Multi-agency Domestic Abuse Joint Protocol

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Document Control

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Implementation of new version control.			
Oct 2021	V1	Amending the document in line with the new DA Act 2021 and the new DA Structure in Lincolnshire. Main items amended/added: • Domestic abuse definition • Insertion of Children as victims of DA section 4. • All references to Domestic Abuse Core Priority Group changed to Lincolnshire Domestic Abuse Partnership, as DA CPG no longer in situ as of April 1st 2021.	Domestic Abuse Project Officer
Oct 2023	V1.2	• Amended EDAN Lincs to LDASS as part of the new commissioning. • Update of hyperlinks throughout the protocol • 3.5 insertion of Non-Fatal Strangulation section	Domestic Abuse Project Officer
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Mar 2024	V1.6	Update within whole document to reflect the change in name for Domestic Homicide Reviews [DHR] to now being called Domestic Abuse Related Death Reviews [DARDR] and Serious Case Reviews [SCR] being called Serious Safeguarding Practice Reviews [SSPR].	Domestic Abuse Project Officer

		Update on Child to Paren/Carer Abuse section.	
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1. INTRODUCTION

Domestic Abuse has a significant impact on individuals, families and our communities. It also has major implications for service providers and agencies across Lincolnshire and increases the demand on our services and organisations.
Nationally, nearly 1 million women experience at least one incident of domestic abuse each year. 1 in 10 men report they have experienced domestic abuse and at least 750,000 children a year witness domestic abuse. Partners working within our universal and targeted services, as well as the general public can be affected; whether through intimate relationships, family members, friends or our colleagues at work.

By working together in Lincolnshire we can:

1. Reduce the number of people in Lincolnshire who experience domestic abuse;

2. Reduce the length and severity of abuse for victims;

3. Reduce the number of perpetrators of domestic abuse through prevention, education and criminal justice interventions; and

4. Create a culture in the county that never tolerates domestic abuse.

1.1 Aim

The Lincolnshire Domestic Abuse Partnership [LDAP], the Lincolnshire Safeguarding Children Partnership [LSCP] and the Lincolnshire Safeguarding Adults Board [LSAB] regard domestic abuse as a priority issue to be tackled by partner agencies and have jointly produced this protocol as guidance on the action to be taken by practitioners.

These multi-agency procedures are for all staff and managers working within any Lincolnshire service that supports adults and/or children who may be experiencing domestic abuse directly or indirectly. It outlines practical, good practice approaches for responding to adults and families who are affected by domestic abuse.

Our vision is to prevent anyone in Lincolnshire suffering domestic abuse.

The guidance outlined in this document recognises that our priority in this area is the safeguarding of children and vulnerable adults. It does not replace existing safeguarding children or adults procedures. As such this protocol should be read in conjunction with;

- Multi-Agency Domestic Abuse Framework for Information Sharing and Governance
- Multi-agency Risk Assessment Conference (MARAC) Operating Protocol.
- Welcome to the Lincolnshire SCP Policy and Procedures Manual Multi-agency Safeguarding Adults Board Policies and Procedures
- Your own internal agency policies and procedure

2. WHAT IS DOMESTIC ABUSE?

2.1 Definition of Domestic Abuse

The Home Office 2021 definition of domestic violence and abuse now states:

Behaviour of a person ("A") towards another person ("B") is "domestic abuse" if A and B are each aged 16 or over and are personally connected* to each other, and the behaviour is abusive.

Behaviour is "abusive" if it consists of any of the following:

a) physical or sexual abuse;
b) violent or threatening behaviour;
c) controlling or coercive behaviour;
d) economic abuse;
e) psychological, emotional or other abuse;

It does not matter whether the behaviour consists of a single incident or a course of conduct.

*Personally connected: They are, or have been, married; civil partners; have agreed to marry one another; have entered into a civil partnership agreement; are or have been in an intimate personal relationship; they have or have had a parental relationship in relation to the same child; or are relatives.

Controlling behaviour is: 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 and regulating their everyday behaviour.

Coercive behaviour is: 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.

Coercive and Controlling behaviour became a criminal offence on 29th December 2015 Controlling or coercive behaviour: statutory guidance framework - GOV.UK (www.gov.uk)

3. ASSOCIATED FORMS OF DOMESTIC ABUSE

3.1 Teenage abusive relationships

As with adults, abuse in teen relationships doesn't just cover physical violence. Other examples of this type of abuse include:
Pressuring you into having sex.
Controlling behaviour including what friends you can see or speak to and where you go.
Jealousy or anger.
Threatening to put lies, personal information, pictures on social networking sites.
Constant name calling and comments.

Research completed by the NSPCC into partner exploitation and partner violence in teenage intimate relationships revealed that for girls in particular, having an older partner, and especially a “much older” partner, was a significant risk factor. Overall, three-quarters of girls with a “much older” partner experienced physical violence, 80 per cent emotional violence and 75 per cent sexual violence.

In those circumstances where the victim is under 18 years old and the perpetrator is 18 years or above, or if both victim and perpetrator are under 18 years, this should also be treated as a child safeguarding concern. A referral/signposting can also be made to specialist domestic abuse services when deemed appropriate. In the event that a child is known to be involved in a violent relationship, the practitioner should consider undertaking an Early Help Assessment. Should the practitioner subsequently decide they would like a consultation with a Team around the Family (TAF)Advisor regarding their next steps this should be arranged**.** During the course of any such discussions the practitioner may find it helpful to consider with the TAF Consultant whether the matter meets the threshold for social care intervention.

If the practitioner believes the child is at immediate risk then they should contact the police and initiate safeguarding procedures by contacting the Children’s Services Customer Services Centre (CSC) on **01522 782111** and reporting a safeguarding concern; e.g. a child involved in a relationship with a violent girlfriend/boyfriend. Outside of normal working hours contact should be made to the Emergency Duty Team on **01522 782333**.

3.2 Abuse through technology

As a professional, the case you are involved with may have elements of online/digital abuse. Many of us now use mobile, social media, e-mail and shop online for example. If someone wants to upset, scare or intimidate another person they may use technology to do it.

This abuse can take various forms: bullying, harassment, stalking, domestic abuse, trolling, and/or hate campaigns.

Questions you may wish to consider:

- Is the victim being abused in multiple ways and means?
- How long has it been going on for?
- Is it escalating?
- What is the motivation of the abuser?
- What is the victim worried will happen?
- Mental state of the victim – are they afraid/suicidal?

You may wish to refer to the Get Safe Online website for further advice as a professional, or to guide the person who is being abused online to advice on the steps they can take to improve their online security via The Cyber Helpline

3.3 Child to Parent/Carer Abuse

The official definition of domestic abuse covers individuals from the age of 16 years. However, there are occasions of familial abuse where the parent/victim is over the age

of 16 years but the child displaying harmful behaviour is under that age. As MARAC is victim focused, if the case is high risk, a referral of child to parent/carer abuse should be made to MARAC. If they are not at immediate harm, please contact the specialist domestic abuse services in the appropriate area, or if you want advice or support regarding a concern.

The child displaying abusive behaviour should be referred to Children's Services through the Customer Services Centre. It is important to note that whether a child is a victim or is displaying harmful behaviour, a referral should be made to Children's Services and a safeguarding response facilitated.

If the concerns do not meet the threshold for a social work assessment under the Children Act (1989), the referrer will be informed. The practitioner may be advised by to consider early help support which will be detailed within the outcome letter.

The practitioner may then decide they would then like a consultation with a TAF Consultant regarding their next steps. The practitioner can also discuss any screening decisions given regarding their safeguarding referral with the Customer Service Centre and the Integrated Front Door.

If the risk does not meet MARAC threshold, then it should always be discussed if the parent/carer would like a referral to domestic abuse outreach services, (LDASS) who can also offer interventions to the CYP displaying harmful behaviours. Lincolnshire offers a Child to Parent Carer Abuse eLearning and toolkit. Full details of the eLearning course can be accessed here: Child to Parent Carer Abuse eLearning and all associated documentation is available on the LSCP Local Resources site under the 'Child to Parent Carer Abuse' section. LSCP Local Resources site,

3.4 Stalking or Harassment

The definition for Stalking is from the Suzy Lamplugh Trust as there is:

'A pattern of fixated and obsessive behaviour which is repeated, persistent, intrusive and causes fear of violence or engenders alarm and distress in the victim.'

Stalking can consist of any type of behaviour such as regularly sending flowers or gifts, making unwanted or malicious communication, damaging property and physical or sexual assault. If the behaviour is persistent and clearly unwanted, causing you fear, distress or anxiety then it is stalking and you should not have to live with it.

The British Crime Survey (2006) suggests that up to five million people experience stalking or harassment in any given year and that many victims will suffer up to 100 incidents before talking to the police.

The most common forms of STALKING/harassment are:

- Frequent, unwanted contact e.g. appearing at the home or workplace of the victim.
- Telephone calls, text messages or other contact such as via the internet (i.e. social networking sites).
- Driving past the victim's home or work.

- Following or watching the victim.
- Sending letters or unwanted gifts to the victim.
- Damaging the victim's property.
- Burglary or robbery of the victim's home, workplace, vehicle or other.
- Threats of harm to the victim and/or others associated with them (including sexual violence and threats to kill).
- Harassment of people associated with the victim (e.g. family members, partner, work colleagues).
- Physical and/or sexual assault of the victim and even murder.

Is someone at risk?

If someone is at immediate danger, call 999. The National Stalking Helpline can help with advice and support. Telephone: 0808 802 0300 or http://www.stalkinghelpline.org

Paladin National Stalking Advocacy Service: https://paladinservice.co.uk/

When stalking is identified, the 8 Stage Homicide Timeline is a good resource to help understand the levels of stalking taking place, this timeline is available on the Professionals Hub.

3.5 Non-Fatal Strangulation

This offence came into force on 7th June 2022 and can be used for any offences committed on or after this date. Non-fatal strangulation is when there is an obstruction of the blood vessels and or airways by external pressure to the neck, resulting in decreased oxygen being supplied to the brain.
Someone can be strangled in many ways. It could be by a hand or hands on the neck, being put in a headlock or by something wrapped tight around the neck.
For more information visit the Institute for Addressing Strangulation as well as useful resources on our Professionals Hub.

3.6 Forced Marriage

A forced marriage is where one or both people do not (or in cases of people who lack mental capacity), cannot consent to the marriage and pressure or abuse is used. The practice of Forced Marriage is recognised in the UK as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights.

The pressure put on people to marry against their will can be physical (including threats, actual physical violence and sexual violence) or emotional and psychological (for example, when someone is made to feel like they're bringing shame on their family). Financial abuse (taking your wages or not giving you any money) can also be a factor.

There are national guidelines for responding to cases of forced marriage.

Multi-Agency Statutory Guidance for dealing with forced marriage 2014. Practitioners should pay particular attention to Chapters 5 and 6.

Multi-Agency practice guidelines: Handling cases of forced marriage 2014

- Any case of Forced Marriage must be reported to Lincolnshire Police by calling 999.

- If the victim is under the age of 18 years, a referral should also be made to Lincolnshire County Council Children's Services. Telephone: 01522 782111.

- If the victim is over the age of 18 years and has additional care and support needs, a learning disability or there are any concerns about mental capacity, a referral should be made to Lincolnshire County Council Adult Care. Telephone: 01522 782155.

Additional support is available by contacting the Forced Marriage Unit: https://www.gov.uk/forced-marriage Telephone: 020 7008 0151

The Forced Marriage Unit has also developed an e-learning package: eLearning training for professionals
Information for people directly affected by forced marriage and this is also available.

Please be aware of recent legislation which changes the minimum age to marry in the UK to 18 Marriage and Civil Partnership (Minimum Age) Act 2022 (legislation.gov.uk)

3.7 Honour Based Abuse

Honour based abuse refers to crimes or incidents committed to protect or defend the honour of a family and/or community. It can take many forms including harassment, criminal damage, arson, sexual assault, forced marriage, kidnap and even murder. When dealing with potential victims it is important to recognise the seriousness/immediacy of the risk. Consider the possibility of forced marriage, abduction, missing persons and murder. Incidents that may precede a murder include:

- Forced marriage
- Domestic abuse
- Attempts to separate or divorce
- A pre-marital relationship
- Pre-marital conflict
- Pregnancy
- Threats to kill or denial of access to children
- Pressure to go abroad
- House arrest and excessive restrictions
- Denial of access to the telephone, internet, passport and friends

When dealing with victims, do not speak with them in the presence of their relatives. Women that return to their families should be offered escape plans.

Please seek further advice from Lincolnshire Police and if someone is at immediate danger then call 999.

Karma Nirvana provide information and support for male and female victims of forced marriage and honour-based abuse. Telephone: 0800 5999 247 Website: www.karmanirvana.org.uk

3.8 Female Genital Mutilation

Female genital mutilation (FGM) is child abuse and violates the rights to health, security and physical integrity of the person and to be free from torture, cruel and degrading treatment. Professionals have a duty to safeguard everyone, including women and girls, which means tackling FGM is an integral part of their role. Effective action must be taken to do so, without allowing themselves to be inhibited by fear of doing or saying the wrong thing. FGM is sometimes known as 'female circumcision' or 'female genital cutting'.

FGM is illegal in the UK. It is also illegal to take a British national or permanent resident abroad for FGM or to help someone trying to do this. Mandatory reporting of FGM has been in place since October 2015.

Even though FGM is part of the National definition of domestic abuse, the lead of FGM in Lincolnshire has passed to the Lincolnshire Safeguarding Children's Partnership where you will find their policy: Female Genital Mutilation. The LSCP also host training on FGM via ENABLE.

Other Useful Key Links:

- The latest statutory guidance on FGM, published 1st April 2016: https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation
- The Home Office resource pack on FGM
- The Department of Health Publications:
  - Safeguarding women and girls at risk of FGM - This document provides practical help to support NHS organisations developing new safeguarding policies and procedures for FGM.
  - FGM E Learning – for Health colleagues is also available via NHS Health Education England
- The NSPCC runs a specific FGM Helpline:
  Email: fgmhelp@nspcc.org.uk or Telephone: 0800 028 3550

If you know someone in immediate danger, contact Lincolnshire Police. If you believe a child or young person under the age of 18 years might be suffering or is likely to suffer significant harm (including any mistreatment or abuse), contact the Children Services CSC.

The latest statutory multi-agency guidance on female genital mutilation should be read and followed by all persons and bodies in England and Wales who are under statutory duties to safeguard and promote the welfare of children and vulnerable adults.

This guidance should be considered together with other relevant safeguarding guidance, including (but not limited to):

- Working Together to Safeguard Children
- Working Together to Safeguard People (Wales) This guidance covers safeguarding children and adults.

It is not intended to replace wider safeguarding guidance, but to provide additional advice on female genital mutilation. The information in this guidance may also be relevant to bodies working with women and girls at risk of FGM or dealing with its consequences.

4. Children as a Victim of Domestic Abuse

The Domestic Abuse Act 2021, introduced in April 2021, recognises that children who live in households affected by domestic abuse are victims in their own right, whether they experience the abuse directly or indirectly. Practitioners should therefore consider and assess the impact of domestic abuse whenever a child discloses abuse or there are concerns about their safety or wellbeing. Research shows that exposure to domestic abuse can have significant and long-term effects on a child's wellbeing and development.
Lincolnshire County Council Children's Services introduced domestic abuse as a category of harm for families being supported within Child Protection. This was implemented to recognise the complexity of domestic abuse within the family and specifically the impact on the children.
Local findings show that domestic abuse is one of the main causal factors of child neglect. Professionals should try to understand the holistic lived experience of the child(ren) with a view of understanding how the domestic abuse is impacting both physically and emotionally on the child(ren) as well as considering parental capacity to provide for care needs.

If you are not working with the children, you should always consider making referrals for support to be offered to them, see section 7.9 and 7.10 regarding this.

5. Diversity

This section includes additional barriers, risks or considerations for practice relating to diversity including:

- 5.1 Cultural and language barriers
- 5.2 Disability
- 5.3 LGBT+
- 5.4 Male Victims
- 5.5 Older People

5.1. Cultural and language barriers

Consideration should be given by all agencies of cultural differences between people from communities within the UK and from other countries as they could impact on the recognition, disclosure and prevention of DA.

Appropriate advice should be sought by practitioners when dealing with cultural differences as these are significant to them seeking help. This may include traveller communities, different religions and a range of beliefs about marriage, divorce, gender, sexual orientation, and domestic abuse as a taboo issue.

Limited English language may also be a significant barrier for victims of abuse seeking assistance from support agencies. Where there are language barriers practitioners should always use an appropriate interpreter. Family and friends should not be used to interpret in domestic abuse cases.

Practitioners should consider general language used at all times when working with and making written records of service users, ensuring that the language used to describe a situation or person is accurate, clear, non-inflammatory or judgmental.

5.2. Disability

If a person has a disability, whether male or female, their chances of experiencing domestic abuse are greatly increased:

- Disabled women are twice as likely to experience domestic abuse as non-disabled women. (Women's Aid 2012). Disabled men and men with mental health problems are at greater risk of domestic abuse than non-disabled men. (Respect 2014).

- Studies show that 80% of disabled women have been sexually abused (Women's Aid 2012).

- 48% of cases involving older adults are those that cannot physically care for themselves (WA 2012).

- 1 in 4 women experience domestic abuse. Therefore 50% of disabled women experience domestic abuse.

Often the carer is a partner or family member. Research by Women's Aid (2008) found that many people with disabilities were afraid to speak out about the abuse due to fear of the carer (who is a partner or family member) leaving and them being left alone. They were reliant on the perpetrator for care and support, they were also afraid of losing their independence and losing their care package. Many people were afraid of not being believed as the perpetrator who the carer was seen by friends and family as a 'hero' and 'selfless.' The ability to disclose may be reduced if the carer/perpetrator attends all appointments and is at all contacts.

Research has also found that sexual abuse was used as another form of control and power over women with disabilities as well as being used to humiliate and degrade.

Abuse can include with-holding medication, over medicating, refusing care e.g. taking to the toilet, washing, not feeding the person, threats to leave. The person's impairments are used to belittle and exercise control.

Disabled victims of domestic abuse are more likely to develop care and support needs including mental health, substance misuse and long term health effects.

5.3. Lesbian, Gay, Bisexual, Transgender (LGBT+) – For more information on LGBT+ visit the Galop website.

There may be additional barriers to reporting domestic abuse for lesbian, gay, bisexual, transgender people. Approximately 25% of LGBT+ people suffer through violent or threatening relationships with partners or ex-partners, which is the same rate as in heterosexual women. As with all types of domestic abuse, the problem is under-reported, but in same sex relationships the victim is often afraid of revealing their sexual orientation or the nature of their relationship.

There are a number of aspects that are unique to LGBT+ domestic abuse. The perpetrator may threaten to 'out' the victim to friends, family, colleagues, and others as a method of control. For some people they may have been made to believe that they are experiencing this abuse because they are lesbian, gay, bisexual, transgender. In addition, a lot of national publicity about domestic abuse has historically been about heterosexual relationships, which could mean that there is a lack of understanding of domestic abuse by people in same sex relationships. This lack of understanding means that some people may not:

- Believe it happens in LGBT+ relationships.
- Recognise their experience as domestic abuse if it does happen to them.
- Know how to respond if they see domestic abuse being experienced by their friends.

5.4. Male Victims

There are myths about men who suffer domestic abuse, with some people thinking that it doesn't happen to men. Men who are victims are not 'real men' and that the law only protects women. These myths are of course completely untrue, but it is possibly why 29% of male domestic abuse victims do not tell anybody about the abuse (Crime Survey England and Wales). Assuming Lincolnshire follows the national picture, this means that in the County there may be 2,439 male victims of domestic abuse who suffer in silence every year.

In Lincolnshire all domestic abuse services and support are available to ALL victims see section 9 for Lincolnshire services.

National Domestic Abuse Services for male victims:
Mankind Initiative 01823 334244
Men's Advice Line 0808 1689 111

5.5. Older People

Older people might not identify themselves as victims of domestic abuse, particularly if the abuser is not their husband/wife. There is an increase in adult child to parent abuse - some research suggests in up to 25% of cases where older women are abused. Financial abuse is also a common factor, particularly when an adult child is the abuser.

There may be fewer services involved with older people and they could be more isolated, making it difficult to report the abuse or have someone else who will notice and report the abuse.

Additional barriers facing older people could include:

- Abuser may also be their carer.
- The victim may care for the abuser, making them feel additional guilt for leaving.
- The abuser may be his/her child(ren) – additional barriers to reporting a child and criminalising a son or daughter.
- Many older survivors have lived in the same area, or even house, for many years. It may be more difficult for them to access new social networks and facilities.
- Refuges are often not equipped to accommodate people with mobility problems or complex health problems

Information and support is available via Hourglass, 24hr 0808 8088141

6. Perpetrators of Domestic Abuse

Lincolnshire Domestic Abuse Partnership is responding to the needs of all domestic abuse perpetrators through the development and delivery of training and interventions aimed at reducing interpersonal violence. Individuals who use violence often have difficulties with emotional management, substance use and mental health which, if addressed, may reduce the likelihood of ongoing domestic abuse. Some perpetrators of domestic abuse may not be motivated to seek help. Engagement with support and intervention is significantly increased if professionals remain open and non-judgmental in their attempts to understand the perpetrators' reasons and motivations for using abusive behaviours. Continuing to increase our understanding of the complex reasons for domestic abuse is an essential part of reducing the harm caused to the lives of those affected by it.

People can be abusive without using physical violence, and this can have a devastating impact on families. Some perpetrators can appear to be caring and co-operative with agencies. Practitioners should be aware that some perpetrators may also try to manipulate professionals, their partners and other family members. Perpetrators may deny or minimise abuse, focus on the actions of others as the reason for their behaviour or avoid contact with those who seek to challenge them.

Domestic abuse has traditionally been understood as a crime perpetrated by dominant controlling men against vulnerable women. In reality, the reasons for abuse occurring within intimate and familial relationships involve far greater complexity than this assumption would suggest. Research spanning over 50 years has consistently found that men and women self-report perpetrating domestic abuse at similar rates, but women are twice as likely as men to be injured or killed during a domestic assault. Like all behaviours, interpersonal violence is best understood as being on a continuum of severity, and those at different points on that continuum require different approaches.

Lincolnshire are currently looking at local provisions for perpetrators of domestic abuse, however, in the meantime there are national services to support those who chose to abuse.

Respect, is an organisation aimed at promoting best practice in work with perpetrators, has produced guidelines for working with male perpetrators.

Drive is an innovative intervention that aims to reduce the number of child and adult victims of domestic abuse by disrupting and changing the perpetrators' behaviour.

7. AS A PROFESSIONAL HOW DO I RESPOND?

7.1 Professional Curiosity

Many Domestic Abuse Related Death Reviews and Child Safeguarding Practice Reviews refer to a lack of professional curiosity or respectful uncertainty. Practitioners need to demonstrate a non-discriminatory approach and explore the issues and formulate judgements that translate into effective actions in their dealings with children, adults and families. This should be matched by an organisational culture which supports its staff in open-ness, constructive challenge and confidence to practice sensitive and challenging circumstances at the front line.

It is vital that professionals understand the complexity of domestic abuse and are curious about what is happening in the child, adult and perpetrator's life.

Professional curiosity is the capacity and communication skill to explore and understand what is happening within a family rather than making assumptions or accepting things at face value.

Practitioners should never avoid asking the difficult questions, sharing concerns with colleagues or your supervisor as a "fresh pair of eyes". Looking at a case can really help to maintain good practice standards and develop a critical mind-set.

Professional curiosity is much more likely if practitioners:

- are supported by good quality training to help them develop;
- have access to good management, support and supervision when working with challenging situations of domestic abuse which will impact on staff working with families;
- 'walk in the shoes' (have empathy) of the child and/or adult to consider the situation from their lived experience; and
- remain diligent in working with the family and developing the professional relationships to understand what has happened and its impact on all family members.

Practitioners should always try to see all parties separately. However, when that is not possible, and particularly when a victim is not being seen alone, professionals should also be alert to the following behaviours they may observe. If these signals are present, the practitioner should find a way of seeing the suspected victim alone:

- the victim waits for their partner to speak first;
- The victim glances at their partner each time they speak, checking their reaction;
- The victim smooths over any conflict;
- The suspected perpetrator speaks for most of the time;
- The suspected perpetrator sends clear signals to the victim, by eye/body movement, facial expression or verbally, to warn them;
- The suspected perpetrator has a range of complaints about the victim, which they do not defend.

Staff must be cognisant to the needs of young people (aged 16 years or above) who may be experiencing inequality and/or violence in their relationships and be able to advise on their right to pursue actions under the revised guidance.

Professionals, however curious cannot protect children and adults by working in isolation. Domestic abuse requires a multi-agency response and families and communities also have a vital role to play in protecting children and adults.

If any professional suspects or becomes aware of domestic abuse, they must notify their manager with their concerns, whether they work directly with members of the public or not.

For more information, please visit Lincolnshire Safeguarding Adults Board – LSAB resources - Lincolnshire County Council

7.2 Asking the Question

Victims of domestic abuse are often too afraid or uncomfortable to raise the issue of abuse themselves. Practitioners should be prepared to ask questions sensitively, but directly.

For example:

- Can you tell me what's been happening?
- You seem upset. How are things?
- Are you frightened of someone/something?
- How are things at home?
- Did someone hurt you?
- How did you get those injuries?
- Are you in a relationship in which you have been physically hurt or threatened by your partner?
- Have you ever been in such a relationship?
- Do you ever feel frightened by your partner or other people at home?
- Are you (or have you ever been) in a relationship in which you felt you were badly treated? In what ways?
- Has your partner destroyed things that you care about?

- Has your partner ever threatened to harm your family? Do you believe that he/she would?
- What happens when you and your partner disagree?
- Has your partner ever prevented you from leaving the house, seeing friends, getting a job or continuing in education?
- What would happen if you wanted to go out with friends?
- Does your partner restrict your access to money or access your Child Benefit or allowances?
- Has your partner ever hit, punched, pushed, shoved or slapped you?
- Has your partner ever threatened you with a weapon?
- Does your partner use drugs or alcohol excessively? If so, how does he/she behave at this time?
- Do you ever feel you have to walk on eggshells around your partner?
- Have the police ever been involved?
- Have you ever been physically hurt in any way when you were pregnant?
- Has your partner ever threatened to harm the children? Or to take them away from you?

Basic Principles:

Make sure that the time and place is appropriate when asking the question e.g. not when they are about to pick the children up, go to work or an appointment, or there are other people around. If you suspect domestic abuse make sure that the perpetrator is not likely to interrupt you/come home. If you need to complete a risk assessment, make sure you have plenty of time - there are 27 risk factors to go through.
More information and guidance on completing a DASH is available on the Professionals Hub as well as training available via the LSCP Training – LSCP

7.3 Working with people where engagement is complex or conflicted

As part of professional curiosity, practitioners should be aware of how people engage in relation to their complexities and conflictions they may have and use their professional judgment to question what is really going on.

These complexities and the conflictions they are feeling can take a number of different forms and parents, adults or perpetrators can use these techniques to avoid raising suspicions, to allay professional concerns and to delay or avoid professional intervention.
Examples include:

- demonstrating reluctance or resistance to work with someone offering support;

- anger or hostility towards those who are offering help;

- demonstrate compliance;

- focus on engaging well with one set of professionals (e.g. education,) to deflect attention from their lack of engagement with other services;

- criticise other professionals to divert attention away from their own behaviour;

- promise to take up services offered but then fail to attend; or
- promise to change their behaviour and then avoid contact with professionals.

this type of behaviour should be carefully recorded with evidence.
The LSCP have more information on this via Working with families where Engagement is Complex or...

7.4 Risk Assessment

If you have evidence of domestic abuse, a disclosure has been made to you or an agency or a member of the public has shared concerns with you relating to domestic abuse you, or a competent practitioner within your agency, must make every effort to complete a DASH risk assessment with the victim. This will help you to explore the risks to the victim. There may be occasions when it is not possible to undertake a DASH risk assessment e.g. victim denies there is any abuse, you don't have any evidence or the individual leaves the service before a DASH has been completed. In these circumstances you must ensure that you have tried to follow up any safeguarding concerns with the individual and, if required, followed Adult and Child safeguarding process. You should also provide information about support services and that you have carefully documented what you have done and the reason why the DASH has not been completed. Your decision needs to be defensible.

Practitioners must be aware that the responsibility for safeguarding and for managing risk does not end once a referral has been made to another agency or multi agency arena.

The DASH allows professionals to make an assessment of risk relating to domestic abuse and ultimately can help determine the course of action that is required. The assessment should be carried out at once, by the practitioner who identifies the concern wherever possible and safe. Where this is not appropriate, the assessment should be carried out as soon as possible by the practitioner who identifies the concern, or the colleague identified in the organisation's internal procedures.

There are 27 questions, so please ensure that you are in a safe environment and that there is sufficient time to listen to the victim and complete the assessment. It is important that you document the answers and keep a record of the outcomes in line with your own agency protocols. Please go to the Professionals Hub for the full DASH risk assessment.

7.5 Additional factors

There are a number of factors that have the potential to increase the risk of abuse in relationships and accordingly increase the risk of harm to victims, children, dependents and perpetrators. The impact of mental health problems/issues, problematic drug and alcohol use should be considered as additional risk factors which should be planned for accordingly in collaboration with the client and relevant professionals where they are involved.

It is highlighted in Child Safeguarding Practice Reviews and in statutory safeguarding guidance that known risk factors for families are where problematic alcohol and/or

drug use and parental mental health problems co-occur with domestic abuse. Nearly a third of mothers (31%) and a third of fathers (32%) had disclosed mental health problems, problematic drug and alcohol use, or both. *(SAFELIVES, In plain sight: The evidence from children exposed to domestic abuse, February 2014)*

Please look to consider intersectionality of the individuals you are supporting and how partners need to adapt their responses to suit individuals intersectionality.

7.6 What Happens Next and Referral Pathways

On completion of the risk assessment you should decide on your course of action. The DASH risk assessment will help you to determine the most appropriate course of action and what response is required. It is important that practitioners become familiar with this risk assessment and referral pathways so that resources and intervention can be allocated accordingly.

Referral Pathway:

Complete DASH Risk Assessment

For Domestic Abuse including where there is a pattern of stalking or harassment behaviour then please complete the DASH Risk Assessment - for the latest version go to [Domestic abuse resources – Professional resources (lincolnshire.gov.uk)]

If a child or adult is suffering or likely to suffer significant harm complete a referral to children or adult services In an emergency dial 999

If you identify a child/ren that need additional support complete an Early Help Assessment and initiate a TAF

High Risk Referral (MARAC)

If the risk assessment score is 14 or above, there is escalation of the abuse either in frequency or severity or you have a professional concern about risk (even if score is lower than 14) complete a referral to MARAC via your MARAC representative. Ensure that the service user(s) is flagged on your systems as a MARAC case.

Specialist DA Services

If the service user is not deemed to be at high risk of further serious harm or death you must ensure that information has been provided about how to access specialist domestic abuse support and that they are able to access that support. This should be documented.

The IDVA (Independent Domestic Violence Advisor) will attempt to contact the referrer and the victim prior to the MARAC (providing that consent has been obtained)

Refer to or signpost to specialist.

- Specialist Domestic Abuse Support
  LDASS 01522 510041
  Email: info@ldass.org.uk
- National Domestic Violence Helpline
  0808 2000 247
- Forced marriage unit 020 7008 0151
- Galop 0800 999 5428
- Men's DA Advice Line 0808 8024040
- Refuge - Supported Accommodation for Male Victims 01753 549865
- National Stalking Helpline 0808 802 0300
- Victim Support 0300 3031947
- Sexual Assault Referral Centre 01522 524402 & out of hours 01371 812686
- Shelter 0808 800 4444
- Samaritans 113 123

Responsibility to safeguard adults or children remains the responsibility of the agency and is not transferred to the MARAC or specialist services.

If you become aware of further domestic abuse following the MARAC consider making a repeat referral to MARAC via your MARAC representative

Risk is dynamic. If the risk to a victim, previously not considered to be high risk, increases you should consider making a referral to MARAC

Risk assessment and risk management will not remove the risk entirely, but it can help to reduce the probability of harm. Always consider whether you need to take any immediate action to safeguard the victim, any children or vulnerable adults, or share any information with agencies to safeguard the victim/family.

On completion of the risk assessment you will be able to make a judgment of whether the victim is at high risk of significant harm or death. This is when:

- As a guide if the risk assessment score is 14 or above, there is escalation of the abuse either in frequency or severity or you have a professional concern about risk (no matter what the score is) complete a referral to MARAC via your MARAC representative. Professional judgment should be used to assess what the actual risk to victim is, using the DASH as a guide. If there is a high risk of serious harm or homicide the case should then be referred to the MARAC. For more information refer to the MARAC Operating Protocol [MOP] on the Professionals Hub.

If you believe the victim to be at imminent high risk of significant harm or death and a crime has been committed you must contact the police, call 999 and make an emergency referral to the Multi-Agency Risk Assessment Conference (MARAC). If further significant harm or death is not considered to be imminent you should still encourage the victim to report the abuse to Lincolnshire Police and make a referral to MARAC. If a crime has been committed, but there is no immediate danger, dial 101. You must tell the victim that you are making a referral to MARAC and that he/she will be contacted by an Independent Domestic Violence Advisor (IDVA). Please refer to the MARAC referral process section below.

If you do not consider the victim to be high risk of serious harm and that the risk is not imminent then you should always ensure that details of specialist domestic abuse services are provided. Please refer to the specialist services referral process below.

If there are children linked to the victim or perpetrator and you believe that a child or children are being affected by domestic abuse then please refer to the Children's referral process below.

7.7 High Risk Referral Process (MARAC)

Multi-Agency Risk Assessment Conference (MARAC) - The MARAC process ensures a timely risk assessment of the circumstances affecting a victim of domestic abuse, ensures that those individuals believed to be at high risk of serious harm or death are linked directly with appropriate services, providing a co-ordinated multi-agency response to high risk domestic abuse cases in a single meeting.

You must tell the victim that you are making a referral to MARAC and that he/she will be contacted by an Independent Domestic Violence Advisor (IDVA). The role of the IDVA is to discuss risk and safety, provide information about options available and be the voice of the victim at the MARAC. A leaflet about the Role of the IDVA is available by request from the MARAC Administration Team via email maraclincolnshire@lincolnshire.gov.uk

You must then contact the MARAC representative for your service before submitting the referral. Under no circumstances should the perpetrator of domestic abuse be informed if a case involving them has been referred to MARAC. This includes Subject Access Requests.

If the victim has already been heard at MARAC and there has been a further significant incident with the same perpetrator, a repeat referral should be made via your MARAC representative. See the MARAC Operating Protocol for 'repeat referral' criteria and procedures.

Risk is dynamic and can change very quickly. If you feel that the victim is NOT at high risk of significant harm or death you should still ensure that they are referred or given information about local specialist domestic abuse services. Consider whether you need to share information with any other agency to safeguard the victim/family or prevent a crime.

For more detailed guidance on the MARAC process contact your MARAC representative or refer to the MOP. If you do not know who your MARAC representative is, contact your supervisor. If you are still in doubt, or your agency does not have a MARAC representative, please contact the MARAC Administrators at Lincolnshire County Council **via email at maracReferral@lincolnshire.gov.uk** **(Please ensure you are sending from a secure connection)**

Op Komoran – Lincolnshire police have created a pathway for professionals to report non urgent crimes for cases that are due/heard at MARAC to report on. This allows professionals to share all information to build a picture of the abuse the victim is experiencing without potentially ruining any relationships you have built up.
For more information on Op Komoran, please visit the Professionals Hub for the official guidance and links.

7.8 Adult Safeguarding Process

According to the Care Act 2014, the local authority **must** make enquiries**, or** instruct others to do so, if they reasonably suspect an adult who has care needs is experiencing, or is at risk of, abuse or neglect. We have agreed that, in Lincolnshire, we will follow the DA SMB protocols, so if you follow the procedures (MARAC/non MARAC) as outlined in this document, you know that you are acting in the client's best interest and, at the same time, fulfilling your statutory obligations. This is both with regard to positive obligations under the Human Rights Act, as well as any other statutory legislation, for example, the Care Act.

To re-iterate, where domestic abuse is the only presenting factor, and no other additional vulnerabilities (for example mental health issues, physical disabilities) are identified, there is no need to consider making a referral to the local authority safeguarding team. If, however, when you are talking through the questions on the DASH risk assessment with the individual, it becomes apparent that the individual may, for example, need to be assessed for adult care services, i.e. an assessment for admittance into a care home, nursing home or a re-ablement (home care package) or a well-being service – then please discuss this with your client and if they are willing for you to make a referral for this type of service, then please contact the Local Authority's **Customer Service Centre** on **01522 782155**. If it is outside normal office

hours you can contact the **Emergency Duty Team** on **01522 782333**. The main issue is that during your conversation with the client, you identify with the client which are the best services to assist them with the domestic abuse, their additional vulnerabilities and what the individual would like to do, in order to inform their decision-making.

People who are deaf, hard of hearing or speech impaired can contact the Police typetalk service. The **typetalk** landline numbers are **01522 558263** and **01522 558140**. The mobile number is **07761 911287**.
For all Safeguarding Adults Policies and Procedures go to the LSAB website.

7.9 Early Help for Children

The EHA process has been designed to help practitioners assess needs at an early stage and then work with the child/, their family and other practitioners and agencies to meet these needs. As such, it is designed for use when:

- you are worried about how well a child is progressing;
- you might be worried about their health, development, welfare, behaviour, progress in learning or any other aspect of their wellbeing;
- a child or their parent/carer raises a concern with you;
- the child's needs are unclear, or broader than your service can address alone; and/or
- the child would benefit from an assessment to help a practitioner understand their needs better.

If you have any of these concerns complete an Early Help Assessment Child and Family Assessment. If, on completion, a need is identified that you are unable to address, you will need to initiate a Team Around the Family (TAF).

If you are unsure what action to take you may want to have a consultation with and TAF Consultant - telephone Children's Services Customer Services Centre (CSC) on **01522 782111**.

As the DASH form is an assessment tool for adult victims, practitioners need to consider using a risk assessment for the child(ren) with regards to the impact of the domestic abuse. Please consider the following tools for practitioners:-

- Barnardo's 'Assessing the risks to children from domestic abuse' [Risk Identifications Matrix].
- The Signs of Safety model should also be used, incorporating a Model for Assessment
- The practitioner should also consider Safety Planning with the victim, child(ren) and young people. Safety planning with the perpetrator can be undertaken if the abuse is acknowledged.

7.10 Children Safeguarding Referral Process

If you believe a child or young adult under the age of 18 years might be suffering, or is likely to suffer, significant harm (including any emotional harm, mistreatment or abuse), contact the Children Services CSC on **01522 782111**. If it is outside normal office hours you can contact the Emergency Duty Team on **01522 782333**.
If your concern is in relation to an unborn child then you should follow the Lincolnshire Safeguarding Children Partnership Pre-Birth Protocol

For all safeguarding children policies and procedures go to the Lincolnshire Safeguarding Children Partnership

8. Safety Advice and Planning

It is important that all agencies work with victims to plan ahead and stay safe so that in times of crisis decisions are made easier and safer. It is expected that where an Independent Domestic Violence Advisor is not involved with the victim, the agency aware of the domestic abuse will provide the function of safety planning and advice.

Victims of domestic abuse are at increased risk when they are planning to leave a relationship or have just left.

You should be very clear about who is at risk and consider other people in the household, pets or relatives. If you have identified risks, you should ensure that appropriate actions are taken to acknowledge, remove or reduce the risk of harm. This may include:

- Contacting Police
- Find suitable alternative accommodation, through emergency temporary housing or refuge.
- Referral to Lincolnshire County Council Children's Services or Adult Safeguarding.
- Liaising with partner agencies to share relevant information that may reduce the risks.
- Referral to health agencies.

Here are some websites Mankind Initiative & Women's Aid where you will find more information you can give those you are working with to keep themselves safe, however, you can also familiarise yourself with the safety planning on these websites and go through it with the person as required.

The Lincolnshire Safeguarding Children Partnership have safety planning resources held on their Local Resources page.

Safety plans should be personalised so information above should all be considered and discussed with the victim where relevant. Any other additional risks and means of mitigating these should also be discussed with the victim.

Emergency safety plans should be in place whilst assessments, referrals and interventions are being progressed.

In some cases where there is a severe risk of harm to the child/ren, the emergency safety plan/strategy should be for the child/ren and, if possible, the non-abusive parent, not to have contact with the abuser.

It is important that Practitioners do not work in isolation and utilise the skills and expertise of specialist services in assessing, intervening and safety planning for the victim and the child/ren.

9. Local and National Specialist Domestic Abuse Agencies:

Support available – Lincolnshire Domestic Abuse Partnership

10. FURTHER INFORMATION

10.1 Information Sharing

In 2024 a **Multi-Agency Domestic Abuse Framework** for information sharing and governance was created to support partner agencies responses to domestic abuse. The framework is an overarching framework for Lincolnshire partners and can work in conjunction with existing frameworks/protocols for specific operating procedures.

Other protocols for domestic abuse include:

- DHR protocol
- Multi Agency domestic abuse framework for information sharing and governance
- MARAC Operating Protocol

All of which can be found on the Professionals Hub

The LSCP also have an Information Sharing Duty (S16LA) Briefing Note dated 30th September 2026 available on the LSCP Manual.

10.2 Emergency accommodation for victims fleeing domestic abuse

Some victims will not be able to stay in their current home because they might not have a legal right to remain or the risk to them is too high.

Refuge

For advice and availability of refuges in the county you can contact either LDASS (www.ldass.org.uk) **or** HavenDAS**.**
If it is not safe for the victim to remain in the County, or it is out of normal working hours, contact the National 24-hour domestic helpline for availability of refuge accommodation throughout the Country. Tel: 0808 2000 247

District Council support

District Councils in Lincolnshire can provide support, information and advice about emergency accommodation and longer-term housing options and solutions. Contact the local district council for further information.

10.3 Improved home security for victims of domestic abuse

District Councils in Lincolnshire operate schemes to help victims of domestic abuse improve the security of their home. The schemes, sometimes called 'Sanctuary' or 'Target Hardening' aim to provide additional security measures to deter and prevent someone from entering the property and reducing the fear for victims at risk of further harm.

The schemes are often run in partnership with Lincolnshire Police, who will advise on crime prevention, and with the specialist domestic abuse services which will look at risks and provide practical safety planning advice as well as emotional support.

Improved security measures could include:

- Door chains
- Covering over letterboxes and fitting external fire-retardant letter boxes,
- Reinforcing exterior doors
- Extra door and window locks
- Alarms
- Smoke detectors and fire safety equipment

Victims of domestic abuse can find out more about what is available in their area by asking their Domestic Abuse Support Worker or by contacting their District Council Housing department.

11. Domestic Violence Disclosure Scheme (DVDS)

The Domestic Violence Disclosure Scheme was launched in Lincolnshire in March 2014. A police led scheme, with two routes available 'Right to Ask' & 'Right to Know'. The applications are managed and held by Lincolnshire Police, with all applications processed and managed by the Protecting Vulnerable Persons Unit (PVP). Should a disclosure be agreed, the exact form of wording is agreed, and how that will be delivered is managed by the Police Safeguarding Hub.

The Domestic Violence Disclosure Scheme has the following key principles:

- Introduce recognised and consistent procedures for disclosing information to persons with concerns about a current/ex-partner. It enables a current/ex-partner of a violent or abusive individual to make informed choices about whether, and how, to take forward that relationship.

- Disclosure is considered if it is lawful, necessary and proportionate to protect a potential person at risk from harm.

- Disclosure MUST be accompanied by a robust safety plan, based on all relevant information, which delivers on-going support to the potential person at risk.
- As a practitioner, if you believe someone you are working with, or know, is at risk of harm and could be eligible under the scheme, you should refer a person/case to Lincolnshire Police as follows:
    - Members of the public (person at risk, third party i.e. guardian, parent) via www.lincs.police.uk or telephone 101 (non-emergency).

- Practitioners can also refer cases they are working on if they believe a disclosure may be required via www.lincs.police.uk or telephone 101 (non-emergency

Should someone be at immediate risk of harm, always call 999 in an emergency. For further information on the scheme see the Lincolnshire Police website.

12. Domestic Violence Protection Notices/Orders [DVPNO] Scheme

From 23rd June 2014, Lincolnshire Police introduced the use of Domestic Violence Protection Notices (DVPN) and Domestic Violence Protection Orders (DVPO). The Crime and Security Act 2010 provides the Police with additional powers to protect victims of domestic violence and abuse, with the objective of securing a co-ordinated approach across agencies for the protection of victims and the management of perpetrators. The DVPN/DVPO process is not intended to replace the Criminal Justice system in respect of charge and bail of a perpetrator. A DVPN will be issued in circumstances where no enforceable restrictions can be placed upon the perpetrator. A DVPO can then be applied for from HM Magistrates Court Lincoln for a maximum period of 28 days. For Lincolnshire Police, a DVPN/DVPO will be required to be considered for all Domestic Abuse prisoners who are being released from custody with no further action being taken. These orders are often shared with IDVAs when looking at safe contact and safety planning with a victim.

You can find more information on the scheme on the Government website

13. MAPPA and Domestic Abuse

MAPPA stands for Multi-Agency Public Protection Arrangements. It is the process by which Police, Probation and Prison Services work together with other agencies to manage the risks posed by violent and sexual offenders both in custody and those living in the community in order to protect the public. This process focuses upon the perpetrator of the domestic abuse (or other offender) and managing their risk of serious harm and re-offending in order to protect current, previous and future victims.

Police, Prison and Probation make up the Responsible Authority which has a duty to ensure the risks posed by specified sexual and violent offenders are assessed and managed appropriately. There is a wide range of agencies with a duty to participate in MAPPA.

Should you feel that the perpetrator is high risk, then consideration should be given to referring the individual to MAPPA. If the individual is already involved with another agency, such as mental health services, Probation or the Prison Service, it would be most appropriate to discuss a referral with the lead agency worker first.

Should you require any guidance to complete the referral form, or wish to discuss a case which you feel needs to be managed through MAPPA, you are able to contact the MAPPA Unit at Lincolnshire Police Headquarters on: 01522 558668 / 01522 558255 or e-mail: EMNPS.eastwestlincolnshire.MAPPA@justice.gov.uk