Key points

1. This guideline is to be read in conjunction with the information and guidelines on the WNHS Family and Domestic Violence (FDV) website. See also relevant forms:
   - Screen (all): Screening for Family and Domestic Violence (FDV 950)
   - Assess (if required): Assessment Family and Domestic Violence (FDV 951)
   - Refer (if required): KEMH patients via eReferral to Social Work.
     - Note: Women who have identified with FDV and decline social work assistance still require referral to social work.
   - Supporting documents
     - FDV Flowchart and CALD FDV Flowchart
     - Guideline for Responding to FDV
     - Reference Manual for Health Professionals Responding to FDV

2. Screening is to take place when the woman is alone
   - Her partner, family (including children) or friends should not be present

3. Documentation of FDV must be recorded and filed in the medical record, not in the MR 220 Pregnancy Health Record

4. Offer screening (use the FDV950) for:
   - Obstetric patients:
     - At initial visit
     - In the third trimester
     - Postnatal- prior to going home from hospital (Birth Suite, Ward, Family Birth Centre)
     - Unbooked women at their first contact with the hospital (e.g. Emergency Centre (EC), Maternal Fetal Assessment Unit)
     - There may be opportunities to screen in the Breastfeeding Centre and Visiting Midwifery Service, where staff are concerned
- **Non-obstetric patients** (screen at each presentation and once per admission)
  - On every presentation to:
    - EC
    - Day Surgery Unit
    - Outpatient Clinics (including Preadmission Clinic, Infusion Unit)
  - Inpatient: On admission (Adult Special Care Unit, Ward)

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**References**


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**Related policies**

**Legislation:** *Restraining Orders Act 1997*

Department of Health WA Policies:

- Mandatory Policy: [MP 0015/16 Information Access, Use and Disclosure Policy](#) (2019)
- Mandatory Policy: [MP 0010/16 Patient Confidentiality Policy](#) (2016)
- OD 0518/14 - Bilateral Schedule: Interagency Collaborative Processes When an Unborn or Newborn Baby Is Identified as at Risk of Abuse and/or Neglect (2014)

NMHS Policies (WA Health employees access via Healthpoint):

- [Family Domestic Violence Leave Procedure](#) (staff)
- [OSH Working Alone Policy](#) (staff)
- [Restraining Orders](#) (Fact Sheet)

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**Related WNHS policies, procedures and guidelines**

WNHS Policies (WA Health employees access via Healthpoint):

- [Family Conflict Management](#)
- [Language Services](#)
- [Violence and Aggression Prevention and Management Policy](#)

KEMH Clinical Guideline: Obstetrics & Gynaecology: [Antenatal Care Schedule](#)

WNHS Women’s Health Strategy and Programs: [Family and Domestic Violence](#) (WA Health employees access via Healthpoint); [Responding to Family and Domestic Violence](#) guideline
Useful resources (including related forms)

| WNHS- Women’s Health | Family and Domestic Violence Toolbox and FDV Training |

Forms:

- FDV 950: Screening for Family and Domestic Violence (FDV 950)
- FDV 951: Assessment Family and Domestic Violence (FDV 951)
- FDV 952: Referral for Family and Domestic Violence (FDV952) (Note- KEMH use eReferral)

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NSQHS Standards (v2) applicable: 1 Governance, 2 Partnering Consumers, 5 Comprehensive Care, 6 Communicating

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