

## DOMESTIC ABUSE POLICY - STAFF

		POLICY	
Reference	HR/0017		
Approving Body	JSPF		
Date Approved	31/03/2024		
For publication to external SFH website	Positive confirmation received from the approving body that the content does not risk the safety of patients or the public:		
	YES	NO	N/A
	X		
Issue Date	01/04/2024		
Version	3		
Summary of Changes from Previous Version	Policy amended onto new template Updated Job Titles and support numbers		
Supersedes	Domestic Abuse Policy [staff]		
Document Category	Human Resources		
Consultation Undertaken	JSPF Safeguarding Committee		
Date of Completion of Equality Impact Assessment	16/01/2024		
Date of Environmental Impact Assessment (if applicable)	N/A		
Legal and/or Accreditation Implications	Code of Conduct for regulated Health and Social care professionals (NMC, GMC, HCPC) Human Right Act 1998 which enshrines the European convention on human rights The UN convention on the elimination of all forms of discrimination against women The UN Security Council resolution 1325 Crime and Disorder Act 1998 The Gender Equality duty 2010 integrated within the public sector equality duty The EU Strategy for Equality between women and men. The Safeguarding Vulnerable Groups Act 2006 The Mental Capacity Act 2005 The Mental Health Act 1983 The Data Protection Act 1998 The NHS Act 2006 The Children Act 2004 The Sexual Offences Act 2005 Forced Marriage (Civil Protection) Act 2007 The Female Genital Mutilation Act 2003 Domestic Violence, Crime and Victims Act 2004		

	The Care Act 2014 Protection of Freedoms Act 2012 The Serious Crime Act 2015 Health and Safety Act 1974 Employment Rights Act 1996 NHS Safer Recruitment Standards Domestic Abuse Act 2021 General Data Protection Regulations (GDPR) 2016	
<b>Target Audience</b>	All staff	
<b>Review Date</b>	01/03/2027	
<b>Sponsor (Position)</b>	Director of People	
<b>Author (Position &amp; Name)</b>	Named Nurse Safeguarding Adults and People Operational Lead	
<b>Lead Division/ Directorate</b>	Corporate	
<b>Lead Specialty/ Service/ Department</b>	Human Resources	
<b>Position of Person able to provide Further Guidance/Information</b>	Named Nurse Safeguarding Adults and People Operational Lead	
Associated Documents/ Information		Date Associated Documents/ Information was reviewed
<ul style="list-style-type: none"> <li>Sherwood Forest NHS Foundation Trust Domestic Abuse Policy</li> <li>Health and Safety Act 1974</li> <li>Employment Rights Act 1996</li> <li>NHS Safer Recruitment Standards</li> <li>Disciplinary Policy</li> <li>Management of Sickness Absence Policy</li> <li>Domestic Abuse Act (2021)</li> <li>SFH Safeguarding Children Policy</li> <li>SFH Safeguarding Adults Policy</li> </ul>		2023  N/A N/A N/A 2021 2021 N/A 2022 2021
Template control		June 2020

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## 1.0 INTRODUCTION

Sherwood Forest Hospitals NHS Foundation Trust (The Trust) is committed to heightening awareness of domestic abuse and providing guidance for employees, volunteers and management to address the occurrence of domestic abuse and its effects on the workplace. The Trust intends to make assistance available to employees who experience domestic abuse. This assistance may include: confidential means for coming forward for help; resource and referral information; special considerations at the workplace for employee safety; work schedule adjustments or leave necessary to obtain medical, counselling or legal assistance; and workplace relocation (if available). In responding to domestic abuse, the Trust will maintain appropriate confidentiality and respect for the rights of the employee involved.

*“Employers have a critical role in both identifying abuse and developing robust workplace policies to support employees who may be victims of violence, abuse or stalking”*  
(Ending Violence against Women and Girls Strategy 2016-2020, p39, 2016, HM Gov)

## 2.0 POLICY STATEMENT

Sherwood Forest Hospitals NHS Foundation Trust is committed to supporting colleagues who are experiencing domestic violence and abuse.

This policy applies equally to all colleagues, regardless of gender identity and sexuality, as domestic abuse and violence can occur in the any relationship. Domestic abuse may also occur within extended families.

## 3.0 DEFINITIONS/ ABBREVIATIONS

Domestic abuse and violence is 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 friend or family member regardless of sex, class, race, disability, sexual orientation, gender identity or age.

Domestic abuse is the abuse of power and control over one person by another. It can take many different forms, including physical, sexual, emotional, verbal and financial.

Domestic abuse and violence includes, but is not limited to;

- a) Physical abuse: slapping, pushing, kicking, stabbing, damage to property or items of sentimental value, female genital mutilation, attempted murder or murder.
- b) Sexual; any non-consensual sexual activity, including rape, sexual assault, coercive sexual activity, or refusing safer sex.
- c) Restricting freedom: controlling whom individuals see or where they go, what individuals wear or what they do, stalking, imprisonment, forced marriage.

- d) Emotional/psychological abuse: intimidation, social isolation, verbal abuse, humiliation, constant criticism, enforced trivial routines.
- e) Economic Abuse: stealing, depriving or taking control of money, running up debts, withholding bank cards.

#### 4.0 ROLES AND RESPONSIBILITIES

**Safeguarding** – will act as an expert resource on Safeguarding Adult, Safeguarding Children and Domestic Abuse issues, providing accessible, accurate and relevant information to managers and staff.

**Line managers** – will offer the initial and appropriate support and advice to colleagues experiencing domestic abuse and violence.

**People Directorate** - will offer informed advice and confidential support, to those colleagues experiencing domestic abuse and violence, support managers who may be managing colleagues who are survivors of domestic abuse and to facilitate appropriate support mechanisms to diminish the risk of further abuse, while they are at work.

**Hospital Independent Domestic Violence Advisor (IDVA)**

Provides information, expertise and advice to the Trust to develop and increase knowledge and organisational understanding of the links across safeguarding of children and adults living with domestic violence, and act as a source of specialist expertise to the organisation.

Offers direct specialist support and advice to colleagues experiencing Domestic Abuse, acting as their advocate within the workplace where appropriate.

Offers support and advice to managers and other SFHFT staff on how to support employees who are experiencing Domestic Abuse and to take appropriate action to prevent and reduce the risk to individuals of abuse.

#### 5.0 APPROVAL

Consultation on this policy shall be via the Joint Staff Partnership Forum (JSPF) and the Safeguarding Committee with final ratification being via the JSPF.

#### 6.0 DOCUMENT REQUIREMENTS

Sherwood Forest NHS Foundation Trust believes that no one should live in fear of domestic violence and abuse and will take a robust approach to recognise, assist and support any individual who is experiencing or being threatened by domestic abuse.

The Trust will take a survivor centered approach that is risk assessed, using the the Domestic Abuse, Stalking, Harassment and Honour Based Violence (Risk Indication Checklist see appendix A and B) and offers flexibility so that the needs of the individual are taken into account.

Raising the issue of domestic abuse takes a great deal of courage on behalf of the staff member and the response of the person disclosed to may be a crucial factor in determining whether a staff member will seek further help.

## **6.1 Identification of the issue at Work**

Whilst it is for the individual to recognise that they are a victim of domestic abuse, there could be signs or disclosure which may indicate an employee may be a victim.

These may include;

- change in job performance
- poor concentration
- increased phone calls/text messages/communications through social media and strong reactions to these
- increased sickness absence and/or lateness for work.
- Wearing of clothing which is inappropriate for the season, such as long sleeves in summer.
- sensitivity about home life
- lack of money
- special requests to leave work early or to change schedules on a regular basis (this list is not exhaustive).

### **Disclosure of abuse**

Colleagues experiencing domestic abuse may choose to disclose, report to or seek support from a union representative, a line manager, Occupational Health, the People Directorate or a colleague. Line managers will not counsel survivors, but offer information, workplace support and signpost to other services.

A colleague may have concerns a member of staff is a survivor of domestic abuse. In these circumstances the staff member is encouraged to speak to the survivor's line manager or the People Directorate, who will arrange to have a sensitive discussion with the affected staff member.

The Trust will respond sympathetically and confidentially to any member of staff who discloses that they are suffering from any kind of domestic abuse.

Once a disclosure has been made the Trust has a duty to safeguard individuals and any dependent children or adults who are deemed to be at risk. This could involve making referrals to Children's Services or Adult Social Care to enable individuals to protect themselves and dependents.

Managers must make enquires about the safety and wellbeing of any children and young people and/or adult dependents who may be at risk. Refer to the Trust safeguarding policies for children and young people and/or adults at risk. It is important to support a staff member experiencing domestic violence and abuse and/or stalking but Sherwood Forest Hospital NHS Foundation Trust also has a statutory duty to safeguard children and/or adults at risk.

Where a staff member may be unable to protect themselves and or other dependents (child and/or adult) from abuse a referral to social care may need to be made to safeguard those at risk.

It is recognised that most managers will not be experts in this area, an understanding approach and offer of basic information is all that is required. Specialist advice and support can be obtained from the Trust's Safeguarding Team on ext 3357.

Where there are concerns or a disclosure of domestic abuse has been made managers must ensure a framework pro forma in **Appendix B** is completed responding to a disclosure and looking at what action needs to be taken. This includes the safeguarding of children and adults at risk.

To support individuals who have disclosed abuse or stalking, managers must a safety plan and including safe contact number to support the health and wellbeing of individuals (please see **Appendix A**)

Support and Guidance can be sought from the Trust Safeguarding Team.

## **Confidentiality**

Any disclosure will be treated confidentially, however in circumstances of child protection, or the protection of vulnerable adults, it may be that the Trust cannot guarantee confidentiality in these cases.

## **Support for Individuals**

Where domestic abuse has been reported line managers will work with individuals with guidance from the People Directorate to minimise the impact of unplanned absences and temporary poor timekeeping.

Line managers may offer employees experiencing domestic abuse a broad range of support. This may include, but is not limited to:

- Managers should develop an understanding and promote a supportive climate within the working environment.
- Managers must be approachable to staff member – giving staff members the opportunity to talk confidentially about personal circumstances either formally e.g. regular one to one sessions, back to work interviews, or informally.
- If a disclosure of abuse is made by a colleague, proof should not be requested. Managers are advised not to pressure a survivor to leave the relationship, and offer support as and when necessary and/or appropriate.
- Ensure employees are aware of the Trust Domestic Abuse Policy [staff] .
- Managers should be alert to and recognise warning signs of domestic violence and abuse as outlined within this policy.
- Managers should not be afraid of asking/enquiring about domestic violence and abuse or stalking to staff members
- Special paid leave for relevant appointments, including with support agencies, solicitors, to rearrange housing or childcare, and for court appointments.



- Temporary or permanent changes to working times and patterns.
- Changes to specific duties, for example to avoid potential contact with an abuser in a customer facing role
- Redeployment or relocation
- Measures to ensure a safe and secure working environment, for example changing a telephone number to avoid harassing phone calls.
- Using other existing policies, including flexible working
- Access to counselling/support services in paid time
- Action to exclude perpetrator from work premises
- Where there are performance issues as a result of the individual being abused, these should be dealt with sensitively

Line managers will respect the right of colleagues to make their own decision on the course of action at every stage and should avoid being judgemental. It must be recognised that the employee may need some time to decide what to do and may try many different options during this process.

Other existing provisions (including Hospital IDVA, occupational health, counselling service, Employee Assistance Programme) will also be signposted to staff as a means of help.

### **Perpetrators of Domestic Abuse**

Domestic abuse perpetrated by employees will not be condoned under any circumstances nor will it be treated as a purely private matter, hence appropriate action will be taken in line with the Trust Allegations Against Staff Policy & Disciplinary Policy.

Where an allegation is made that a member of staff is perpetrating domestic abuse, sexual violence or stalking this should be shared with the appropriate line manager, Named Nurse for Safeguarding Adults / and a name representative from the People Directorate. A multi-disciplinary strategy meeting will be convened in order to ascertain next steps, involving the above parties.

The Trust recognises that it has a role in encouraging and supporting employees to address violent and abusive behaviour of all kinds.

Perpetrators can seek confidential advice, information and support to help them stop being violent and abusive to their partner from Respect a Charity who offer a helpline and email service. They can be contacted on 0808 802 4040 or through: [www.respectphoneline.org.uk](http://www.respectphoneline.org.uk).

All employees have a duty to report cautions and convictions to their line managers.

If the alleged perpetrator is identified as a risk to children and has a designation working with children, the local LADO should be notified. Following a fact-find and any subsequent investigation, if allegations of abuse and violence have been substantiated the Trust will make a referral to the Disclosure and Barring Service (DBS).



## **If the victim and the perpetrator work in the same organisation**

In cases where both the victim and the perpetrator of domestic abuse and violence work in the organisation, The Trust will take appropriate action. On balance, it may be more relevant to move the perpetrator however decisions would be made on a case by case basis. Each individual should have a separate identified worker to risk assess and offer support. This should be discussed at a multi-disciplinary meeting including the line manager, a senior manager, Named Nurse for Safeguarding Adults, and a representative from the People Directorate.

In addition to considering action in line with the Trust's Disciplinary Policy against the individual who is perpetrating the abuse, action may need to be taken to ensure that the survivor 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 survivor. This may include a change of duties for one or both employees or withdrawing the perpetrators access to certain computer programmes or offices, or suspension from duty pending an investigation. Any actions will be considered proportionate and appropriate on a case by case basis.

In some circumstances an individual who is experiencing domestic abuse, as well as the perpetrator, may have their details shared with the Local Authority Designated Officer (LADO). This would be where there are concerns that the perpetrator and/or the individual may pose a risk to the patients they serve or the person's ability to protect children or vulnerable dependents is impacting on their ability to see risks to the patients they care for. Such concerns would be discussed by the appropriate line manager, and Named Nurse/ Head of Safeguarding and the Allegations Against Staff Policy should be followed.

## **Staff who are experiencing stalking**

Stalking is "two or more incidents (causing distress, fear or alarm) of obscene or threatening unwanted letters or phone calls, waiting or loitering around home or workplace, following or watching, or interfering with or damaging personal property by any person, including a partner or family member."

Signs a colleague is experiencing stalking may include;

- change in job performance
- poor concentration
- increased phone calls/text messages and strong reactions to these
- increased sickness absence and/or lateness for work.

Colleagues are encouraged to disclose if they are being stalked by any individual. This could include ex partners, acquaintances, estrange family members, patients (this is not an exhaustive list).

The Trust seeks to support any colleague who disclose they are experience stalking to minimise the risk, promote safety whilst at work and also to offer support with the impact this

behaviour may have on their ability to perform effectively at work or during legal or other proceedings.

Identifying that a colleague is experiencing difficulties at an early stage will lead to appropriate help being offered, which will make it easier for the person to deal with the situation — and improve the safety of both the person and for other members of staff.

Colleagues may require time off work to attend repeated legal appointments; this should be discussed with the line manager.

## 7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

Minimum Requirement to be Monitored  (WHAT – element of compliance effectiveness within the document will be monitored)	Responsible Individual  (WHO – is going to monitor this element)	Process for Monitoring e.g. Audit  (HOW – will this element be monitored (method used))	Frequency of Monitoring  (WHEN – will this element be monitored (frequency/ often))	Responsible Individual or Committee/ Group for Review of Results  (WHERE – Which individual/ committee or group will this be reported to, in what format (eg verbal, formal report etc) and by who)
	People Directorate	Sickness and Absence, AAP, Safety Plans	Quarterly	JSPF
	Named Nurse Safeguarding Adults	AAP, DASH, Safety Plans	Quarterly	Safeguarding Committee

## 8.0 TRAINING AND IMPLEMENTATION

Sherwood Forest Hospital NHS Foundation Trust seeks to promote a culture of recognising and responding to domestic violence and abuse where clients and employees can safely disclose without fear of harm, discrimination or victimisation

The Trust will provide training at a level identified appropriate to their roles and responsibilities for all employees including line managers and People Directorate managers/advisors to raise awareness of domestic abuse and understanding of this policy.

Colleagues who directly line manage employees will be supported to ensure they feel confident to support any disclosure of domestic violence and abuse or where there are concerns or suspicions to sensitively enquire. This will include being able to:

- Identify if an employee or volunteer is experiencing difficulties
- Provide initial support
- Offer referrals
- Discuss ways to help the person stay safe in the workplace
- Understand that they are not counsellors. Counselling is to be left to trained professionals and no one should attempt to act in place of a domestic abuse expert or counsellor. The best thing a manager can do is to refer the person to the appropriate domestic abuse resources.

The Trust will include domestic violence and abuse within training for Managers whilst dealing with sickness and absence.

## 9.0 IMPACT ASSESSMENTS

This document has been subject to an Equality Impact Assessment (see completed form at Appendix D).

## 10.0 EVIDENCE BASE (Relevant Legislation/ National Guidance) AND RELATED SFHFT DOCUMENTS

### Evidence Base:

- Code of Conduct for regulated Health and Social care professionals (NMC, GMC, HCPC)
- Human Right Act 1998 which enshrines the European convention on human rights
- The UN convention on the elimination of all forms of discrimination against women
- The UN Security Council resolution 1325
- Crime and Disorder Act 1998
- The Gender Equality duty 2010 integrated within the public sector equality duty
- The EU Strategy for Equality between women and men.
- The Safeguarding Vulnerable Groups Act 2006
- The Mental Capacity Act 2005
- The Mental Health Act 1983
- The Data Protection Act 1998
- The NHS Act 2006
- The Children's Act 2004
- The Sexual Offences Act 2005

- Forced Marriage (Civil Protection) Act 2007
- The Female Genital Mutilation Act 2003
- Domestic Violence, Crime and Victims Act 2004
- Care Act 2014
- Protection of Freedoms Act 2012
- Serious Crime Act 2015
- Health and Safety Act 1974
- Employment Rights Act 1996
- NHS Safer Recruitment Standards
- Domestic Abuse Act 2021

**Related SFHFT Documents:**

- Sherwood Forest NHS Foundation Trust Domestic Abuse Policy
- Health and Safety Act 1974
- Employment Rights Act 1996
- NHS Safer Recruitment Standards
- Disciplinary Policy
- Management of Sickness Absence Policy
- Allegations Against Staff Policy
- Safeguarding Children Policy
- Safeguarding Adults Policy

## **11.0 KEYWORDS**

N/A

## **12.0 APPENDICES**

APPENDIX A: SAFETY PLAN AT WORK

APPENDIX B: Proforma following disclosure of domestic abuse by a staff member

APPENDIX C: Useful Contact Numbers

APPENDIX D: EQUALITY IMPACT ASSESSMENT FORM (EQIA)

## **APPENDIX A SAFETY PLAN AT WORK**

Safety Plan at Work Example
<b>Travel to and from work:</b> When I am travelling to work I can do the following <hr/> <hr/>
If I use public transport I can <hr/> <hr/>
When I am leaving work I can : <hr/> <hr/>
Ask security or a suitable colleague to escort me to my car <hr/>
Vary my route <hr/>
Park my car securely at <hr/>
<b>At work I can :</b> Tell _____ about my situation Move my desk away from the window / change ward ..... Change my work telephone number ..... Be aware of my safe exits ..... Map different exit routes out of the building ..... Ask for calls not to be put directly through to me/ screened ..... Request for a change of e mail address .....

Let ..... know I am leaving the building and will return at.....

.....

Ensure I am not alone in the building.....

.....

### Working Patterns:

.....

Ensure that I am not lone working

.....

Consider flexible working patterns.....

Request for a change of base.....

### Safe Contact:

.....

Give my employer a safe contact number

.....

Provide safe emergency numbers

.....

Discuss safe methods of contacting me

.....

Discuss a code word with my

.....

Carry with me a personal alarm/ work safety devise.....

.....

Agree what needs to happen if I do not return to work unexpectedly

.....

.....



## **APPENDIX B**

### **Proforma following disclosure of domestic abuse by a staff member**

**Please ensure that this pro forma is kept confidentially with restricted access**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Agreed Method of Safe Contact

\_\_\_\_\_

Safe Contact Number

\_\_\_\_\_

DOB \_\_\_\_\_

Area of Work \_\_\_\_\_

Job Title and place of work

\_\_\_\_\_

\_\_\_\_\_

Details of Alleged  
Perpetrator \_\_\_\_\_

Relationship to  
employee \_\_\_\_\_

Details of any children within the relationship or who have contact with the alleged perpetrator:

NAME	DOB	Address	Relationship

Details of any adults at risk:

NAME	DOB	Address	Relationship

People Directorate contacted: Yes/No Date \_\_\_\_\_

Name of People Directorate staff member \_\_\_\_\_

Are there any safeguarding concerns regarding:

Children Yes/No

Adults at risk Yes/No

Have you contacted the Named Nurse for Safeguarding? Yes/No

Date: \_\_\_\_\_

Name of the Safeguarding Team member informed

### Checklist

	Yes	No
Proforma completed		
Safe methods of contact agreed		
Safety plan at work completed		
Staff member given copy of sources of help including 24hr Nottinghamshire domestic violence and sexual violence helpline number: <b>0808 800 0340</b>		
DASH form completed (repeated if further disclosure of repeated incidents)		
Are there any children within the relationship?		
Are there any other adults at risk?		
Safeguarding team involved		
Social care/ Police involvement		
HR informed		
Does the alleged perpetrator work within the organisation or with children/adults at risk?		
Review of support needed		
Flexible working arrangements		

**Action Plan agreed**

Action	Timescale	By Whom
Agreed Review date:		

**Completed by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Designation:** \_\_\_\_\_

## **APPENDIX C: Useful Contact Numbers**

<b>For Female survivors</b>	
<b>Helpline Numbers</b>	
Nottinghamshire domestic violence 24 hour freephone helpline number	Tel: 0808 8000 340 Text phone: 0808 8000 341 with Language Line
National Domestic Violence Helpline 24 hour free phone	Tel: 0808 2000 247
Topaz Centre (Sexual Abuse and Violence)	Tel: 0800 0859993
Nottingham Sexual Violence Support Services (NSVSS)	Tel: 0115 941 0440
Refs 4 Pets (If animals may be at risk and are a barrier to leaving).	Tel: 07971 337 264
<b>North Nottinghamshire Providers</b>	
Nottinghamshire Women's Aid (NWA)	Tel: 01909 533 610
Newark Women's Aid	Tel: 01636 679 687
North Nottinghamshire Independent Domestic Abuse Service (NNIDAS)	Tel: 01623 683250
<b>South of the County and City providers</b>	
Juno Women's Aid	0808 8000340
Broxtowe Women's Project	Tel: 01773 718555
Midlands Women's Aid	Tel: 0300 3020035
	Tel: 0115 925 7647
<b>For Male survivors</b>	
<b>Men's Advice Line</b> Tel: 0808 01 0327 <a href="http://www.mensadvice.org.uk">www.mensadvice.org.uk</a>	Help and support for heterosexual, gay, bi and transgender male survivors of domestic violence and abuse
Victim Support Tel: 0300 303 1947	Supports standard and medium risk male survivors of domestic violence and abuse
GALOP 0800 9995428	Specialist support for lesbian, gay, bisexual and transgender (LGBT) people experiencing domestic violence
<b>For male/female perpetrators</b>	
Respect Phonenumber Tel: 08088024040 <a href="http://www.respectphonenumber.org.uk">www.respectphonenumber.org.uk</a> Email: <a href="mailto:info@respectphonenumber.org.uk">info@respectphonenumber.org.uk</a>	Help and Information for male and female perpetrators

<b>Forced Marriage</b>	
Forced Marriage Unit	Tel: 020070080151
Karma Nirvarna Helpline	Tel: 08005999247
<b>FGM</b> NSPCC 24hr FGM Helpline	Tel: 08000283550
<b>Nottinghamshire Public Protection Unit (PPU)</b>	
<b>Mansfield/Ashfield</b>	01623 483947
<b>Bassetlaw and Newark</b>	01909 500999 ext 7530 / 7531
<b>City</b>	0115 967 6999
<b>Nottingham South</b>	0115 944 4014
<b>Other Support Agencies</b> <ul style="list-style-type: none"> <li>• Amber House Refuge: 0115 941 4279</li> <li>• Shine (Housing related support)-0115 822 0833</li> <li>• Umuada Refuge-0115 933 8202</li> <li>• Victim Support (For Men and Women): 0845 450 3899 (8-8)</li> <li>• Childline: 0800 1111</li> <li>• or access to refuge contact: 0808 8000 340</li> <li>• Shelter: 0808 800 4444</li> </ul> Framework: 0115 841 7711	
<b>Equation – Support for male survivors</b>	0800 995 6999 (mon-fri, 09.30 -4.30) <a href="mailto:helpline@equation.org.uk">helpline@equation.org.uk</a>
<b>Derbyshire DA Helpline</b>	08000 198 668

## APPENDIX D - EQUALITY IMPACT ASSESSMENT FORM (EQIA)

<b>Name of service/policy/procedure being reviewed: Domestic Abuse Policy (Staff)</b>			
<b>New or existing service/policy/procedure: Existing policy</b>			
<b>Date of Assessment: 16/01/2024</b>			
<b>For the service/policy/procedure and its implementation answer the questions a – c below against each characteristic (if relevant consider breaking the policy or implementation down into areas)</b>			
<b>Protected Characteristic</b>	<b>a) Using data and supporting information, what issues, needs or barriers could the protected characteristic groups' experience? For example, are there any known health inequality or access issues to consider?</b>	<b>b) What is already in place in the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening?</b>	<b>c) Please state any barriers that still need to be addressed and any proposed actions to eliminate inequality</b>
<b>The area of policy or its implementation being assessed:</b>			
<b>Race and Ethnicity</b>	This guideline provides equitable care for all irrespective of race or ethnicity	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None
<b>Gender</b>	This guideline provides equitable care for all irrespective of gender. It does acknowledge that women are affected more often and are more likely to experience repeated harm/injury	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None
<b>Age</b>	This guideline provides equitable care for all irrespective of age	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None
<b>Religion</b>	This guideline provides equitable care for all irrespective of religion	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None
<b>Disability</b>	This guideline provides equitable care for all irrespective of disability	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None
<b>Sexuality</b>	This guideline provides equitable care for all irrespective of sexuality	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None

<b>Pregnancy and Maternity</b>	This guideline provides equitable care for all irrespective of pregnancy and maternity	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None
<b>Gender Reassignment</b>	This guideline provides equitable care for all irrespective of gender reassignment	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None
<b>Marriage and Civil Partnership</b>	This guideline provides equitable care for all irrespective of marriage and civil partnership	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None
<b>Socio-Economic Factors (i.e. living in a poorer neighbourhood / social deprivation)</b>	This guideline provides equitable care for all irrespective of socio-economic factors	This guideline replaces the previous Domestic Abuse (Staff) Policy.	None
<b>What consultation with protected characteristic groups including patient groups have you carried out?</b> This guideline acknowledges the needs of employees who require support from an organisational duty of care perspective. To ensure that it is compliant with all legislation it has been shared with HR, clinical and safeguarding colleagues for consultation and feedback to ensure that it effectively meets the needs of all staff.			
<b>What data or information did you use in support of this EqIA?</b> N/A			
<b>As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments?</b> Np			



<p><b>Level of impact</b></p> <p>From the information provided above and following EQIA guidance document Guidance on how to complete an EIA (<a href="#">click here</a>), please indicate the perceived level of impact:</p> <p>Low Level of Impact</p> <p>For high or medium levels of impact, please forward a copy of this form to the HR Secretaries for inclusion at the next Diversity and Inclusivity meeting.</p>
<p><b>Name of Responsible Person undertaking this assessment:</b> Lisa Nixon</p>
<p><b>Signature:</b> <i>Lisa Nixon</i></p>
<p><b>Date:</b> 16/01/2024</p>