



**Herefordshire and
Worcestershire**
Clinical Commissioning Group

Domestic Abuse Policy

April 2020

Document Reference Information

Version:	Herefordshire and Worcestershire CCG Domestic Abuse Policy Version	
Policy number:	WCCG0000	
Category:	Safeguarding	
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Impact assessment required:	Equality Impact Assessment	
	Quality Impact Assessment	
	Privacy Impact Assessment	
Impact assessment completed:	Equality Impact Assessment	
	Quality Impact Assessment	
	Privacy Impact Assessment	
Links to other policies:	Safeguarding Children Policy Safeguarding Adults Policy	
Last revised:	Revised 1.4.2020	
Review date:	1.4.2020	
For action by:	1.1.2020	
Policy Statement:	This policy aims to provide a framework for Herefordshire and Worcestershire Clinical Commissioning Group as a Commissioner of health care and as an employer to deliver a consistent and effective response in tackling domestic abuse and effective response to those experiencing it.	
Responsibility for dissemination to new staff	Designated Nurse and Safeguarding Team	
Mechanisms for sharing		
Training implications	No	
Resource implications	No	
Further details and additional copies available from		

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1. INTRODUCTION

The terms 'domestic violence' (DV) and 'domestic abuse' (DA) are often used interchangeably. In this guide 'domestic abuse (DA)' is used as it is felt to be a more inclusive way to describe a range of behaviors, which include violence, controlling and coercive behaviors as well as all other forms of abuse.

Many people think that domestic abuse is about intimate partners, but other family members are included.

Family members are defined as mother, father, son, daughter, brother, sister and grandparents in-laws and step-families.

The cross-government definition of domestic abuse is not a legal definition and includes so called 'honor' based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

Domestic abuse is a crime. It does not respect race, social background or other similar factors. It affects one in four women and one in six men in their lifetimes, with women suffering higher rates of repeat victimization and serious injury; it accounts for 14% of violent crime, covering offences ranging from common assault to rape and murder; and it has a massive impact on victims, their children and the wider community.

Alongside the significant effect domestic abuse has on individuals, to families and to communities, consideration must also be given to the cost to public services. In March 2017, domestic abuse was estimated to have cost over £66 billion in England and Wales, with costs to health services in dealing with physical injuries or the effects on mental health estimated to be £2.3 billion (Oliver et al 2019)

Everyone has the right to live life free from abuse and violence in any form and the responsibility for such acts lies with the perpetrators. There are also serious and adverse impacts on children who live in an abusive household, and the long-term damage to their physical and mental health. Within this context, Herefordshire and Worcestershire Clinical Commissioning Group (CCG) recognises its responsibilities to safeguard and protect children and adults at risk of abuse (Children's Act 1989 and 2004 and the Care Act 2014).

2. PURPOSE

2.1

The purpose of this policy is to:

- Ensure all CCG staff understand how to identify and report domestic abuse,
- Ensure all staff have access to support and effective guidance or intervention if experiencing domestic abuse
- Ensures confidentiality wherever possible and sympathetic handling of situations at work arising from domestic abuse
- Support identification of any safeguarding issues for children and adults (with care and support needs).
- Ensure that processes are in place for action plans developed following a Domestic Homicide Review (DHR), safeguarding reviews or internal management reviews.
- Ensure that the lessons learned from DHR's, safeguarding reviews both child and adult and internal management reviews are shared across the CCG's, Primary Care colleagues and commissioned health providers.

3. DEFINITIONS

The Home Office, 2013 (updated 2018 to include 16- and 17-year old's), defines domestic abuse as:

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

- Psychological/emotional
- Physical
- Sexual
- Financial/economic
- Violent or threatening behavior
- Controlling and Coercive behavior

Controlling behaviour: 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 by regulating their everyday behavior.

Coercive behaviour: 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.

The Serious Crime Act (2015) created a new offence of controlling or coercive behavior in intimate or familial relationships. The new offence closes a gap in the law around patterns of controlling or coercive behavior Control in an on-going relationship between intimate partners or family members.

The Government definition, which is not a legal definition, includes so called 'honor' based violence, Female Genital Mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group.

In this policy where the term 'adult' or 'young person' is used this includes people who are 16 and 17 years old, as well as people aged 18 and over, in line with the above definition. (See also [Safelives](#))

Herefordshire and Worcestershire's response to Forced marriage, FGM and honor-based violence is coordinated under the Herefordshire and Worcestershire Domestic Abuse Strategy 2017-2020 by the Community Safety Partnership (CSP).

4. CONTEXT

4.1

Incidents of Domestic Violence/Abuse: Nationally Context

- Each year around 2 m people suffer some form of domestic abuse - 7.9% of women and 4.2% of men. Women aged 20-24 years were significantly more likely to be victims of any domestic abuse than women in any other age group. (ONS, 2018)
- Each year more than 100,000 people in the UK are at high and imminent risk of being murdered or seriously injured as a result of domestic abuse (Safe Lives, 2015a)
- Women are much more likely than men to be the victims of high risk or severe domestic abuse: 95% of those going to MARAC or accessing an IIDVA service are women (Safe Lives, 2015b)
- In 2017-2018, the police recorded a total of 1,198, 094 domestic abuse-related incidents in England and Wales. Of these 598,545 (50%) were not subsequently recorded as a crime (ONS, 2018)
- On average, 2 women are killed, per week, by a current or former partner in England and Wales (ONS, 2018)
- 130,000 children live in homes where there is high-risk domestic abuse and 62% of children living with domestic abuse are directly harmed by the perpetrator of the abuse, in addition to the harm caused by witnessing the abuse of others (CAADA, 2014)
- On average high-risk victims live with domestic abuse for 2.6 years before getting help (Safe Lives, 2015b)
- 85% of victims sought help five times on average from professionals in the year before they got effective help to stop the abuse (Safe Lives, 2015)
- By the time they reach 18, almost a quarter of children will have been exposed to domestic violence (NSPCC, 2016)

5. Priorities

There are four priorities under the shared vision of Herefordshire and Worcestershire's Community Safety Partnership (CSP) (2019-2022)

- **Prevention** - The aim is that individuals and communities understand domestic abuse and the harm it causes and have the skills to build, and a culture that supports healthy relationships.
- **Provision of services** - The aim is that when domestic abuse is disclosed, identified or reported, those affected by domestic abuse can access timely and effective information, advice and support.

- **Partnership** - The aim is to work together across organisations in an efficient and effective way to prevent, and protect those experiencing, domestic abuse, ensuring that organisational barriers do not have impact on those affected by domestic abuse.
- **Pursuing perpetrators and Criminal Justice** - The aim is that the tools available are used effectively and consistently and those experiencing domestic abuse see the police and criminal and civil legal systems as working to protect them and their children.

NHS organisations will inevitably employ individuals who are affected by domestic violence and abuse or may even be perpetrators. The organisation will need to ensure they make all reasonable efforts to provide staff with the support needed.

The NICE guidance 'Domestic violence and abuse: how health services, social care and the organisations they work with can respond effectively' was updated in July 2018. The guidance aims to help identify, prevent and reduce domestic violence.

The CCGs recognise their responsibilities and are committed to preventing domestic abuse wherever possible and ensuring that victims of domestic abuse and violence receive a high standard of care irrespective of age, race, culture, sexuality, religion or ability and equality underpins all our service provision and commissioning.

This policy aims to provide a framework for the CCG's as commissioners of health care and as an employer to deliver a consistent and effective response in tackling domestic abuse; and supporting those experiencing it.

6. Priorities

6.1

The Accountable Officer (AO) has responsibility for ensuring the provision of high quality, safe and effective services being delivered by the CCGs. The Accountable Officer has overall responsibility and is accountable for ensuring the CCGs effectively contributes to the multi-agency partner response to support people living with domestic abuse.

6.2

The Head of Safeguarding/Designated Nurse provides specialist support and advice to staff in relation to aspects of safeguarding children and adults who are experiencing domestic abuse.

6.3

The Head of Safeguarding/Designated Nurse will monitor and provide health oversight of action plans from Domestic Homicide Reviews as appropriate and seek assurance that member practices and commissioned providers implement any recommendations.

6.4

The Head of Safeguarding/Designated Nurse will ensure lessons learned from Domestic Homicide reviews are shared across the CCGs and member practices and inform safeguarding training.

6.5

All managers should:

- Ensure that this policy is known to all staff and that staff are aware of their responsibilities
- Seek adequate and appropriate training for staff within their teams in relation to domestic abuse commensurate to their roles and responsibilities.
- Support staff within their team who are experiencing Domestic Abuse

6.6

All staff should:

- Be aware of the policy and know how and where to report any concerns in relation to domestic abuse.
- Have access to occupational health support and/or counselling if experiencing domestic violence/abuse.

6.7

Staff Experiencing Domestic Abuse

- With the prevalence of domestic abuse in our society, there is a potential that some members of CCG staff will suffer abuse at the hands of someone close to them. The CCG's are committed to creating a working environment that supports staff experiencing domestic abuse.
- CCG employees have the right to work in a supportive and confidential environment that does not discriminate against or stigmatise people who are experiencing domestic abuse.
- Staff are not obliged to tell anyone at work about their domestic situation, however there are many support mechanisms available such as line manager, HR representative and Occupational Health
- It is therefore recommended that staff talk to someone at work if they feel their personal situation is affecting work – specific details are not necessary but a joint approach to problem solving to resolve and work issues is essential.

The CCGs' internet and intranet pages both identify and contain links to specialist domestic abuse services in the Herefordshire and Worcestershire area.

Worcestershire 24-hour free phone helpline 0800 980 3331

Worcestershire rape and sexual abuse support center 01905 724514

www.WRSASC.org.uk

Wellbeing Information and Signposting Herefordshire (WISH): 01432 344777

NSPCC ChildLine: 0800 11 11

Men's advice line: 0808 801 0327 - www.mensadviceline.org.uk

Mankind: 01823334244 www.mankind.org.uk

GALOP - Support for LGBT experiencing domestic abuse: 0300 999 5428

<http://www.galop.org.uk/domesticabuse/>

Freephone national domestic abuse helpline run by Refuge 0808 2000 247

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

Karma Nirvana 0800 5999247

(forced marriage and honour crimes) <https://karmanirvana.org.uk>

Forced Marriage Unit 020 7008 0151 <https://www.gov.uk/stop-forced-marriage>

IN AN EMERGENCY DIAL 999

If you are worried that someone may see you visiting a helpline, the Women's Aid Website tells you how to cover your tracks online

<https://www.womensaid.org.uk/cover-your-tracks-online/>

6.8

Employees who are perpetrators of domestic violence

Abusive behavior is the responsibility of the perpetrator. Domestic violence/abuse is a serious matter that can lead to a criminal conviction. If you are hurting somebody and want help, please contact the Respect National Helpline (details at end of this document).

Conduct outside of work (whether or not it leads to a criminal conviction) can lead to disciplinary action being taken against an employee because of the impact it may have on the employee's suitability to carry out their role and/or because it undermines public confidence in the CCGs. Where appropriate, there will be an investigation of the facts as far as possible, and a decision made as to whether the conduct is sufficiently serious to warrant disciplinary action being taken.

6.9

Arrangements for where others may be put at risk

Managers have a duty to maintain a secure environment for all employees and this may be made easier if colleagues are aware of potential risks. With the express wish and consent of the employee in question colleagues may need to be informed of the situation.

workplace or personal details of individuals be divulged unless the individual concerned gives consent.

If you are worried you are abusive you can contact the free RESPECT helpline 0808 802 4040

<http://respectphoneline.org.uk>

7. ADULTS (has needs for care and support) AND DOMESTIC ABUSE

7.1

The Mental Capacity Act (2005)

The MCA 2005 provides a statutory framework to empower and protect people who may lack capacity to make decisions for themselves and establishes a framework for making decisions on their behalf. This applies whether the decisions are life changing events or everyday matters. All decisions taken in the adult safeguarding process must comply with the Act.

The Mental Capacity Act (MCA) states that if a person lacks mental capacity to make a decision then whoever is making that decision or taking any action on that person's behalf must do this in the person's best interests. One of the key principles of the Act is that a person must always be assumed to have capacity unless it is established otherwise. A person cannot be treated as lacking capacity because a decision may be unwise or foolish.

When a person who appears to have mental capacity also appears to be choosing to stay in a high- risk abusive relationship then careful consideration must be given to whether they are making that choice free from the undue influence of the person who is causing them harm or others. The impact of controlling and coercive behaviours', and application of undue influence, is a factor that needs active consideration for those with or without capacity. Early consultation with legal advisors is recommended in high-risk situations where this is indicated.

If an adult with capacity decides to remain in an abusive relationship and does not consent to a referral to services, then there remains a responsibility to support the individual wherever possible. This may include, steering them to partner agencies and appropriate services/counselling. If there is evidence that Domestic Abuse is escalating, where there is medium to high risk, then referral to MARAC (Multi-Agency Risk Assessment Conference) should be considered with or without consent. (See also [Safelives](#))

7.2

Victims of on-going domestic abuse may be reluctant to leave an abusive relationship and:

- Deny or protect an abusive partner if questioned or challenged
- Be financially or emotionally dependent on the abuser
- Blame themselves for the abuse inflicted
- Be frightened of the consequences of leaving
- Be denied access to children if they leave

7.3

Safeguarding Adults with care and support needs

A referral may need to be made to Worcestershire Local Authority Safeguarding Adults Team for adults with needs for care and support. (Refer to Adult Safeguarding: Multi-agency policy & procedures for the protection of adults with needs for care and support in the West Midlands)

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

8. CHILDREN AND DOMESTIC ABUSE

8.1

Domestic violence/abuse is a significant safeguarding and child protection issue. Both the Government and key children's services and agencies now recognise the issue of children living with domestic violence / abuse as a matter of concern. Nearly three quarters of children with a child protection plan nationally, live in households where domestic abuse occurs.

8.2

The impact of domestic abuse on an individual child will vary according to the child's resilience and the strengths and weaknesses of their circumstances, as well as a range of factors in respect of the abuse. Three key imperatives of any intervention with children living with domestic abuse are

- To protect the child/children.
- To empower the non-abusive parent to protect herself/himself and her/his child/children.
- To hold an abusive partner accountable for their violence and provide them with the opportunities to change.

8.3

Where it is known that a child/child is living with domestic abuse, it is important to assess the risk of harm to the victim and her/his child/children. This risk assessment (DASH – Domestic Abuse, Stalking and Honor Based Violence risk Identification, Assessment and Management Model), tool can be found at the following link: www.safelives.org.uk

If the risk assessment score is 14 or more, a referral to the Multiagency Risk Assessment Conference (MARAC) must be made. This should be done with consent where safe to do so but can also be referred without consent if required.

8.4

Other forms of Domestic Violence/Abuse

Online grooming • Digital stalking • Naming of rape victims online • Social location systems whereby perpetrators can keep track of where victims are • • Sexting – the exchange of sexual messages or images and creating, sharing and forwarding sexually suggestive nude or nearly nude images through mobile phones and the internet

Where perpetrators of domestic abuse are under 18 years of age the Courts advise that Youth Offending Teams (YOTs) are involved with support programs. There are tools and resources available to assist staff who work with young adults who use abuse within domestic relations available from link

<https://www.wwmcrcc.co.uk/>

9. INTERGENERATIONAL ABUSE

Domestic violence/abuse approaches historically have had an emphasis on partner violence in heterosexual or lesbian, gay, bisexual or transgender (LGBT) relationships. More focus needs to be given to family and inter-generational abuse, and how this differs from partner violence for example if the perpetrator is the sibling, child or grandchild. Abuse of an adult by a child may be used to exercise control over that adult.

Like other forms of domestic violence/ abuse, it is very likely to be under-reported and there are few services working specifically on this issue. The lack of recognition of this form of abuse means that many families may not recognise that they need support and there is a need for more guidance for practitioners that does not just include a criminal justice response. Many families may be facing multiple issues such as substance misuse, mental health problems as well as domestic violence/abuse.

10. INDICATORS OF DOMESTIC ABUSE

This list is not exhaustive, and most are applicable to adults and children: -

- Physical complaints (marks, injuries or bruising, headaches, stomach aches)
- Changes in the way people dress (clothing that covers up, long sleeves on hot days)
- Constant worry about possible danger and/or the safety of loved ones
- Depression and/or withdrawal from others and activities
- Low self-esteem and lack of confidence, especially for trying new things (including academic tasks)
- Suicidal thoughts and actions
- Difficulty paying attention at work/in class, concentrating on work or learning new information
- Outbursts of anger directed toward others, peers or self • bullying and/or aggression directed toward others
- School truancy or leaving home
- High risk behavior including criminal activities and substance abuse
- stereotyped beliefs about males as aggressors and females as victims
- Dating violence

11. REPORTING CONCERNS

11.1

If you have concerns that a child or adult (with needs for care and support) are at risk or are being abused then you, as an employee of the NHS, must report your concerns. Lessons from Serious Case Reviews, Domestic Homicide Reviews and Safeguarding Adult Reviews have taught us that it is never acceptable to do nothing.

11.2

To report concerns please contact: Children – Worcestershire Children First - 01905 822666

11.3

Herefordshire Multi-Agency safeguarding Hub (MASH)-01432 260800

11.4

Adults - Adult Safeguarding Team 01905 768053

11.5

For advice and guidance please speak to the CCG's Safeguarding Team (Appendix 1)

If you feel a life is in danger call 999

12. DOMESTIC HOMICIDE REVIEWS (DHR's)

12.1

The Domestic Violence, Crime and Victims Act (2004) states: 'Domestic Homicide Review' means a review of the circumstances in which the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse or neglect by-

"A person to who (s) he was related or with whom (s) he was or had been in an intimate personal relationship, or a member of the same household as her/himself"

These are held with a view to identifying lessons to be learnt from the death. See also

<https://www.gov.uk/government/publications/revised-statutory-guidance-for-the-conduct-of-domestic-homicide-reviews>

12.2

The Domestic Violence, Crime and Victims Act, section 9, stipulates the multi-agency statutory requirement to conduct a domestic homicide review. A Domestic Homicide Review (DHR) should be carried out to:

- Establish what lessons are to be learned from the domestic homicide regarding the way in which local professionals and organisation work individually and together to safeguard victims.
- Identify clearly what those lessons are both within and between agencies, how and with what timescales they will be acted on, and what is expected to change as a result. • apply these lessons to service responses including changes to policies and procedures as appropriate.
- Prevent domestic violence homicide and improve service responses for all domestic violence victims and their children through improved intra-agency working.

12.3

The CCG's comply with this duty and actively engages in DHR's in Worcestershire. The Designated Nurse and Deputy Designated Nurses for adults, children's and Primary Care safeguarding attend and contribute to these reviews.

12.4

Staff or member GP practices may be asked to support the DHR process with the provision of or information to support Independent Management Reviews (IMRs) or access to healthcare records as required.

13. EQUALITY IMPACT ASSESSMENT (EIQ)HOMICIDE REVIEWS (DHR's)

13.1

In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic. The CCGs aim to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others.

13.2

The Equality Impact Assessment screening was used to determine the potential impact this policy might have in respect to the individual protected characteristics.

14. PROVIDER ASSURANCE

The CCG's as a commissioner of healthcare will seek assurance that commissioned provider organisations are also engaged in the work to respond to domestic violence/abuse. This includes having an internal process in place within the Provider organisations (Domestic abuse policy) to respond to allegations of abuse, deliver domestic abuse training as part of Safeguarding training, and to engage where appropriate in Domestic Homicide Review processes. Required Safeguarding Standards for NHS providers are detailed within the NHS Standard Contract (2019/2020).

15. TRAINING

15.1

Domestic violence abuse is included within safeguarding adults and children's level 3 training.

15.2

Further domestic abuse training can be accessed via the Worcestershire Safeguarding Children's Partnership and Worcestershire Safeguarding Adults Board (WSCP/WSAB) at the following link: <https://www.safeguardingworcestershire.org.uk/>

16. MONITORING COMPLIANCE WITH THE DOCUMENT

The Policy will be monitored through existing CCG Safeguarding structures. Where gaps and omissions are identified within the CCG's domestic violence/abuse arrangements, recommendations and required actions will be added to safeguarding work-plans for action. Where gaps or omissions are identified within NHS commissioned provider services, the Designated Nurse or their Deputy's will either:

- Inform the provider and request immediate action to bridge the gap/omission and/or
- Inform and discuss with the CCG Executive lead for Safeguarding (Chief Nursing Officer).

18. ARRANGEMENTS FOR REVIEW

This policy will be formally reviewed and amended every 2 years by the CCG's safeguarding team unless new national or local guidance identifies/recommends changes in practice occurs.

19. DISSEMINATION

The final version of this policy will be uploaded to the CCG's intranets and all staff within the CCG will be advised by internal communications.

20. ASSOCIATED DOCUMENTATION

20.1

This policy should be read in conjunction with:

- Herefordshire and Worcestershire CCG Safeguarding Adults Policy
- Herefordshire and Worcestershire CCG Safeguarding Children Policy
- MCA/DOLS policies and procedures for Herefordshire and Worcestershire CCG

20.2

Legislation and guidance- the following legislation and guidance has been taken into consideration in the development of this policy:

- Domestic Violence, Crime and Victims (Amendment) Act 2012
- Government Strategy to tackle Violence against Women and Girls (VAWG)
- 'Responding to Domestic Abuse. A resource for health professionals'.(2017) Home Office
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/597435/DomesticAbuseGuidance.pdf
- Domestic Abuse Bill (2019) Home Office
- Domestic Violence and Abuse (Quality Standards) NICE 2018
- The Care Act 2014
- Children Act 1989, 2004
- Domestic Violence and Abuse(NICE)2018

21. REFERENCES

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<http://www.legislation.gov.uk/ukpga/2004/28/contents>
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https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/772180/horr107.pdf
- <https://www.nhs.uk/live-well/healthy-body/getting-help-for-domestic-violence>

APPENDIX 1	
Herefordshire and Worcestershire CCGs' Safeguarding Team Generic email address:	RBCCG.WCCGSafeGuarding@nhs.net
Ellen Footman Head of Safeguarding/Designated Nurse for Safeguarding Adults and Children	07885 265970 Or 01527 482920 Ellen.footman@nhs.net
Jeremy Newell Deputy Designated Nurse (Safeguarding Adults/Prevent Lead)	07730 029810 Or 01527 482920 jeremynewell@nhs.net
Heather Manning Deputy Designated Nurse (Safeguarding Children & LAC Lead)	07854 415449 Or 01432 260768 h.manning@nhs.net
Sarah Dempsey Deputy Designated Nurse (Primary Care Lead)	07834 172270 Or 01527 482920 sarah.dempsey3@nhs.net
Rebecca Haywood-Tibbetts Named Professional (Primary Care)	07976 481413 Or 01432 383692 rebecca.haywood-tibbetts@nhs.net
DESIGNATED DOCTORS FOR SAFEGUARDING CHILDREN	
Herefordshire	
Dr Sally Stucke (Designated Doctor Safeguarding Children)	07812 094674 01432 356438 sally.stucke@nhs.net
Worcestershire	
Dr David Lewis (Designated Doctor for Safeguarding Children)	07718 118312 Office: 01905 681071 (or internal extension 51071) david.lewis5@nhs.net

In the Event of Child Protection Concerns Please Contact:	
Herefordshire Children & Young People's Directorate (Social Services)	
Multi Agency Safeguarding Hub (MASH)	01432 260800
Email: cypd@herefordshire.gcsx.gov.uk	
Out of Hours Children's Duty Team	01905 768020
Worcestershire Family Front Door	
Family Front Door:	01905 822666
Emergency Duty Team (Out of hours)	01905 768020
West Mercia Police	
During office hours ask for the Family Protection Unit, if no reply or outside office hours, ask for the Duty Inspector	0300 3333000/101

Please refer to

Safeguarding Procedures for Herefordshire and Worcestershire

<http://westmidlands.procedures.org.uk/>

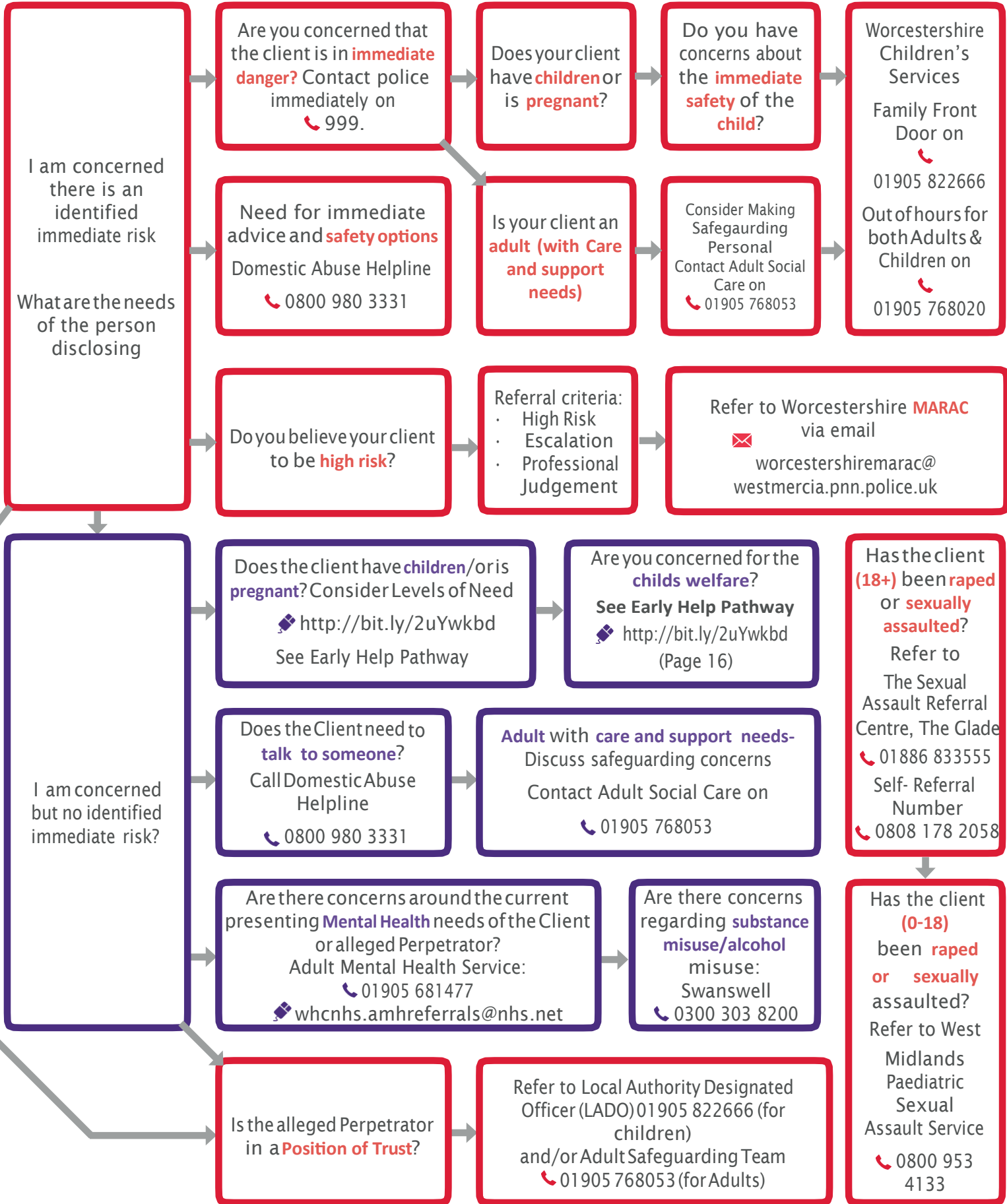
In the Event of Adult Protection Concerns Please Contact:	
Herefordshire Adult Safeguarding Team	
Monday – Friday 9am – 5pm	01432 260715
After 5pm,	0330 123 9309
Weekends,	safeguarding@herefordshire.gcsx.gov.uk
Worcestershire Adult Safeguarding	
To Report a Safeguarding concern	01905 768053
If you would like safeguarding advice please phone the Adult Safeguarding Team on 01905 843189 (note this number does not accept referrals)	http://www.worcestershire.gov.uk/safeguardingadults
http://www.worcestershire.gov.uk/info/20363/safeguarding_adults/1106/safeguarding_adults_policies_and_procedures	
West Mercia Police	
During office hours ask for the Protecting Vulnerable People Team, if no reply or outside	0300 3333000/101

West Midlands Adult Safeguarding Policies and Procedures

<https://herefordshiresafeguardingboards.org.uk/herefordshire-safeguarding-adults-board/for-professionals/policies-and-procedures>

http://www.worcestershire.gov.uk/info/20363/safeguarding_adults/1106/safeguarding_adults_policies_and_procedures

DISCLOSURE



Domestic Abuse Helpline: Is the single point of access to services:- refuge / safe houses, support, recovery and educational programmes, Independent Domestic Abuse Advisors (IDVA's) and Peer support