



**KENT AND MEDWAY  
MULTI AGENCY PROTOCOL  
FOR DEALING WITH CASES  
OF**

**DOMESTIC ABUSE**

**TO  
SAFEGUARD  
ADULTS**

**April 2016**

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## 1. INTRODUCTION

- 1.1 This document provides guidelines to assist Police, the local authorities and where appropriate health services to work together to address the issues of Domestic Abuse where they affect adults with care and support needs. These referrals will normally be addressed through the Multi-Agency Safeguarding Adults Policy Protocols and Guidance 2016.
- 1.2 **Under the Care Act 2014** safeguarding concerns should be referred to Kent County Council or Medway Council' social care departments as they have responsibility for agreeing that the s42 Duty to carry out enquiries are necessary. If s42 enquiries are required, the local authority can carry out the enquiries or require another more appropriate agency /service to carry out the enquiries on their behalf. E.g. if a crime has or appears to have been committed the police will carry out a criminal investigation, other agencies/ services may contribute to the process to ensure that the s42 duties are met.
- 1.3 **The principle of safe enquiry** is core to all work with victims of domestic violence. The Local Authority will need to consider the expressed views of the victim if it is qualified (See sections 6.5 and 7.3) that they are making a capacitated decision and are not under duress. This may result in consent to share information with other agencies being withheld; in these circumstances there should be a consultation regarding the scenario only with the Police to inform the Designated Senior Officers (DSO) risk threshold assessment if it is believed a crime has been committed at the point the concern is reported.
- 1.4 **The Adult at risk : Safeguarding duties apply to an adult who:** has needs for care and support (whether or not the local authority is meeting any of those needs) and; is experiencing, or at risk of, abuse or neglect; and as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.  
(Care and Support Statutory Guidance issued under the Care Act 2014 DoH)
- 1.5 **Who may be considered for statutory and non-statutory enquiries?**  
This may include people with learning disabilities, mental health issues, older people, and people with a physical disability or impairment. It may also include adult victims of abusive care practices; neglect and self-neglect; domestic abuse; Child Sexual Exploitation (CSE); hate crime; female genital mutilation; forced marriage; modern slavery; trafficking and anti-social abuse behaviour. It may also include an individual who may be vulnerable as a consequence of their role as a carer in relation to any of the above. An adult's need for additional support to protect themselves may be increased when complicated by additional factors, such as, physical frailty or chronic illness, sensory impairment, challenging behaviour, drug or alcohol problems, social or emotional problems, poverty or homelessness and it is important to note that vulnerability can fluctuate.

**1.6 The Home Office definition of Domestic Abuse** as endorsed by ACPO March 2013 effective through England and Wales, please see below:-

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

- Psychological
- Physical
- Sexual
- Financial
- Emotional

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 pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.

It is also important to remember that most research also suggests that domestic abuse occurs in all sections of society irrespective of race, culture, nationality, religion, sexuality, disability, age, class or educational level.

The definition includes incidents where extended family members may condone or share in the pattern of abuse e.g. forced marriage, female genital mutilation and crimes rationalized as punishing women for bringing 'dishonour' to the family.

**2. PURPOSE**

- 2.1** This protocol aims to identify effective joint working practices for all agencies when Domestic Abuse affects an adult at risk.
- 2.2** The purpose of this protocol is to set out a minimum standard of service when an adult at risk requires some support to protect them from Domestic Abuse and to identify appropriate support networks.

### 3. OBJECTIVES

#### 3.1 The objectives of this protocol are:

- a) To provide guidance to all agencies in referring cases of concern to appropriate service (see section 1.2). These will normally be addressed through the Kent and Medway Multi-Agency Adult Protection Policy, Protocols and Guidance for Kent and Medway (2016).
- b) To provide guidance that enables agencies to apply a consistent approach to sharing information.
- c) To set out a minimum standard of service for responding to adults at risk who may be in need of protection and other Support Services because of Domestic Abuse.
- d) To include the principles of Wellbeing as described in the Care and support statutory guidance 2014.

#### 3.2 This protocol recognises that:

- a) All agencies will always seek to act in the best interest of adults at risk with whom they are involved.
- b) All agencies are bound by a duty to protect the confidentiality of shared material. Any decision made to share confidential information must be justified and proportionate with regard to the [Human Rights Act \(1998\)](#) (JAPAN principles *Justified, Authorised, Proportionate, Auditable and Necessary*).
- c) All agencies will use shared material only for the purposes for which it is disclosed and not for secondary reasons.
- d) It is important that adults at risk understand the agreement they are entering into and that you revisit the agreement. You need to explain the reasons why their information might be shared and how the service will treat the sensitive and personal data it is given. Explain that every case is individual but, in general, the service does not need consent to share information where the adult or their children are at high risk of serious harm.

## **4. EFFECTS OF DOMESTIC ABUSE ON ADULTS WITH CARE AND SUPPORT NEEDS**

- 4.1** It is important to recognise that adults with care and support needs may be the victims of Domestic Abuse themselves or be affected by it occurring within their household. This is likely to have a serious effect on their physical and mental well-being.
- 4.2** Research has mainly been carried out with women, and findings include that being disabled strongly affects the nature, extent and impact of abuse. That it is especially acute where the abusive partner is also the carer, the carer has considerable power and control and the victim relies on them.
- 4.3** Where adults at risk are victims of Domestic Abuse; they may need extra support to plan their future. The abuse or threat of abuse may continue after a victim has separated from the abuser. It is important to ensure that all adults at risk in this situation have appropriate support to enable them to maintain their personal safety.
- 4.4** Although it is recognised that carers are sometimes under pressure this should not be used as mitigation for violence or abuse where there is power and control identified over the adult. Where domestic abuse is identified consideration should always be given as to whether the perpetrator has a history of domestic violence or abuse prior to the onset of the disability or capacity issues that defined them as an adult with care and support needs. Consideration should also be given to whether the disability or capacity issue is contributing to the Domestic violence or abuse episodes. This should assist workers to address the needs of the adult at risk within a domestic abuse or violence situation.
- 4.3** Consultation and advice can be sought from the Police Combined Safeguarding Teams (CST) across Kent and Medway.

## **5. POLICE RESPONSIBILITIES**

- 5.1** Kent Police will work with multi agency partners to ensure the overriding priorities in dealing with all incidents of domestic abuse are:
- a)** To protect the lives of adults and children who are at risk of domestic abuse;
  - b)** To ensure safeguarding and signposting to national and local support resources for victims of domestic abuse;
  - c)** To record all incidents of domestic abuse;
  - d)** To facilitate effective action against offenders so they can be held accountable through the criminal justice system.
  - e)** Domestic abuse is not a specific criminal offence. The term is used to describe a range of incidents occurring in particular circumstances where the victims can be of any gender and from any ethnic group as can the

perpetrator. Kent Police will respond to all victims of domestic abuse so they can receive the appropriate quality of service according to their individual needs. All allegations will be properly investigated and the perpetrators held accountable through the criminal justice system.

- 5.2** Following a report of a Domestic Abuse incident it is the responsibility of the Patrol Supervisor or Detective Sergeant, Central Referral Unit (CRU), to identify if the victim appears to have care and support needs and be at risk of Domestic Abuse. Those adults deemed at risk will be immediately referred via CRU.

A referral of concern will be made to the Local authorities (See 1.2) in all cases where:

- It is believed that an adult at risk and/or associated children are suffering or are at risk of suffering significant harm
- It is believed that an adult at risk and/or children are in need of more support services

If there is any uncertainty regarding the need for a referral, a consultation can be sought through the relevant Local Authority Social Services/Mental Health Office/CST/CRU.

## **6. CONSENT AND DATA PROTECTION**

- 6.1** The Data Protection Act 1998 protects personal privacy and upholds individual's rights.

The Act requires anyone who handles personal information to comply with the eight data protection principles: -

- a) Personal information must be fairly and lawfully processed
- b) Personal information must be processed for limited purposes
- c) Personal information must be adequate, relevant and not excessive
- d) Personal Information must be accurate and up to date
- e) Personal information must not be kept for longer than necessary
- f) Personal information must be processed in line with the data subject's rights
- g) Personal information must be secure
- h) Personal information must not be transferred to other countries without adequate protection

- 6.2** The Act includes crime prevention and detection exemptions and allows disclosure where it is necessary to:-

- a) Prevent or detect crime

- b) Apprehend or prosecute an offender and where failure to disclose would be likely to prejudice those objectives
- c) Protect the vital interests of the data subject or another.

**6.3** Article 8 of the Human Rights Act 1998, states that everyone has the right to respect for his private and family life, and that there shall be no interference by a Public Authority with this right except as in accordance with the law:-

- a) In the interests of national security
- b) Public safety
- c) Economic wellbeing of the country
- d) The prevention of disorder or crime
- e) The protection of health or morals
- f) The protection of the rights or freedoms of others.

**6.4** In most circumstances the agreement of the adult should be sought before a referral is made. However consent should not be sought where:-

- a) It would hinder the prevention or detection of a crime or the apprehension of an offender.
- b) It would place the subject of the referral or other adults at risk of harm.
- c) An urgent referral is necessary and it is not possible or appropriate to seek consent, i.e. cases where the alleged abusers are the only persons able to give consent.

**6.5** Statutory agencies have a responsibility to act to prevent a crime or abuse of children and adults at risk.

If a professional has concerns about the adult's welfare and believes they are suffering or likely to suffer abuse or neglect, then they should share the information with the local authority and, or, the police if they believe or suspect that a crime has been committed. *(14.34 Care and Support Statutory Guidance issued under the Care Act 2014 DoH)*

If the adult at risk withholds his/her agreement to a referral being made and they have capacity (as per the requirements of the [Mental Capacity Act 2005](#)) to understand the risk issues following completion of a risk assessment conducted during safe enquiry and it is qualified that they are not being intimidated, then their wishes should be respected and this decision recorded. If however, other adults with care and support needs or Children are at risk then referral to social services should be made in respect of these people.

**6.6** Lessons learned from domestic homicide reviews reveal that failing to share vital information is a contributory factor in many cases but while the current 'message' is very much that professionals should consider the potential risks of not sharing information; both strategically and at the front-line there is still much caution attached to doing so. [Preventing and Responding to Domestic Abuse in Kent – Kent Select Committee Report 2012 \(4.34\)](#)



## 7. LOCAL AUTHORITIES

- 7.1 In all situations of Domestic Abuse, local authorities and other agencies or services will, wherever possible, work to support and assist adults at risk to take action necessary to protect themselves from abuse especially where this may result in significant harm to themselves or other adults with care and support needs and children.
- 7.2 In accordance with the Multi-agency Safeguarding Adults Policy and Protocols and Guidance for Kent & Medway (2016), it is a responsibility of the Designated Senior Officer (DSO) in the local authorities to make a decision about what course of action will be taken. This would be in accordance with the Kent and Medway Multi-agency Adult Protection Protocols and Guidance following risk assessment of the seriousness of the abuse (guidance section 19). This will inform the level of response and approach from the framework (guidance section 25). The following are possible responses that may be made at any stage during the information gathering or enquiries made from initial consultation / formal referral to case conference: -
- a) It is abuse, the alleged victim is an adult at risk and a section 42 enquiry is commenced using the multi-agency policy protocols and guidance.
  - b) It is abuse but the adult at risk following safe enquiries requests case is closed and DASH does not indicate referral to MARAC.
  - c) There is evidence of abuse that does not constitute a criminal offence but following assessment of the issues reported it appears more appropriate to address the situation in a less formal way e.g. through the provision of support services for the adult at risk and their carer (who may also be the adult at risk).
  - d) It is not assessed as adult abuse but an assessment of social care/support is initiated
  - e) It is abuse but the victim does not have Care **and** Support needs so a non-statutory enquiry may be appropriate.
  - f) If the victim does not have either care or support needs it may be necessary to suggest a referral to a more appropriate service e.g. Domestic Abuse Floating Support Services (referrals via Supporting people services in Kent County Council and Medway Council)
  - g) Initial assessment and evaluation of the presenting risks and protective factors concludes that there is no evidence of abuse or abuse is discounted following enquiries made.
- 7.3 The social services agency must make or cause to be made whatever enquiries necessary to decide what needs to happen and by whom. This then constitutes a formal Section 42 Enquiry; to assist in reaching this decision it is

**crucial** that such enquiries are made when the person is **safe to disclose** and in a situation which will not increase risk to them.

The following enquiries will be undertaken: -

- a) The views and wishes of the adult once safe contact and enquiry has been made.
- b) Explain the limits of your confidentiality e.g. the only time I would tell anyone anything you told me would be if a child was in danger, if another adult was in serious danger or if a crime may have been committed. Even then, I would discuss it with you first if I could and I would do everything I could to support you.
- c) An Independent advocate may be appointed to support them if they have difficulty understanding the processes.
- d) Information gathering from other organisations.\*If the adult does not want other agencies involved but there has been disclosure of a crime there should be consultation with the Police regarding the scenario (without passing personal details) to discuss and consider how to ensure that the person is and remains protected from abuse or neglect.
- e) Consider any records of previous or current involvement with the adult at risk and any other family members by statutory agencies.
- f) Domestic Abuse, Stalking and Honour Based Violence Risk Identification Checklist (DASH) should be completed. With the adult unless it is not possible to do so.
- g) Referral to Multi-agency Risk Assessment Conference (MARAC) if indicated by DASH.
- h) The adult should be informed of the role of an Independent Domestic Violence Advocate IDVA for their consideration.
- i) The adult should be advised of their nearest One Stop Shop
- j) Planning discussions by telephone or meetings involving the adult at risk and/or referrer.
- k) All planning discussions and decisions must be appropriately documented.

Further guidance regarding enquiry is available within the Kent and Medway Multi-agency Adult Protection Protocols and Guidance 2016 and on the <http://www.domesticabuseservices.org.uk/>

This is the guidance from the [LGA/ADASS Adult Safeguarding and Domestic Abuse, a guide for practitioners and managers](#)

- 7.4** Should there be any disagreement between professionals regarding the decision the matter should be referred to the appropriate the Assistant Director for Kent County Council or to a Service Manager for Medway Council.

## **8. INTER-AGENCY CO-OPERATION**

- 8.1** Inter-agency Domestic Abuse Fora have been established in the following Areas: North Kent, West Kent, Maidstone, Medway, Swale, Canterbury, Thanet, South East Kent and Ashford.
- 8.2** No one agency can meet the needs of those who experience Domestic Abuse. The primary objective of the Area Domestic Abuse Fora is to focus inter-agency efforts to raise awareness, improve services and support for victims, and their families, experiencing Domestic Abuse.
- 8.3** Area Domestic Abuse Fora will not discuss individual cases. Where a concern for an adult at risk is identified, the above protocol should be adopted and referral made as appropriate.

## **9. KENT AND MEDWAY DOMESTIC ABUSE STRATEGY GROUP (KMDASG)**

- 9.1** The Kent and Medway Domestic Abuse Strategy Group (KMDASG) has developed a strategy setting out a vision for effectively addressing the issue of domestic abuse in the county and details the steps that will be taken to achieve this on a multi-agency basis. The KMDASG works towards ensuring a more co-ordinated approach is adopted by all statutory, independent and voluntary agencies, with a particular focus on the identification of what is both best practice and best value.
- 9.2** The KMDASG Strategy builds on the work already carried out, within previous strategies with particular emphasis on the continuing need to strengthen services that assist survivors of domestic abuse throughout the county and the development of preventative initiatives. The responsibility for responding to and addressing domestic abuse is the role of all professionals and service providers.
- 9.3** The 2013-2016 KMDASG Strategy will focus on the same four objectives also identified by the Government as crucial in tackling abuse:
- i. Preventing Abuse
  - ii. Provision of Services
  - iii. Justice Outcomes and Risk Reduction
  - iv. Partnership Working
- 9.4** Each of the four objectives in the Strategy will be supported by a range of key outcomes that have been identified as focus areas across Kent and Medway through a range of sources including:
- i. KMDASG Partnership Review findings;
  - ii. Focus group with survivors of domestic abuse
  - iii. Kent County Council Domestic Abuse Select Committee Recommendations; (2012)
  - iv. KMDASG workshops;

- v. Lessons Learned from Kent and Medway Domestic Homicide Reviews.
- 9.5 The Domestic Abuse Strategy is supported by a delivery plan which details the actions that are to be taken to achieve the outcomes identified to address the four main objectives in the Strategy.
- 9.6 By working together more effectively agencies will be able to maximise the utilisation of existing resources and, where possible, seek to draw upon additional resources, to improve services further.
- 10. DASH Risk Assessment Tool Kit.**
- 10.1 All staff having direct contact with adults at risk should be trained to complete the Risk Indicator toolkit (DASH) where it is identified that an adult at risk is in a domestic abuse situation.
- 10.2 The DASH is for all professionals working with victims of domestic abuse, stalking, and harassment and honour based violence.
- 10.3 In England and Wales, the police service will use the ACPO DASH and partner agencies the [CAADA DASH](#)
- 10.4 There is also a risk checklist for victims of domestic abuse, stalking and honour based violence. This is called the [Victim-DASH](#) (V-DASH 2010).
- 10.5 There are also further questions on stalking called the [Stalking-DASH](#) (S-DASH, 2009) Risk Identification Checklist. This again has been adapted for victims to use, [Victim Stalking-DASH](#). (VS-DASH 2009).
- 10.6 Staff should have training, to a level depending on their role and responsibilities, in completing the DASH risk assessment tools and to understand the criteria for a referral to MARAC.
- 10.7 Adult social services must nominate MARAC representatives by area. All staff in their area should know who the MARAC representatives are.
- 11. Domestic Abuse Multi-Agency Risk Assessment Conference (MARAC)**
- 11.1 MARAC is a multi-agency response to ensure that the highest risk victims of domestic abuse are protected within a multiagency arena. There are MARACs covering the whole of Kent and Medway.
- 11.2 In a single meeting, MARAC combines up-to-date risk information with comprehensive assessment of a victim's needs and links those directly to the provision of appropriate services for all those involved in a case: victim, children and perpetrator.

- For more information, CAADA have produced an [explanatory video](#) that explains why MARACs were set up, how they help high-risk victims of domestic abuse and what types of professionals are expected to attend.

**11.3** The aims of the MARAC are:

- a) To share information to increase the safety, health and wellbeing of victims, adults and their children;
- b) To determine whether the perpetrator poses a significant risk to any particular adult at risk and/or to the general community; also professional staff involved with domestic abuse
- c) To jointly construct and implement a risk management plan that provides professional support to all those at risk and that reduces the risk of harm
- d) To reduce repeat victimisation;
- e) To improve agency accountability
- f) Improve support and safety for staff involved in high risk DA cases

**11.4** The responsibility to take appropriate actions rests with individual agencies; **it is not transferred to the MARAC.**

**11.5** The role of MARAC is to facilitate, monitor and evaluate effectively information sharing to enable appropriate actions to be taken to increase public safety.

## **12. Training**

**12.1** The Kent and Medway Safeguarding Adults Board supports the recommendation of the Kent & Medway Domestic Abuse Strategy Group's [Domestic Abuse Training Framework](#) launched in 2012. It is recommended that all staff and their managers, who have direct contact with adults at risk, should receive training on Domestic abuse, MARAC and DASH.

## Appendix 1 - Contact and referral details

If police attention/presence or medical attention is required  
urgently please call: **999**

Police enquiries call: **101**

To report Adult Protection concerns to Kent or Medway Social Services:

**Medway Council** Telephone: 01634 334466 (during work hours)  
Fax: 01634 334504 (during work hours)  
e-mails : [ss.accessandinfo@medway.gov.uk.cjism.net](mailto:ss.accessandinfo@medway.gov.uk.cjism.net) (secure email)

**Kent County Council** Telephone: 03000 416161 (during work hours)  
Fax: 03000 412345  
e-mails : [CentralDutyTeam@kent.gcsx.gov.uk](mailto:CentralDutyTeam@kent.gcsx.gov.uk) (secure email)  
[central.duty@kent.gov.uk](mailto:central.duty@kent.gov.uk) (standard email)

**Kent & Medway Local Authority Out Of Hours** Telephone: **03000 41 91 91**  
Fax: **03000 417345**  
(Safe haven fax)

For more details on when and how to make a referral please see Guidance sections 5, 6 and 7 in the main Kent and Medway Multiagency Safeguarding Adults Protection Policy, Protocols and Guidance for Kent & Medway (2016).

For information regarding domestic abuse services for victims, perpetrators and information for professionals across Kent and Medway refer to:  
[www.domesticabuseservices.org.uk](http://www.domesticabuseservices.org.uk)