and gives them an opportunity to make reparation. It offers those who have suffered harm the opportunity to have their harm or loss acknowledged and amends made'.*

(RJ Consortium 2006)

When sexual abuse occurs often close family members and relationships within families are affected, and can break down as a result. This can be very distressing for everyone. The aim is that through the use of a restorative justice approach children, young people and families can move forward more positively from what has happened, having been provided with the right support at the right time.

Acknowledging where responsibility and boundaries lie is an integral part of the therapeutic process and using a restorative justice approach with both parties involved adds considerable strength to this. Introducing a restorative justice approach takes into account the needs and interests of the person who has been harmed, is led by their wishes, needs and is carried out in a safe way with support from a range of professionals.

The R e s t Δ r e Pilot draws together the specialist skills of the different agencies working within the same field and creates opportunities for all three agencies to learn and develop their practice through this experience.

This approach to working with children, young people and their families addresses the issue of sexual abuse head on and provides support for all parts of the family system affected by the issue. Family breakdown as a result of sibling sexual abuse is very common and the pilot presents innovative ways of addressing this.

**The aim of the project** is for children and young people who have been sexually abused to access individual therapy from The Green House, and for the children and young people who have harmed them to be supported. This support comes from either the Be Safe Service or the Youth Offending Team and seeks to enable them to consider the harm they have done and to learn ways to act safely. The three agencies involved in the project have developed a range of processes for information sharing and working together.

If appropriate and where assessed as in the interests of those harmed and safe to do so, support will be provided for the children and young people receiving interventions from the partnership organisations to participate in a restorative justice approach. Taking part in this approach may include one or a combination of the following interventions - engaging in a facilitated family meeting / being supported to receive an apology letter from the child or young person who has harmed, with the option to respond if they wish / having a representative attend a restorative justice meeting on their behalf.

Any face to face meeting would need to be informed firstly by the needs of the child / young people who has been harmed and include preparation for all parties involved and follow the processes outlined within the assessment. A face to face meeting would only take place when the young person who has harmed has learnt to manage their harmful sexual behaviour safely, the person harmed feels safe and in control, where safe guards are in place and contributory factors have been addressed.

It is important to consider both the risks to such a meeting as well as the potential benefits.

The starting point for the majority of restorative justice work is within the criminal justice arena. The R e s t Δ r e Pilot locates restorative justice within a therapeutic context, with the needs of those who have been harmed at the centre of the process. This feels like an important shift in focus and in our thinking around how restorative justice can be approached.

In cases where there has been sexually harmful behaviour between siblings / family members the relational context is paramount and is what makes restorative justice in these cases very different from other types of offences. There needs to be a renegotiation of the future relational context. Siblings will still be siblings.

For some children and young people, a carefully supported restorative justice process might be the only opportunity they have to re-build relationships with brothers or sisters, if this is what they are looking for, or for their parents / carers to truly acknowledge what has taken place and for responsibility for what has happened to be located accurately.

For some children and young people these opportunities might be the difference between never seeing a sibling or a cousin again and gaining a more in-depth understanding of what happened, why this happened and moving forward more positively as a family.

## **Chapter 2 – Evaluation Aims & Methods**

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### **2.1 Purpose & Scope of this Year One Report**

The purpose of this year one report is to review the work which has been conducted over the last year and to present an account of how a multiagency framework has been established which supports the The R e s t Δ r e partnership in conducting restorative justice work with this client population.

Essentially this report is a summary of where we are, how we got here and our progress so far.

Having been granted continuation funding from the PCC to run the pilot for a further year (April 2016 - April 2017), our aim with this evaluation is also to highlight the challenges and key areas for learning which have been identified over the past 12 months, and which will be used to inform our next 12 months of work.

### **2.2 Research Questions**

Within this report we will explore how a robust multiagency framework to support the successful introduction of a restorative approach to practice with this client population has been established. Specifically, we will explore the development of the partnership, of the processes we have developed, and the work we have done to date with clients engaged with the RJ process.

#### **2.2.1 Partnership**

We will explore what has been involved in working collaboratively as a multiagency partnership to develop a shared understanding of the aims and objectives of the pilot and in developing appropriate guidance to support this approach.

#### **2.2.2 Processes**

We will explore the process of identifying potential participants for the pilot and how and when a restorative approach was introduced into the work and what our learning around this has been. This will include a discussion about the challenges we've faced and the areas of difficulty we've come across as well as our successes along the way.

Quantitative and qualitative data in the form of outcomes gathered and questionnaires completed as part of the therapeutic process with those who have been harmed will be shared, as well as our reflections and interpretations of the clients' journeys through therapy, whilst working with a restorative approach in mind.

#### **2.2.3 People**

We will explore the cases we have been working on, and provide case study examples of the work.

We will discuss the nature and complexity of the cases we've been working on and the importance of using a sensitive and considered approach to introducing restorative processes as part of practice, and the reasons for this.

## 2.2.4 Looking Ahead

Finally we will summarise our findings and what we have learnt over the course of this process in order that we can compile recommendations to inform the next 12 months of work.

## 2.3 Methods

This report has been compiled through a process of consolidating the information and the guidance which has been developed by the multiagency partnership over the last 12 months, including our learnings, findings and outcomes.

The learning we've acquired in terms of working collaboratively as a multiagency partnership and establishing a framework which supports this work, will be based on our experiences as a network and our reflections of these experiences.

The majority of the outcomes and outputs presented in this first year evaluation is from the point of view of those who have been harmed and who have worked directly with The Green House. For the second end of year report as the pilot develops, we will be able to widen the study to include the outcomes and outputs of the clients who shown sexually harmful behaviour as well as those who have been harmed, increasing the data available across the three partnership agencies involved in the pilot, as well as the perspectives of the partners.

Quantitative data which records the experiences of those who have been harmed and who have engaged in the process will be highlighted through the CORE YP outcome measure, completed at intervals as a routine part of therapeutic practice at The Green House.

The CORE (Clinical Outcomes in Routine Evaluation) YP outcome measure is a self-report questionnaire designed for young people (11-16 years), and is a simplified version of the CORE-OM outcome measure originally designed for adults.

Over the course of the year we supported a number of children / young people who fall into the category of having been sexually abused by another child or young person and were potential candidates for the pilot. Not all of these children / young people were approached to participate in the restorative justice process as once they had started therapy with us it was established that they did not fulfil the guidance criteria. However, the restorative approach was incorporated into their therapy that we provided and we have provided the outcomes from the whole cohort to provide insight into their outcomes and how the pilot has informed our work.

## Chapter 3 – Review of Progress to Date

### 3.1 Establishing the Partnership

Our aim from the start of the funded R e s t Δ r e Pilot was to build positive working relationships as a multiagency partnership and to understand more about each of the services we offered.

A number of initial meetings were held between The Green House, Be Safe and The Bristol YOT. Practice was shared and ideas were raised. At this early stage we agreed to meet on a bi-monthly basis to review progress and identify how emerging issues could be addressed. By sharing information about our services and models of practice, we were able to:

- Think further about how a restorative justice approach could be introduced within this context.
- Consider how a restorative approach might be integrated as part of our own individual practice models and from a practical point of view.

Through this detailed groundwork, we developed as a partnership and built a shared understanding of restorative justice within the context of sexual abuse and sexual harm, and considered the benefits for our clients of thinking ‘systemically’ when abuse has taken place within families. This enabled us to:

- Address and agree administrative processes and information sharing protocols to ensure relevant data would be shared in appropriate detail and format and how our communication would work.
- Establish referral systems and identify and agree referral criteria for clients who might be considered suitable for participation in the pilot.
- Produce guidance for introducing a restorative approach.
- Discuss how and when the idea of a restorative justice approach would be introduced with clients in the separate services and what issues needed to be thought about with regards to this.

Identifying clients’ needs relating to their participation in the pilot was a crucial discussion topic and one which we have returned to thinking about throughout the course of this work, because of the innovative nature of the pilot which means that there are no clear ‘templates’ from similar work.

By the end of Year 1, The Green House had produced and agreed with partners a project action plan defining responsibilities, timescales, outputs and outcomes where partner agencies took responsibility for agreed activities and contributed to the partnerships’ objectives.

At a relevant stage in the process, once services were underway with their individual pieces of work with clients who had been identified as potentially suitable for participation in a restorative approach, Be Safe worked in collaboration with The Bristol YOT to produce a multiagency assessment guidance document, which could be used across the three agencies to determine client ‘suitability’ and ‘readiness’ to engage in a restorative justice process.

## 3.2 Identifying Additional Partners

The Restore project is both innovative and risky. It was, therefore, important to build it on firm foundations that are aligned with existing restorative justice work and practice standards. We have been fortunate to work with and receive advice, guidance and training from the following people:

- Helen Rosenthal
- Dr. Marian Leibmann
- Vince Mercer
- Dr. Nadia Wager

*(For biography details please see Appendix 1.)*

Linking with these key professionals has provided us with a range of resources to consider, research which has taken place, frameworks which have been developed as well as examples of restorative justice work taking place both nationally and internationally which are relevant to this pilot. These partnerships have helped us to gain confidence in the solidity of the programme and validity of this approach, even in this difficult area of work.

## 3.3 Developing Referral Processes and Protocols for Joint Working

During the first six months of the pilot (April – October 2015) the three partnership agencies worked closely together to clarify roles and responsibilities through the establishment of a clear, transparent multiagency framework to support the successful delivery of the project. This process involved developing clear cross agency protocols and procedures for using a restorative justice approach with this client population. Given the sensitivity of this work, especially when it is delivered in a multi-agency context, this was a lengthy piece of work. We believe that this investment of time was invaluable and enabled us to build a stronger project.

*‘Referral Protocol’ and ‘Guidance for Introducing a Restorative Approach’ was produced as well as a ‘Parent / Carer Information and Consent Form’ (Please see Appendix 2, 3 & 4).*

To capture the processes of a client's journey, the partnership developed the flowchart below. This demonstrates an example of the journey our clients might follow through their engagement with the different partnership services and the points at which they might be identified as suitable for participation in the restorative process.

## The Restore Project – Flowchart

Client A – Child or young person who has been harmed / Client B – Child or young person who has harmed them

Clients A & B are identified as potentially benefitting from involvement in the Restore Pilot



Clients A & B start their individual work with The Green House and BeSafe (this may not happen simultaneously)



At the appropriate stage (at The Green House once the client reaches their 6 week review) the Info. Sharing & Consent Form will be shared and discussed



If the client/s & their parents/carers feel able to 'give their consideration' to being involved in the pilot - the Info. Sharing & Consent form will be signed



A planning meeting will take place between The Green House / BeSafe / YOT to discuss the process for working with the identified clients A & B in the individual services



Where an RJ process is still appropriate and when the clinician working with the individual client (A or B) feels confidently able to answer the assessment questions on behalf of the client - the assessment will be introduced verbally and discussed with the client and then completed by the clinician (possibly in collaboration with a colleague)



The assessment outcome is shared between partner agencies



According to the timing of services and the individual pieces of work being conducted, there may be a lapse in time from the completion of the assessment in one service until the assessment is completed in the other.



A planning meeting will take place between The Green House / Be Safe / YOT to discuss the process for introducing an RJ intervention if this is still appropriate



Next Steps - planning and preparation for RJ.....

### 3.4 Reaching Agreement about who is Suitable for Referral to the Pilot

Once we had produced the *'Referral Protocol'*, *'Guidance for Introducing a Restorative Justice Approach'* and the *'Parent / Carer Information Sharing and Consent Form'* we were in a position to identify clients who we felt might be suitable for participation in the R e s t Δ r e Pilot.

Initially The Green House and Be Safe identified that there were family cases that were being held jointly across the two services, whereby a child / young person who had been harmed was receiving therapy from The Green House and the child / young person who had harmed them was engaged in an intervention at Be Safe. We were in agreement that a number of these cases were in-line with our referral protocol, and that it would be the appropriate time to introduce the idea of a restorative approach to clients and their families.

Once information sharing & consent forms had been signed The Green House and Be Safe could start working collaboratively around the work being conducted with both clients and were able to start thinking holistically about the needs of the family, whilst continuing to *'hold'* and support the individual pieces of work taking place.

Once therapeutic work and intervention was underway and the next stage of the process would be to *'assess'* clients' *'suitability'* and *'readiness'* to take part in a restorative justice process. As part of our agreement in establishing professional guidance to support this approach, Be Safe worked in collaboration with The Bristol YOT to produce a document entitled - *'Guidance for assessing appropriateness of a restorative justice process between a child / young person who has been harmed sexually and the child / young person who has harmed them'*.

This assessment guidance has been written to inform The Restore Pilot and is for use by the clinicians working with those who have been harmed and those who have harmed them, in order that a thorough and comprehensive assessment could be made.

The assessment guidance is an adaptation of the guidance developed by Thomas and Viar (2005), and the AIM Project's Restorative Justice Assessment Guidance (2014). These have been extended to consider the role of young person's support network drawing particularly from the ideas of Turnell and Essex (2006), and Turnell and Edwards (1999).

### 3.6 Interim Findings

A total of 8 *'victims'* of sexual abuse were offered and provided with therapy under the first year of the pilot. A further 2 victims have been assessed and are waiting to receive therapy from The Green House and Be Safe. All of these clients were referred to The Green House and had been sexually abused by a child or young person under 18.

During their therapy, 2 of these 8 clients were assessed as being suitable for the RJ Process and have signed the Info. Sharing and Consent form, giving their consideration to being involved in an RJ process as part of their work. Another case has been through the initial assessment process and will be approached to become involved once we have started their therapy and reached an appropriate point to discuss it with them.

Therapeutic Outcomes of the Pilot Group:

We use three tools at The Green House to enable continued evaluation of the impact of our work.

#### 1. CORE

The CORE (Clinical Outcomes in Routine Evaluation) YP outcome measure has been adopted and adapted as our key tool for measuring impact. Since its development the CORE outcome measure has been validated with samples from the general population, NHS primary and secondary care, and in older adults. It is a self-report questionnaire designed for young people (11-16 years), and is a simplified version of the CORE-OM outcome measure originally designed for adults. There is no precise age below which self-report measures become unreliable however we recognise that it isn't possible to use the same measure for six year olds and for sixteen year olds. Therefore, as part of our work at The Green House we have developed a new outcome measure. This is an adapted version of the CORE YP form and which is suitable for use with children (5 – 11 years). (*Please see Appendix 5.*)

Both versions of the CORE forms are designed to be administered before therapy begins and after the therapeutic intervention comes to an end and asks clients to respond to 10 questions about how they have been feeling over the last week, using a 5-point scale ranging from 'not at all' to 'most or all of the time'.

The 10 questions cover four dimensions:

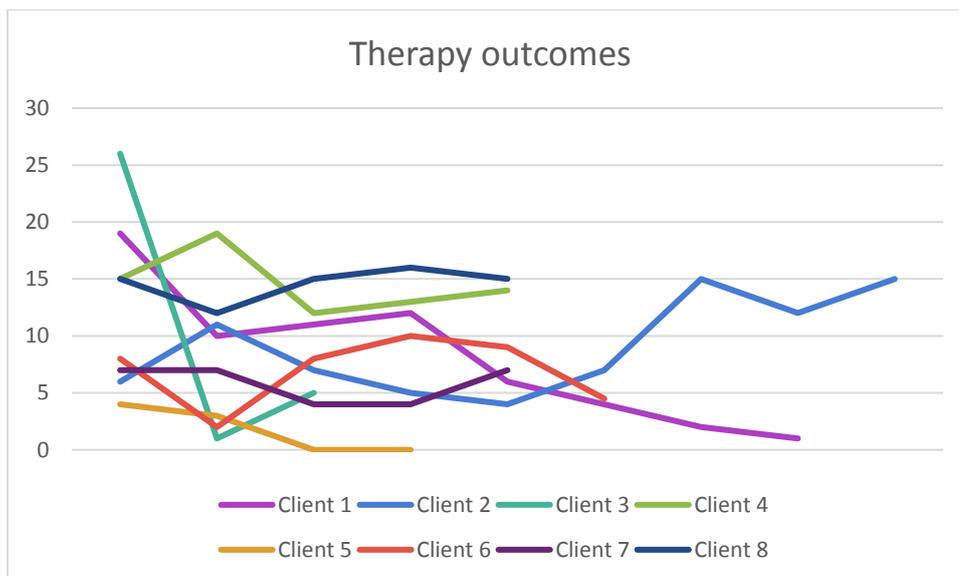
- Subjective well-being
- Problems/symptoms
- Life functioning
- Risk/harm

The responses indicate the level of current psychological distress (from 'healthy' to 'severe'). The questionnaire is repeated over the course of therapy and finally during the last session of therapy. A comparison of the scores over the course of the work shows whether or not the client's level of distress has changed, and by how much. Contextual information is used to support the results and look at mitigating circumstances such as pre-trial therapy processes that should be taken in account.

The Green House Pilot data based on CORE:

Of the 8 clients in the pilot group, 7 were female and one was male. They received between 12 and 38 sessions of therapy each. The therapy was delivered by two art therapists using creative therapies to help them understand and make sense of the sexual abuse and the effect it has had on them. All of them completed CORE forms suited to their age group.

At the end of therapeutic programme, 5 out of the 8 clients demonstrated positive outcomes in reducing their level of distress. One of the clients displayed an increase in distress and two showed no difference.



The two clients who showed no difference in their outcomes were Client 7 and Client 8 who have signed up for the Restorative Approach. Both of them experienced severe difficulties at the end of their therapy. One had a decision on a court case hanging over her; the other was affected by a serious safeguarding issue resulting in the removal of her brother. In both of these circumstances, we would expect the distress of the client to be quite overwhelming at this stage and so the fact that they have managed to remain stable is seen as a very positive outcome in the circumstances. It is evident that the therapy provided a significant level of 'holding' for these clients at a time when then probably needed this the most

## 2. End of Therapy Questionnaire

Clients are also asked to complete an ‘*End of Therapy Questionnaire*’ at the end of their work with The Green House. This is specifically designed to capture their feelings around the experience at The Green House and this provides more of subjective view of the service separate from their current emotional state. When compared with the outcomes from their clinical data, it demonstrates how the RJ process worked very well for them and needs to be evaluated outside of what are normal emotions based on their current circumstances.

It asks a number of questions including

- Whether or not the child / young person found the process helpful
- Whether or not the process helped the child / young person with their problems
- Whether or not the therapist did all they could to support the child / young person

The clients are asked to respond to the questions using a 10 point scale and space is left for the client to include their own comments. (*Please see Appendix 6.*)

Both of the RJ clients completed an End of Therapy questionnaire. Both reported that the process had been very positive.

On the following questions, 1 of the clients answered 10 for all of them and other client between 10 and 8 (10 being the highest, very helpful).

Question	Client A	Client B
<i>Has coming to The Greenhouse been helpful to you?</i>	10	10
<i>Did coming to The Green House help you with your problems?</i>	10	8
<i>How do you feel about your future?</i>		
<i>Did your therapist do all they could to support you?</i>	10	10

The client who answered ‘8’ for how she felt about her future wanted to make a point with her therapist of saying that 8 was good enough for her as she didn’t think you could be happy all the time and ‘8’ was where she felt was right for her right now.

They described the process as helpful because ‘*I can draw and share my feelings*’ and ‘*It stops me looking for things I’m not meant to.*’ Both said it had helped a lot with their problems and one of them said they valued ‘*being able to talk about anything*’. When asked about service improvements, neither of them could think of anything that could be improved about the service.

## 3. Goal Based Outcomes

Alongside the outcome measures, as part of the therapeutic process young people aged over 13 are also asked to create their own goal based outcomes of what they want to achieve out of the therapy. Two of the 8 pilot client cohort fit within this category and their goal based outcomes are below (10 is goal achieved):

		2 <sup>nd</sup>	3 <sup>rd</sup>
	1 <sup>st</sup> Review	Review	Review
<b>Client A</b>			
1	I want to think about it less	5	8 10
2	I want to feel more confident seeing them	5	5 9
3	I want to move on	5	9 10
<b>Client B</b>			
1	To not be depressed all the time	2	7
2	To think differently about everything	1	8
3	To not worry so much	0	8

Although Client B has not yet had their third review, both cases demonstrate positive progression and the benefit of applying an RJ approach to our therapeutic work.

### 3.7 Conclusion

At the end of the first year we have established processes and partners and explored the difference in theory and practice between a therapeutic and a restorative process.

#### 3.7.1. Developing the partnership

We have a robust multiagency framework in place which appropriately supports the successful delivery of The R e s t Δ r e Pilot. Positive working relationships have been established across the partnership agencies and all staff are familiar with the aims and objectives of The R e s t Δ r e Pilot and the ways in which this approach can be integrated into practice.

As part of the first years' work we have consulted with a range of partners who continue to support the project and who we will liaise and consult with as we move forward and who will be valuable advisors as we further develop this approach and model of service delivery.

#### 3.7.2. Developing effective processes

Over the past year our approach to practice and to addressing the needs of those harmed sexually has changed. We have adopted a restorative approach to practice, which in many cases may never lead to a restorative justice meeting being the end result, however the possibility for the wider context to be considered has become an integrated part of practice and of the services we are delivering to families.

#### 3.7.3. Delivering RJ to people

We are fortunate at this stage to have had the experience of exploring this approach with our clients and their families, and learning from these experiences and adapting our approach accordingly.

As a result of this joint approach we now have a much better understanding of the nature and complexity of cases we are working with through opportunities to view cases from the perspective of those who have been harmed and those who have harmed them. This wider perspective has enabled systemic issues to be considered and addressed and a whole-systems approach to be taken with the aim of restoring and repairing the damage caused as a result of the abuse which has taken place.

#### 3.7.4 Looking ahead

Our aim is to continue to adapt and modify our practice to incorporate a restorative approach where this is possible and to make use of opportunities to work jointly and to make clinical decisions collaboratively in order to better support the children, young people and the families referred to our services.

In the next section of the report we will reflect on the lessons for the second year of the project.

## **Chapter 4 – Learning & Reflection**

In this section, we will focus on the development of the partnership and the RJ process as we reflect on what we have learned from the first year of this Restore Project. At this stage of the project, *'People'* considerations are inextricably linked to *'Process'* issues. Further, it is too early to identify learning points from case work.

## 4.1 Applying a Restorative Justice Approach to this work

### 4.1.1 Partnership working and the timing of interventions

The issue of timing has been raised a number of times as part of discussions taking place within the multiagency partnership. It may be the case that a child / young person who has harmed begins their intervention with Be Safe before the child / young person who has been harmed begins therapy with The Green House, or the other way round. The children / young people may therefore reach a point of being 'ready' to engage in a restorative justice process at different times.

As a multiagency partnership we recognise that the process will be guided by the needs of our clients. Client's 'readiness' to engage in a restorative justice process is not something we can predict, there are also an array of external factors which may influence and impact upon a client's 'suitability' and 'readiness' for the approach. For example, in one case a young person attending sessions at Be Safe chose to write an apology letter to the child attending The Green House. We agreed that the fact that this letter had even been written would not be shared with the client attending The Green House until they were in a position of being 'ready' to consider this.

We are reminded here of the PCC's Crime Plan in terms of 'Putting Victims First':

- *To support a consistent approach to Restorative Justice across Avon and Somerset, directly commissioning Restorative Justice Services to ensure more victims are offered this resolution at a time that is appropriate to them.*

#### Key Learning Point

Our aim with the pilot is to continue to discuss our experiences of practice as a multiagency partnership and to be guided by the needs of our clients and also by our own individual processes and interventions.

### 4.1.2 External Factors Influencing Client's 'Readiness' and 'Suitability' for the Approach

As we have navigated through and around a number of complex situations over the past year, in terms of the clinical cases we have been holding in mind for R e s t Δ r e, we have identified a variety of unforeseen external factors which have impacted on the processes taking place within the individual services and the possibility of engaging in restorative processes with these families.

Where we have felt it has been appropriate to introduce the idea of a restorative justice approach, the children and young people working with us have been appropriately supported by committed parents or carers, who are actively invested in the process themselves and are fully supportive of the interventions being carried out by the individual services involved. Difficulties have arisen when this supportive 'system' has broken down and relationship difficulties have become apparent.

For example, where sexual abuse has taken place between potentially two family members, who in some cases may be siblings, the aftermath for the parents / carers supporting the children and young people involved, as well as any non-abusing siblings is catastrophic. The relationships between the adults in the family may become significantly affected as well.

Where these difficulties and complications have become evident we have made decisions not to proceed on any basis with any restorative type of approaches. This is because the stability of the family environment and family support 'system' is viewed as a fundamental part of a successful process.

The individual and very often in-depth pieces of work taking place with the individual children involved have been hugely insightful in gaining a comprehensive understanding of the overall family situation and shedding light on the recovery process for the whole family.

In some cases, whereby the child / young person who has been harmed and the child / young person who has harmed them live within the same family home a safety plan has been drawn up and agreed between family members, as a means to keep each other safe and prevent further incidents of abuse from taking place. This has happened, for example, where we have been working with we have recognised that the safety plan may not be working as

effectively as we had hoped and reviews of safety plans have been carried out. In some cases this has led to the child / young person who has harmed being removed from the family home for a period of time in order that the child / young person who has been harmed remains safe.

In situations such as this the application of a restorative justice process is not suitable. Where safety is an issue, safety becomes the priority.

### **Key Learning Point**

In many cases the joining-up of services has meant that more information and insight is available to the partnership resulting in complex decisions being considered and made regarding families at potentially an earlier stage in the process.

The assessment guidance document drawn up to support the multiagency framework and as a collaboration between Be Safe and The Bristol YOT provides a key opportunity for any external factors which may have an influence or impact on the restorative justice process to be identified and carefully considered from the point of view of all services involved in working with and supporting the clients and the family, before any further restorative work is carried out.

### **4.1.3 Introducing RJ Too Early**

During the initial stages of our therapeutic work with the clients we identified as potentially able to benefit from this approach, we introduced the idea of restorative justice. We felt at the time that if we, as clinicians, were holding the idea of restorative justice in mind for our clients it was fair to share this insight with them at an early stage. We found however that for children / young people and their families contemplating the idea of therapy - to process the sexual abuse they had experienced, was a big enough challenge in itself. Introducing a secondary approach at this early stage, on top of what is already being contemplated and considered a challenging process was too much for clients and their families to manage at this very early stage in the process.

We now recognise the importance of enabling the therapeutic relationship to be established before introducing the idea of restorative justice. We therefore found it more helpful to introduce the approach at the point of review after six sessions and once therapy was underway.

The review provides an opportunity to take a short pause to reflect and think about the progress made so far within the work and to consider the work yet to take place. Reviews also provide a chance to consider the wider context of the work, whether other professionals need to become involved, whether conversations with other agencies may be helpful at this stage and whether or not the work should be extended beyond what was originally agreed (24 sessions being the maximum number of sessions we are able to offer).

Prior to review the clinician (often in collaboration with clients) would consider who should be invited to the review, and how the review should be conducted in order that it best serves the therapeutic process.

In terms of using the opportunity of the review to introduce restorative justice, it would be important that the parents / carers were invited along to the meeting. If the client themselves chose not to attend the review the therapist would inform them about the process and the fact that restorative justice would be introduced, if this was the case.

It may be that in some cases introducing restorative justice at the point of review is still too early in the therapeutic process, it may also be that by the time the client has reached review the case is no longer considered suitable for the approach after all for a variety of reasons.

### **Key Learning Points:**

- Maintaining a flexible approach around the introduction of restorative justice to ensure that the primary process which is the therapy itself is not negatively impacted upon.
- Timing and sensitivity are paramount in the decision about when to introduce restorative justice successfully so that our clients and their families are willing to trust in the process. As skilled clinicians, we know that there can be no fixed timescales for this work.

## 4.2 Resource Implications

The establishment of the framework and process for the pilot has exceeded the initial hours allocated to it in the agreement and this has stretched the resources of the service. The complicated nature of the cases that we are working with as part of the Restore Project require a great deal of consideration and liaison between multiple agencies which takes a lot of time. This combined with reporting and evaluation of the project does mean that the project can be quite draining on the resources of the organisation as a whole. However, as an organisation, we have a firm commitment to the Restorative Justice approach as part of our work and have found the benefits that the multiagency working model has created for the service as a whole and all of our clients has been worth the greater outlay in terms of resources. We feel it has strengthened our core service and informed our therapeutic approach beyond the pilot cohort of clients.

Demand on the service is very high currently with a waiting list of 6 months for children and young people being offered a therapeutic service at The Green House because of the gap in therapeutic services in the area. Be Safe and YOT have also experienced their own resource issues transferring from NBT to Sirona and experiencing cuts and restructuring of staff. Going forward we will need to be aware that the Restore pilot cannot take resources from other areas of the organisation which might affect our core role of providing therapy to victims.

The cost of leaving sexual abuse untreated is incredibly high for many victims. Not everyone who experiences contact sexual abuse suffers serious consequences but the statistics and long term affects for those that do are significant.

- 36% of girls who are sexually abused as children will also be sexually abused as adults, by partners, grooming gangs and strangers (Lau & Kristensen, 2010)
- 29% of those in prison have experienced emotional, physical or sexual abuse as a child with women (53%) more likely to have experienced such abuse than men (27%). (MoJ Surveying Prisoner Crime Reduction (SPCR) study 2005-6)
- Almost half (48.9%) of childhood sexual abuse victims became victims of a violent partner as an adult. This compared to 17.6% of non-victims of childhood sexual abuse. [Briere and Runtz, 1988]
- Women who experience any type of sexual abuse in childhood are roughly three times more likely than non-abused women to report drug or alcohol dependence as adults. [Kendler, K.S., et al., 2000]

Our own statistics in the adult service show that 68% of our adult clients have attempted suicide at some point in their lives. The total operating cost for the CYP service is for 15/16 was £139,623 and this provides a team with the full time equivalent of 2.9 staff. This Community Safety grant at £14,700 provides 10.5% of this expenditure with the rest made up from the Home Office, Big Lottery Focus on Families project and MoJ Male and Female Rape support for the over 13s. The breakdown is as follows:

Pilot breakdown costs	
Initial multi-agency development and set up	£3,700
Therapeutic services for 6 clients for 6 months	£6,480
Referral work, management and reporting	£1,950
Training	£500
Evaluation	£2,100
<b>Total</b>	<b>£14,730</b>

Providing an early intervention to the 8 victims seen under the pilot using these calculations is £1,841.25 which represents excellent value for money based on the level of engagement and outcomes that we achieve with this hard to reach client group.

We will develop this financial model further in the Year Two evaluation report.

## 4.3 Looking Ahead

During this first year's work the R e s t Δ r e clients were held between two members of staff working as part of the children's team. However, the work in Year 1 of the pilot has convinced us of the validity of the RJ approach in The Green House's work. Therefore, we intend to distribute the cases we are holding in mind for R e s t Δ r e between the clinicians working as part of our service, and to provide information and updates to the team via the Clinical Lead for the service. This will enable us to integrate the RJ approach as part of the clinical structure of the existing work which takes place, and for the whole Green House team to learn and develop their own thinking around the process of R e s t Δ r e. We acknowledge that first-hand experience of working which this approach will be the most beneficial way of understanding and further developing what we are trying to achieve.

As we develop the R e s t Δ r e Project, we will aim to continue to align as services. We have found that the more the clinicians from the various teams are sharing their experiences and learning alongside one another, the greater the opportunities for our multi-agency partnership to grow, develop its practices, and to thrive.

## Chapter 5 – Conclusions & Recommendations

### 5.1 Conclusions: Key learning points from Year One of the Pilot

#### 5.1.1. Partnership working

Over the last year we have learnt that

- Working collaboratively as a multiagency partnership provides us with more expertise, more insight and more experience to address issues of sexual abuse and sexually harmful behaviour.
- Through working together our decision making becomes clearer and is better informed.
- The complexity of this work can be more carefully supported through the joining of agencies working within the same field where positive and professional working relationships are supporting the processes taking place.
- There is also an impact for families who observe the coming together of services, that clinicians are working together collaboratively and productively to think about their needs as a family.
- Our relationships as services have developed and grown as a result of The R e s t Δ r e Pilot, and we hope will continue to develop and grow as a partnership as we move forward into year two of the pilot.

#### 5.1.2. Developing RJ processes

- The most appropriate time to introduce the idea of restorative justice as part of therapeutic process is when the client has settled into the process of therapy and into their relationship with the therapist.
- Our work has an increasing restorative justice approach in mind. Even if clients do not necessarily engage in a restorative justice process involving the coming together or the two parties, applying a restorative justice approach to practice is restorative in itself and has a number of benefits.

#### 5.1.3 Applying RJ processes with the people we work with

Our experiences over the last year have shown us that the majority of the cases we are working with are incredibly complex and require a significant level of consideration during every stage of the process for those who have been harmed and those who have harmed. We will explore this further in the Year Two evaluation report.

## 5.2 Recommendations for Year Two

### 5.2.1. Partnership Working

- We will continue to meet as a multiagency partnership on a bi-monthly basis to discuss issues raised and progress made.
- We will continue to invite representatives from our partner agencies to therapeutic review meetings to discuss our clients' progress and next steps where this is appropriate and agreed by all parties.
- We will continue to actively discuss clinical cases and progress across the services.

### 5.2.2. Process issues

- During year two of the pilot we aim to more carefully consider the best timing for the introduction of restorative justice as part of therapy.
- We would like to work more closely with the issue of timing in terms of the work carried out in the separate services to understand whether aligning interventions more carefully would have an impact on the success of the approach.

### 5.2.3. People issues

- We will continue to be guided by the needs of the children / young people who have been harmed, keeping their best interests at the centre of the process.
- We will maintain a flexible approach to practice, recognising the individuality of the cases we're working with however continuing to practice in-line with our own professional guidance and protocols.

## 5.3 Evaluation of Year Two of the Pilot

We will explore the issues highlighted in this report in the Year Two evaluation. Our focus will widen to assess the impact of applying an RJ approach to our client work as this develops. We will assess our current assessment tools (CORE, End of Therapy Questionnaire, and Goal Based Outcomes), and establish whether we need to develop a framework that is used by all members of the partnership. We will also develop a formal approach to the evaluation of the partnership itself. As stated above, we will develop our model for assessing the cost-benefits of the RJ approach for this work.

We will aim to gather data (outcomes / questionnaires / case study material) from all three partnership agencies. Multiagency partnership meetings over the course of the next year will therefore need to include discussions about this process. A shared understanding will need to be built about how each individual agency gathers information and outcomes, which evaluation models are utilised and how the combination of all material gathered can inform a robust quantitative and qualitative evaluation process in April 2017.

# Appendices

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## Appendix 1 - Partner Biography Details

Helen Rosenthal is the Restorative Justice Development Manager for Avon and Somerset Police.

Dr. Marian Liebmann has worked at a day centre for ex-offenders, with Victim Support, and in the probation service. She was director of Mediation UK for 4 years and projects adviser for 3 years, working on restorative justice. She now works as a freelance restorative justice consultant and trainer in the UK and overseas, in several African and East European countries. She has given presentations at UN Crime Congresses. She is also an art therapist and runs '*Art and Conflict*' and '*Art and Anger Management*' workshops. In 2013 she was awarded an OBE for services to social justice through art therapy and mediation. She is very involved in helping Bristol to become a restorative city. She has written/ edited 10 books, including '*Restorative Justice: How It Works*'.

Vince Mercer is responsible for developing restorative approaches within the AIM Project. AIM (Assessment Intervention Moving on Project) since January 2000 has developed and implemented policies, procedures, assessment models and a range of interventions in respect of children and young people who sexually harm. The project works on a multi-agency basis across the 10 local authorities in Greater Manchester, training and supporting frontline practitioners to deliver assessment and interventions.

In November 2015 the Clinical Lead for Children & Young People's Services at The Green House attended a 3 day AIM training in Manchester – '*Restorative Justice and Harmful Sexual Behaviour (HSB)*' and shared information and notes from the training with the multiagency R e s t Δ r e partnership.

Dr. Nadia Wager is a Reader in Psychology at The University of Bedfordshire, an associate Fellow of the British Psychological Society and a Chartered Psychologist (Teaching and Research). Additionally, she is an active applied researcher who engages with community partners in evaluation, training and research activities. Her main focus is on victimisation (both as primary victims and secondary victims) and the application of restorative justice practices to serious crimes such as sexual and domestic violence.

## Appendix 2 - Referral Protocol

- Children / young people referred to take part in the pilot will be under 19 years of age.
- Children referred to the pilot will already be working with either *Be Safe*, *YOT* or *The Green House*.
- Referrals will be made by either *Be Safe*, *YOT* or *The Green House*. The pilot is not open for general referrals.
- Children / young people referred will be living in a safe & stable environment
- A safe and consistent adult (eg. parent / carer / residential worker / professional) will be present to support the entirety of the process
- Criminal processes / police investigations must have been concluded prior to involvement in this process. We cannot work with children / young people where there is a risk that a case might go to appeal.
- Children / young people agree to '*give consideration to*' being involved in the Restorative Justice process as part of their work, which will be supported by a range of professionals.

## Appendix 3 - Guidance for Introducing a Restorative Justice Approach

- Once children / young people have been identified as suitable candidates for involvement in the RJ pilot, they will be provided with information about the RJ Pilot (from the perspective of the agency they are engaged with). This information will describe the approaches which can be considered as part of this process, and which will potentially form part of their work with that particular agency.
- Children / young people agree to 'give consideration to' being involved in the Restorative Justice process as part of their work, which will be supported by a range of professionals.
- Children / young people give their consent for information to be shared between partner agencies.
- A child / young person's *readiness* to engage in an RJ approach will be assessed as part of their work with either *Be Safe*, *YOT* or *The Green House*, prior to an RJ approach being introduced.
- During the process assessments will be made, in collaboration with clients and partner agencies, to consider which RJ approach is appropriate to introduce as part of the work.
- Before an RJ approach is introduced both parties (the child or young person who has been harmed and the child or young person who has harmed), should be at the stage of working towards *resolution* in their individual work with either agency.
- There should be a shared understanding from the point of view of all concerned (children / young people / parents / carers / family members / professionals) about *responsibility*, eg. who the person is who holds the responsibility for what has happened.

## Appendix 4 - Parent / Carer Information & Consent Form

### The Rest△re Pr△ject - Parent / Carer Information Sharing & Consent Form

Due to the nature of your case and because of the circumstances surrounding what has happened, we feel your child or young person may benefit from taking part in The Restore Project.

#### What is The Restore Project?

The aim of The Restore Project is to enable children and young people who have experienced sexual abuse to access support to take part in a restorative justice approach, in order to resolve and restore the damage which has been caused, particularly within relationships, as a result of the abuse which has taken place.

#### What is Restorative Justice?

*'Restorative justice works to resolve conflict and repair harm. It encourages those who have caused harm to acknowledge the impact of what they have done and gives them an opportunity to make reparation. It offers those who have suffered harm the opportunity to have their harm or loss acknowledged and amends made'.* (RJ Consortium 2006)

## How will the project work?

When sexual abuse occurs often close family members and relationships within families are affected, and can break down as a result. This can be a very distressing for everyone. The aim is that through the use of a restorative justice approach children, young people and families can move forward more positively from what has happened, having been provided with the right support at the right time. Introducing a restorative justice approach takes into account the needs and interests of the person who has been harmed, is led by their wishes, needs and is carried out in a safe way with support from a range of professionals.

The aim of the project is for children and young people who have been sexually abused to access individual therapy from The Green House, and for the children and young people who have harmed to be supported by either the NHS Be Safe service or the Youth Offending Team, to enable them to consider the harm they have done and to learn ways to act safely. The three agencies involved in the project will develop processes for information sharing and working together.

Taking part in a restorative justice approach may include one or a combination of the following interventions - engaging in a facilitated family meeting / being supported to receive an apology letter from the child or young person who has harmed, with the option to respond if they wish / having a representative attend a restorative justice meeting on their behalf.

Before we would consider introducing this approach individual therapy sessions would be provided by The Green House, in the usual way. The counsellor / therapist working with your child or young person would discuss the options with you, and support you as you consider whether or not you feel taking part would be helpful.

## Your Consent

At this stage we only ask that you *give consideration* to your child or young person being involved in a restorative justice process as part of their therapeutic work, this is so we know whether or not to include you in The Restore Project.

*'I am interested in considering a restorative justice process as part of my child / young person's therapeutic work at The Green House, and give permission for any relevant information about my child / young person to be shared with the agencies involved in The Restore Project'.*

Signed (Child / young person) ..... Date .....

Signed (Parent / carer) ..... Date.....

## Appendix 5 - Child Friendly CORE YP Form



CORE YP - Child  
Friendly.pdf

## Appendix 6 - End of Therapy Questionnaire

### End of Therapy Questionnaire

1. Has coming to The Green House been helpful to you? (please circle a number)

0    1    2    3    4    5    6    7    8    9    10

Not helpful at all

quite helpful

very helpful

Can you tell us why you found it helpful or unhelpful:

2. Did coming to The Green House help you with your problems?

0    1    2    3    4    5    6    7    8    9    10

Not at all

A little

Yes, a lot

Can you tell us why you think it helped or didn't help:

3. How do you feel about your future?

0    1    2    3    4    5    6    7    8    9    10

I feel worried

I feel ok

I feel happy / positive

Is there anything else we could have done to help you feel more positive about your future?

4. Did your therapist do all they could to support you?

0    1    2    3    4    5    6    7    8    9    10

Not at all

some of the time

Yes, during every stage of the process

Are there ways your therapist could have supported you better?

5. What did you think of the waiting area, the therapy room you worked in and the equipment / materials you used?

0    1    2    3    4    5    6    7    8    9    10

Not acceptable

quite good

very good

How could the room / equipment / materials be improved?

6. Would you recommend The Green House to a friend?

0    1    2    3    4    5    6    7    8    9    10

No

Maybe

Yes, definitely

Can you tell us how you would describe the service you received from The Green House to a friend:

Was there anything you didn't like about the service you received, or anything you feel needs improving?

Are there any other comments or doodles you would like to share with us:

Many thanks for taking the time to fill in this form! Your feedback is really valuable to us.

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