

SUPPORTING COLLEAGUES WHO ARE AT RISK OF DOMESTIC ABUSE POLICY

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1 INTRODUCTION

- 1.1 The aim of this policy is to ensure that NHS Somerset Integrated Care Board (the ICB) fulfils their statutory duties and has a procedure in place, to respond to reported incidents or allegations of domestic violence and abuse involving a colleague or volunteer, whether perpetrator or victim.

2 POLICY STATEMENT

- 2.1 As employer, NHS body and clinical commissioner, NHS Somerset Integrated Care Board (the ICB) has a crucial contribution to make in the drive to address domestic violence and abuse.
- 2.2 Somerset ICB has a duty of care to all employees and has a legal responsibility to provide a safe and effective work environment. Preventing and tackling domestic abuse is an integral part of the ICB's response to safeguard the wellbeing of its workforce.
- 2.3 This policy will ensure that managers and employees have guidance on the process to be followed, if they receive notification or information that a colleague or volunteer is involved in an incident or allegation regarding domestic violence or abuse. This will enable managers to deal with disclosures in an appropriate manner, whilst also enhancing competency in the management of employees who are identified as perpetrators of domestic violence.
- 2.4 This policy aims to ensure that colleagues are aware that Somerset ICB is a responsible employer, and will not only treat disclosures sensitively, but will provide appropriate interventions to improve their safety and wellbeing.
- 2.5 Finally, we hope that this policy allows staff to feel able to report domestic abuse in the workplace, and are aware of the support available to them.

3 SCOPE

- 3.1 This document applies to all staff and all services within Somerset Integrated Care Board (ICB).

4 PURPOSE

- Encourage and enable reporting of domestic abuse in the workplace
- Provide help and support to employees who are experiencing domestic violence or abuse

- Enable managers to deal with disclosures in an appropriate manner
- Enable managers to deal with employees who are identified as perpetrators

5 GUIDING PRINCIPLES

5.1 This guidance aims to help identify, prevent and reduce domestic violence and abuse by delivering safe interventions to colleagues at risk or those who are concerned about their inclinations in the perpetration of abuse.

5.2 The core principles of the policy promote the importance of considering the intended or unintended consequences of domestic abuse on the entire family, “Think Family”. It is thus vital to consider that it is “Always” abusive to be part of a family where domestic abuse is present, whether witnessed or not. Exposure to domestic abuse can negatively impact the emotional well-being and development of children, and may lead to a failure to protect and safeguard children from harm.

6 ROLES AND RESPONSIBILITIES

6.1 ICB

The role and responsibility of the ICB is:

- To explicitly state the ICB’s commitment to safeguard the wellbeing of its workforce and to execute its legal responsibility to provide a safe and effective work environment
- To ensure that the ICB develops and implements clear strategies, structures, policies and procedures to ensure that children and adults experiencing or at risk of abuse and neglect are safeguarded
- To fulfil its duty in making colleagues aware and to support the allocation of resources to ensure compliance with this policy
- To ensure that the ICB complies with its responsibilities under the Domestic Abuse act 2021

6.2 Quality Committee

As the designated Board committee with responsibility for seeking assurance and challenging matters of safety, the committee is responsible for:

- Receiving assurance reporting
- Providing scrutiny and challenge
- Ensuring this policy is reviewed at least every three years or more frequently if there are changes in legislation

- Receiving reports from the health representative at the Safer Somerset Partnership strategic board, and its associated boards, for example: Somerset Domestic Abuse Board
- Ensuring the ICB is compliant with its duties under the Domestic Abuse Act 2021

6.3 The ICB Safeguarding Adults and Children’s Team

Responsibilities include:

The Designated Professionals for Safeguarding Children and Adults

- To facilitate adherence to the ICB Colleagues at risk of Domestic Abuse policy, including relevant domestic abuse elements of the Children and Adults safeguarding policies and the Domestic Abuse Act 2021.
- Work closely with Human Resources to provide leadership and guidance, in the quality assurance of processes designed to respond to incidents or allegations regarding domestic violence and abuse, including guidance on appropriate interventions to improve the safety and wellbeing of employees

6.4 The Human Resources Team

The Human Resources team will be responsible for:

- Advising both managers and colleagues on the implementation of this Policy; in particular the use of the Flexible Working and Special Leave Policy in cases where employees or their family members are affected by domestic abuse
- Signposting colleagues to appropriate resources and support in the workplace

6.5 The Role of the Line Manager

Line managers are responsible for:

- Being aware of the extent and impact of domestic violence and abuse and understanding the significant overlap of domestic abuse within the context of both child and adult safeguarding
- Being aware of the guidance and process to be followed if they receive notification or information that a colleague or volunteer is involved in an incident or allegation regarding domestic violence or abuse
- Being available and approachable to colleagues experiencing domestic abuse

- Keeping information confidential, subject to the parameters described in relation to safeguarding children and adults at risk
- Ensuring, that all conversations take place in a private environment where conversations cannot be overheard or interrupted
- Ensuring all requests for assistance must be treated seriously and sympathetically
- Recognising that domestic abuse is characterised by power and control and that your colleague maybe exposed to coercion and threats, intimidation, emotional abuse, isolation or stalking and harassment
- Discussing the specific steps that can be taken to help the colleague stay safe in the workplace
- Ensuring the colleague is aware of options available to them, as referenced in this document
- Encouraging affected colleagues to seek advice from external agencies as appropriate
- Encouraging affected colleagues to utilise support mechanisms available internally to the ICB (e.g. Occupational Health, Employee Assistance Programme)
- Making arrangements to ensure that any domestic abuse allegation or disclosure from those who have perpetrated abuse and whom work directly with children are passed to the Local Authority Designated Officer at Somerset Children's Social Care on 0300123 2224, within 24 hours. Advice should be sought from HR and the ICB Safeguarding Children Team

6.6 Somerset ICB Employees

All employees should:

- Feel confident that NHS Somerset Integrated Care Board (the ICB) will respond sensitively to disclosures of domestic abuse, and will strive to deliver appropriate interventions to improve the safety and wellbeing of their employees

7 DEFINITION

7.1a The Domestic Abuse Act (2021) definition of domestic abuse:

Behaviour of a person ("A") towards another person ("B") is "domestic abuse" if (a)A and B are each aged 16 or over and are personally connected to each other, and (b)the behaviour is abusive.

Behaviour is “abusive” if it consists of any of the following

- (a) physical or sexual abuse;
- (b) violent or threatening behaviour;
- (c) controlling or coercive behaviour;
- (d) economic abuse (see subsection (4));
- (e) psychological, emotional or other abuse; and it does not matter whether the behaviour consists of a single incident or a course of conduct.

7.1b “Economic abuse” means any behaviour that has a substantial adverse effect on B’s ability to—

- (a) acquire, use or maintain money or other property, or
- (b) obtain goods or services.

7.1c For the purposes of this Act A’s behaviour may be behaviour “towards” B despite the fact that it consists of conduct directed at another person (for example, B’s child).

7.1d For the purposes of this Act, two people are “personally connected” to each other if any of the following applies—

- (a) they are, or have been, married to each other;
- (b) they are, or have been, civil partners of each other;
- (c) they have agreed to marry one another (whether or not the agreement has been terminated);
- (d) they have entered into a civil partnership agreement (whether or not the agreement has been terminated);
- (e) they are, or have been, in an intimate personal relationship with each other;
- (f) they each have, or there has been a time when they each have had, a parental relationship in relation to the same child (see subsection (2));
- (g) they are relatives.

7.1e (2) For the purposes of subsection 7.1d (f) a person has a parental relationship in relation to a child if—

- (a) the person is a parent of the child, or
- (b) the person has parental responsibility for the child.

7.1f In this section—

“child” means a person under the age of 18 years;

“civil partnership agreement” has the meaning given by section 73 of the Civil Partnership Act 2004;

“parental responsibility” has the same meaning as in the Children Act 1989 (see section 3 of that Act);

“relative” has the meaning given by section 63(1) of the Family Law Act 1996.

7.2 The Serious Crime Act 2015, recognises that non-violent coercive behaviour, a long-term campaign of abuse, often at the heart of domestic abuse and requiring the victim to fear the immediate application of unlawful violence is a serious crime. The act explicitly criminalises patterns of coercive or controlling behaviour where they are perpetrated against an intimate partner or family member.

7.3 It is important to recognise that domestic homicides can occur without prior patterns of physical violence. Domestic abuse is characterised by patterns of power and control; often with one party exuding a significant sense of entitlement and inordinate levels of control; using coercion and threats, intimidation, emotional abuse, and isolation to control their victim.

7.4 Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

7.5 Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.”

7.6 This definition includes 'honour' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

8 PREVALENCE AND IMPACT

8.1 Domestic Violence and Abuse is a significant public health issue, leading to increased risk of poor mental health, physical injuries, chronic physical conditions, unwanted and complicated pregnancy, sexually transmitted infections and substance misuse. The effects can often last a lifetime and into subsequent generations.

8.2 Research shows that an estimated 2 million adults aged 16 to 59 years experienced domestic abuse in the year ending March 2018, equating to a prevalence rate of approximately 6 in 100 adults. Women were around

twice as likely to have experienced domestic abuse as men (7.9% compared with 4.2%).¹

- 8.3 HM Government estimates the cost of domestic abuse to be approximately £66 billion in England and Wales for the year ending March 2017.
- 8.4 The cost to the NHS has been calculated at £1.73 billion. With mental health costs estimated at an additional £176 million.
- 8.5 In Somerset there is an estimated population of 530,000. The estimated cost of domestic abuse is £61 million. The cost to public services is £33.5 million, £15 million of which is attributed to healthcare.
- 8.6 In the Avon and Somerset Policing area there were 27,628 domestic abuse related incidents recorded in the financial year ending March 2018.² This is equivalent to 16 incidents and crimes for every 1,000 people in the population
- 8.7 Domestic abuse has significant psychological consequences, including anxiety, depression, PTSD, suicidal behaviour, flashbacks, sleep disturbances and emotional detachment.
- 8.8 1 in 8 of all suicides attempts by women in the UK is due to domestic abuse. This equates to just fewer than 200 women dying and nearly 10,000 attempting suicide each year.
- 8.9 Almost a quarter (24%) of Refuge clients (study based on 3500 women) had felt suicidal at one time or other. 18% had made plans to end their life, 3.1% had made at least one suicide attempt. (Source: Refuge and Warwick Law School)
- 8.10 Safelives report, A Cry for Health found that in the year before getting effective help, nearly a quarter (23%) of victims of domestic abuse at high risk of serious harm and murder, and one in ten victims at medium risk went to Accident and Emergency (A&E) because of their injuries.
- 8.11 Almost a third of domestic violence cases start during pregnancy with pregnant women more likely to have multiple sites of injury, and often reporting that abuse escalates throughout the pregnancy.
- 8.12 Pregnant women who are abused are more likely to experience serious pregnancy complications, such as [miscarriage](#), [high blood pressure](#) and

¹ (Domestic abuse in England and Wales - Office for National Statistics, 22 Nov 2018)

² Source (Domestic abuse in England and Wales - Office for National Statistics, 22 Nov 2018) Link <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/domesticabuseinenlandandwalesdatatool>

[premature birth](#). They are also more likely to suffer emotional and mental health problems, such as [depression](#).

- 8.13 Pregnant women who experience domestic violence and abuse are also more likely to have a baby who is stillborn. Blows to the abdomen, [pregnancy complications](#) and irregular attendance at [antenatal check-ups](#) all increase the risk.
- 8.14 Between 2006 and 2008, domestic abuse was reported in 12 per cent of maternal deaths.
- 8.15 80% of older adults experiencing domestic violence and abuse are not visible to services. Of those visible to services, ¼ live with abuse for more than 20 years.
- 8.16 Victims aged 61+ are much more likely to experience abuse from an adult family member or current intimate partner than those 60 and under, and are much less likely to leave the perpetrator of their abuse. Often they experience an average of 12.9yrs of abuse before accessing support.
- 8.17 Older people may have a lower level of complex needs in terms of mental health and substance misuse, but are more likely to have a disability/dependency issue.
- 8.18 Public Health England produced a report on domestic violence and abuse and disability in which they state the following: “Disabled women are significantly more likely to experience domestic abuse than disabled men and experience more frequent and more severe domestic abuse than disabled men. However, as being disabled carries further risk of domestic abuse, disabled men also experience higher rates of abuse than non-disabled men. Disabled men experience a similar rate of domestic abuse as non-disabled women.
- 8.19 Black and Minority Ethnic (BME) women can face additional barriers to accessing support, there are a plethora of reasons that a patient’s ethnicity, gender, disability, religion, sexuality or age may affect their experience of abuse, how and when they seek support and the type of support they need. This can include but not limited to: fear of the consequences of disclosure or not being believed, additional barriers to disclosure and service access in form of; language and communication difficulties, insecure immigration status or previous experiences of discrimination based on race, gender, religion, sex, marital status, pregnancy status, sexuality, disability and age.
- 8.20 Lesbian, gay, bisexual and transgender (LGBT) women / men can be vulnerable to abusers who undermine their sexuality and threaten to ‘out’ them to colleagues, employers and family members.
- 8.21 Transgender women and men may have fewer specialised services available to them.

- 8.22 Women and men experiencing domestic abuse and sexual violence may find it difficult to disclose the abuse. Rape and sexual abuse is an extremely difficult and traumatic experience for anyone who experiences it, with shame and stigma being felt by both sexes in disclosing. Specialist Sexual Violence Services, such as Somerset & Avon Rape and Sexual Abuse Support (SARSAS) have specialist helpline support for both men and women.
- 8.23 80% of women in a domestically violent or abusive relationship seek help from health services, usually general practice, at least once, and this may be their first or only contact with professionals.
- 8.24 There is extensive contact between women and primary care clinicians with 90% of all female patients consulting their GP over a five-year period. Safelives insights data for 2016/2017 shows over half (52%) of victims supported by a domestic abuse advocate had visited a GP in the past 12 months – on average, 4.5 times.
- 8.25 Relevant resources and reports:
- The Economic and Social Costs of Crime' (Heeks et al., 2018) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/772180/horr107.pdf
 - Public Health England produced a report of DVA and Disability https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/480942/Disability_and_domestic_abuse_topic_overview_FINAL.pdf
 - Safelives report Cry for Health: <http://www.safelives.org.uk/cry-for-health>
 - Safelives report Older People and Domestic Abuse: <http://safelives.org.uk/sites/default/files/resources/Safe%20Later%20Lives%20-%20Older%20people%20and%20domestic%20abuse.pdf>

9 SAFEGUARDING

- 9.1 To comply with statutory safeguarding responsibilities, it is vital to safeguard both adults and children at risk of domestic violence and abuse.

Adults at Risk

- 9.2 The Care Act 2014 sets out a clear legal framework for how local authorities and partner organisations should protect adults at risk of abuse or neglect. Under The Care Act 2014 there are 10 definitions of abuse, one of which is domestic abuse.
- 9.3 The Care Act adult safeguarding duties apply to an adult who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs), and
- Is experiencing, or is at risk of, abuse or neglect, and
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

9.4 To Report an Adult Safeguarding Concern:

- **Emergency:** If an adult is at imminent risk of harm and a crime has occurred ring 999 for an emergency response.
- If a crime has occurred but the situation is not an emergency the crime should be reported by calling **101**
- Non-emergencies and to seek safeguarding advice **call** Adult Social Care on **0300 123 2224**
- To submit a referral click the link online via the Somerset Safeguarding Adults Board website:
www.ssab.safeguardingsomerset.org.uk
- Out of hours service: Call Adult Social Care on **01823 368244**

Children at Risk

9.5 The Serious Crime Act 2015 makes it explicit that cruelty to children which causes psychological suffering is a crime. This includes when children are emotionally harmed by exposure to domestic abuse.

9.6 Where there is domestic violence and abuse, the wellbeing of the children in the household must be promoted and all assessments must consider the need to safeguard the children, including unborn child/ren. They are at increased risk of; physical, emotional, sexual abuse and neglect, in these environments.

9.7 Children's responses to the trauma of witnessing domestic abuse may vary according to a multitude of factors including, but not limited to, age, race, gender and stage of development. It is equally important to remember that these responses may also be caused by something other. Where there is reasonable cause to suspect that a child is suffering or likely to suffer significant harm, professionals should act in accordance with their organisations child safeguarding policy. South West Child Protection Procedures:
<http://www.proceduresonline.com/swcpp/somerset/>

- If you are worried about a child or young person who could be in danger (**child protection Level 4 threshold**) please contact Children's Social Care on: **0300 123 2224** or the police.

- You can contact the police directly by dialling 101 and they will discuss with Children's Social Care what action should be taken. In an emergency always contact the police by dialling **999**.
- If you would like to speak to a social worker outside office hours, please phone the Emergency Duty Team (EDT) on **0300 123 23 27**

10 DOMESTIC ABUSE AND THE WORKPLACE

Why Is Action needed in the workplace?

- 10.1 Research identifies 51,355 NHS staff likely to have experienced domestic abuse within the past 12 months, breaking down to 44,825 women and 6,530 men. (*Safelives report Cry for Health: <http://www.safelives.org.uk/cry-for-health>*)
- 10.2 Domestic abuse is not limited to the home. Research indicates that 75% of women that experience domestic abuse are targeted at work – from harassing phone calls and abusive partners arriving at the office unannounced, to physical assaults. Perpetrators may seek out the victim in the workplace when they have been legally prevented from gaining access in other ways.
- 10.3 For people who are personally affected by domestic abuse, it can devastate their family, home and working lives. Support and understanding by their employer can play a pivotal role in their recovery. Thus ensuring the wellbeing of colleagues is a key priority for the ICB.
- 10.4 Domestic abuse can happen to anyone, and in all kinds of relationships - heterosexual, gay, lesbian, bisexual and transgender. People suffer domestic abuse regardless of their social group, class, age, race, disability, gender, sexual orientation or lifestyle. The abuse can begin at any time – in new relationships or after many years spent together.
- 10.5 The direct and indirect costs of domestic abuse on staff will be wide ranging. The ICB recognises that domestic abuse could have a direct effect on the quality of an individual's work performance and may, impact in the following ways:
- 1 Increased sickness absence and/or decrease in attendance levels
 - 2 Reduced work performance and effectiveness
 - 3 Reduced punctuality
 - 4 Job prospects and career development
- 10.6 The ICB is committed to supporting staff who are experiencing any form of domestic abuse or violence, and in providing guidance for staff and management to address the occurrence of domestic abuse and its effects on the workplace.

- 10.7 It is important to highlight the understanding that everyone has the right to a life free from abuse in any form. Domestic abuse is wholly unacceptable and inexcusable behaviour and responsibility for domestic abuse lies with the perpetrator.
- 10.8 The ICB strives to create a working environment that promotes the view that abuse against people is unacceptable and that such abuse will not be condoned or made the subject of jokes, and such behaviour would be considered as a disciplinary matter.
- 11 EMPLOYEES AT RISK OF DOMESTIC ABUSE**
- 11.1 It is not always easy to detect when an employee is experiencing domestic abuse. Abuse is often associated with physical violence, however frequently the central theme to the abuse is rooted in control, coercion and psychological abuse.
- 11.2 The following indicators may assist managers in identifying domestic abuse. However they are to be used more generally as an indicator that something might be wrong, without immediately assuming that it will be related to domestic abuse.

Work Productivity

- Change in the person's working patterns: for example, frequent absence, lateness or needing to leave work early.
- Reduced quality of work: missing deadlines, a drop in usual performance standards.
- Change in the use of the phone/email: for example, a large number of personal calls/texts, avoiding calls or a strong reaction to calls/texts/emails.
- Spending an increased number of hours at work for no reason
- Frequent visits to work by the employee's partner, which may indicate coercive control
- Changes in Behaviour or Demeanour
- Conduct out of character with previous behaviour
- Changes in behaviour: for example, becoming very quiet, anxious, frightened, tearful, aggressive, distracted, or depressed
- Being isolated from colleagues
- Obsession with leaving work on time
- Secretive regarding home life
- Worried about leaving children at home

Physical Indicators

- Visible bruising or single or repeated injury with unlikely explanations
- Change in the pattern or amount of makeup used
- Change in the manner or dress: for example, clothes that do not suit the climate which may be used to hide injuries

- Substance use/misuse
- Fatigue/sleep disorders

Other Indicators

- Partner or ex-partner stalking employee in or around the workplace or on social media
- Partner or ex-partner exerting unusual amount of control or demands over work schedule

11.3 The more supportive atmosphere an employer can create, the more likely employees are going to feel comfortable disclosing a problem with domestic abuse.

12 UNDERSTANDING THE BARRIERS TO DISCLOSURE

12.1 Colleagues experiencing abuse maybe afraid to talk about what is happening to them, and in many cases either not identifying that their experience is classified as domestic abuse, or unaware of the services and support available.

12.2 They may feel unsure of how to start the conversation, fearful of being judged, ashamed, embarrassed, or not feel worthy of help and support. They are also likely to feel that they are betraying their partner; afraid of what will happen next, worried about how they will cope, and what they may have to do to leave the relationship.

12.3 Domestic abuse is a complex psychological dynamic rooted in values and beliefs that can result in the victim being rendered “immobilised”, afraid to stay and afraid to leave.

12.4 Colleagues may face additional barriers to disclosure and access to services due too: language and communication difficulties, insecure immigration status or previous experiences of discrimination based on race, gender, religion, sex, marital status, pregnancy status, sexuality, disability and age. Intersectionality; namely how aspects of one’s social identities might combine to create unique modes of discrimination and thus prevent further barriers to disclosure must also be considered.

13 PREGNANCY AND DOMESTIC ABUSE

13.1 Pregnancy can be a trigger for domestic abuse, and existing abuse may get worse during pregnancy or after giving birth.

13.2 Domestic abuse during pregnancy puts the mother and unborn child in danger. It increases the risk of miscarriage, infection, premature birth, and injury or death to the baby.

- 13.3 It can also cause women to experience emotional and mental health problems, such as stress and anxiety, which can affect the development of the baby.
- 13.4 Staff who are pregnant (or post-natal) who are experiencing domestic abuse are encouraged to seek support from their Manager and Human Resources colleagues in addition to their midwife, health visitor and GP.

14 A COLLEAGUE WHO IS A PERPETRATOR OF DOMESTIC ABUSE

- 14.1 Domestic abuse is a serious matter that can lead to criminal convictions. A colleague who is a perpetrator of domestic abuse may be subject to disciplinary action being taken against them, up to and including dismissal (in line with the ICB's Disciplinary Policy), regardless of whether the abuse occurred at work or not. This measure reflects the organisation's approach to domestic violence as a wholly unacceptable and inexcusable behaviour.
- 14.2 Where ICB staff are convicted or cautioned by the police in connection with domestic abuse the ICB will consider the impact this may have on their employment with the ICB and the risk to service users. In deciding such action, the ICB will take into account the role of the colleague and whether it is necessary for Disclosure and Barring Service checks to be conducted for the continuation of their role within the ICB having regard for the nature and scale of the offence. Where appropriate, the ICB will refer the colleague to their professional regulatory body.
- 14.3 Failure to declare or notify the ICB of any criminal conviction or any circumstances which would constitute personal misconduct may lead to consideration under the ICB's Disciplinary Policy.
- 14.4 Perpetrators of domestic abuse should also be signposted to support agencies either through their GP or Somerset Survivors (Somerset Integrated Domestic Abuse Service) - 0800 69 49 999.

15 VICTIMS AND PERPERTRATORS WORKING IN THE SAME ORGANISATION

- 15.1 Situations in which both the victim and the alleged perpetrator work for the ICB, or where a victim of domestic abuse needs to access services at a location where the alleged perpetrator is employed, need to be handled particularly sensitively.
- 15.2 Ensuring safety for the victim and any relevant colleagues in the workplace may involve the suspension or redeployment of the alleged perpetrator pending an investigation in line with the ICBs Disciplinary Policy.
- 15.3 Action may also need to be taken to minimise the potential for the perpetrator to use their position or work resources to find out details about the whereabouts of the victim. This may include a change of duties for one or both employees or withdrawing the perpetrators access to certain computer programmes or offices.

15.4 Misuse of workplace information and resources to continue abuse will be dealt with as a disciplinary offence.

16 INTERACTION OF DOMESTIC ABUSE AND PERFORMANCE CONCERNS

16.1 As described in section 2.4, individuals who are suffering from domestic abuse may find that this experience impacts upon their performance at work.

16.2 When addressing individual's performance at work and absence concerns, the ICB will make reasonable efforts to consider all aspects of the colleague's situation before determining action to take under the relevant ICB Policy.

17 CONFIDENTIALITY AND PRIVACY

17.1 The ICB respects an individual's right to privacy in the event they do not wish to inform the organisation that they have experienced domestic abuse.

17.2 Individuals who disclose experiencing abuse can be assured that the information they provide is confidential and will not be shared with other members of staff without their permission.

17.3 As far as possible, personal information of colleagues who are experiencing domestic abuse will only be shared on a need-to-know basis, including phone numbers and details of employment within the ICB such as working hours.

17.4 The ICB respects an individual's right to confidentiality. However, in circumstances of child protection or the protection of adults with care and support needs from abuse, the child protection and adult safeguarding services may need to be involved (in line with 'Somerset's Safeguarding Adults at Risk Policy and the ICB's Safeguarding Children Policy). Complete confidentiality cannot be guaranteed in these situations.

17.5 Where a colleague has reason to believe that a child or vulnerable adult is being abused, or there is high risk domestic abuse, further guidance should be sought from the ICB Safeguarding Team in relation to their legal obligation and requirements for information sharing.

18 SHARING INFORMATION IN CASES OF SUSPECTED DOMESTIC ABUSE

18.1 Professionals who encounter domestic abuse victims, perpetrators and their families often need to assess how to share personal information about clients with other professionals. Lawful and responsible information sharing can be vital to help victims and their children (or other dependents) safe, to carry out risk assessment, to provide support and advocacy services and help bring perpetrators to justice.

18.2 Legal Framework and Guidance for Information Sharing.

- 18.3 **The Data Protection Act 2018** defines consent as: a 'freely given specific and informed indication of his or her wishes by which the data subject signifies his or her agreement to personal data relating to him or her being processed'.
- 18.4 When obtaining consent to disclose personal information it should be made clear:
- Why the information is to be shared (the reasons, purpose and intended outcome)
 - Which agencies or named practitioners the information will be shared with
 - What information is to be shared
- 18.5 For the purpose of this guidance, it is assumed that no consent has been obtained from any individual (the victim, the victim's children and/or the alleged/suspected perpetrator) as to the sharing of their information.
- 18.6 In practice, consent should always be sought if possible and it is safe to do so, although the individual needs to take an independent decision on whether sharing information is necessary and permitted by law to address the safety of the individual or individuals.
- 18.7 If consent is not obtained, disclosures can still be made under the Data Protection Act (DPA), the Human Rights Act (HRA) and the Caldicott Guidelines. Decisions to disclose must:
- Be reached on a case by case basis
 - Be based on a necessity to disclose
 - Ensure that only proportionate information is disclosed in light of the level of risk or harm to a named individual or a known household in each case.
 - Be properly documented at the time a disclosure decision is being made (i.e. what risk is believed to exist), what information will be disclosed and what restrictions on the use of the disclosed information will be placed on its recipients
 - Consideration should always be given to the safety of the victim when disclosing information with or without consent as the perpetrator may have access to their phone, post or emails. For advice about disclosing safely please speak to the ICB Safeguarding team email: somicb.safeguardingandcla@nhs.net or Somerset Integrated Domestic abuse service (0800 69 49 999).

- 18.8 Laws and guidance governing domestic abuse disclosures (including at Multi Agency Risk Assessment Conference (MARAC)).
- Data Protection Act 2018 (the DPA)
 - Human Rights Act 1998 (the HRA)
 - Common Law duty of confidence
 - The Crime and Disorder Act 1998
 - Caldicott Guidelines: as these are guidelines only, if conflict exists between them and the DPA and HRA, the legislation must take precedence.
- 18.9 **Data Protection Act** – the prevention of crime exemption under Section 29 of the DPA can be used if disclosure is necessary to prevent a crime against a named individual or specified household. The risk of crime must be a genuine or likely risk.
- 18.10 **Common Law duty of confidence** – An obligation of confidence will exist where the individual has provided the information to another in circumstances where it is reasonable to assume that the provider of the information expected it to be kept confidential. Where there is a clear duty of confidence the information can only be disclosed to “third parties” if there is informed consent, compulsion of law or public interest.
- 18.11 **Human Rights Act** – A disclosure will comply with HRA if it:
- Is made for the purpose of preventing crime, protecting the health and/or safety of alleged victims and/or the rights and freedoms of those who are victims of domestic violence and/or their children, and
 - Is necessary for the purposes referred to in (a) above and is no more extensive in scope than is necessary for those purposes, and
 - Complies with all relevant provisions of law, including the DPA and the Caldicott Guidelines
- 18.12 **The Crime and Disorder Act 1998** – Any person may disclose information to a relevant authority under Section 115 of the Crime and Disorder Act 1998, ‘where disclosure is necessary or expedient for the purposes of the Act (reduction and prevention of crime and disorder)’. ‘Relevant authorities’, broadly, are the police, local authorities, health authorities (Integrated Care Boards) and National Probation Service and Bristol/Gloucestershire/Wiltshire and Somerset (BGSW) Community Rehabilitation Company.
- 18.13 **Caldicott Guidelines** – Where an individual has not consented to the use of their information, that individual’s wishes should be respected unless there

are exceptional circumstances. One such exceptional circumstance arises where there is a serious public health risk or risk of harm to the patient or other individuals, or for the prevention, detection or prosecution of serious crime.

18.14 The Seven Caldicott Principles are:

- Justify the purpose(s) of using confidential information
- Only use personal confidential data unless absolutely necessary
- Use the minimum necessary personal confidential data that is required
- Access should be on a strict need-to-know basis
- Everyone must understand his or her responsibilities
- Understand and comply with the law
- The duty to share information can be as important as the duty to protect patient confidentiality

18.15 Individuals should be aware that Caldicott Guidelines are not law and that the DPA, HRA and common law will always take precedence. If there is apparent conflict between legislation and common law, legislation takes precedence. The ICB Safeguarding Team, the HR team and the ICB's Caldicott Guardian can all provide advice and support about information sharing

18.16 Seven Golden Rules for Information Sharing:

- Remember that the Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately
- Be open and honest with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so
- Seek advice from other practitioners if you are in any doubt about sharing the information concerned, without disclosing the identity of the person where possible
- Share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgement on the facts of the case

- Consider safety and well-being: Base your information sharing decisions on considerations of the safety and well-being of the person, and others who may be affected by their actions
- Necessary, proportionate, relevant, accurate, timely and secure: Ensuring that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely
- Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared with whom and for what purpose

19 MANAGING REPORTS OF DOMESTIC VIOLENCE AT WORK

- 19.1 The ICB condemns domestic abuse and will respond sensitively and effectively to colleagues that require help and support. In responding to domestic abuse, the ICB will maintain appropriate confidentiality and respect for the rights of the individual involved.
- 19.2 When receiving a disclosure from a colleague it is important to support and validate their experience with the following key messages:
- I am listening
 - I believe you
 - You have the right to live free from violence and abuse
 - Abuse is not your fault
 - You are not alone
 - We can help you to access support
- 19.3 Reassure the person that their disclosure is confidential and will not be shared with the abuser, that the abuse is not their fault and that they can access help and support. This may be the first time the colleague is talking about their experience of domestic violence and abuse, how managers respond is key to the colleague accessing appropriate services and support.

Explain the Parameters of Confidentiality

- 19.4 It is essential to ensure transparency around information sharing parameters. Advise colleagues of your duty to safeguard individuals and the parameters of confidentiality. For example: 'Everything you tell me is confidential; I do not routinely share information without your consent. However, if I do feel that there is a risk of harm to yourself or someone else, I may have to share that information with other professionals.'
- 19.5 Remember that a colleague may be fearful about the implications of information sharing. For example: they may have had previous negative experiences with services, or the perpetrator may be using the threat of the involvement of services to control them.

- 19.6 Managers must emphasise that information sharing' and actions offered, are a supportive measure to reduce harm. They must offer support around the outcome of information sharing.
- 19.7 The Somerset ICB will make assistance available to colleagues involved in domestic abuse. This assistance may include providing a confidential means to ask for help via:
- Their Line Manager
 - The Human Resources department
 - The Employee Assistance Programme, which is available 24 hours a day, 365days a year and is free to call from a landline on 0800 1116 387
 - The Somerset Domestic Abuse Helpline: 0800 69 49 999, which is open 9am to 5pm or through the national helpline run by Women's Aid and Refuge on 0808 2000 247, which is available 24 hours a day
- 19.8 The support provided to colleagues must at all times' within reason, uphold the rights and wishes of the individual and protective measures must be offered in way that is proportionate to the identified risk.

Assessment of a Colleague's Disclosure

- 19.9 Determine if there is an immediate risk to the colleague? Are there any children or adults with care needs in the family? Who they are at risk from? Check if there is a risk of multiple perpetrators and who else may potentially be at risk? (Consider risk to children, unborn baby and adults with care needs).
- A. Do they have immediate concerns?
 - B. Is it safe for them to return home today?
 - C. Are there children at home or other adults who may be vulnerable?
 - D. Do they have a place of safety?

Factors that can Indicate that the Person is at High Risk of Harm in the near Future

- 19.10 Six factors are indicators of high risk are listed below- using the SPECSSS acronym. Absence of these risk factors does not exclude high risk. If you are concerned- seek further advice from HR or the ICB safeguarding team. The SPECSSS acronym is;
- Separation
 - Pregnancy

- Escalation
- Community / Additional Factors
- Stalking
- Sexual Abuse
- Strangulation / Threats to Kill

19.11 **SPECS** is designed to strengthen judgement and understanding of the risks associated with domestic violence and abuse, whilst also acting as an alert to prompt referrals to specialist services. If any one of the indicators are present within the initial assessment/disclosure immediate action must be considered.

Referring a Colleague Domestic Abuse Services

19.12 To support a colleague's disclosure of domestic abuse contact Somerset Domestic Abuse helpline or the Avon and Somerset Police.

- **Somerset Domestic Abuse Helpline: 0800 69 49 999**
- **Avon and Somerset Police: 101 or if there is immediate threat of serious harm, call 999**

20 SAFETY CONSIDERATIONS

20.1 People are at greater risk of domestic homicide at the point of separation or after leaving a violent partner. Be aware that the colleague is more likely to feel in a heightened state of risk post disclosure, breaching the established power and control mechanisms will likely aggravate their abuser and conflict may escalate.

20.2 The colleague is likely to feel exposed and concerned about what is going to happen. Be clear about what support can be offered and what actions you have agreed.

20.3 Only 1 in 5 survivors of abuse are ready to report their concerns to the police, encourage engagement with domestic abuse professionals (e.g. Independent Domestic Violence Advisors) who work independently from the police and can offer specialist advice and support.

20.4 Do not suggest that the colleague leave the relationship. Managers should not offer their personal views or make comments that could be perceived as judgemental. Domestic abuse is complex in nature. There are many barriers to disclosure and many reasons why a person experiencing abuse may feel isolated and powerless to leave.

20.5 The colleague's rights should be respected. They may not yet be ready to engage with support but will feel reassured by your response which may indeed prompt them to engage at a later date. However, if you feel there

may be a risk of serious harm or threat to life you may need to take action without their consent. In these circumstance you should contact your line manager to explore the risk and agree appropriate actions. Disclosures should be made in line with Sect 19 above and be documented in a factual/neutral manner.

- 20.6 Do not override the colleague's decision of not contacting the police unless there is a threat to their life, to their children or to other adults with care and support needs. Calling the police against the colleague's wish can increase the risk and severity of the abuse. In most instances the colleague is' the best gauge of their risk.

21 SAFETY PLANNING AT WORK

- 21.1 The ICB will actively provide support to colleagues to minimise the risk to their safety while at work, if they make it known that they are experiencing domestic abuse. Colleagues working from home should also have the same support. All security and risk management plans should put the safety of the victim and any other employees first.

- 21.2 The ICB operates a 'swipe-card' system, in which only those with these cards can enter the building. However, an individual who is the victim of domestic abuse could still be at risk whilst at work such as a partner turning up at work at times of potential vulnerability such as at the beginning or ending of the working day, when a colleague is entering or leaving the car park. Plans should be developed for staff to follow if there is a risk of the perpetrator attempting to gain access to a victim in the workplace.

- 21.3 Where it is in the interests of the victim and other employees and is proportionate to the risks assessed, a confidential record should be made of attempts to gain access to the victim and measures taken to reduce such risks. Where the continued safety of the victim cannot be assured. or where any such attempt involves the use or threat of violence or the use of a deception, consideration should be given to making a police report. In this context it should be noted that harassment of a person could be a criminal offence.

- 21.4 Perpetrators of domestic abuse have been known to go to lengthy means to obtain new contact details of a victim who has moved on. Employees who have access to personal information e.g. address or home telephone number or internal location should never disclose this to any unidentified callers.

- 21.5 Examples of support provided may include, but are not limited to:

- providing resource and referral information, including the use of ICB telephones and IT equipment to access support
- enabling special considerations in the workplace for colleague safety

- enabling work schedule adjustments or leave necessary to obtain medical housing, financial, counselling or legal assistance
- arranging flexible work hours so that the colleague can seek protection, go to court, look for new housing, arrange childcare, etc
- consider job sharing options consider providing for a reasonable and proportionately short period of, normally, paid or unpaid leave
- Allowing access to the workplace rather than working from home

21.6 All arrangements that would be considered would need to be reasonable, and would balance the short term needs of the colleague alongside the short and medium term needs of the ICB.

21.7 To protect colleagues and support effective safety planning managers may use the following template to guide discussions, identify risk and devise effective safety measures. It is recommended that this be in support of and in collaboration with safety plans agreed with other specialist partner agencies.

22 MONITORING COMPLIANCE AND EFFECTIVENESS OF THIS POLICY

22.1 In accordance with Somerset ICB's Policy for the Development and Management of Procedural Documents this policy will be reviewed in conjunction with the core Domestic Abuse policy for Somerset every 3yrs or sooner, through a system-wide consultation, and in accordance with regional and national standards.

22.2 The Leadership Team will be responsible monitoring and reporting on review dates and the Associate Director of Human Resources will be responsible for reviewing the policy in accordance with the review arrangements described above. This includes a review of the activities and developments concerning the implementation and compliance with the core principles outlined in the policy.

23 REFERENCES

23.1 The evidence base and content for the development of this document is based on best practice. Refer to appendix for source of data and support links.

24 ASSOCIATED DOCUMENTS

24.1 This document should be read in conjunction with the following Somerset ICB policies:

- Flexible Working Policy / Special Leave Policy / Disciplinary Policy and Procedure / Safeguarding Adults and Children's policies.

SAFETY PLANNING WITH COLLEAGUES

Employee Name:	
Date:	

This safety plan should be used in conjunction with the Supporting Colleagues who are Victims of Domestic Abuse Policy and the Somerset Domestic Abuse Policy and serves as an outline only. Each situation will be different' and the assistance required should be tailored to the individual employee's circumstances. Those affected by domestic abuse know their abuser best – be guided by and trust their assessment and suggestions.

Background		
<p><i>Details of the domestic abuse which has occurred or is at risk of occurring. (The individual can share and record as much or as little information as they feel able to.)</i></p>		
<p><i>The following questions are listed as a prompt for discussion with the employee to help identify what actions may be required to be implemented.</i></p>		
Guideline	Yes/No	Action
Has the abuser threatened you at work – in person, over the phone, via email?		
Has the abuser threatened to come to the workplace? Are you concerned that this might occur?		
Have you felt unsafe working from home? Do any of your colleagues check in with you when you are working from home? Would this be helpful?		
Has stalking been a problem? Have you checked your phone for a tracker device?		

Do you think you or any of your colleagues are in danger in the workplace from the perpetrator?		
Do you have concern about safety on your commute to and from work?		
Are you required to travel as part of your role? Do you have concern about this element of your role?		
Do you have a buddy system in place with another colleague? (if no, would this be helpful?)		
Do you have any concern to your safety relating to your current work/shift pattern? Do any changes needed to be implemented to your work/shift pattern?		
Do you require time off to attend any appointments/meetings relating to domestic abuse? Would it help you to have meetings arranged in the workplace?		
Has a response/contact system been developed if you do not attend for work or are not contactable when you are working from home? Is there someone else who it is safe to call?		
Is there a preferred way of contacting you if you should be late/absent from work?		

(Are there any forms of communication that should be avoided?)		
Do you have any concern regarding the safety of children/dependents within the home?		
Is there a requirement to share the details of this form with any other worker or agency?		
Detail here any other relevant information/actions to be taken:		

GUIDANCE ON RECOGNISING DOMESTIC ABUSE

Although every situation is unique, there are a number of common identifying factors that relate to the occurrence of an abusive relationship. Recognising these factors is an important step in helping to prevent and stop the abuse. The following list can be used as an aid to help you to recognise if you, someone you work with (or other person known to you) are suffering from domestic abuse. They include:

Destructive criticism and verbal abuse: shouting; mocking; accusing; name calling; verbally threatening (coercive and controlling behaviour).

Pressure tactics: sulking; threatening to withhold money, disconnecting the phone and internet, taking away or destroying your mobile, tablet or laptop, taking the car away, taking the children away; threatening to report you to the police, social services or the mental health team unless you comply with their demands; threatening or attempting self-harm and suicide; withholding or pressuring you to use drugs or other substances; telling you that they have no choice in any decisions (coercive and controlling behaviour/ harassment).

Disrespect: persistently putting you in front of other people; not listening or responding when you talk; interrupting your telephone calls; taking your money without asking; (psychological/emotional/financial).

Breaking trust: perpetrator could be lying to you; withholding information from you; being jealous; having other relationships; breaking promises and shared agreements (emotional/psychological).

Isolation: monitoring or blocking phone calls, e-mails and social media accounts, telling you where you can and cannot go; preventing you from seeing friends and relatives; shutting you in the house (emotional/ coercion and control/harassment).

Harassment: following; checking up on; not allowing any privacy (for example, opening mail, going through your laptop, tablet or mobile), repeatedly checking to see who has phoned; embarrassing you in public; accompanying you everywhere you go (harassment/ controlling).

Threats: making angry gestures; using physical size to intimidate; verbal aggression; destroying your possessions; breaking things; punching walls; wielding a knife or a gun; threatening to kill or harm you and/or your children; threatening to kill or harm family pets; threats of suicide (coercive and controlling/ psychological).

Sexual violence: using force, threats or intimidation to make you perform sexual acts; non-consensual sexual intercourse (rape); forcing you to look at pornographic material; constant pressure and harassment into having sex when you do not want to; forcing you to have sex with other people; any degrading treatment related to your sexuality (sexual).

Physical violence: Physical violence can consist of punching; slapping; hitting; biting; pinching; kicking; pulling hair out; pushing; shoving; burning; strangling, pinning you down, holding you by the neck, restraining (physical).

Denial: saying the abuse doesn't happen; saying you caused the abuse; saying you wind him/her up; saying he/she can't control his/her anger; being publicly gentle and patient; crying and begging for forgiveness; saying it will never happen again.

RESOURCES

Specialist Organisations:

<https://www.somersetsurvivors.org.uk>

<http://www.safelives.org.uk/>

<http://www.standingtogether.org.uk/>

<https://www.womensaid.org.uk>

<https://www.imkaan.org.uk/>

<https://www.hollieguard.com>

<http://respect.uk.net/information-support/domestic-violence-perpetrators/>

<https://safeandtogetherinstitute.com>

LGBTq Domestic Violence Helpline

<http://www.galop.org.uk/galop-to-run-national-lgbt-domestic-violence-helpline/>

HONOUR BASED VIOLENCE

<https://www.refuge.org.uk/our-work/forms-of-violence-and-abuse/honour-based-violence>

<https://www.haloproject.org.uk/definition-of-honour-based-violence-W21page-47>

<https://karmanirvana.org.uk/about/honour-based-abuse>

FORCED MARRIAGE

<https://www.gov.uk/stop-forced-marriage>

FEMALE GENITAL MUTILATION

FGM resource pack: <https://www.gov.uk/government/publications/femals-genital-mutilation-resource-pack/female-genital-mutilation-resource-pack#effective-practice-and-resources>

NHS England has produced a helpful pocket guide:

<https://www.england.nhs.uk/wp-content/uploads/2017/02/adult-pocket-guide.pdf>

REFERENCES – LEGISLATION

HUMAN RIGHTS ACT

Under the Human Rights Act, all public bodies have an obligation to protect the human rights of individuals and to ensure that their human rights are not being violated. Violence, domestic abuse and sexual violence against either women, girls, boys and men denies the most fundamental of human rights:

<http://www.legislation.gov.uk/ukpga/1998/42/contents>

EQUALITY AND DIVERSITY

The Equality Act 2010 includes a public sector duty, whereby those subject to the general equality duty, must have due regard to the need to eliminate unlawful discrimination, harassment and victimisation; advance equality of opportunity for protected groups; and foster good relations.

The Care Act (2014) HMSO, London

The Children Act (1989) HMSO, London

Adoption and Children Act (2002) HMSO, London

The Crime and Disorder Act (1998). HMSO, London

Female Genital Mutilation Act (2003) HMSO, London

Domestic Violence, Crime and Victims Act (2004) HMSO, London

Forced Marriage (Civil Protection) Act 2007. HMSO, London

Serious Crime & Disorder Act 2015) HMSO.London

Department of Health (2015) <https://www.gov.uk/government/publications/call-to-end-violence-against-women-and-girls>

Domestic Abuse Act (2021) HMSO, London