Top Tips for Clinicians

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| Subject | Remote consultations and domestic abuse assessment |
| Date | January 2021 / Review date 12m later |
| Disclaimer | These are intended only as good practice prompts. Use your clinical judgement. |
| Top Tip 1 | Check if you are on speaker phone or whether the call is being recorded Ask if the patient is alone in the room/house Ask the patient if it is safe to talk using 'closed questions', 'yes/no' answers may help your patient share that they are being harmed, even if they cannot talk freely Routinely use commissioned translator services to obtain a professional translator |
| Top Tip 2 | Domestic abuse - Respond and risk assess It's hard to talk about, acknowledge that and thank them for being honest with you; validate their experience with phrases like 'I believe you' or 'This is not your fault.' |
| | Be clear about when you would need to share information and how you would do this. If in immediate danger call 999 and ask for the police. Tell them about the <u>Silent Solution</u> system - if they feel in immediate danger silent calls will work if they don't feel safe to speak – call 999 from a mobile and then press 55. |
| | Ask for more details of the abuse –the <u>DASH risk checklist</u> can be used to assess the level of risk to the victim (generate as a word doc in S1 via DQT safeguarding adult template). |
| Top Tip 3 | Never advise people to leave their relationship. This may put them in danger. Signpost to support agencies: the Bright Sky App has an up to date list of local agencies, details also in the Domestic abuse guide found here (open using Google Chrome) The victim of domestic abuse may not want other agency involvement. However you have a duty to refer to other agencies if: a. This is high risk domestic abuse (DASH score 14 or more, or by professional judgement). There is a risk of Domestic Homicide so refer to a Multi-Agency Risk Assessment Conference (MARAC). The CCG safeguarding team can provide referral support on 01274 237645. b. There are safeguarding concerns: • If Children are affected by the abuse, or if a MARAC referral is needed - refer to children's social care • If the patient is pregnant then a pre-birth assessment may be needed • If you have an adult safeguarding concern then refer to adult social care How will you safely contact the victim if follow up is needed? Do you need to agree a code word with the patient so they can alert you safely that they can no longer talk? |
| Top Tip 4 | Intimate images Managing intimate examinations for U18's virtually, either by video or by handling imagery is fraught with risk. Most GPs working in child safeguarding would not request intimate images of U18s and the MDU does not endorse it. |
| Questions to | Clinical Top Tips: Top.Tips@bradford.nhs.uk |
| My QI | Take action, then document a simple Quality Improvement for my next appraisal |