



VIOLENCE AGAINST WOMEN, DOMESTIC ABUSE AND SEXUAL VIOLENCE PROCEDURES

Introduction and Aim

The Named Lead for Safeguarding has developed an over-arching Safeguarding Policy which sets out the organisation’s commitment and responsibility to safeguarding of both adults and children at risk of harm and victims of violence against women, domestic abuse and sexual violence (VAWDASV).

This procedural document forms part of a suite of safeguarding documents to achieve this aim through advising on the procedural steps which need to be undertaken when any of the above incidents are suspected or disclosed.

It should be followed to ensure the appropriate actions are taken under the legislative framework within Wales for possible victims/survivors. It will also cover actions to be taken when a perpetrator is suspected or identified.

Through the development and implementation of this procedure in conjunction with the other safeguarding Policy and procedures the Chief Executive and the Board can take assurance that the organisation has appropriate arrangements in place to safeguard victims of VAWDASV.

Linked Policies, Procedures and Written Control Documents

Safeguarding Policy; Child at Risk procedures; Adult at Risk procedures; Safeguarding Training Plan; Procedure for NHS Staff to Raise Concerns; Prevent Policy; Safeguarding Supporting Information Document. Managing Allegations of Abuse by Staff Procedure.
[Wales Safeguarding Procedures](#)

Scope

This procedural document is applicable to all Public Health Wales staff who come into contact with the public either directly or indirectly. In this document ‘staff’ refers to all staff including agency staff, temporary staff, those on honorary contracts and volunteers. The procedure applies equally regardless of sex, age, disability, race, religion or belief, gender reassignment and sexual orientation. It also applies to all staff experiencing abuse and violence and to those who are perpetrators or alleged perpetrators.

Equality and Health Impact Assessment	Refer to the completed EHIA
Approved by	Quality, Safety and Improvement Committee
Approval Date	15 February 2022 TBC
Review Date	15 February 2023 TBC
Date of Publication:	TBC
Accountable	

Executive Director/Director	Executive Director Quality Nursing and Allied Health Professionals
Author	Named Lead for Safeguarding

Disclaimer

If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author

Summary of reviews/amendments

Version number	Date of Review	Date of Approval	Date published	Summary of Amendments
2	9/11/2021			Updated with new contact details for Named Lead for Safeguarding and reference to Wales Safeguarding Procedures

1. Introduction

This document identifies the procedures that staff within Public Health Wales are required to undertake when a Violence against Women, Domestic Abuse and Sexual Violence (VAWDASV) concern has been suspected or identified either with a service user or with a member of staff.

Compliance with these procedures will ensure that Public Health Wales provides a consistent approach when dealing with suspected or confirmed concerns. To assist staff with the decision making process of when to share safeguarding information three flowcharts have been developed which offer guidance to staff when faced with these situations. The flowchart 'When to Share Domestic Abuse Information' is included as an appendix to this document and reflects all legislative requirements within Wales. Further information to assist staff on how to follow the flowchart is found within the Safeguarding Supporting Information Document.

Most VAWDASV situations can be responded to by following the Domestic abuse flowchart. However, certain situations may need further consideration and support for example victims of Female Genital Mutilation, sexual assault and to ensure that the correct legislative framework is being followed for the protection of the individual. For further advice contact the Named Lead for Safeguarding.

Within the workplace Public Health Wales will strive to ensure that any staff member who experiences VAWDASV can raise the issue at work, without fear or stigmatisation or victimisation and will receive appropriate support and assistance to help the member of staff protect themselves, their children and dependents. This document aims to assist managers to appropriately address situations where staff are alleged/known victims or alleged/identified perpetrators and to ensure all safeguarding measures are considered.

2. Roles and Responsibilities

2.1 Role of the Staff

All staff within Public Health Wales have a legal duty to comply with relevant Welsh and UK Government legislation which this procedural document sets out.

All cases of domestic violence and abuse must be treated sensitively and confidentially, sharing information to safeguard the person appropriately and on a need to know basis.

2.2 Role of the Executive for Quality, Nursing and Allied Health Professionals and delegate.

The above role will ensure safeguarding arrangements are in place in the organisation to support staff in responding to concerns as they relate to this procedure. This includes arrangements for sourcing and ensuring relevant awareness training in relation to domestic violence and abuse.

Delegated responsibility for specialist advice, information and supporting materials will mainly be discharged through the lead Professional for Safeguarding and cover arranged via Quality Nursing and Allied Health Professional's (QNAPS) Directorate as required.

2.3 Role of the Manager and other supporting roles

Managers need to be familiar with the contents of this procedure and other safeguarding policies and procedures, to ensure that they provide appropriate support to staff who identify a service user in need of support relating to VAWDSV. Additionally, if a staff member makes them aware of a personal situation which could be as a result of VAWADSV, it is advisable to get additional advice and support from the Named Lead for Safeguarding, a more senior manager, or a Human Resources Manager.

Where there are concerns of serious harm managers should contact the Named Lead for Safeguarding or if unavailable the Executive for Quality, Nursing and AHP, identified delegate or The Live Fear Free Helpline.

2.4 Role of People & Organisational Development (POD)

POD will provide appropriate support to both managers and employees affected by VAWDASV, taking specialist advice from the Named Lead for Safeguarding to ensure the appropriate safeguarding measures can be assessed and responded to. This will include ensuring there is access to support systems such as occupational health services, counselling services and the Employee Assistance Programme with support from POD as required.

2.5 Role of Trade Unions

Trade Union Representatives should familiarise themselves with this procedure and other related safeguarding policies and procedures, in order that they are able to signpost members of staff to appropriate resources and support in the workplace, where staff are affected themselves by VAWDSV.

3. Procedure / Process

3.1 Process

When any staff member suspects that an adult is a victim of VAWDASV they are required to follow the appropriate process/flowchart ([Appendix A](#)). The questions embedded within the flowchart specifically lead the member of staff to undertake a holistic assessment of the situation to consider how best to protect the individual in question. Further explanation of the terminology used within the flowchart is found within the Safeguarding Supporting Information Document.

3.2 Contact

At any point within the process during normal working hours, staff can contact the Named Lead for Safeguarding (or identified cover) for help and support as well as their line manager. Further advice and support can be obtained from the Live Fear Free helpline 24 hours a day.

3.3 Assessing Risk

The safety of staff is important, and in order for staff not to place themselves in a dangerous position, they must risk assess the situation in regard to their own and, where possible, their client's safety or anyone else who may be at risk.

If the adult is in immediate danger, or serious harm has occurred, the police and/or other emergency services should be contacted. The police should be informed if it is suspected that a serious crime has been committed.

Staff when faced with a possible VAWDASV situation must be open minded in their response and not take things at face value. Situations and experiences of individuals may not be what is initially presented. Therefore, staff may need to ask some questions of individuals to gain a better understanding of the experience of that person but throughout the interaction must consider their safety and wishes. When speaking to an individual who you suspect to be a victim, staff members must ensure that the person is alone so as not to compromise their safety.

If there is a child in the household, even if the child is not stated as being directly affected by the abuse they are at risk of harm. If a child lives in the household part time or full time, then a referral needs to be made to Children's Social Services via telephone. This referral must be followed up with an electronic referral within 24 hours.

3.4 Reporting

Out of hours' referrals should be made to the Social Services Emergency Duty Team (EDT) by telephone.

Once information has been shared with the local Social Services department it should be followed up by the completion of the appropriate referral form for that area.

In all cases, staff must also complete a DATIX incident report, record details of the action taken and inform the Named Lead for Safeguarding and Line Manager.

Staff also need to identify if the adult is an Adult at Risk, if so, then they need to follow the appropriate flowchart within the [Wales Safeguarding Procedures](#)

3.5 Consent

If the potential victim of VAWDASV has mental capacity to understand their situation, has a clear understanding of consent and the risks associated with VAWDASV and wishes not to make a complaint to the police, then the staff member must respect their decision to withhold consent to share information. In exceptional circumstances such as evidence of a serious crime, over-riding public interest or to prevent a serious crime then the information can be shared without the person's consent.

If the person is in immediate risk of harm, then the situation should be assessed in collaboration with the individual. If they still do not wish to contact the police (bearing in mind exceptional circumstances paragraph above), the staff member needs to provide accurate and up to date advice and give them the contact details of the Live Fear Free helpline.

The individual may wish to contact the police themselves to make a complaint, and in these circumstances the member of staff can support the individual with this. Information should also be shared with the Live Fear Free Helpline using the DA/01 form at ([Appendix 2](#)). If the individual does not wish to involve the police, they should be supported and encouraged to share the information with the live fear free helpline at ([Appendix 2](#).)

Where a staff member has disclosed being at risk or effected by VAWDSV, if the suspected or known perpetrator of the abuse is a person employed by or acting on behalf of Public Health Wales, staff must follow in the Public Health Wales Managing Allegations of Abuse by Staff Procedure.

Staff should also be aware that conduct outside of work could lead to disciplinary action being taken because of its impact on the employment relationship

3.6 Recording

Any discussion about an adult's welfare should be recorded electronically in Datix or the individual's records where one exists. All records should be succinct, legible and clear as to what actions were agreed, and by whom. If the decision is to take no further action, this should be recorded in writing,

explaining the reason for the decision. Records should be completed as close to the time of the incident/suspicion as possible to ensure that the information recorded is contemporaneous. DATIX completion should also occur as soon as possible ensuring that person identifiable information is not included in the description of the incident. The incident will be recorded on DATIX, due to the sensitivity of the information recorded within the DATIX incident, limited access and permissions will be authorised, ensuring confidentiality.

3.7 Managers Responsibility

Managers are responsible for supporting and guiding staff in the decision making process when a VAWDASV concern is highlighted, (staff member or service user) through being familiar with the content of this document. They will ensure they have the appropriate level of knowledge and skills to support staff. The manager should consult with the Named Safeguarding Lead, the Live Fear Free helpline or the local Social Services department for advice and support if required. If it has been identified that a member of staff may be at risk from a potential perpetrator in the work environment then the line manager would need to work with the individual at risk on a personal risk assessment and once complete seek further advice/support from Estates and Health and Safety Team to review identified hazards/risks and the control measures recommended.

All managers must ensure that all staff for whom they are responsible are aware of this policy.

Managers should ensure that staff follow the process and within the timescales. Managers are encouraged to identify and deal with incidences where VAWDASV and/or its effects become apparent in the workplace as well as appropriately address situations where staff are alleged or found to be perpetrators of domestic abuse. For these reasons managers are encouraged to seek advice from the Named Safeguarding Lead and Human Resources at an early stage and to act in a confidential manner.

3.8 Confidentiality

Where staff raise concerns about colleagues confidentially with their manager, depending on the nature of the concern, the manager should seek advice from the Named Lead for Safeguarding as they may be obliged to take action or speak to the person giving rise to those concerns. This must be done sensitively, maintaining confidentiality wherever possible.

4. Female Genital Mutilation

If a staff member becomes aware that a child under the age of 18 years has been a victim of Female Genital Mutilation they have a statutory responsibility to share the information with the police within 28 days. The Public Health

(Wales) Act 2017 prohibits the intimate piercing of a person who is under the age of 18 in Wales.

If the victim is an adult then the 'All Wales Clinical Pathway – Female Genital Mutilation' should be followed.

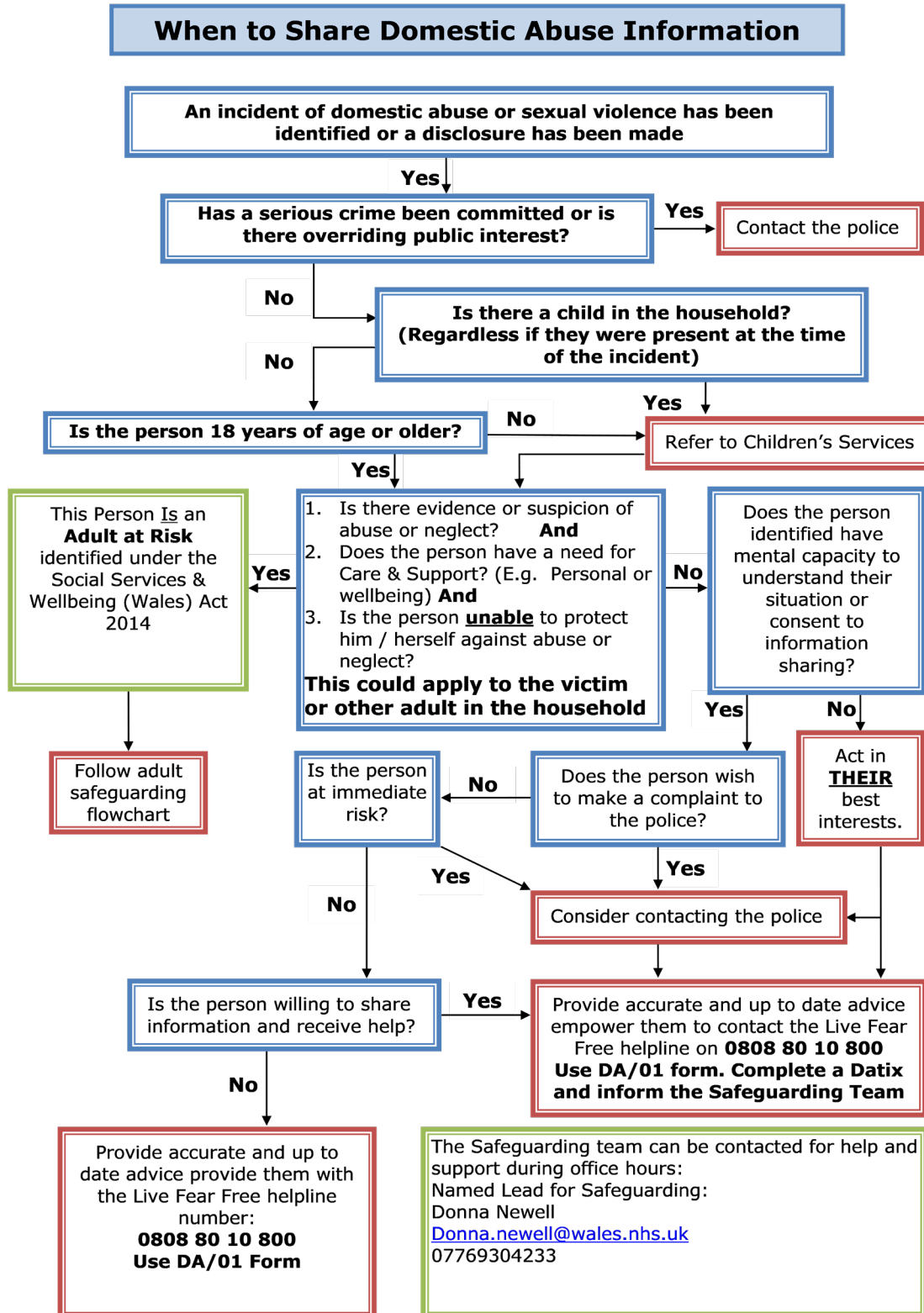
5. Training requirements

All staff have a statutory responsibility to have undertaken the appropriate level of domestic abuse training as set out in Welsh Government's VAWDASV National Training Framework.

6. Monitoring compliance

Monitoring of compliance with this document will be assessed through evaluation of safeguarding adult concerns DATIX entries, feedback from the Live Fear Free helpline and specific audits.

Appendix A



Appendix B



Concern in Relation to Domestic Abuse /Sexual Violence (DA/01)

Date:

Type of referral: Domestic Abuse Sexual Violence

Name: _____

Address: _____

Post Code: _____

DOB: Contact Telephone Number: _____

Is it safe to ring this number? Yes No Do not refer if the answer is no or there is no safe time to call
Safe time to call: _____

Does the victim live with the perpetrator? Yes No Don't know

Type of Experience:

Physical Sexual Financial Emotional Psychological

Is the victim pregnant? Yes No Don't know

Any Further concerns to be reported:

.....
.....
.....

Consent Obtained? Yes No Do Not refer if the answer is no give advice to call helpline when safe

Are there any language issues that need to be considered? Yes No
If yes please state _____

Number of Children in the Household Share information with Children's services and complete Datix

Does the victim have: (please tick all that apply)

A learning disability/difficulty Mental health issues/dementia
older persons care needs Physical/sensory disability
Drug/alcohol misuse Autistic spectrum disorder

Name of Person Sharing information: _____
Designation: _____