Scottish Government Health Directorates Chief Scientist Office



Police To Primary Care: Police to Primary Care: Testing the feasibility and acceptability of a high risk domestic abuse referral pilot.

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Aim: to test the feasibility and acceptability of an intervention by Police Scotland to notify GPs about high risk domestic abuse (DA) incidents.

Project Outline/Methodology: The study used monitoring data to audit the pathway from identification of high risk DA to notification of a victim's GP following signed consent. Semi-structured interviews were used to investigate implementation within Police Scotland and to explore the acceptability of Police to Primary Care notification from the perspective of Police, GPs, women who had experienced abuse and a broader set of strategic stakeholders.

Kev **Results:** The intervention was poorly implemented - a tiny proportion of incidents led to GP One explanation is that the study notification. coincided with major upheaval as Scotland's 8 police forces were merged into one resulting in changing structures, databases and risk assessment tools. Nonetheless, the intervention (including its purpose and monitoring) was perceived to be poorly communicated to police officers and practical difficulties in obtaining signed consent meant that it became burdensome in the context of stretched resources. Stakeholders were, in the main. supportive of the principle of police communicating high risk of DA to GPs. Concerns about GP knowledge and use of existing guidelines in seeking disclosure and responding to/recording abuse were raised. Whilst some women who had experienced abuse had received long-term support from their GPs, many recounted negative and unsupportive encounters that further stigmatised them and closed opportunities for improved health outcomes.

Conclusions: Poor implementation meant that this study could not fully assess the pilot's feasibility in aiding disclosure and improving subsequent health-care. Nonetheless, the study identified how feasibility could be improved and demonstrated acceptability of police to primary care communication of high risk abuse.

What does this study add to the field?: This is the first study evaluating a specially designed intervention aimed at improving GP awareness of DA Although it identified significant bv police. implementation problems, its findings are relevant to collaboration and practice at the police and primary care interface. It demonstrated that notification of prior abuse is broadly accepted by the police, GPs, women who have experienced abuse and those in the NHS and third sector organisations with expertise in gender-based violence. It also demonstrated the need for improved practice within primary care and highlighted key facets of this including: recognising and validating the experience of abuse: and identifying its implications for victims' health over the longer term. Further, it produced recommendations for improving implementation and evaluation of future pilot work in this field.

Implications for Practice or Policy

Improved communication of DA between police and primary care is largely welcomed by key stakeholder groups but is only likely to make a difference to the support that those experiencing abuse receive if appropriately implemented by Police Scotland and responded to by GPs. Implementation would be improved through higher prioritisation of the notification intervention by police, more effective processes of monitoring and greater police awareness of its purpose. Further training (and engagement with existing training) for GPs around recognising, validating and responding to abuse is warranted.

Where to next? The research team is currently exploring with its networks in the NHS, Police Scotland and third sector organisations refined pilot and alternative approaches to testing means of improving communication between police and primary care. These will be set within the context of UK and international evidence of improving primary care responses to DA and in the context of evolving health and social care integration.

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