

# Domestic/Sexual Abuse and Violence Policy (WB3)

If you require a copy of this policy in an alternative format (for example large print, easy read) or would like any assistance in relation to the content of this policy, please contact the Equality and Diversity team on 01803 656680.



*This is a controlled document. It should not be altered in any way without the express permission of the author or their representative. On receipt of a new version, please destroy all previous versions.*

<b>Date of Issue:</b>	<b>September 2015</b>	<b>Next Review Date:</b>	<b>September 2017</b>
<b>Version:</b>	<b>1</b>	<b>Last Review Date:</b>	<b>January 2015</b>
<b>Author:</b>	Occupational Health and Wellbeing Manager		
<b>Directorate:</b>	Workforce and OD		
<b>Approval Route;</b>			
<b>Approved By:</b>		<b>Date Approved:</b>	
JCNC/LCNC			
<b>Links or overlaps with other policies:</b>			
Wellbeing at Work Strategy –WB2		Special Leave Policy - 21	
Equality and Diversity Policy ED1		Alcohol & Substance Misuse Policy	
Reducing Stress – WB3		Safeguarding Adults	
Acceptable Behavior Policy – H4		Personal Safety Policy: Violence and Aggression Advice for Managers	
Lone Working Policy		Security Policy - 52	
Health & Safety		Disclosure and Barring Service Check Policy-H14	
<b>SDHCT only</b>		<b>TSDHCT only</b>	
Sickness Absence Management Policy No 6		Managing Sickness Absence Management Policy (HR06)	

### Amendment History

Issue	Status	Date	Reason for Change	Authorised

## Contents

<b>1</b>	<b>Policy Statement .....</b>	<b>4</b>
<b>2.</b>	<b>Introduction and Definitions.....</b>	<b>4</b>
<b>3.</b>	<b>Equality &amp; Diversity Statement .....</b>	<b>5</b>
<b>4.</b>	<b>Aims .....</b>	<b>5</b>
<b>5.</b>	<b>Roles and Responsibilities.....</b>	<b>6</b>
<b>6.</b>	<b>Training and Awareness .....</b>	<b>89</b>
<b>7.</b>	<b>Perpetrators .....</b>	<b>9</b>
<b>8.</b>	<b>References .....</b>	<b>9</b>
<b>9.</b>	<b>Contact details.....</b>	<b>10</b>
<b>10</b>	<b>Monitoring, Audit and Review Procedures .....</b>	<b>10</b>

### **Appendix 1 Guidance for Managers**

#### **1a ‘Safe Lives’ (CAADA) Risk Assessment**

### **Appendix 2 Practical Suggestions for Employees**

### **Appendix 3 Further help and support**

### **Appendix 4 Types of Abuse**

### **Appendix 5 Recognising the signs of Abuse**

### **Additional toolkits**

#### **Checklist 1** for Responding to Employees Experiencing Domestic Abuse

#### **Checklist 2** for Responding to Employees who are the Perpetrators of Domestic Abuse

#### **Domestic Abuse Employee Flowchart – Guidance for Managers**

#### **Domestic Abuse perpetrator Flowchart – Guidance for Managers**

## 1 Policy Statement

- 1.1 South Devon Healthcare NHS Foundation Trust and Torbay and Southern Devon Health and Care Trusts' [*known hereafter as the Trusts*] Domestic/Sexual Abuse and Violence Policy has been developed in partnership with representative membership of the Wellbeing at Work Project Board, including, staff side and someone with lived experience of domestic abuse, as well as external parties including Torbay Council, Public Health Team and Domestic Abuse/Violence Champions.
- 1.2 Both Trusts' are committed to providing a supportive environment for those impacted by domestic abuse, offering reassurance that the organisation has an understanding of how the impact of domestic abuse may affect their work performance, and are aware of the support that can be offered.
- 1.3 This policy applies to all staff and includes those working in a temporary or voluntary capacity. It aims to ensure that all staff feel supported whilst at work.

## 2. Introduction and Definitions

- 2.1 The Health and Safety at Work etc. Act 1974 and the Management of Health and Safety at Work Regulations 1999 identifies an employers' duty of care to the people they employ, be it physical or emotional. This means that the organisations have a legal responsibility should an employee be targeted at work to protect both the one experiencing the abuse and their co-workers.

Domestic abuse can have an enormous effect on an individual's mental health. It is now well accepted that abuse (both in childhood and in adult life) is often the main factor in the development of depression, anxiety and other mental health disorders. It can also lead to sleep disturbances, self-harm, suicide and attempted suicide, eating disorders and alcohol and substance misuse. Domestic abuse, between partners (16 years and over) or between family members includes psychological, physical, sexual, financial, emotional control and abuse or social isolation and can occur in all social classes, regardless of gender or sexuality.

- 2.2 Domestic Abuse that takes place is intimate, and affects other family members and partners, [or ex-partner] relationships. It is designed to hurt and control another person by the use of threats of violence or assault and emotional violence. Domestic Abuse is intentional and purposeful and often difficult or dangerous to escape.

Domestic abuse has several strands to its definition, described below.

**Physical** – Shaking, smacking, punching, kicking, poking, biting, strangling, starving, and tying up, throwing objects, female mutilation, and honour violence. Physical effects are often in areas of the body that are hidden i.e. breast/abdomen

**Sexual Abuse** - any sexual encounter without consent, including any unwanted touching or forced sexual activity. Men and women, whether heterosexual or

homosexual, experience sexual abuse. A perpetrator of sexual abuse can be either a stranger or someone known to you already.

**Stalking** - a series of acts which are intended to, or in fact, cause harassment to another person. It involves following the victim, threatening or repeated phone calls, coming to the victim's place of employment, leaving written messages or objects and vandalising the victim's property.

**Cyber-stalking** - the use of the Internet to harass or threaten someone repeatedly. Involving e-mail, harassment in live chat situations, leaving inappropriate messages on message boards or guest books, sending viruses, or electronic identity theft.

**Financial** – withholding money, refusal to allow opposite sex to work, undermining efforts to find work, asking for explanations of money spent, not paying bills or withholding money for essentials i.e. food, heating etc. to cover costs of addiction.

**Emotional** – Swearing, undermining confidence, making racist remarks, making the opposite sex feel unattractive, eroding independence.

**Psychological** - Intimidation, insulting, intentionally isolating a person from others i.e. friends and family, using children/pets as pawns as a mechanism to control.

### 3. Equality & Diversity Statement

3.1 The Trusts' are committed to preventing discrimination, valuing diversity and achieving equality of opportunity. There is a defined gender bias in incidents of domestic abuse. However no person (staff, patient or public) will receive less favourable treatment on the grounds of the nine protected characteristics (as governed by the Equality Act 2010): Sexual Orientation; Gender; Age; Gender Reassignment; Pregnancy and Maternity; Disability; Religion or Belief; Race; Marriage and Civil Partnership. In addition to these nine characteristics, the Trust will not discriminate on the grounds of domestic circumstances, social-economic status, political affiliation or trade union membership.

3.2 The Trusts' are committed to ensuring all services, policies, projects and strategies undergo equality analysis. For more information about equality analysis and Equality Impact Assessments please refer to the Equality and Diversity Policy ED1.

### 4. Aims of this policy

The trusts' understand that domestic abuse often negatively impacts on a person's ability to work effectively. It affects absence rates, stress prevalence, productivity and turnover.

The aim of the policy is to:

- To send out a strong message that any abuse is unacceptable.
- To support employees experiencing safety issues inside/outside of work.
- To advise managers on how to support employees who may be experiencing problems at home, which is affecting work?
- To increase awareness and understanding of domestic abuse, sexual abuse and stalking/harassment.

- To develop an effective and supportive response to safety issues being experienced by employees.
- To offer practical suggestions and make employees aware of further help available.
- To reduce the impact of domestic abuse, sexual abuse or stalking/harassment on an employee's life.
- To decrease the risk of violence in the workplace from the possibility of the perpetrator visiting the workplace.
- To ensure that advice is available for managers, colleagues, occupational health and others in order to identify their different roles in supporting those who are [or have] experienced domestic abuse.

## 5. Roles and Responsibilities

### 5.1 Trust Board/Integrated Governance Board [Workstream 4]

- Under the Department of Health, Public Health responsibility Deal the Trusts' will make a pledge to do everything possible to prevent abuse in the workplace and provide support to employees that have suffered abuse and the repercussions that have an impact in the workplace.
- Ensure appropriate support is in place to provide a supportive environment for an employee who is experiencing any abuse, in order to seek help.
- Allocate resources necessary as identified through the Wellbeing at Work Project Board

### 5.2 Workforce and Organisational Development/Wellbeing at Work Project Board:

- Ensure promotion of the policy
- Establish monitoring processes to evaluate the impact of the policy
- Make ongoing recommendations following consultation with staff on developments and improvements to the policy
- Provide support and guidance for individuals
- Provide step by step toolkits /guidance/signposting
- Provide relevant training
- Develop a **toolkit** that should be used by line managers during discussions with their affective members of staff

### 5.3 Managers

- Ensure effective communication between management and the employee, which ensures confidentiality, unless there is a safeguarding risk of harm.
- Familiarise yourselves with the policy and the practical tips in helping you to recognise the problem
- Be vigilant to employees personal circumstances and offer additional support where appropriate to members of staff experiencing risks to their wellbeing derived from outside of work,
- Believe an employee if they disclose experiencing domestic abuse – do not ask for proof, from the employee or anyone connected to them.
- Reassure the employee that the organisation has an understanding of how abuse may affect their work performance and inform them of the support that can be accessed.

- Refer employee (with their consent) to the Occupational Health Service. Advise staff they can access Staff Support, as necessary
- Take all reasonable steps to ensure staff are not over loaded during this period, supporting the development of personal resilience and practices
- Ensure any potential staff wellbeing issues are communicated to a member of either the Senior Management Team/Wellbeing at Work Team/Human Resources, as soon as possible in order to secure appropriate advice/support and/or appropriate signposting.
- Ensure effective measures are in place for monitoring all Sickness Absences for domestic abuse related absence
- Ensure absence patterns are monitored, adhering to the Sickness Absence Management Policy.
- Support flexible working practices where practical and in line with service needs and ensuring fairness and equity in application
- Identify own training needs including how to complete the relevant risk assessment form 'Safe Lives' (CAADA). Flowchart 1
- Develop action pathways and know who to contact for support when dealing with staff that are being abused etc.
- Ensure any incidents spilling into the workplace, or occurring within the workplace are recorded and reported.
- Establish how the employee suffering abuse wants to be contacted, as contacting them at home may not be appropriate.
- Where there may be a safety issue in the workplace, a risk assessment should be undertaken.
- Determine and agree with the abused member of staff what they would like the manager to tell other members of staff, should the need arise.
- Lead the risk assessment process, to ensure the employee is as safe as possible to, from and during work.
- Alert security personnel of risks on a need to know basis.

#### 5.4 **Staff**

All staff are expected to:

- Familiarise themselves with this policy and others it links with, knowing where to go for further help and support. Inform line managers if they have a suspicion or concern regarding another employees behaviour that makes them suspect there may be an abuse issue.
- Treat every colleague with dignity and respect, showing empathy, sensitivity, compassion and understanding at all times as expected in the Trusts' values and behaviours.
- Recognise limitations and seek advice at the earliest opportunity

#### 5.5 **Human Resources**

- Support managers, if applicable, when they are dealing with an employee who has been abused
- Work jointly with Occupational Health in the support of Line managers to monitor reasons for sickness absence/performance related to abuse and plan strategies to deal with the issues.

- Provide advice on a case by case basis such things as, monitoring of absence separately from other sickness absence, time off to access legal advice etc. under the Special Leave Policy etc.
- Offer support/advise on changes in working patterns, hours etc. including changes in work site if appropriate, on a case by case basis.

## 5.6 Occupational Health / Health and Safety / Training and Development

- The trust will provide mandatory training for managers to ensure that routine enquiry and best practice is followed.
- Support individuals who have been off sick resulting from abuse, and advise them and their manager of any further support that can be offered / accessed.
- Respond to specific management and self-referrals, on a confidential basis, provide a confidential, advisory and support service to individuals through counselling, information and training with strategies and techniques in how to manage stress caused by abuse, individually or with others.

## 5.7 Risk Management

- Co-ordinate reported incidents using the Trust reporting system including abuse issues and cross reference to sickness reporting
- Report issues to Health and Safety and Risk Management committees for consideration, monitoring and further recommendation to reduce/learn from incidents and promote a safe and healthy working environment.
- Support managers to undertake a risk assessment if a risk of safety is likely in the workplace and alert security personnel if necessary.

## 6 Training & Awareness

- Staff will be informed about Wellbeing@Work and related policies, updates, activity, etc. through *Icare* / Contact / weekly communication bulletins / workplace champions / Project Board / Wellbeing@Work visits / monthly newsletters, social media.
- All staff are advised to attend the Stress Awareness Training organised through Horizon Centre
- Material relating to abuse and support services will be displayed throughout all workplaces and easily accessible to staff.
- Trusts are committed to a regular campaign highlighting domestic abuse to patients, service users and staff, using a range of media.

## 7 Perpetrators

- In the event that a perpetrator may attempt to enter Trust premises, then staff are advised to follow the relevant security procedures.
- Perpetrators are not just men abusing women or women abusing men; they could be a member of the family, a friend or a same sex partner, or an existing employee.
- The perpetrator may disclose his/her behaviour to their line manager/HR.

If the alleged perpetrator is an employee of the Trusts' it may be appropriate to refer to the following policies:

- **Domestic /Sexual Abuse and Violence Policy**
- **Acceptable Behaviour Policy**
- **Alcohol & Substance Misuse policy**
- **Grievance and Disciplinary Procedures**
- **Disclosure and Barring Service Check Policy –H14**
- Facilitate access to available support agencies.
- **'Clare's Law'** – 'Domestic Violence Disclosure Scheme' gives members of the public a 'right to ask' Police where they have a concern that their partner may pose a risk to them or a member of their friends/family, noting this will only highlight perpetrators that have been convicted previously. Police will release information on a need to know basis, with safety of the partner/family as their prime concern.

## 8 References

### Legislation

The organisations' duty of care towards its staff is determined externally by;

- Health and Safety at Work Act (1974)
- Human Rights Act (1998)
- Data Protection Act (1998)
- Equality Act (2010)
- Health and Safety Executive (2004) Working Together to reduce Stress at Work: A guide for employees.
- Health and Safety Executive (2008) Management Standards for Work Related Stress [www.hse.gov.uk/stress/standards](http://www.hse.gov.uk/stress/standards)
- Children's Act - 2004
- Safeguarding Adults join group

Other standards the Trust is measured against includes:

- Care Quality Commission
- Health & Safety Executive
- [Wellbeing at Work Charter Standards](#)
- National Audits
- [Mindful Employer Charter Standards](#)

## 9 Contact Details

- 9.1 Any queries regarding this policy should be directed to: [wellbeing.tct@nhs.net](mailto:wellbeing.tct@nhs.net) or Identified Champions [to be identified and trained accordingly *needs further discussion*]

## 10 Monitoring, Audit and Review Procedures

10.1 This policy will be monitored and audited on a regular basis. A full review will take place every three years by the Debrief/Support Managers, Well Being at Work Project Board as directed by the Integrated Governance Board, unless legislative changes determine otherwise.