

DOMESTIC VIOLENCE AND ABUSE (DVA) GUIDANCE FOR RECEPTION AND ADMINISTRATION TEAMS

We know that COVID-19 will have a detrimental impact on the safety and lives of patients affected by domestic violence and abuse (DVA) and their children. Home may not be a safe place for those affected by DVA. As patients will speak with reception or triage staff before they speak to a clinician, it is important that all staff in telephone or video contact with patients have an understanding of the effect of domestic abuse on their patient population and the current risks during the COVID-19 pandemic

DURING TELEPHONE TRIAGE

- Where you are already aware of DVA from the patient's medical record, or if this is disclosed during triage, consider, where possible, prioritising the patient for a call back with a clinician.
- If DVA is disclosed, it is important to ask if the patient is alone and safe to continue this conversation.
- If they are not alone, consider offering a telephone/video appointment with a clinician as a priority for a time that is safe for them. This could be when taking their daily allowed exercise outside or on the way to and from the shops. During this discussion ensure that closed questions, eliciting a yes or no response are used.
- Should you hear anything that causes concern during a telephone consultation, i.e. shouting or aggression, alert a clinician who can safely explore this further with the patient.
- Prior to the consultation ensure the clinician is aware of any DVA disclosure at point of triage.

FOR ANY PATIENTS WHO ATTEND THE PRACTICE

- If a patient does attend in person, ensure any mention of DVA is done discreetly and only if a patient attends alone.
- Where possible offer the patient a safe space they can sit in private. This could be either to make safe calls to the IRIS service, national helplines or the Police.
- Alert an IRIS trained clinician who will be able to speak with the patient about support options available.

CONFIDENTIALITY

- Ensure disclosures of DVA are not shared with family members or anyone who may call on the patient's behalf.
- Only speak with patients about DVA when you are sure they are alone and no one else can overhear the conversation.
- Now more than ever, perpetrators are likely to monitor or listen in to all calls.
- Only provide DVA literature to patients when you have clarified that they are safe to take this away.

***IF TEXT MESSAGES REGARDING DVA ARE SENT TO PATIENTS AT THE PRACTICE, ENSURE THAT THEY DO NOT DIRECTLY MENTION DVA ***

***We are advising the following text is used:** "Social isolation can increase stress at home, impacting on you and your family's well-being. Your GP is here to help you. Please contact the practice."