Domestic Abuse Routine Enquiry

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Background to Routine Enquiry

• In 2008 the Scottish Government Health Department outlined a commitment of NHS Scotland to make tangible and sustainable progress in tackling Gender Based Violence (GBV), in particular domestic abuse and childhood sexual abuse (adult survivors)
Background to Routine Enquiry

Six priority areas
- Mental Health Services (*)
- Addictions Services (*)
- Sexual & Reproductive Health Services
- A&E
- Primary Care
- Maternity Services

(* men)

This is now being rolled out into HSCP
What is Routine Enquiry?

- Routine Enquiry involves asking the direct questions in relation to abuse of a specified population group when they present to a service.
- This can be at a particular point in their use of the service, or on all occasions at which they present. It does not matter whether there are any signs or indicators of abuse.
Aim of Routine Enquiry

• The overarching aim of RE is to support, diagnose and assess women who have suffered from GBV to ensure early, appropriate intervention and care

• A disclosure of abuse also means that the therapeutic intervention will be more meaningful and will be specific for the individual
Rationale for RE

• By not asking, you may miss the opportunity to offer support and help

• How you respond as a practitioner may differ if you realise that a service user is experiencing abuse. For example, you may be frustrated that she keeps missing appointments, but if you know she is being locked in the house by her partner, you will approach her differently

• The protection of service users can be enhanced by early disclosure and intervention
Continued

• The service user’s safety may be jeopardised by failing to take into account that s/he is experiencing abuse, as it may mean that inappropriate advice is given or that treatment is unsafe.

• Routine enquiry is core practice and practitioners are already working with many service users who have experienced abuse.

• There may be concerns about any children in the family, who could be at risk of abuse or experiencing it already.
Learning

• The prevalence of abuse has significant implications for the health and social care system, currently and in the future

• Increased detection can mean earlier intervention to access appropriate support and services leading to improved outcomes
Learning Continued

• Without a structured programme in place to support staff, the question is less likely to be asked

• Survivors of abuse may be reluctant to disclose without direct questioning because of stigma or the fear of not being believed

• Women find it acceptable to be asked about domestic abuse
Health Impact of Gender Based Violence including Domestic Abuse

• Homicide, suicide and maternal mortality
• Physical signs such as broken bones, other physical injuries
• Alcohol and drug abuse
• Mental health issues, including anxiety, depression, eating disorders or PTSD
• Poor sexual health ie STI’s pelvic inflammatory disease
• Miscarriage or low birth weight babies
Routine Enquiry Pilot with Housing

• Scottish Government is currently piloting a new housing application form which will be used by the Housing Options team when a person presents as homeless

• There is a specific question on the application form which would be routinely asked *

• Specific staff will receive training on how to respond if someone discloses an incident of
Health & Social Care Partnership Roll Out

• Following on from the Housing Pilot other departments and services are keen to be trained. S A Health & Social Care Partnership is committed to rolling out RE training

• Training is under the wider public protection banner involving the Child Protection and Adult Protection Committees

• 16 Days of Action in North, South & East
Domestic Abuse & Routine Enquiry
Event in South Ayrshire
A better awareness of domestic abuse and signposting

How to approach asking about domestic abuse

A better understanding of abuse and strategies about routine enquiry

About all the different agencies that can be contacted
GP Pilot – North Ayrshire

• GP practice was approached to undertake RE from May 2015 – March 2016
• Bespoke awareness raising training was developed by North and East Ayrshire Women’s Aid
• A champion was identified within the practice
• NA Women’s Aid provided a key worker for rapid response referrals
Experiences of Implementing RE
Summary
‘Tackling VAWG is Everyone’s Business’

- Raise Awareness
- Multi-Agency Partnership Working
- Showcase Good Work
Any Questions and Contact Details

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