

Domestic Abuse: A HEALTH SERVICES Referral Pathway for Hampshire



Definition of domestic violence and abuse

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse: psychological; physical; sexual; financial; and emotional.

Who should use this pathway?

The [NICE DVA](#) Pathway suggests that trained staff in antenatal, postnatal, reproductive care, sexual health, alcohol or drug misuse, mental health, children's and vulnerable adults' services should ask service users whether they have experienced domestic violence and abuse as a routine part of good clinical practice, even where there are no indicators of such violence and abuse.

You can use the pathway overleaf and the questions listed in the orange boxes to help you do this.

Opening Questions

- 1. You seem upset/frightened/anxious/low/quiet, is there something troubling you?**
 - If **yes**, proceed to asking the screening questions below. If no, but you are concerned use your professional judgement and proceed to the screening questions below.
- 2. Have you ever felt frightened or had to change your behaviour due to someone who you have a close relationship with?**
 - If **yes**, proceed to asking the screening questions below. If no, but you are concerned use your professional judgement and proceed to the screening questions below.

Key contacts & services

- Hampshire Police: 999 in an emergency and 101 for all other calls/enquiries
- Hampshire Domestic Abuse Service (for all members of the family): 0330 0165 112
www.hants.gov.uk/domesticabuse
- Victim Care Service (for standard risk victims): 0808 178 1641
- Hampshire Children's Services: 0300 555 1384
- Hampshire Adult Services (safeguarding): 0300 555 1386
- HHFT staff – contact your local DA Health Advocate, based in ED & maternity departments.

Screening Questions

- 1. Have you ever been hurt by this person?**
 - Do you feel able to tell me about it?
 - Has this happened before? How many times?
- 2. Within the last year, have you ever been embarrassed or made to feel stupid by this person?**
 - Do you feel able to tell me about it?
 - Has this happened before? How many times?
- 3. Have you been stopped from doing things that you enjoy?**
 - Do you feel able to tell me about it?
 - Do they have control over your finances or possessions, i.e. car?
 - Do you feel that you are being sabotaged, such as not being able to find your purse/keys when you are planning to go out? Are you no longer allowed to see your friends or family, have you seen them less often?
 - Do they tell you who you can see socially or contact, including via social media?
- 4. Have you been in any situation sexually where you felt uncomfortable or felt unable to say no to any kind of sexual activity that you did not want?**
 - Do you feel able to tell me about it?
 - Have you been forced or pressured to do anything of a sexual nature that has humiliated, upset or hurt you?
 - Have you ever been pressurised to use any drug/substance as part of a sexual encounter?
- 5. Do you have any concerns about the impact on children/people that you have caring responsibilities for and/or pets?**
 - Are you worried about them? Have they been hurt? What about pets?
 - What are you worried about?
 - Have you noticed any change in their behaviour?
- 6. Protection Planning: Do you have a safe place to go in an emergency?**
 - Do you have family or friends who can support you? Are they aware of your circumstances?
 - Would you call the police if you were frightened?

Domestic abuse victim concern – what should I do?

Opening Questions (overleaf)

DO NOT ask questions in front of the potential perpetrator or children over the age of 2 years.

Screening Questions

If appropriate, complete the **Screening Questions** overleaf with the victim/survivor

Health indicators of Domestic Violence and Abuse

- Enquire if:
- Pregnant / miscarriage / new baby
 - Depression, self-harming behaviour or mental health problems
 - Substance misuse
 - Genital injuries / Sexually Transmitted Infections
 - Facial or dental injuries
 - Delay in presentation with injuries
 - Frequent attendances to unscheduled care settings such as Emergency Departments/GP
 - Unexplained injuries
 - Cancelled appointments
 - Always accompanied by partner and unable to speak alone

TOP TIPS

- ✓ Patients highly value compassion and the quality of being non-judgemental.
- ✓ Make sure you ask in a private environment.
- ✗ Do not use family or friends as interpreters. Consider the presence of children over the age of 2 years who may be able to report back to perpetrator.
- ✗ Be aware of patients holding a mobile phone during the consultation as the perpetrator may be listening to the conversation.

All patients, including if they refuse screening questions

Do you have any immediate concerns for your client's welfare or safety?

Yes

In an emergency call 999 and ensure the client's safety.

No

Are there children or adults at risk involved?

Yes

Refer to your agency's procedures for children and adults at risk and make a referral to Children's or Adult Services (including for perpetrators who are adults at risk).

And

And

Refer to the Hampshire Domestic Abuse Service for a risk assessment, further advice and support.

In all cases, undertake the following actions with your client:

- Talk to your client about safety planning
- Consider what your agency should do to help them and keep them safe, and which other agencies should be contacted.
- Ask if they want further support or information to take away if they have somewhere they can keep it (e.g. make client aware that they can cover their internet tracks when accessing domestic abuse websites).

Perpetrators of abuse

For concerns or advice about perpetrators of abuse, or to make a referral, call the Hampshire Domestic Abuse Service Advice Line.

Domestic Violence and Abuse Tool (DVA Tool)

The Domestic Violence and Abuse tool has been developed to aid practitioners to understand/establish the level of concern they have following discussions with the client. This can help to ensure that an appropriate response is given to the level of concern indicated and covers a wide range of DVA indicators which should be considered.

Level of Concern	LOW	MEDIUM	HIGH
General Relationship Dynamics	Consensual & respectful, equal relationship	Difference in balance in relationship Consider age gap/difference in ability/ level of maturity & intellect Consider ethnicity/culture	Significant difference in balance of relationship Consider the same issues as in Amber Previous violence / abuse in this or other relationship
	Joint decision making	Unequal power balance and decision making	Power and control used in relationship (and accepted) Forced to comply
Jealous and controlling behaviour	Freedom of choice	Pressure to undertake activities or behave in a certain way – feels uncomfortable or unable to refuse	Coercion or forced to undertake activities or behave in a certain way - feels unable to refuse; often due to fear of consequences
	Communicates with friends and family as wishes	Possessiveness, loss of autonomy, can be a slow creep of loss of independence, may not be obvious initially	Controlling jealous behaviour by perpetrator so victim is prevented from making own decisions
	Communication with friends/family	Becoming withdrawn from friends / family May have relationships actively sabotaged by partner May still have a significant other to speak to eg friend/family member	Isolated from friends / family / sudden unexplained change in social circle Made to account for/prove whereabouts Has to respond to calls/texts immediately
Separation		May attempt/ indicate desire to separate	Scared to separate/ Attempts to separate / recent separation
Verbal abuse	Appropriate language and healthy disagreements	Aggressive / disrespectful language to individual	Direct threats and intimidation to individual, they may describe violent, aggressive &/or degrading language
Physical abuse	None	Pushing and shoving to the individual Minor injuries where medical attention not sought No physical abuse to children Destruction of property	Escalating aggressive behaviour e.g. hitting, punching, kicking, aggressive pushing, strangulation, choking, smothering, restricting breathing Injuries that should require medical attention but do not seek medical advice Injuries do not accord with explanation of cause Fear evident – verbal or non-verbal cues from individual or their children

Financial abuse	None - Able to access money whether it in a joint or own account	Unable to access accounts freely	Unable to access accounts Finances controlled by perpetrator Made to account for purchases/provide receipts
Sexual activity	Consensual	Verbal, physically unacceptable sexual activity; threats made if partner does not comply	Non-consensual sexual contact/activity Feels unable to say no due to fear of consequences May feel they have "consented" because they failed to decline due to fear of the consequences
Internet/social media use	No restrictions to use of internet / media to communicate with friends/family	Some restriction imposed	Controlled & restricted use of social media Tracking the victim Perpetrator sharing or viewing threatening /violent / abusive/explicit content online and / or interest in accessing 'violent' websites or explicit images online NB this could also indicate CSE
Mental Health and Substance Abuse	Emotionally stable	Low mood as a result of relationship that makes individual more vulnerable to anxiety / depression Substance / alcohol misuse	Self-harming / suicidal / erosion of self-esteem Panic attacks, anxiety Substance misuse / Alcohol misuse
Animal Welfare	No concerns	Threats to pets including threats if you say you will leave	Maltreatment or killing pets
Individual at risk		Prepared to take advice on safety Insight into the risk to both themselves (and children / vulnerable adult if appropriate)	Increased requests for police intervention Fear of use of statutory services
Abuser/ Perpetrator		Engaging with services fully (not just turning up) Victim makes excuses for behaviour	Stalking & harassment behaviour Breaching bail conditions/non-contact orders Says will engage with services but makes excuses Minimal or no remorse /guilt Blames victim No insight into impact on partner or children Minimises and denies
Children		Children may be witnessing DA incidents Children may be threatened with harm if they intervene Consider the impact on the child	Threats to harm children Children unable to use safety strategy due to fear of abuser OR Physical harm to children Consider Neglect - look at repeated non-attendance – was not brought guidance

Other areas to note as risks:

- During pregnancy domestic violence and abuse may start or intensify. Having a child < 1year old is also an additional risk
- Family history of domestic violence and abuse: witnessing DA impacts on individual's risk of becoming either a perpetrator or a victim. It can impact on what is perceived as acceptable behaviour
- Previous history of an abusive relationship: Either by a partner, ex-partner or a family member
- Forced marriage/honour based violence: family may be unsupportive to the victims requests for help or indeed harm the victim for bringing the family into disrepute
- Victim's minimisation, self-blame or excuses abusive behaviour

Hampshire Hospitals Foundation Trust (HHFT) – Health Advocates

There is a pilot project running in some of HHFT's departments (ED and Maternity in Basingstoke and Winchester) during 2019/2020.

Health Advocates will be based within the departments and their roles will include:

- Offering training to health professionals
- Supporting health professionals to identify systems for identifying victims, giving initial advice, signposting etc.
- Supporting patients whilst in the health setting with advice, information, risk assessment and safety planning.
- Follow up of patients where relevant if short term interventions are needed
- Referring to the Hampshire Domestic Abuse Service and other specialist services where appropriate, including MARAC and HRDA meetings for high risk clients.
- Supporting the use of this Domestic Abuse Health Services Referral Pathway for Hampshire

If you work in one of these HHFT teams, the Health Advocates will be providing their contact details and training options to you from 1 August 2019 and will be in post for approximately 12 months.

RECORDING: Domestic Violence and Abuse Opening and Screening Questions

Name		Address		Date of Birth	
Positive response to Domestic Violence and Abuse Opening Questions?				Y	N
Domestic Violence and Abuse Screening Questions completed due to concerns? (professional judgement)				Y	N
Detail the response to the Domestic Violence and Abuse Screening Questions below:					
	Have you ever been hurt by this person? <i>Details:</i>			Y	N
	Within the last year, have you ever been embarrassed or made to feel stupid by this person? <i>Details:</i>			Y	N
	Have you been stopped from doing things that you enjoy? <i>Details:</i>			Y	N
	Have you been any situation sexually where you felt uncomfortable or felt unable to say no to any kind of sexual activity that you did not want? <i>Details:</i>			Y	N
	Do you have any concerns about the impact on children / people you have caring responsibilities for / pets? <i>Details:</i>			Y	N
Protection Planning: Do you have a safe place to go in an emergency? Any additional information?					
<p>If the victim answered <u>YES</u> to the Domestic Violence and Abuse Opening Questions and <u>one or more</u> of Domestic Violence and Abuse Screening Questions, then a referral should be made to Hampshire Domestic Abuse Service Advice Line: 03300 165 112 as this indicates that the victim may be at risk of Domestic Violence of Abuse. This will require the victim's consent, unless they lack capacity to make this decision (Mental Capacity Act, 2005). If this is the case, a Best Interests Decision supported by the rationale should be made and fully recorded.</p> <p>If you think that a child or adult with care or support needs may be witnessing or experiencing abuse/neglect, you should make a referral to Children's and/or Adult Services. If unsure, please refer to your Safeguarding Children/Adult Policy and the Mental Capacity Act 2005 Guidance. If you are concerned that a child or adult is at immediate risk, contact the Police directly on 101 or 999 (in an emergency).</p>					
Action Taken <i>*tick as appropriate</i>	DVA Information Provided	Safety Planning Completed	Referral to DA Service		
Name and title of person completing this form:					
Organisational Address and Telephone Number:					
Date:					

