



# Internal Domestic Abuse Policy

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## 1. Introduction

The Learning for Life Trust recognises that some of its employees will be amongst those affected by Domestic Abuse (DA). It may be as a survivor, someone who is currently living with DA, someone who has been impacted by DA or someone who perpetrates DA.

It is the Trust's policy that every employee who is experiencing / has experienced DA has the right to raise the issue with their employer in the knowledge that this will be treated sympathetically, sensitively, and, where possible, confidentially.

The Trust will take a supportive position on DA and is committed to ensuring that any employee who is the victim of DA has the right to raise the issue with their employer in the knowledge that they will receive support and assistance. We are committed to developing a workplace culture in which there is no room for violence or abuse and which recognises that the responsibility for DA lies with the perpetrator.

This Policy also covers the approach we will take where an employee is a perpetrator of DA (Section 12).

By having an effective DA Policy and working to reduce the risks related to DA, we will create a safer workplace and send out a strong message that DA is unacceptable. DA has clear implications for the workforce, affecting attendance and presenteeism, staff turnover and mental wellbeing. It could also affect workplace teams, who may be caught up in a colleague's distress or in supporting them to move on.

We recognise that DA has a disproportionate impact on women and girls. However, DA does affect men and non-binary individuals as well as women and it should also not be assumed that only a husband / male partner/ family member is a threat because abusers may include any relative including those with whom there was a previous intimate relationship.

We undertake to not discriminate against anyone who has been subjected to DA both in terms of current employment or future development.

This Policy will apply to all staff. This Policy is part of the Trust's commitment to the welfare and safety of all staff.

## 2. Scope

This Policy applies to staff across all schools and the central team, as well as agency and contract staff.

This Policy is intended to be safety focussed and supportive of victims of DA.

## 3. Definition

Historically, the terms Domestic Violence and Domestic Abuse tended to be used interchangeably. The Domestic Abuse Act 2021 defines that the term Domestic Abuse should be used, taking into account that all violence is abuse, but not all abuse is violent.

In summary, the definition of DA is:

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are, or 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:

- coercive Control (a pattern of intimidation, degradation, isolation and control with the use or threat of physical or sexual violence);
- psychological and/or emotional abuse;
- physical or sexual abuse;
- financial or economic abuse;
- harassment and stalking; or
- online or digital abuse

#### 4. Principles

We believe that abusive behaviour is the responsibility of the perpetrator.

We will treat every victim as an individual as everyone's circumstances are different. Once a victim raises a concern about DA, they will be offered appropriate support and information on protection and help.

A survivor's experiences of DA may be compounded by racist reactions, isolation, language and cultural barriers or other reactions to age, sexuality, or disability. The same access to information and support should be available for everyone experiencing DA.

Employees will be informed of their right to contact their Trade Union.

#### 5. Confidentiality

If an individual makes a disclosure that they are a victim of DA, they must be assured that the information they provide is confidential. Consent will be sought if information is to be shared and all relevant governance will be observed.

There are, however, some circumstances in which confidentiality cannot be assured. This may occur when:

- there are concerns regarding children (for example, if an employee gives information which suggests that their child or another child is at risk of abuse, whether physical, emotional, sexual or through neglect);
- if there is concern around vulnerable adults or where the organisation is required to protect the safety of other employees; or
- if it is believed an employee and/or colleague(s) are at risk of serious injury or death. In these cases, a Multi-Agency Risk Assessment Conference- MARAC- will be held. This will be a private MARAC, with only relevant parties invited.

In these circumstances, the individual should be informed of the reasons why confidentiality cannot be maintained.

Where there are concerns regarding children, the relevant Designated Safeguarding Lead (DSL) needs to be satisfied that appropriate steps are being taken to protect children and if they are not satisfied, they must consider making a referral to Children's Services.

If there is concern for a vulnerable adult's safety, the relevant school leader should inform the individual that they are seeking further advice from an appropriate agency such as the Council's Safeguarding Adults Team or by completing a Safeguarding Adult Concern (SAC).

Leaders have a duty to maintain a safe, secure working environment for all employees and this could be made easier if colleagues are aware of potential risks as part of safety planning. The leader should advise the individual concerned fully what information they will be sharing with colleagues and confirm the basis for it.

Leaders should remind employees that this information is confidential and any unauthorised breaches of this or improper disclosure of information could result in disciplinary action being taken. The consequences of breaching confidentiality could also have very serious consequences for the person experiencing DA.

It is important that the employee is made aware of the above at the beginning of any discussions.

## 6. The Learning for Life Trust's Commitment

Disclosure of abuse and immediate process:

Employees experiencing DA may choose to disclose, report to or seek support from a variety of sources.

This may include:

- Headteacher/ School Leader
- Colleague
- Trade Union Representative
- Domestic Abuse Internal Champion

It is not their role to counsel victims, but they can offer information, workplace support and/or signpost to other organisations.

We will respond sympathetically, supportively and effectively to any member of staff who discloses that they are suffering from DA. Leaders should consult with the employee and consider what actions that they can make to support victims of DA this could include, but is not limited to:

- temporary adaptations to the victim's working patterns;
- using other existing policies (e.g. flexible working);
- signpost and support safety planning (set out below);
- paid time off to victims; and
- signposting to counselling/support services.

## 7. Risk Assessment, Safety Planning and Support

Research suggests 75% of DA victims are targeted at work; from threatening calls to harassment and arriving unannounced. We have a duty of care to all our employees and we will prioritise the safety of employees if they make it known that they are experiencing DA.

When an employee discloses DA, we will encourage them to accept support from a specialist support agency who can undertake a DASH (Domestic Abuse, Stalking and Harassment, and honour-based violence) Risk Assessment and provide ongoing advice and guidance. All of the Trust's DSLs are trained to undertake DASH assessments.

As a baseline, the person receiving disclosure **MUST** undertake an assessment using the 5 Critical Questions at Appendix 1. Training has been provided on how to complete this - again to the Trust's DSLs.

There should be an initial call to Victim Support Cumbria on **0300 303 0157** to explain that a referral is being made regarding a Colleague via the protocol agreed with Victim Support Cumbria.

The referral should then be sent- password protected- to: [cumbriaadmin@victimsupport.org.uk](mailto:cumbriaadmin@victimsupport.org.uk)

If a referral is declined or it is not possible to complete the assessment fully, the person receiving initial disclosure should complete the assessment based on the information they have. A High-Risk Referral **MUST** be completed.

All Trust schools are Victim Support Champions and have been trained by Victim Support Cumbria.

## 8. Housing Support

Accommodation for victims of DA is available via internal Housing Options Departments listed at **Appendix 2**. There are no eligibility criteria other than an individual's needs to cite they are a victim of DA.

Wider support services listed at **Appendix 3**.

## 9. If the victim and the perpetrator work in the same organisation

In cases where both the victim and the perpetrator of DA work in the same organisation, the Trust will take appropriate action.

Action should be taken to ensure that the victim and perpetrator do not come into contact in the workplace. Action may also need to be taken to minimise the potential for the perpetrator to use their position or work resources to find out details about the whereabouts of the victim. This may include a change of duties for one or both employees or withdrawing the perpetrators access to certain computer programmes or offices/ spaces.

## 10. Training, Learning and Development

At the Learning for Life Trust, we are committed to ensuring all staff are aware of DA and its implications in the workplace. Information, briefings and training are undertaken to ensure that all staff are able to:

- identify the warning signs of DA;
- respond to disclosure in a sensitive and non-judgemental manner;
- understand that the victim's attitude to their domestic situation may vary over time;
- provide initial support – be clear about available workplace support including in-house specialist staff where applicable;
- discuss how the organisation can contribute to safety planning;
- understand that a victim may be subject to abuse from another perpetrator after entering into a new relationship;
- signpost to internal and external sources of support; and
- understand that they are not counsellors.

## 11. Role of Colleagues

We encourage all employees to report if they suspect a colleague is experiencing abuse. Employees should speak to a relevant senior leader about their concerns in confidence. In dealing with a disclosure from a colleague, employers should ensure that the person with concerns is made aware of this statement.

## 12. Perpetrators of DA

The Code of Conduct and other appropriate Professional Codes inform staff of the standards of conduct expected of them. They identify principles governing behaviour by which employees are expected to abide. Employees are always expected to present high standards of personal integrity, honest, respect and conduct that will not reflect adversely on the organisation and its reputation both at work and also outside of work.

DA perpetrated by employees or any allegation that an individual assisted an abuser in carrying out and/or perpetrating DA will be viewed as a potential breach of the Trust's Code of Conduct and will not be condoned under any circumstances.

In most cases, the matter will be investigated under the Trust's disciplinary procedure as potential gross misconduct which may, if proven, render the employee liable to dismissal without notice.

Employees who raise concerns about their own behaviour may be referred to Cumbria's Change Behaviour Programme "Turning the Spotlight" which is delivered by Cumbria Victim Support. This would not be a replacement for any relevant disciplinary/ judicial procedures.

The Trust appreciate that there may be Reverse Victim Offender allegations (DARVO- Deny, Attack, Reverse Victim Offender) where the Primary Perpetrator presents as the Primary Victim.

The Trust will fully comply with any ancillary procedures carried out by Partner Agencies, for example: Criminal investigations/ Civil enforcement and will inform and/or work in conjunction with LADO, where appropriate.

Each case will be considered on a case-by-case basis.

## 13. Review

This statement will be reviewed every three years unless there are changes in legislation, best practice and/or other organisation policies impact on its effectiveness.

Should further clarification be required in relation to the consultation and/or implementation process, school leaders should contact the LA's Domestic Abuse Strategic Lead:

[Mary-Claire.Telford@cumberland.gov.uk](mailto:Mary-Claire.Telford@cumberland.gov.uk)

## Appendix 1: Victim Support



### **External Referral to Victim Support Domestic Abuse Services**

When completing this referral please try to complete all fields with as much information as possible to ensure the person being referred receives the most appropriate support. A completed 5 Critical Questions assessment must be included, there is one included within this form.

Please be aware that if the risk assessment reaches stage 5 of the homicide timeline, or if your professional judgement is that the case is high risk **you** are responsible for referring this to the Multi-Agency Risk Assessment Conference. You can do this here - [MARAC Referral Form inc Standard RIC \(Page 1 of 4\)](#)  
[\(office.com\)](#)

All of our referrals are contacted within 2 working days of receipt of the referral and if we are unable to make contact we will liaise with the referrer for further information or to give an update.

Please send all completed referral forms to [cumbria.admin@victimsupport.org.uk](mailto:cumbria.admin@victimsupport.org.uk).

If you have any questions please email us or call us on **0300 303 0157**.

**Client Details:**

<b>Client Name</b>			
<b>Date of Birth</b>		<b>Age</b>	
<b>Address</b>			
	<b>Postcode</b>		
<b>Preferred method of contact</b>	Mobile Phone <input type="checkbox"/> Landline <input type="checkbox"/> Text Message <input type="checkbox"/> E-mail <input type="checkbox"/> Letter <input type="checkbox"/>		
<b>Contact Number</b>			
<b>Best time to contact</b>		<b>Can a message be left?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>If a landline, do they have a call monitoring service installed?</b>		<b>Is it safe for us to state which service we are calling from?</b>	
<b>Ethnicity</b>			
<b>Communication preferences</b>			
<b>GP Details</b>			

Has the client been informed about Victim Support and consented to this referral?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no, why not?	

Date of most recent incident	Was this reported to the police?
<p><b>Brief case details:</b></p> <ul style="list-style-type: none"> <li>• What is happening?</li> <li>• Who is aware?</li> <li>• What disclosures have been made?</li> <li>• Has the person been supported by domestic abuse services before?</li> <li>• Have they experienced domestic abuse in the past?</li> <li>• What are their living circumstances?</li> <li>• Do they have any family or friends supporting them?</li> </ul>	
<p><b>Risk factors</b></p> <p>i.e. self-harm, suicide ideation, drug and alcohol, mental health etc. (please include details):</p>	
<p><b>Caseworker Safety</b></p> <p>Is there anything the caseworker should be aware of that could impact on their own safety?</p>	
Offender known?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is Sexual Violence a factor?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is client considered safe to visit?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	<b>Suspect name</b>
	<b>Victim/Suspect Relationship</b>

**Your Details:**

Referrer Name	
Agency	
Contact number	
E-mail address	

**Please complete this next section if the person has children:**

Details of any children.			
Name	DOB	Address (if different)	School/Nursery/College etc.

<b>Is there any children's services involvement?</b>		Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Is there a Child Protection Plan, Child in Need, Team around the Family or other in place?</b>		Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Please give details</b>		
<b>Social worker name</b>		
<b>Social workers contact details</b>		
<b>Are there any other agencies involved with the person you are referring or their children? (If yes, please provide details below)</b>		
<b>Name of Organisation/ Contact details including email and number</b>	<b>Name of Individual / lead worker and job title</b>	<b>Details of role and involvement:</b>

**It is essential you explore and discuss the following 5 questions.**

You can add any additional information that you are aware of into the additional information sections e.g. from what you already know, from a DA referral etc. To determine current threat and significant risk, use the **highest** timeline stage identified to inform your professional judgement and wherever possible,

address immediate risk/needs and follow up any safeguarding concerns with your DSO. Refer to MARAC if escalation in frequency and severity can be evidenced (Stage 5).

	<b>Additional Information</b>	<b>Perpetrator &amp; victim characteristics &amp; behaviours to explore</b>
1. Is this a pattern of behaviour? (Stage 3 – 6 explore)	Yes / No	Behaviours and risks to consider:  Dominated by controlling and jealous patterns of behaviour, consider 'Honour' based abuse (HBA), forced marriage, Economic/Financial issues – forced debt or dependency, Violence in many cases, Drug/alcohol/MH issues, isolation, mistreating pet/animal, sexual abuse – unwanted touching, forceful sex/sexual acts, derogatory comments, sexual assault, rape etc. Threats of suicide in order to control/manipulate  Threats to kill to control, feel threatened by others? Victim's chronic fear, disclosure, and/or help-seeking.

<p><b>2. Is this making you/someone change their behaviour?</b> <b>(Stage 3 - 5 explore)</b></p> <p>Yes / No</p>		<p>Speed and intensity if relationship? Love bombing, seeking very early commitment, coerced pregnancy/controlled contraceptives, Complying with demands. Walking on egg shells - pre-empting to de-escalate abuse? Isolated? Decline in your MH/depression? Have you relocated/fled your home/separation? Changed your routine?</p>
<p><b>3. Is this making you/someone afraid?</b> <b>(stage 3-7 – explore)</b></p> <p>Yes / No</p>		<p>What are you frightened of? Threats to kill? Threats to harm others you care about/children? Frightened/threats he/she will take your children? Is the abuse getting worse? Consider HBA.</p>
<p><b>4. Has there been any kind of physical/sexual abuse or violence?</b> <b>(stage 3 – 6 explore)</b></p>		<p>Pushing, slapping, hitting, restraining, kicking, and/or throwing objects/weapons at you? Non-fatal strangulation or suffocation,</p>

Yes / No		coerced/forced /unwanted sexual touching, harm to others/children? Pet /animal abuse?
<b>5. Is there a separation? (Stage 4)</b>		Imagined, threatened or real? Within the last 12 months?  Are you pregnant or recently had a baby? (last 18 months)  Is there conflict over child contact?
<b>ADDITIONAL QUESTIONS/INFORMATION</b>		
Are you pregnant or had a baby in the last 18 months)	Yes / No	If yes – expected date of birth / or date of birth of baby
Do you have any children? If yes, where do they live? (You will need to record the children onto NGCM.)		
Age (don't forget all of the EDI questions & protected characteristic questions)		

Does (the abuser) have access to unique weapons? E.g. through their job or interests	If so, current trade? What weapons?		
Anything additional from victim and/or profession (concerns, fears or safety/support requirements?)			
Date of assessment	Timeline stage reached?	Comments (MARAC and/or safe guarding referral required? professional judgement/notes, risk review)	Name of professional

**Below guidance will help you to identify: Abusers & Victims characteristics & behaviours, risk escalation, patterns & stages identified within the intimate partner homicide timeline.**

**Stage 1. History of the following by alleged perpetrator:** DA /Sexual offences; Control & coercion, Stalking &/or harassment, routine jealousy, violence to anyone? Mistreating animals/pets, breaching bail/orders, drug/alcohol, mental &/or health issues, criminal history.

**Stage 2. Early relationship** Speed and intensity of relationship how long have they been together, when did abuse start, tried to separate before? Change in behaviour, early commitment demands &/or early pregnancy, love bombing. Showered with gifts/attention. Quickly isolating victim

**Stage 3. Relationship.** Dominated by controlling and jealous patterns of behaviour: accusations of affairs, increased isolation, financial issues &/or dependency, discrediting victim to others including family, professionals and/or preventing contact with family/professionals /health services – or preventing access to them. Verbal abuse, Gas lighting victim. Drug, alcohol &/or MH issues of abuser &/or victim. Derogatory comments. Withholding or controlling access to medication and/or contraception. Violence used in many cases including; physical abuse & some high/significant risk markers may already be present. Previous sexual assaults/strangulation/choking/drowning may be disclosed. Feeling threatened by others? Tracking & monitoring? (Consider HBV& A). Victim's chronic fear – adapting own behaviour to avoid the consequences? May be considering disclosure &/or help seeking.

**Stage 4. Trigger.** Victim may disclose abuse to family or professionals (police reporting also included within this stage). Separation (imagined, threatened or real) Victim may have threatened to leave or may have left. Control may be escalating, Violence may escalate and/or persistent harassment. Conflict over child contact? Victim may play ill. Victim may have presented a challenge to the control. Life change; pregnancy, menopause, redundancy, Illness. Abuser has carer responsibilities? Financial issues; no control of finances, forced debt, dependency/entrapment. Stalking may begin. Victim starts to tell others about the abuse.

Sexual abuse – unwanted touching, forceful sex/sexual acts, derogatory comments, sexual assault, rape etc. Animal or pet abuse.

**5. Escalation.** Control escalates; strangulation/choking/drowning, begging, crying, violence, threats, suicide threats. Increased child contact conflict. Victim help-seeking, fearful, and/or may feel guilt. Counter allegations? - consider DARVO; violent resistance may occur. Use of weapons. Drug and/or alcohol/MH issues escalation. Breach of bail/orders. Others involved with threats, harassment etc. (again consider HBV/A). Sexual abuse; current unwanted touching, forceful sex/sexual acts, derogatory comments, sexual assault, rape etc.

Increased child contact conflict. Victim help-seeking, fear, and/or may feel guilt. Increased stalking may also be evident in stage 5.

**Stage 6. Homicidal ideation** Threats to kill &/or perpetrator threats of suicide/self-harm. Last chance thinking, “if I can’t have you nobody will/can” “I’ll do time for you”. Increased stalking & monitoring. Victim may: be fearful, feel powerless “he/she is never going to leave me alone” “He/She is never going to let me go/leave him/her”. Things may become calm/more intense. May sense something has changed.

**Stage 7. Planning** Web searches, murder kits/weapons. Increased stalking - seeking to be alone with victim and/or children. Unaware of plan/may sense increased danger.

**Stage 8. Homicide** for guidance only- not required to determine risk level – Homicide, coerced into suicide, children killed, others killed, missing person, staged suicide, sudden ‘accident’, drugs administered, fatal fall, victim may be forced to live with death of children.



This assessment tool has been designed with permission from Professor Jane Monckton Smith, Professor of Public Protection at the University of Gloucestershire as part of the Victim Support pilot using her research to evidence and identify significant stages/triggers and red flags in risk escalation.

Monckton Smith, J. (2019) The Homicide Timeline: Using Foucauldian Analysis to Track an Eight Stage Relationship Progression to Homicide Violence Against Women <https://journals.sagepub.com/doi/10.1177/1077801219863876> Timeline research is supported by University of Gloucestershire.

[https://www.glos.ac.uk/courses?s=homicide+timeline&cpt%5B%5D=course&subject\\_area%5B%5D=criminology-and-policing](https://www.glos.ac.uk/courses?s=homicide+timeline&cpt%5B%5D=course&subject_area%5B%5D=criminology-and-policing)

Link to 8 stages interview with Prof Smith <https://www.counselmagazine.co.uk/articles/order-out-of-chaos-professor-jane-monckton-smith>

## Appendix 2: Accommodation Guide

### **Accommodation for Victims of Domestic Abuse- a quick guide**

Under the Domestic Abuse Act 2021, there is a duty to accommodate and support victims of Domestic Abuse, including children.

The aim is to stabilise the service user so they are in a position to move into permanent accommodation and recover from their experiences. Each person is allocated a Domestic Abuse Supported Accommodation Officer to act as a Lead Professional to bring in all required services including mentoring, life skills and therapeutic services.

In order to make a referral, please contact the relevant area, although those in need can present in any area.

- **Copeland:** email: [Homelessness3@cumberland.gov.uk](mailto:Homelessness3@cumberland.gov.uk) t: 01946 598300 24 hours
- **Allerdale:** email: [Homelessness1@cumberland.gov.uk](mailto:Homelessness1@cumberland.gov.uk) t: 01900 702660 office hours, 0300 373 3730 out of hours
- **Carlisle:** email: [Homelessness2@cumberland.gov.uk](mailto:Homelessness2@cumberland.gov.uk) t: 01228 817428 office hours, 01228 817373 / 817386 out of hours

## Appendix 3: Support Services

Poster (hyperlinked) outlines relevant support services for victims of DA.



DA Helpline poster  
041224.pdf