

# Specification for Goods or Services

Creative health intervention for primary-aged children with experience of domestic abuse

LBC/TN/701

*June 2026*

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## 1. Introduction

National statistics estimate 1 In 5 children in England experience domestic abuse<sup>1</sup>, and Croydon has one of the highest rates of incidences of domestic abuse per 1,000 people compared to the other London local authorities<sup>2</sup>. Whether children witness or experience harm themselves, victims commonly experience fear, powerlessness and sadness<sup>3</sup> as a result. Even after abuse has been resolved, 60% of children display behavioural problems (e.g., aggressiveness) that can lead to challenges within education and family contexts while 52% experience social development challenges<sup>4</sup> with impacts on social interactions and healthy relationships with peers and family. Survivors are at greater risk of teenage substance abuse, pregnancy and criminal behaviours as compared to non-experienced peers, and are almost 3x more likely to experience abuse in adult relationships<sup>5</sup>.

## 2. Background

In September 2024, Croydon Council Creative Health identified primary-aged children with experience of domestic abuse as a key priority for support in the borough. A literature review confirmed that creative health interventions could be successful in providing social, emotional and behavioural support to children of this age and their families.

A strategic steering group was convened in February 2025, including representatives from relevant stakeholders (Family Justice Service; the Council's Children Young People and Education Safeguarding team; Public Health; voluntary sector Violence Against Women and Girls (VAWG) providers; educational psychologists, individuals with lived experience) to determine the most effective model of creative health support for children ages 5-10 with experience of DA. Further focus group consultation with VAWG/DA organisations and non-abusive parents in the target population helped shape the initial model.

A 10-week intervention was developed by the Creative Health team along with local creative therapists and practitioners, and piloted in three terms across academic year 2025/26. The pilot programme proved effective in supporting participants to achieve the stated aims of the project, and as a result further funding has been identified from Croydon's Public Health grant to support ongoing delivery.

## 3. Scope of the Contract

This contract aims to identify an experienced supplier(s) to continue to deliver and develop this intervention.

The intervention will be project managed, delivered and evaluated by the successful supplier, including but not limited to securing appropriate venues; purchasing necessary resources; managing participant recruitment and attendance logistics, including transport and food; procuring and managing an appropriate

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1. Woman's Trust (N.D.) [The impact of domestic abuse - facts and figures - Woman's Trust](#)
  2. Croydon Borough Profile December 2024. [Microsoft Word - BOROUGH PROFILE Dec2024 WORD](#)
  3. Noble-Carr D, Moore T, McArthur M. Children's experiences and needs in relation to domestic and family violence: Findings from a meta-synthesis. *Child & Family Social Work*. 2020; 25: 182–191. <https://doi.org/10.1111/cfs.12645>
  4. SafeLives, [Children's insights national dataset, England and Wales](#), 2015 to 2018, Specialist children's abuse services. ↵
  5. SafeLives, [Safe Young Lives: Young people and domestic abuse](#). ↵

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delivery team; supporting the delivery team on delivery days; ensuring project aims and target topics are effectively delivered across sessions; carrying out and analysing agreed evaluation methodologies; and ensuring all safeguarding, health & safety, data protection and other necessary policies and procedures are in place and followed.

Successful supplier(s) will ensure work is delivered by creative therapists and/or practitioners with significant expertise in socially engaged participatory work with the target age range, and should engage with clinicians with expertise in child development and domestic abuse if not already present within the delivery team. Children's sessions should maintain an arts-based approach relevant to children of the target age range, while ensuring safety for children to express and explore emotions in response to their experiences as relevant.

Suppliers will be required to supply an appropriate facilitator to support a parallel strand of light-touch support for parents/carers of child participants, with opportunities for: facilitated peer networking; information on trauma and its impact on parenting, healthy family dynamics and 'good enough' parenting; and signposting to wider support and services.

Suppliers will also be required to make arrangements to support non-participant siblings attending sessions with their family, ensuring parent/carers can fully take part in the parent/carer group if desired.

Successful bids will include opportunities for Croydon artists with relevant practice but limited experience of evidence-based delivery to participate in a supporting capacity, in order to develop the skills of the local sector.

Bids must include appropriate pastoral supervision for all delivery staff.

The intervention is expected to work closely with schools, families, statutory services and other relevant Croydon Council teams to ensure children's needs are recognised and supported across contexts.

A close working relationship with the Croydon Council Creative Health team is expected, and advice and support can be provided by the team where relevant, especially where relationships with statutory services, schools or other partners can be helpfully facilitated.

This tender and contract is scheduled to run until end of July 2027, including three terms of delivery. In the event of the Council securing further funding related to the project, an extension of up to a further 12 months of delivery may be offered at a reduced award rate, currently estimated at around 50% of project delivery costs to support continued subsidised delivery. The Council will aim to inform supplier(s) of the potential for extension by March 2027 wherever possible.

#### **4. Detailed Requirements**

This intervention provides support to children victims of domestic abuse at a young age, with the aim of reducing the impact or development of maladaptive behaviours or understandings.

This is a recovery programme for children who are no longer experiencing abuse. To take part, children must fall into one of the following two categories:

- If no longer residing with the alleged perpetrator, no abuse may have been experienced since the change in living circumstances, and at least for one month.
- If currently residing with the alleged perpetrator, the family must have engaged with statutory services (social care and/or social worker) to address abusive behaviour AND no abuse may have occurred in the previous six months.

A detailed registration form and risk assessment has been designed and will be carried out with families at point of referral to ensure the programme is the right fit for the family. However, domestic abuse is complex, and so changes to circumstances must be monitored throughout and the risk assessment carried out again at the intervention mid-point to ensure appropriate support is in place in case of risks arising. The aim is for children who have started the intervention to be supported to complete it, unless there is an unavoidable risk which makes this impossible.

### Delivery model

- The programme runs as a 10-week intervention, delivered to one cohort of identified families each term. Families may be identified by schools, social workers, Early Help, Family Hubs, GPs, other statutory services or VCFS organisations. Families may also self-refer.
- Cohorts include maximum 25 child participants, split into two groups by age (5-7 year olds and 8-11 year olds), with each group receiving a high-quality participatory creative arts experience each week, one after the other on the same evening. For example:
  - 4.00-5.15pm – 5-7 year-old creative group session
  - 5.30-6.45pm – 8-10 year-old creative group session
- Individual session content is creative and participant-led, within an overarching scheme of work developed by the Supplier to ensure relevant skills and behaviours will be elicited and taught, modelled and/or corrected across each cohort's intervention. Content should be structured enough to ensure outcomes are met, while remaining flexible to respond to individual group needs, as well as family and school feedback received throughout the intervention.
- Parent/carers of participants are invited to stay on during sessions to participate in a parallel informal, facilitated network with advice, support and opportunities to engage with others in similar circumstances. This session also provides information on what children are doing/experiencing in each session in order to prepare for any conversations that might arise at home as a result. A skilled facilitator provided by the supplier(s) will ensure this space remains safe, collegial and supported.
- A 'creche' or other arrangements for non-participant siblings is offered across the evening, especially in acknowledgement that some families may have children falling across cohort age groups as well as outside the programme's age range.
- Snacks (drinks, fruit, biscuits) are provided upon arrival, and a hot meal is provided for families to eat following their child's session.
- Interventions will move to different venues each term, ensuring families across the borough are able to take part.
- Quarterly 'family day' events are provided inviting programme graduates to come back together for fun, no-pressure creative activities. These do not need to be delivered by the trained team and can include other artforms or creative experiences as deemed suitable by the Supplier.

### Timeline

The following delivery is expected to take place during the lifetime of this contract:

- July/August 2026: programme planning between successful supplier and Creative Health team; cohort 1 recruitment
- September-December 2026: Delivery of Cohort 1 intervention, location A; Family Day 1
- January-March 2027: Delivery of Cohort 2 intervention, location B; Family Day 3
- April-July 2027: Delivery of Cohort 3 intervention, location C; Family Day 3

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### Outcomes

Following participation in the 10-week intervention, children should demonstrate:

- Improved wellbeing, self-esteem and self-efficacy
- Improved emotional literacy
- Improved self-regulation skills and techniques
- Improved inter-personal and communication skills
- Improved understanding and experience of healthy relationships
- Reduction in distressed, aggressive and/or coercive behaviours
- Reduction in unhealthy attachment behaviours
- Further target outcomes as identified by parents and children during initial sessions with each cohort

Carers attending the parallel parent support group should demonstrate:

- Improved wellbeing, self-esteem and self-efficacy
- Improved understanding of trauma and its impacts on child development
- Improved understanding of parenting after trauma and healthy family dynamics
- Signposting to additional support and services

Interventions should further be designed to the following medium-term outcomes:

- Improved familial relationships, especially between child and parent/siblings
- Development of friendships and peer support among group members and parents
- Improved academic engagement and attainment
- Signposting to other community-based creative or leisure activities to encourage continued engagement following completion of the intervention

Outcomes will be measured via feedback from participants, parents and schools throughout the process, as well as through baseline and end-of-intervention standardised measure (e.g., Strengths & Difficulties Questionnaire) completed by either parent or teacher proxy. Please see Section 5 for further information.

### Supplier mandatory specification:

- Suppliers must demonstrate the relevant skills and experiences of its delivery team. The team involved in developing and delivering sessions should include:
  - Artists with high-quality, socially-engaged participatory creative group practice, specifically with 5-10 year olds with experience of adverse childhood events
  - Clinicians or counsellors with expertise in child development, child mental health and domestic abuse
  - Trained facilitator(s) to manage the parallel light-touch parental support group
  - Appropriate staff to provide safe care for non-participant siblings
- Suppliers must include practical supporting opportunities for Croydon-based artist(s) with relevant practice to gain experience of this work.
- All members of the workforce must have trauma informed training and practice.
- All members of the workforce must have Enhanced DBS checks and agree to conform to all prescribed Safeguarding policies and procedures.
- Suppliers should be representative of Croydon's communities.
- Suppliers should have expertise allowing for inclusion of multi-art form delivery and collaborative ways of working.

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- In line with the Mayor of Croydon's Business Plan and to support future sustainability of the intervention, preference will be given to Croydon-based suppliers.
- Suppliers must demonstrate what supervision is in place for the delivery team, including professional and pastoral support.

The total budget available for suppliers to deliver the above is £60,000.

Where a single supplier is not judged suitable to deliver against all elements of the specification, the Council reserves the right to invite suppliers with complementary skills to work collaboratively to deliver the full specification. Suppliers with a strong track record in one or more areas of the specification are therefore encouraged to submit a response clearly outlining the elements you feel you can strongly deliver against and associated costs, for consideration in case a single supplier is not found.

## **5. Service Levels and Key Performance Indicators (KPIs)**

Supplier's performance will be monitored by outputs delivered, feedback from participants and proxies, and participant scores on validated measures related to the stated objectives.

Suppliers will be expected to deliver 3x 10-week interventions plus 3x light-touch 'family day' opportunities as outlined in the Detailed Requirements above.

Participant feedback should be sought informally throughout the intervention, in age and ability-appropriate ways.

Family, school (where parental consent is given, re: behaviour, engagement and/or attainment as relevant to the child) and social worker (where parental consent is given, feedback re: behaviour, support needs, protection plans as relevant to the child) should be sought informally at and between sessions, with formal check ins at the mid-way and end points.

Practitioner observation of child participants should be collected during debrief sessions after each workshop, comparing participants' demonstrated learning and behaviours against programme outcomes. Indicators of successful achievement of outcomes should be noted, as well as individual support needs identified and plans put in place to support each child to achieve the stated aims.

Participant outcomes will also be monitored via a pre- and post-intervention validated measure (currently the Strengths and Difficulties Questionnaire completed by parent/carer proxy is in use). Scores are expected to improve for each child as a result of taking part in the intervention. Lack of improvement or negative outcomes will be assessed and discussed after each cohort, and recommendations made for subsequent interventions. Lack of improvement by more than 20% of participants in one cohort will be considered cause for concern and potential termination of contract unless significant extenuating circumstances or plans for improvement can be agreed.

Monitoring of performance will take place by the Supplier during post-session debrief and debrief reports. Formal monitoring with the Creative Health team will take place following each term, or more frequently if post-session reports do not indicate adequate improvement.

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## **6. Contract Management and Review**

Suppliers are expected to engage with the Creative Health team regularly throughout the process, including asking for support with recruitment or partner engagement as needed. Regular check ins will be required before first delivery and at the end of each term thereafter. Additional meetings may be requested by either party where deemed necessary, and all parties will strive to make all reasonable meeting requests to ensure success of the programme.

## **7. Social Value and Sustainability**

Suppliers must demonstrate how they will provide social value by including practical opportunities for local artist(s) with to to engage with the programme and develop relevant skills and experience. Suppliers should demonstrate how these artist(s) will be identified, supported and included in the delivery plan.

## **8. General Data Protection Regulation (GDPR) and Privacy Impact Assessments (PIA)**

The Supplier must ensure appropriate GDPR and PIA are carried out and procedures put in place to ensure data protection. The Creative Health team may ask to see GDPR and privacy policies at any time.

## **9. Contract Period**

The contract will begin at the earliest opportunity following the bidding process and run until end of July 2027, unless early termination due to lack of delivery or poor performance outcomes as stipulated above.

## **10. Health and Safety**

The Provider is expected to fully comply with ALL health and safety legislation. All new operatives shall be formally trained in the safe use of all materials and the Provider shall ensure that their operatives have the correct equipment including personal protective equipment if required. Full training and assessment records of all operatives must be kept in an acceptable manner and submitted to the Council on an annual basis.

The provider and all persons (including sub-providers) employed by him on the work shall comply fully with the Health and Safety at Work Act 1974 and all appropriate enactment's which are relevant statutory provisions under that Act and with all other relevant safety requirements and with appropriate codes of practice and Health and Safety Executives Good Practice Guidance Notes.

The Provider shall provide all necessary equipment and safe provision for power to execute the works as required to deliver the contract.

## **11. Reporting & Liaison**

The Council's lead officer for this contract is the Council's Creative Health Development Officer.

Progress reports will be issued to the Council's internal project manager regularly. The content of this report will include, but not be limited to the following:

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The status of each task  
Action taken to date  
Expected outcome  
Expected completion date  
Any risks and risk management actions

The Council will have the option to terminate the contract at any time by serving 3 months' notice in writing.

## **12. Payment**

The price submitted (excluding VAT) by the Provider must be a fixed fee to meet the specification. This fee must be inclusive of all listed expenses, consultation materials, etc. The preferred Provider will be selected as having submitted the most economically advantageous tender in relation to quality of service delivered.

Under no circumstances will the Council pay invoices in advance of work being undertaken. The invoices will be submitted in whatever format the Council may require, setting out full details of the services provided and including any supporting documents as required by the Council.

Any adjustments for deductions or additions over and above the work set out in the specification, will not be paid unless previously agreed in writing by the Council in advance of the additional work taking place. Any additional work or expenses over and above those identified within the specification must be clearly set out and justified in writing, and requests for its inclusion cannot be guaranteed.

## **13. SAFEGUARDING**

The Provider will ensure that all aspects of the course provision will be delivered in line with Croydon Safeguarding Children procedures (Appendix 1)

The provider should ensure that all staff refer to guidance and procedure from the Local Safeguarding Children's Board (LSCB) and 'What to do if you are worried a child is being abused', in particular safe recruitment of staff, and supporting families if there are any concerns.

Staff should be aware of possible disclosures from children and should have robust policies and procedures, as well as staff Code of Conducts with clear reporting routes outlined, in place at all times. The Creative Health Programme Manager is available to support as required.