

	<b>Policy</b>
<b>DOCUMENT TITLE:</b>	<b>Supporting Staff who are Experiencing Domestic Abuse</b>
<b>DOCUMENT NUMBER:</b>	<b>ELHT/HR70 V2</b>
<b>DOCUMENT REPLACES Which Version</b>	<b>Domestic Violence &amp; Abuse Policy v1.1</b>
<b>LEAD EXECUTIVE DIRECTOR DGM</b>	<b>Director of Human Resources</b>
<b>AUTHOR(S):</b>	<b>Head of Safeguarding</b>

<b>TARGET AUDIENCE:</b>	All Trust Personnel
<b>DOCUMENT PURPOSE:</b>	<p>To ensure that ELHT fulfils its statutory duties and has a procedure in place on how to respond to reported incidents or allegations of domestic abuse involving an employee or volunteer, whether perpetrator or victim.</p> <p>To provide guidance for managers and employees of ELHT on the processes to be followed if they receive notification or information that an employee or volunteer is involved in an incident or allegation regarding domestic violence or abuse.</p>
<b>To be read in conjunction with (identify which internal documents)</b>	<ul style="list-style-type: none"> <li>• ELHT/C112 Supporting Patients and others who are at risk of / are experiencing Domestic Abuse</li> <li>• ELHT/C67 Safeguarding Adults Policy</li> <li>• ELHT/CO34 Safeguarding Children Policy</li> <li>• ELHT/HR57 Managing Allegations against Staff</li> </ul>
<b>SUPPORTING REFERENCES</b>	<ul style="list-style-type: none"> <li>• SafeLives (2016) A Cry For Health: Why we must invest in Domestic Abuse Services in hospitals</li> <li>• Safeguarding Adults: Roles and competences for health care staff – Intercollegiate Document NHS England 2016</li> <li>• <a href="http://www.nhsemployers.org/~media/Employers/Publications/Domestic%20abuse.pdf">www.nhsemployers.org/~media/Employers/Publications/Domestic%20abuse.pdf</a></li> </ul>

	<ul style="list-style-type: none"> <li>• HM Government (2016) Ending Violence Against Women and Girls</li> <li>• Walby, S. (2009), The cost of domestic violence: up-date 2009</li> <li>• SafeLives (2015), Safety in numbers report, <a href="http://www.safelives.org.uk">www.safelives.org.uk</a></li> <li>• SafeLives (2015), Getting it right first time: policy report, <a href="http://www.safelives.org.uk">www.safelives.org.uk</a></li> <li>• The NHS Staff Council (2017) Dealing with domestic violence and abuse: first steps</li> <li>• The NHS Staff Council (2017) Domestic Violence and Abuse: supporting NHS staff</li> <li>• NICE (2016), Quality Statement 1, NICE guidance, Domestic Violence and Abuse</li> <li>• The Care Act 2014</li> <li>• The Mental Capacity Act 2005</li> <li>• Disability Discrimination Act 1995</li> <li>• Human Rights Act 1998</li> </ul>
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<b>CONSULTATION</b>		
	<b>Committee/Group</b>	<b>Date</b>
<b>Consultation</b>	Internal Safeguarding Board	11.5.17 & 9.11.17
<b>Approval Committee</b>	HR Policy Group & JNCC	14.12.17
<b>Ratification date at Policy Council:</b>	<b>March 2018</b>	
<b>NEXT REVIEW DATE:</b>	<b>September 2020</b>	
<b>AMENDMENTS:</b>	<b>Full Review of Policy with input from staff who have experienced Domestic Abuse</b>	

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## **DOMESTIC ABUSE POLICY**

### **POLICY STATEMENT**

The UK Government defines domestic violence and abuse as:

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

Each year an estimated 1.9m people in the UK suffer some form of domestic abuse - 1.3 million women (8.2% of the population) and 600,000 men (4.0% of the population).<sup>1</sup> In the 12 months to March 2015, the police service in England and Wales received more than 900,000 calls about domestic abuse – an average of over 100 calls an hour. Domestic abuse victims and their children are among the most vulnerable in society; domestic abuse accounts for 10% of all recorded crime.

Women are much more likely than men to be the victims of high-risk or severe domestic abuse:<sup>3</sup> 95% of victims referred to a Multi-Agency Risk Assessment Conference (Marac) or accessing an Independent Domestic Abuse Advisor (Idva) are women.

In a recent study, the estimated number of female staff within a hospital with an average of 5696 employees, (78% of whom were female) who had experienced Domestic Abuse in the previous year was 365 staff. *That is equivalent to 8.2% of the female staff within organisations similar to East Lancashire Hospitals NHS Trust are experiencing Domestic Abuse.*

Each year, more than 100,000 British adults are at high and imminent risk of being murdered or seriously injured as a result of domestic abuse.

Over 130,000 children live in these homes. Domestic abuse is so prevalent in our society that NHS staff will be in contact with adult and child victims (and perpetrators) across the full range of health services. The NHS spends more time dealing with the impact of violence against women and children than almost any other agency, and is often the first point of contact for women who have experienced violence.

The cost of domestic abuse to health services has been calculated at £1.73 billion (with mental health costs estimated at an additional £176 million) so there is a pressing need to find cost effective ways of supporting victims. Both adult and children's outcomes improve significantly across all key measures after support from specialist services.

**Ref: A Cry for Health (SafeLives 2016)**

***'At best she would lose her job: at worst she  
would lose her life'  
Head of Safeguarding 2017  
(in relation to a hospital employee)***

## **1.0 Introduction**

East Lancashire Hospitals NHS Trust is committed to ensuring it creates a culture that reflects its values of treating people fairly and respecting the individual.

This policy is intended to raise awareness of domestic abuse and provides guidance for employees and managers in order to address the serious effects it can have on employees and the workplace.

The Trust is committed to supporting employees involved in domestic abuse. This assistance may include;

- confidential means for coming forward for help;
- resources and referral information;
- special considerations at the workplace for employee safety;
- work schedule adjustments
- access to peer support
- special leave where it is necessary to obtain medical, counselling or legal assistance;
- workplace relocation (if available).

In responding to domestic abuse, the Trust will maintain appropriate confidentiality and respect for the rights of the employee involved.

## **2.0 Definition**

The UK Government defines domestic violence and abuse as:

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

Source: SafeLives (2016) A Cry for Health: Why we must invest in Domestic Abuse Services in hospitals

## **3.0 Scope of Policy**

The Trust acknowledges that while it is mainly women who experience domestic abuse this policy applies equally to men who need advice or support.

Domestic abuse can affect men and women in same sex relationships and in heterosexual relationships. It can often continue after a relationship has ended.

In support of this, the Trust policy is that any employee who is experiencing, or has experienced domestic abuse can raise the issue, in the knowledge that the matter will be treated effectively, sympathetically and confidentially.

The Trust recognises that domestic abuse is not obvious/easy to spot. An aim of this policy is that by having visible support available for staff, channels of communication will open up for those staff experiencing domestic abuse.

#### **4.0 Domestic Abuse and the Workplace**

It is important to promote the understanding that everyone has the right to a life free from abuse in any form. Domestic abuse can have an impact on the performance at work of the individual and therefore has a direct effect on quality of service provision.

Possible consequences include:

- Lateness/leaving work early
- Physical and emotional exhaustion
- Absenteeism
- Reduced work performance
- Poor concentration
- Behavioural change
- Low self-esteem and lack of confidence
- Increased episodes of minor illness

Domestic abuse may also impact on the workplace for example:

- Sickness trends, such as being off after the weekend, where staff report 'general' issues of being unwell, may actually be related to domestic abuse with a possibility of having to hide injuries
- Employees experiencing domestic abuse may receive harassing or repeated phone calls, fax or emails, and unwelcome notes on their cars or unplanned and unannounced visits at work.
- This may also include being stalked or physically assaulted when travelling to or from work, or at work.
- Colleagues could also be followed to or from work, or subjected to questioning about how to contact the individual, or where he or she can be found.
- Other employees may unintentionally aid abusers by assisting them to locate their partners etc.

Statistics on Domestic Violence

- 1:4 women will be affected in their adult lifetime (the NHS employs 700,000 women)
- 1:6 men will be affected in their adult lifetime (the NHS employs 300,000 men)
- The SafeLives report *A Cry For Health* (2016) found that a potential 2,065 members of staff across the five pilot hospital sites were likely to be victims of domestic abuse.
- The report also found that the total number of NHS staff likely to have experienced abuse in the past 12 months is 51,355 (male and female). This breaks down as 44,825 women and 6,530 men.
- Based on these figures East Lancashire Hospitals NHS Trust could have up to 2000 employees who are victims of Domestic Abuse at some point in their lives

## 5.0 Confidentiality

The Trust respects an employee's right to confidentiality and employees experiencing domestic abuse normally have the right to complete confidentiality. However, in circumstances of child protection or the protection of vulnerable adults from abuse, the child protection and adult protection services may need to be involved. This may include referral to the local authority designated officer (LADO) where the safety or welfare of children is involved. ***Confidentiality cannot then be guaranteed in these situations but they will always be dealt with on a strict need to know basis.***

## 6.0 Right to Privacy

The Trust respects an employee's right to privacy in the event that they do not wish to inform the Trust that they have experienced domestic abuse.

## 7.0 Anti-Discrimination

The Trust will not discriminate against employees who have been subjected to domestic abuse, in terms of his or her existing employment or career development

The Trust is aware that domestic abuse can lead to performance problems such as chronic absenteeism or lower productivity. When addressing performance and safety issues, the Trust will make reasonable efforts to consider all aspects of the employee's situation and / or safety issues.

## 8.0 Absence Options for Employees Experiencing Domestic Violence

The Trust will provide assistance to an employee experiencing domestic abuse. This includes bank staff.

If an employee needs to be absent from work due to domestic abuse, the length of the absence will be determined by the individual's situation, through collaboration with their manager. Advice may also be sought from the appropriate Human Resources Manager.

The individual's manager will usually explore paid leave options first, which can be arranged to help the employee cope with the situation, without having to take a formal unpaid leave of absence.

Depending on circumstances, these options may include:

- Arranging flexible work hours (see the Trust's Flexible Working Time Guidance) so the employee can seek protection, go to court, look for new housing, enter counselling, arrange child care, etc.
- Consideration of the appropriate use of sick leave, reduced hours, time in lieu, special leave, unpaid leave, etc., particularly if requests are for relatively short periods.

These arrangements are regarded as a temporary measure to enable issues to be resolved by the individual and will be reviewed regularly.

## **9.0 Safety at Work**

The Trust undertakes to ensure the safety of its employees. The Trust will actively provide support to employees to minimise the risk to their safety while at work, if they make it known to the Trust that they are experiencing domestic abuse and give an indication of the possible issues that may arise.

This support may include:

- Offering temporary or permanent changes to their workplace, work times and patterns, helping to reduce the risk at work and on their journeys to and from work.
- Reminding reception staff, switchboard or team members not to divulge information about colleagues, especially personal details such as addresses, telephone numbers or shift patterns.
- Blocking e-mails/intercepting telephone calls
- Carrying out a workplace risk assessment for both the individual and other employees.
- Develop a mutually agreed plan which takes account of workplace safety.
- Coordination of support plans between Occupational Health and Well-Being, Safeguarding and Specialist Domestic Abuse Services to include internal services, such as security and car parking.

## **10.0 Providing Support for Employees**

Support will be available to employees involved in domestic abuse. Support is available via several routes, these include the individual's manager, a Human Resources Manager, the Hospital Safeguarding Team, Occupational Health and Wellbeing Service, Union Representative etc . Support is also available through specialist services for supporting those experiencing domestic abuse and staff can access these directly. (See Appendix 1)

It is important to follow good practice to support an individual. This may include:

- Creating an environment where the employee feels safe to talk about what they are experiencing.
- Ensuring that employees have a named individual to go to with further issues
- Ensuring that employees have a consistent manager or named individual to manage sickness associated with domestic abuse
- Listening and believing what they are saying.
- Provide a sensitive, non-judgemental response and reassuring the employee informing them that there is help and support available, both through the Trust and through links with specialised agencies.
- Be aware of any additional issues for an employee because of their ethnic background, gender, age, sexuality or disability.



- Ensuring that information is kept confidential unless there is a specific agreement with the individual to do otherwise. However, in circumstances of child protection or the protection of vulnerable adults from abuse, the child protection and adult protection services may need to be involved. Confidentiality cannot then be guaranteed in these situations but they will always be dealt with on a strict need to know basis.
- Be informed about supportive options which are available in this policy and discuss these with the employee.
- Respect the choices and decisions the employee may make about their situation.
- Keep in touch with the employee during any period of absence, maintaining confidentiality of their whereabouts at all times.

The Trust recognises that perpetrators of domestic abuse may wish to seek help and support voluntarily. They should also have access to help and support appropriate to their situation.

#### IF THE VICTIM AND THE PERPETRATOR WORK IN THE SAME ORGANISATION OR ON THE SAME PREMISES

In cases where both the victim and the perpetrator of domestic violence work in the organisation, or come in to contact on the same premises, the Trust will take appropriate action based on individual cases. This includes facilitating access to specialist programmes and services for help and support.

In addition to considering disciplinary action against the employee who is perpetrating the abuse, action may need to be taken to ensure that the victim and perpetrator do not come into contact in the workplace.

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.

If a perpetrator uses Trust equipment / time etc to stalk or harass the staff member this needs to be dealt with in line with disciplinary policy. The Trust needs to be aware that this could be considered facilitation of a criminal act on their part, and all measures must be in place to safeguarding individual staff.

Referral to the LADO will need to be considered for perpetrators of Domestic Abuse, and if the alleged perpetrator works on the same premises but for a different organisation there must be liaison between HR leads within each organisation.

All cases are unique to both individuals involved, and should be managed sensitively.

### **11.0 The SEE Network**

Within East Lancashire Hospitals NHS Trust we recognise that peer support is of great value, and we have established individual staff members who themselves have experienced Domestic Abuse, and are in a position to support other staff on an

informal basis. The Hospital Safeguarding Team holds the list of staff who are available to support others. Due to the nature of the support they are able to offer, that list will be kept confidential.

The name for the SEE Network was devised by individual staff from East Lancashire Hospitals NHS Trust who have experienced Domestic Abuse, and represents the time when they were able to finally see that something was wrong and they needed support.

**S Safe**  
**E Enlightened**  
**E Empowered**

The SEE Network has evolved, and those involved have been supported to establish this peer support group by the Hospital Safeguarding Team. It needs to be noted that most people who experience Domestic Abuse may take up to 2 years to fully recover, and be ready to support others who are having similar experiences.

The SEE Network is not a formal, specialised service and as such it is recommended that this is accessed in addition to the specialised support from Domestic Abuse services, including Independent Domestic Abuse Advocates (Idvas).

## **12.0 Routine Enquiry**

In December 2016 East Lancashire Hospitals NHS Trust's Occupational Health and Well-Being Service introduced *Routine Enquiry* for Domestic Abuse. All staff who have contact with this service, irrespective of the nature of that contact, will be asked about Domestic Abuse. If this is disclosed then the support mechanisms can be accessed, and individual staff will be directed accordingly. The Hospital Safeguarding Team will play a key role in ensuring staff who are experiencing Domestic Abuse are signposted to the appropriate specialised services, and they will link in with managers to offer advice on how best individuals can be supported.

## **13.0 Roles and Responsibilities**

Specific duties include:-

### **13.1 Line Managers**

As the primary support to members of staff; managers may receive reports or disclosures of domestic abuse from employees. In this situation the manager should:

- be available and approachable to employees experiencing Domestic Abuse
- Listen, reassure and support individuals.
- Keep information confidential (subject to the requirements of child and adult protection).
- Respond in a sensitive and non-judgemental manner.
- Discuss the specific steps that can be taken to help this person stay safe in the workplace.

- Ensure the employee is aware of the options available to them, including support mechanisms within the Trust and other external specialist agencies, as outlined within this Policy

Line managers are responsible for ensuring that staff are supported by this policy within their work areas, and for communicating its contents to their staff. Managers need to be familiar with the contents of this policy and to ensure that they provide appropriate support once an individual makes them aware of their personal situation.

Support for the manager in dealing with this may be sought from a number of people, including the Hospital Safeguarding Team, their own manager, a Human Resources Manager, Staff Side Organisations, Occupational Health etc, as appropriate. Confidentiality must be maintained when managers seek support, as it should be in relation to the process to follow rather than the individual. If there are concerns that the member of staff is at risk of harm the Hospital Safeguarding Team should be consulted for advice.

### **13.2 Trust Employees**

All Trust Employees have a responsibility to familiarise themselves with this policy and to adhere to its process. Fellow employees are often those who receive a disclosure of Domestic Abuse, and as such should be in a position to direct the staff member who is experiencing Domestic Abuse to the appropriate services (within this Policy)

### **13.4 The Hospital Safeguarding Team**

The Hospital Safeguarding Team may have a direct role in supporting staff who are subject to domestic abuse and for collaborating in the development and review of this policy. They are in a position to direct staff to specialist services as required and access appropriate support. The Team will also advise and support managers and others who require additional help.

### **13.5 Human Resources**

The Human Resources team have a responsibility to ensure adherence to this Policy and that it is kept up to date. They have responsibility for the audit of the effectiveness of this Policy.

Human Resources are also in a position to direct staff who are experiencing Domestic Abuse to appropriate people within the organisation, or externally, when the staff member chooses not to disclose abuse to their manager.

### **13.6 Occupational Health and Well-Being**

The Occupational Health and Well-Being team has a valuable role in asking all staff who access their service about Domestic Abuse, as part of routine enquiry. They are in a position to seek advice as required and access appropriate support for staff who are affected. They are able to provide additional support in the management of health and well-being through their own service. Close partnership working is in place between the Occupational Health and Well-Being and Safeguarding teams.

### **13.7 Staff Side Organisations**

Staff side organisations have a valuable role in supporting staff who are experiencing domestic abuse and for collaborating in the development and review of this policy. They are in a position to seek advice as required and access appropriate support for staff who are affected. They are able to access additional, practical support, such as emergency funding for its members.

### **14.0 Equality Impact Assessment**

The equality impact assessment is shown at Appendix 2.

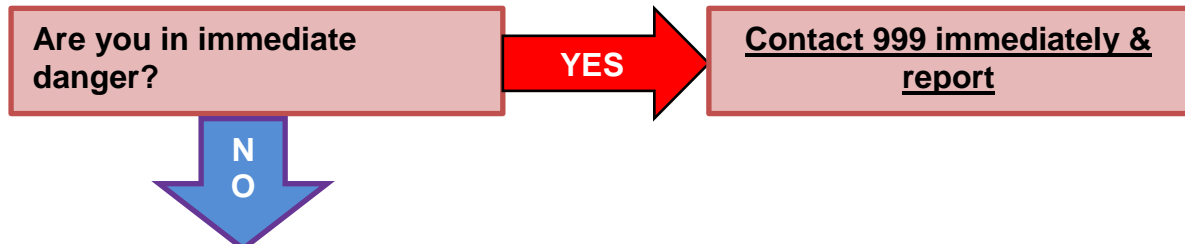
### **15.0 Dissemination and Implementation**

The Trust will raise awareness of domestic abuse through the following measures:

- Publicising, maintaining and posting in locations of high visibility a list of external and internal resources for individuals subject to and perpetrators of domestic abuse
- Publicising a statement from the Trust communicating the Trust's position on domestic abuse to all employees.
- Publicising and distributing information on the Trust's policy on the intranet.

## Are you experiencing Domestic Abuse?

*Domestic Abuse can be any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological, physical, sexual, financial & emotional.*



ELHT has access to an Independent Domestic Violence Advocate (IDVA) who is available at the Royal Blackburn Hospital. They cover people who reside in Blackburn with Darwen and can be contacted on 07812 663381 (Monday-Sunday 8am-6pm) or 01254 311181.

For residents outside Blackburn with Darwen a referral will need to be made to Lancashire Victim Support. Initial Contact can be made by telephoning 0300 323 0085, however they will require an electronic referral form (embedded below)



LVS Referral Form  
2017.docx

You can also contact the ELHT Safeguarding Teams (Mon-Fri): 01254 732848 (internal 82848) or 01282 803125 (internal 13125). Between the hours of 8 – 5pm the Safeguarding Team carry Bleep 319 and can respond at RBH

Other people can be your first point of contact if you prefer, such as Staff Side Organisations, Occupational Health and Well-Being or your Line Manager.

Alternatively below is a list of helpful contacts, telephone numbers & websites which may be of assistance:

### NATIONAL ADVICE:

Refuge: <http://refuge.org.uk/> or Helpline: 0808 2000 247

National Domestic Violence Helpline: [www.nationaldomesticviolencehelpline.org.uk](http://www.nationaldomesticviolencehelpline.org.uk) or Helpline: 0808 2000 247

Men's Advice: <http://www.mensadvice.org.uk> or Helpline: 0808 801 0327

### LOCAL ADVICE:

East Lancashire Women Refuge (ELWRA): <http://www.elwra.org.uk/index.htm> or Helpline: 07866 510 728

The Wish Centre – a specialist support service for people experiencing domestic abuse, access to IDVA, ISVA, YPVA service: Telephone: 01254 260465/ 55111 9am – 5pm

Humraaz Support Service - A specialist service for Black & Minority Ethnic Women. Humraaz Refuge offers safe temp accommodation, advice, support & resettlement Tel: 01254 53807 / 674312

## Equality Impact Analysis for Policies & Procedures

### Stage one – Initial Screening

Directorate/Service/Department/Ward	Safeguarding & Human Resources
Policy Title	Supporting Staff who are experiencing Domestic Abuse
New or Existing Policy / Protocol/ Procedure?	Existing Policy revised and updated
Name of Assessor/s	
Job Title/s	Head of Safeguarding
Contact Telephone Number	
Date of Analysis	31 <sup>st</sup> August 2017

Please complete the following Questions: (expand boxes as required)

1. Describe the aims and objectives of the policy, service or function?	<p>To ensure that ELHT fulfils its statutory duties and has a procedure in place on how to respond to reported incidents or allegations of domestic abuse involving an employee or volunteer, whether perpetrator or victim.</p> <p>To provide guidance for managers and employees of ELHT on the processes to be followed if they receive notification or information that an employee or volunteer is involved in an incident or allegation regarding domestic violence or abuse.</p>
2. Who will implement the policy etc?	<p>This policy applies to all staff employed by the organisation, either directly or indirectly, including volunteers and to any other person or organisation that uses the organisation's premises for any purpose.</p>
3. Who will benefit?	<p>Individual staff who may be at risk of or experiencing Domestic Abuse.</p> <p>These are the primary people who will benefit from this policy. It will also increase the knowledge and awareness of others within the organisation, including managers, thus supporting them to act accordingly.</p>

4. What are the expected outcomes?	Staff at risk of or experiencing Domestic Abuse are supported accordingly by the Trust to access appropriate help and advice, and reduce the risk to themselves and their families.
5. Who was consulted and or involved on this policy, service or function?	Internal Safeguarding Board Safeguarding Team Individual Staff Members who have experienced Domestic Abuse HR Policy Group

6. In the table below, for each group of people tick whether the proposed policy or service would be:

- experienced as different and positive action for that group compared to other groups of people (e.g. a women only service is positive action for women);
- experienced more negatively for that group compared to other groups (e.g. a Christian service run in the lounge of a residential unit would be positive for any Christian service users but negatively for people of other faiths who would lose use of the lounge for that period of time)
- neither positive nor negative for any one group of people (equality target group) compared to others.

Assessment of likely impact on equality target groups

(This involves determining whether or not there is an adverse impact on the main equality groups or sub groups)

Equality Target Group	What impact will the policy/ proposal have? For example, its effect on	Positive Impact	Negative Impact		Neither	Reason / Comment (What actions will you take to remove or minimise the negative impact)
			High*	Low #		
	Lifestyles?					
Men	<ul style="list-style-type: none"> <li>Diet &amp; nutrition?</li> <li>Exercise &amp; physical activity?</li> </ul>				✓	
Women	<ul style="list-style-type: none"> <li>Substance use: tobacco, alcohol or drugs?</li> </ul>				✓	
People from Black and Minority Ethnic Communities	<ul style="list-style-type: none"> <li>Risk taking behaviour?</li> <li>Education &amp; learning, or skills?</li> <li>Personal safety?</li> <li>Privacy?</li> </ul>				✓	
Disabled People	<ul style="list-style-type: none"> <li>Communication?</li> <li>Relationships?</li> </ul>				✓	

Gay, Lesbian and Bisexual people	<ul style="list-style-type: none"> <li>• Other?</li> </ul>			✓	
Religion & Belief	<p>Social environment?</p> <ul style="list-style-type: none"> <li>• Social status</li> <li>• Employment ( paid or unpaid)</li> <li>• Social/family support</li> </ul>			✓	
Carers	<ul style="list-style-type: none"> <li>• housing</li> <li>• Income</li> </ul>			✓	
Transgender people	<p>Will it impact on;</p> <ul style="list-style-type: none"> <li>• Discrimination?</li> <li>• Equality of opportunity?</li> <li>• Relations between groups?</li> <li>• Other</li> </ul>			✓	
Age	<p>Physical environment?</p> <ul style="list-style-type: none"> <li>• Living conditions?</li> <li>• Working conditions?</li> <li>• Pollution or climate change?</li> <li>• Accidental injuries or public safety?</li> <li>• Transmission of infectious disease?</li> <li>• other</li> </ul> <p>Access to and experience of services? e.g.</p> <ul style="list-style-type: none"> <li>• Health Care &amp; treatment</li> <li>• Education</li> <li>• Leisure</li> <li>• Transport</li> <li>• Housing</li> <li>• other</li> </ul> <p>Human Resources</p> <ul style="list-style-type: none"> <li>• Recruitment</li> <li>• Selection</li> <li>• Training</li> <li>• Promotion</li> <li>• Disciplinary/Grievance</li> <li>• Bullying &amp; Harassment</li> <li>• Work life balance</li> </ul>			✓	



\* High - there is significant evidence of adverse impact or potential for adverse impact. If the negative impact of the policy etc. is high for any equality group, you must complete a full impact assessment as soon as possible

# Low - there is anecdotal or little evidence to suggest adverse impact. The policy etc. operates mainly within a small unit and affects few people. If the negative impact of the policy etc. is low please complete the questions below.

<p>7. What evidence have you used to support the conclusions drawn in screening questions 6? (Does the data indicate a possible adverse impact on some groups?)</p> <p>What is the strength of this evidence - for instance</p> <p>a) well established and validated?  b) strong evidence, but a few gaps?  c) some evidence, but considerable gaps?  d) anecdotal?</p>	<p>a) Well established and validated</p> <p>Support for those at risk of or experiencing Domestic Abuse is well defined under The Care Act 2014, and multi-agency systems and processes are well-embedded. ELHT has close links with specialist services for Domestic Abuse</p>
<p>8. If there is a negative impact on any equality target group, could the policy etc. lead to unlawful direct discrimination? (If so the policy etc. must be abandoned and you will need to look for different ways of achieving the policy etc. aims)</p>	<p>No – it is about safeguarding individual staff at risk of or experiencing abuse</p>
<p>9. Could the policy etc. lead to unlawful indirect discrimination? If so, is it justifiable?</p> <p>Could the policy etc. damage relations between different groups?</p>	<p>No – reference has been made to appropriate acts within the policy to clarify the boundaries of confidentiality and information sharing</p>
<p>10. Could the policy etc. damage relations between different groups?</p>	<p>No</p>
<p>11. What actions could be taken to amend the policy/service to minimise the low negative impact?</p> <p>Are there alternatives that could meet the policy etc. aims/objectives? If so state what alternative method will be used?  Can the adverse impact be reduced or justified?</p> <p>Is there a need for further consultation?</p>	<p>n/a</p>
<p>12. Conclusions &amp; Recommendations</p>	

To support the policy in the interests of safeguarding individuals at risk of or experiencing Domestic Abuse.

Signature of Assessors

Date: 31<sup>st</sup> August 2017

Signature 1:

Signature 2: