

South Worcestershire Community Safety Partnership Domestic Homicide Review Case No 2 ACTION PLAN

Overview Report Recommendations

| Recommendation | Action Required by Agency | Implementation Lead | Target date for Completion | Summary of Action Taken & Date |
|--|---------------------------|---------------------|----------------------------|---|
| Recommendation No 1 West Mercia Police should ensure that all front line officers are aware of their responsibilities for positive robust action when attending incidents of domestic abuse irrespective that there may have been repeated calls to the same address or people concerned, and compliance to NPIA guidance is ensured. | West Mercia Police | Det Supt HQ PVP | July 2014 | August 2013. All current front line response staff and identified specialist staff have an understanding of serious issues that may emerge from reported incidents of Domestic Abuse. This includes repeat victims and their risk assessment and also children exposed to similar incidents. Identified |

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| | | | | repeat child victims and |
| | | | | adults are subject to senior |
| | | | | officer daily management |
| | | | | and scrutiny to ensure the |
| | | | | sharing of appropriate |
| | | | | information to provide |
| | | | | reassurance to victims and |
| | | | | survivors and where |
| | | | | necessary to develop an |
| | | | | investigative investigation |
| | | | | strategy. |
| | | | | Update Feb 2014 |
| | | | | Following an HMIC |
| | | | | Review in December 2013 |
| | | | | West Mercia Police have |
| | | | | seconded an experienced |
| | | | | Detective Sergeant to |
| | | | | lead and co-ordinate a |
| | | | | Domestic Abuse Delivery |
| | | | | Plan. There is a range of |
| | | | | activity either planned or |
| | | | | underway to support |
| | | | | Officers and Staff in |
| | | | | |
| | | | | understanding the risks |
| | | | | associated with Domestic |
| | | | | Abuse. |
| | | | | WMP are developing an |
| | | | | action plan arising out of |

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|---|---------------------------|--|----------------------------|--|
| | | | | the recent HMIC inspection |
| Recommendation No 2 West Mercia Police to assess the impact of the pilot schemes of Anti-Social Behaviour Risk Assessment Conferences in the Telford and Hereford Divisions and consider implementing the concept force wide as soon as possible. | West Mercia Police | Ch Supt Local Policing (strategic alliance). | December 2013 | August 2013 The Anti Social Behaviour Risk Assessment Conference (ASBRAC) development has been piloted within selected areas of West Mercia since January 2013. The outcome being the desire to deliver the ASBRAC process across the strategic alliance. This new multi agency development requires local authority lead and ownership. West Mercia and Warwickshire Police intend to drive this initiative via the strategic lead for local policing Update Feb 2014: This process is currently under review as part of a wider review around risk assessment and Anti Social Behaviour Orders. ASBRAC continues to be used in areas of West Mercia. |

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| Recommendation No 3 South Worcestershire Community Partnership to request assurance from Clinical Commissioning | Awareness raising of domestic abuse guidance through feature in safeguarding newsletter to General Practices | Jonathan Leach Named General Practitioner Safeguarding Ellen Footman Designated Nurse | March 2013 | Completed /Ongoing Item in June Newsletter |
| Groups in Worcestershire that the guidance 'Responding to Domestic Abuse' (Royal College General Practitioners June 2012) has been implemented | Identification of Nominated Lead for Domestic Abuse in each general practice. | Jonathan Leach Named General Practitioner | April 2013 | All GP practices have been informed of the recommendation but they |
| across all general practices. | 3. Targeted training on domestic abuse to Nominated GP leads identifying roles and responsibilities, local pathways and support services | Jonathan Leach Named General Practitioner Safeguarding Ellen Footman Designated Nurse | December 2013 | have no contractual obligation to have a nominated lead. This is being raised with NHS England Profile raised with GP |
| | 4. Audit across General Practices to focus on implementation of domestic abuse guidance, referrals and information sharing with partner agencies | Jonathan Leach Named General Practitioner Safeguarding Ellen Footman Designated Nurse | November 2013 | practices that a nominated Lead for Domestic abuse is good practice. Questionnaire gone out all practices with input from Coordinator – awaiting analysis |
| | 5. Progress on actions and evaluation of audit and training programme to be fed back to CCG Safeguarding Adults and Children health Forum | Jonathan Leach Named General Practitioner Safeguarding Ellen Footman Designated Nurse | | Targeted Domestic abuse training has been incorporated into Level 3 Safeguarding children training for GPs. Level 3 |

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| | CCG Quality and Patient | | | training is a rolling |
| | Safety Committees | | | programme, held on a |
| | Community Safety | Frances Howie | | Quarterly basis which all GI |
| | Partnership | | | are invited to attend. (All |
| | \\\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\. | In Callerina | | GPs should attend Level 3 |
| | Worcestershire Safeguarding Adult Board | Jo Galloway Executive Nurse Quality and | | training as a minimum eve |
| | | Patient Safety | | 3 years, with annual updat |
| | | | | regarding safeguarding. |
| | | | | Level 1 safeguarding adult |
| | | | | training also includes basic |
| | | | | awareness raising around |
| | | | | domestic abuse) |
| | | | | Training being delivered to |
| | | | | GP's and A&E clinicians by |
| | | | | forum coordinator over |
| | | | | |
| | | | | coming months. |
| | | | | |
| | | | | Self assessment |
| | | | | Questionnaire to be sent t |
| | | | | all GP practices to provide |
| | | | | baseline of current |
| | | | | implementation of |

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| | | | | Recommendation 3. |
| | | | | NHS England to be informed following the audit, regarding compliance of GP Practices with the implementation of Recommendation 3 |
| | | | | All Domestic abuse Notifications will be sent to GPs from the Integrated Safeguarding Team which identifies the victim and children in the household. GPs will action based on professional judgement and |
| | | | | knowledge of family. Due to be implemented by 28 th Feb 2014 |
| Recommendation No 4 Worcestershire Acute Hospital Trust to ensure that all Emergency Department staff obtain full details and | Worcestershire Acute Hospital Trust | Clare Bush Matron Emergency Department WRH AND Kidderminster | Ongoing | There are a number of processes in place currently. High risk cases are |

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| patients who frequently present with alcohol and/or drug related injuries and share this information with other agencies such as the police and Adult Social Care. | | Worcestershire Royal Hospital Rose Johnson (Clinical Director A&E) | | Alison Chapman (A&E MARAC lead) – enhanced awareness around MARAC to delivered to front line nurse and consultants. The Emergency Department computer |
| | | | | system allows us to tag and flag any patient we believe is high risk of domestic abuse. It also allows us to see on one screen all of the patient previous attendances. |
| | | | | All staff have mandatory safeguarding e- learning training All nurses at sister level and above have had |
| | | | | MARAC teaching and domestic abuse awareness training. • Nurses at staff nurse |
| | | | | level are currently placed or an internal teaching programme on domestic abuse provided by Donna Daley(midwife safeguarding |

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| | | Amy Ritchie / Alison Chapman | | Any patient identified as having multiple attendances will be discussed with a consultant and management plan made if appropriate. This information will be shared with GP. We are aware that we have some development and there are some pieces of work that are in progress: Development of a more robust 'in-house training programme' Development of a flow chart for use within the ED which would guide the clinician towards identifying victims of domestic abuse, what to do next and when is the right time to share information. A&E staff have received domestic abuse awareness training and this is planned to continue with supporting materials. All areas |

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| | | | | within A&E have domestic abuse posters and signposting to support services. Examining the possibility of staff being Visible Evidence for Victims (VEV) trained. Scoping placing an IDVA into hospital |
| Recommendation No 5 South Worcestershire Community Safety Partnership endorses the draft Protocol for Referral to the Community Intervention Team and seeks its implementation as soon as possible, as is the Adult Social Care Community Intervention Team contained within the Adult Social Care Bill. | South Worcestershire Community Safety Partnership | | | |
| Recommendation No 6 The Responsible Authorities within the Community Safety Partnership to explore the possibility of the introduction of a contractual obligation on providers to ensure that | Responsible Authorities within the Community Safety Partnership | | | This is in place within the current contractual obligations at clause 19 of the general conditions and point 4.13.1 in respect of data protection. |

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| client information is passed on to other relevant agencies at the end of the contract. | | | | |
| Recommendation No 7 When dealing with clients who are reluctant to engage at nominated agency premises, consideration should be given by West Mercia Women's Aid to seek alternative premises where the client is comfortable where formal meetings could take place. | West Mercia Women's Aid | Adele McGuigan – Service Manager | 1 st July and ongoing | This issue has been highlighted to the IDVA & Community Support teams at team meetings. It is now incorporated into paperwork as a checklist item to ensure that the issue is always considered when working with clients. |
| Recommendation No 8 When dealing with clients who are reluctant to engage, West Mercia Women's Aid should ensure that there is a positive assumption that the risk is or remains high and the IDVA will refer on to the appropriate source such as the original referrer and MARAC as and when necessary, particularly where the history of abuse appears to be historic. | West Mercia Women's Aid | IDVA procedures now include a clause directing them to seek alternative premises where client will feel comfortable to attend meetings, when required. Action completed 1st April 2013 directing them to seek alternative premises where client will feel comfortable | 1 st April 2013 and ongoing | This has been incorporated into internal IDVA training and is monitored at case file management meetings and supervision. Action taken 1st April 2013 and monitoring is ongoing. |

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| | | to attend meetings, when required. | | |
| | | Action completed 1 st April 2013 | | |
| Recommendation No 9 Worcester Community Housing should review the processes for dealing with situations where tenants are living with frequent disruptions and threats from other residents and their visitors, and make sure that robust systems are in place to ensure effective and timely action in order to safeguard families and children. | Worcester Community Housing | Paul Adams Estate Manager Lead on DV Viv Marriott Senior Neighbourhood Manager | July 2013 | New case management now installed, (May 2013) staff training completed (May 2013) |
| Recommendation No 10 South Worcestershire Community Safety Partnership to ensure that all agencies attention is drawn to the guidance as issued by: • Herefordshire Safeguarding Children Board regarding working | South Worcestershire Community Safety Partnership | | | These guidance's have been shared with the partnership thereby informing policy and future working. They are referred to by and accessible via agencies websites. |

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| with resistant, violent and aggressive families; • Worcestershire Safeguarding Children Board regarding Resistant, Violent and Aggressive Families within Inter-Agency Child Protection Procedures, and • guidance issues by the Government in December 2012. Agencies should ensure that this best practice is included in future training and policy documents. | | | | |
| Recommendation No 11 The Responsible Authorities within Community Safety Partnership to encourage all agencies to partake in Freedom Programme Training and MARAC referral training as from May 2013 | The Responsible Authorities within Community Safety Partnership | Stonham Home Group / Strategic Coordinator | Freedom Programme for Professionals recommissioned in April 2013 for 12 months to Stonham. Course dates to be released throughout the year. | The Freedom Programme for Professionals has been recommissioned to Stonham. To-date all courses are fully subscribed and it is estimated that in excess of 400 professionals will have attended by the end of the contract in June 2014. To be |

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| | | | | evaluated by Worcester |
| | | | | University |
| | | | | MARAC awareness events |
| | | | | continue to be scheduled all |
| | | | | of which are fully subscribed |
| | | | | with positive feedback. |
| Recommendation No 12 South Worcestershire Safety Community Partnership to ensure that Individual Management Report recommendations as set out in the in action plans contained within this report, are completed within the timescales indicated and that agencies report to South Worcestershire Safety Community Partnership confirming this within 6 months of the date this report is accepted by the CSP Board. | South Worcestershire Safety Community Partnership | All agency leads | Action plan to be updated | Strategic coordinator to brief Worcestershire Safer Communities Board Chair. |



South Worcestershire Community Safety Partnership

Domestic Homicide Review Case No 2

ACTION PLAN

Individual Management Report Recommendations

Agency: West Mercia police

| Recommendation | Action Required by Agency | Implementation Lead | Target date for Completion | Summary of Action Taken & Date |
|---------------------|---------------------------|----------------------|----------------------------|--------------------------------|
| Recommendation No 1 | West Mercia Police | Det Supt Head of PVP | Autumn 2013 | The West Mercia and |

| To Develop an analytical product that will identify those individuals where they are most vulnerable to harm from both an anti-social and public protection perspective. Recommendation No 2 | West Mercia Police | Ch Supt McNevin | Autumn 2013 | Warwickshire strategic alliance are to introduce 3 appropriately resourced Harm Assessment Units. These units will be dedicated to identifying and risk assessing vulnerable individuals and sharing appropriate information to effectively deliver safeguarding processes. Update Feb 2014: A Harm Assessment Unit for Worcestershire & Herefordshire is now in place as of 3 rd Feb 2014. HAU processes are being developed to ensure every incidents involving any vulnerable person has a thorough risk assessment and appropriate referrals are made irrespective of traditional silos. Process will be embedded over the forthcoming months. |
|---|-----------------------|--------------------|---------------|---|
| To implement the use of Anti- Social Behaviour Risk Assessment Conference across the force in order to facilitate a coordinated | vvest iviercia Fulice | Cit Supt Micheviii | Autuiiii 2013 | Risk Assessment Conference (ASBRAC) development has been piloted within selected areas of West Mercia since |

| approach to tackling repeat | | | | January 2013. The outcome |
|--|--------------------|----------------------|-------------|----------------------------------|
| victimisation. | | | | being the desire to deliver |
| viouriiodiioni | | | | the ASBRAC process across |
| | | | | the strategic alliance. |
| | | | | - |
| | | | | This new multi agency |
| | | | | development requires local |
| | | | | authority lead and |
| | | | | ownership. |
| | | | | West Mercia and |
| | | | | Warwickshire Police intend |
| | | | | to drive this initiative via the |
| | | | | strategic lead for local |
| | | | | policing |
| | | | | Update Feb 2014: |
| | | | | This process is currently |
| | | | | under review as part of a |
| | | | | wider review around risk |
| | | | | assessment and Anti Social |
| | | | | Behaviour Orders. ASBRAC |
| | | | | continues to be used in |
| | | | | areas of West Mercia. |
| Recommendation No 3 | West Mercia Police | Det Supt Head of PVP | Autumn 2013 | The completed pilot process |
| To increase awareness of | | · | | of Domestic Violence |
| the parameters of the | | | | Protection Notices (DVPN) of |
| Domestic Violence Protection | | | | which West Mercia was a |
| Notice scheme currently operating within South and | | | | selected area is currently |
| North Worcestershire and | | | | being independently |
| due to be implemented force | | | | evaluated and assessed with |
| wide by November 2012. | | | | regard to their effectiveness |
| | | | | by the University of London. |
| | | | | The outcome of that |
| | | | | |
| | | | | evaluation is to be presented |

| Assor Office their regar imple poter Upda after Police the wand to after ende evalue to the wand to after the wand to a | vorking National ciation of Chief Police ers (ACPO) group with recommendation ding proposed national ementation and ential funding resources. |
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| Office their regar imple potes Upda after Police the wand to after ende evalue to the wand to after t | ers (ACPO) group with recommendation ding proposed national ementation and natial funding resources. |
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| regar imple poter Upda after Police the wand t after ende evalue. | ding proposed national ementation and ntial funding resources. |
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| after Police the w and t after ende | te Feh 2014: Shortly |
| Police the wand to after ende evalue. | te res zora. Shortly |
| the wand to after ende evalue. | this DHR West Mercia |
| and to after ende evalue. | e rolled-out DVPN's to |
| after ende evalu | hole of the Force area |
| ende evalu | hey remained in place |
| evalu | the pilot officially |
| | d. The independent |
| of Lo | ation by the University |
| | ndon has now been |
| comp | leted and reviewed by |
| both | ACPO and the Home |
| Office | e. In November 2013 |
| the H | lome Secretary |
| anno | unced her desire to see |
| DVPC | o's rolled out nationally |
| in 20 | 14. Work is currently |
| unde | rway in Warwickshire |
| Police | |
| by 2 ⁿ | e to implement DVPO's |
| also ! | e to implement DVPO's d June 2014. This will |
| орро | |

| | | | | awareness within West Mercia Police and planning for events of this nature are underway ie: identification and training for 'champions' on each shift |
|---|--------------------|----------------------|--------------------------|---|
| Recommendation No 4 All Response officers to receive a more comprehensive brief in relation to history and risk involving particular addresses and individuals in order that incidents are not dealt with in isolation. | West Mercia Police | Det Supt Head of PVP | Implemented and ongoing. | Individuals who are identified as being repeat victims of incidents or who are recognised as being potentially vulnerable are subject to daily intrusive management that has chief officer oversight. Where potential victims are identified reassurance is required that all appropriate information is shared with agencies to safeguard the individual Update Feb 2014: The Harm Assessment Unit for Worcestershire and Herefordshire commenced in early Feb 2014. A HAU for the north of the force is due to begin in March 2014. HAU staff are responsible for ensuring incidents are |

| | | not reviewed in isolation and that appropriate referrals are made which takes into account the way perspective. HAU process will be embedded over the next 6 months. | h vider sses |
|---|--------------------|---|---|
| Recommendation No 5 To raise awareness of Children Safeguarding and re-enforce the statutory obligation that the police have to deliver safeguarding. | West Mercia Police | Since 2007 all new West Mercia police officer reci and Community Support Officers have received Safeguarding Awareness training during their induction training. The emphasis of this training cantering on risk identification and sharing information of risk. Train is delivered by staff from strategic HQ PVP Dept. Update Feb 2014 – Child Safeguarding remains a priority and a Strategic G Safeguarding post at Detective Inspector leve remains within the organisation. Safeguard training continues to be given to all new membe staff and has recently be rolled out to new PCSO* example. The increasing | cruits t g g ning n the Child ling ers of een s for |

| | | number of case reviews |
|--|---|-------------------------------|
| | | (Serious and local) taking |
| | | place since changes in |
| | | Working Together 2013 has |
| | | called for a more robust |
| | | |
| | | overview of the |
| | | Recommendations process |
| | | and a thematic review of |
| | | repeat issues. These reviews |
| | | have Strategic oversight at |
| | | ACC level and plans are |
| | | underway to provide more |
| | | consistent feedback to |
| | | those staff at the front end |
| | | of these processes. The roll |
| | | out of HAU departments in |
| | | the North and South of the |
| | | Force from Feb 2014 will |
| | | also ensure consistent |
| | | approaches are applied |
| | | across the Force to incidents |
| | | where child safeguarding |
| | | concerns are raised, |
| | | ensuring prompt and |
| | | appropriate referrals |
| | | processes. |
| | | The Section 11 audit for |
| | | Worcestershire is due in Feb |
| | | 2014 and will report on |
| | | West Mercia Police's |
| | | commitments to |
| | | safeguarding. |
| | I | |

| Recommendation No 6 Management of the Operational Information System needs to be more dynamic and subject to scrutiny | West Mercia Police | Chief Supt Safety & Justice | September 2013 | The strategic alliance is currently reviewing and assessing operational control and command of all live incidents with a realignment of additional new supervisory posts to enhance service delivery Update Feb 2014: Operations and Communications Centre has since October 2013 reinstalled Sergeant Supervisors and additional team supervisors for robust scrutiny of incidents with a focus on threat, risk & harm. They review all domestic incidents to ensure an appropriate response and ensure all relevant checks have been completed. No incident can be scheduled for delayed deployment unless it has been assessed by a supervisor. All domestic incidents have a |
|---|--------------------|-----------------------------|----------------|--|
| | | | | unless it has been assessed by a supervisor. All |
| | | | | marker on them, so if a crime / incident report is not submitted, then the incident will appear on the |
| | | | | exceptions list and become |

| | | subject of further scrutiny |
|--|--|------------------------------|
| | | by patrol supervisors. |
| | | Across West Mercia & |
| | | Warwickshire a supervisor |
| | | at Inspector rank within OCC |
| | | is also responsible for |
| | | dynamic review of all high |
| | | risk incidents. An |
| | | Intelligence Team is also |
| | | now available 24 hours a |
| | | day to inform the OCC of |
| | | additional information to |
| | | inform risk. |

Agency: CRI Pathway to Recovery

| Recommendation | Action Required by Agency | Implementation Lead | Target date for Completion | Summary of Action Taken & |
|--|--|----------------------------|----------------------------|---|
| | | | | Date |
| Recommendation No 1 To improve management of | To cross reference all referrals with MARAC and | Jon Shorrock/ Steve Sanger | April 2013 | • MADDA lists currently |
| referrals and assertive | MAPPA [and other high | Joh Shorrocky Steve Sanger | Αρι 11 2013 | MAPPA lists currently available and being |
| engagement | risk persons] lists where | | | used. |
| | agencies are able to share | | | Update August 2013 – |
| | these lists | | | as above and not able |
| | To assertively follow-up | | | to progress MAPPA list |

| | any high risk clients appearing on this list that disengage with the Pathways service, as would routinely occur foe the high risk clients | | | sharing due to data protection problems • Any flagged clients are routinely assertively engaged |
|---|--|----------------------------------|------------|--|
| Recommendation No 2 Ensure a smooth transition of client information through contractual/organisational changes | To ensure that all closed high risk clients are passed to the new service provider so that critical information is not 'lost'. | Steve Sanger/Local commissioners | April 2013 | Commissioners have been informed and have agreed to implement with any future commissioning arrangements |