NHSScotland Board Chief Executives

18 January 2012

Dear Chief Executives

Gender-based Violence and Health Programme

In Sept 2008 we embarked on an ambitious programme of work to improve the identification and management of gender-based violence across NHSScotland. Our priorities, as outlined in CEL_41, were designed to assist us fully recognise and meet our responsibilities as a service provider, employer and partner agency.1

Evaluation of the programme reveals encouraging progress across the country towards accomplishing our initial objectives and I commend you for the commitment and effort demonstrated in your boards. Most notable amongst your achievements is the successful introduction of routine enquiry of abuse in the 6 key priority settings in a number of boards, and the accompanying roll out of a national training programme which has trained almost 3,000 staff. In addition, a suite of guidance and resources have been developed to help staff address this issue, a research programme has been established to further our understanding of appropriate interventions and approaches to this work and recently we have issued a national PIN policy to support staff who have experience of abuse.

Future Direction

The overarching theme in CEL_41 was the adoption of a systems approach to embed this issue firmly within policy, planning and service provision. At the outset we acknowledged it would be an incremental process given the institutional and organisational changes demanded by such an approach and the variation in health boards’ state of readiness to engage in this work. Our twin aims for the future therefore are to consolidate the progress made to date and to complete the following areas of work of CEL_41:

- Routine enquiry of abuse

1 CEL_41

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Implementation of routine enquiry within the 6 priority areas should be undertaken in all territorial health boards. An important aspect of this work is the recording and collation of data around disclosures. Although challenging, early indications from areas where this has been achieved reveal high levels of disclosures from service users. These data will be helpful both in shaping our service response and in contributing to the national drive to provide robust data across the country on abuse.

- **Employee PIN policy on gender-based violence**
  Implementation of this policy is a key priority to support the drive towards tackling gender-based violence. Some boards have already embarked on planning the implementation of this policy and we would expect that boards will make provision for ensuring that staff can access this policy and that managers are supported to implement it.

- **Role of GPs**
  GPs have a pivotal role in identifying and responding to abuse, and in some areas they have engaged with the programme and participated in training. Since they are at the heart of our primary care services it is important that they are apprised of the local work on gender-based violence, and that arrangements for appropriately sharing information are developed to enhance and promote effective practice and protection.

- **Multi-agency approach**
  The NHS is an important partner in contributing to the wider endeavour to address GBV. Many initiatives, such as domestic abuse courts, the Caledonian Programme, and multi-agency risk assessment conferences (MARACs) have been developed in different parts of the country and it is important that the NHS continues to be involved in supporting such work.

Over the last year, two further issues have emerged which need to be considered within the GBV work: Forced Marriage and Human Trafficking. Statutory guidance on the former has been issued to public bodies following the introduction of legislation in 2011. Boards therefore have to ensure that staff are aware of their responsibilities in this regard. In relation to Human Trafficking, new guidance has been developed for NHS staff which will be issued shortly.

**National Focus**
The Scottish Government is committed to building on these achievements and ensuring longer term sustainability of the gains secured to date. The role of national boards is important in taking this forward and we will work with NHS NES, HIS and NHS Health Scotland to determine the most effective means of incorporating gender-based violence into their existing workstreams.

NHS Health Scotland will assume more direct responsibility for providing leadership on this agenda, and will work with us to support health boards in continuing to roll out the GBV programme. At a national level we will strengthen our focus on prevention and early detection in this area and will work to ensure that a strategic focus on GBV is included within key policy and planning areas.

We will also work to enhance the public health focus on abuse and consider how the specific skills and unique perspective of public health can support the wider preventative efforts around violence and abuse.

**Resources**

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The Gender-Based Violence Programme Manager post has been continued for a further year and will be based in NHS Health Scotland. The key aim of this post will be to continue to support health boards implement the tasks outlined above, and will further work across SG Health and Social Care Directorates to ensure the integration of this work into key strategic areas.

At a practical level, the following resources will be available:

- Limited financial support for the ongoing roll out of the training programme
- Evaluation of the training, and reports to boards on this, will be maintained
- A basic awareness e-module on GBV will be produced for staff
- An e-module for managers and HR staff on implementing the PIN policy will be developed
- A research study on a group-work approach for people with abuse related complex trauma will be undertaken across a number of health boards.

Conclusion
Significant inroads have been made in accomplishing the tasks outlined in CEL_41. The relative lack of time to embed the gains secured to date, however, makes them fragile. Nonetheless, we recognise that addressing gender-based violence is crucial if we are to achieve our goal of reducing health inequalities and promoting gender equality. As evidence continues to demonstrate the incontrovertible connections between abuse and poor health we need to ensure that this informs our current and future practice. I should be grateful if you would continue to give this important issue your continued attention and support. I have asked NHS Health Scotland to let me have a report on further progress in 12 months time.

Yours sincerely

DEREK FEELEY
The Center-Based Vaccines Program's Manager has been conducting a review to assess the continued need for further assistance. The Center-Based Vaccines Program's Manager has been conducting a review to assess the continued need for further assistance.

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