Domestic Homicide Review in respect of X ACTION PLAN (APPENDIX 1)

Agency + Action Owner	Recommendation	Action proposed	Defined Outcome or Improvement	Evidence/Activity	Progress rating R>A>G
	Recommendation 1				
Barnsley Hospital NHS Foundation Trust Safeguarding Department	To ensure good and consistent practice BHNFT should raise awareness amongst staff in both Children & Adult Emergency Departments and the Dental Department of the need to assess domestic abuse where there are potential indictors and consider the possibility of child abuse in actual or potential cases of domestic abuse.	Staff in relevant areas will be reminded of the need to ask direct questions about domestic abuse in line with the Barnsley Child Protection Procedures and MARAC guidance. Awareness will be raised through direct supervision, training, newsletters and memos etc.	Staff in relevant areas will have a sufficient standard of knowledge of domestic abuse to be able to identify and manage concerns including any impact on children.	Domestic abuse and MARAC is part of all safeguarding training delivered in the Trust — either Induction or Update. Additionally staff awareness has been raised through supervision, memos and newsletters. The Emergency Department has gained national recognition for the high number of referrals it makes into the MARAC process. Questions about domestic abuse are also part of spot checks to test staff knowledge. These have not identified any concerns in relation to staff knowledge in this area.	Green

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Community Safety Partnership	Re-launch of Guidance for DHR's taking into consideration lessons learnt and updated guidance from the Home Office.	 Review processes - arising from the learnings from the DHR. Update DHR Guidance. Learning the lesson event to be arranged. Provide refresher training by publicising and tracking DHR training available on the Home Office Website. 	Update Guidance & Policy, building on: Lessons learnt from the review. Taking account of updated DHR guidance – revised 1 August 2013. Assisting any future DHR's to be more robust. Strengthen and build on multi agency partnerships.	DHR Guidance updated November 2015. Will be updated again December 2015 but new guidance will not be used until the recent homicide is reviewed.	Green
NHS Barnsley CCG	Send a reminder to all practices to constantly	Send a letter to the lead GP for Safeguarding and	To help to eliminate multiple prescribing of unused drugs.	In July 2013 a letter was sent from the Named	Green
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	review their repeat prescribing system to avoid duplication of the same class of drug. At the same time make practices aware of the risk of hoarding where there are multiple items on a repeat prescription. Approach A&E and see if it is possible to raise the profile of knife injuries and perhaps routinely notify the Police.	the Practice manager of all Barnsley practices recommending a review of the way they manage their repeat prescribing systems. Seek support from the CCG to include an item in the contract with BHNFT to record all knife injuries and the action taken with them.	To attempt to track a pattern of knife injuries in order to provide early help if Domestic Violence is the cause.	Doctor to all Barnsley Practices. This outlined the recommendations of the DHR to raise awareness of the need to regularly monitor repeat prescribing systems to ensure compliance. It was acknowledged that where individuals kept to the correct schedule for collection of repeat medication but stockpiled it by not taking it, then this would be almost impossible to detect. This scenario should however be borne in mind. The named Doctor had a meeting with the Director of Commissioning for the CCG and discussed the inclusion in the local Hospital contract of a log of knife injuries attending the Emergency Department. Staff within A&E have been advised of the need to complete an internal	Green
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				incident form when patients attend with a knife injury. The staff will then take	

action as appropriate,
these actions may be
An adult safeguarding
referral
A child safeguarding
referral
A referral to Police
A referral to mental
health services
A referral to MARAC
A Telefral to WARAC
The actions would depend
on the circumstances and
would involve a discussion with the senior team In
A&E and adult
safeguarding lead at
BHNFT to determine
action.
The matron in A&E has
highlighted this to staff.

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South West Yorkshire Partnership (NHS) Foundation Trust	To ensure that clinicians have access to appropriate risk assessment tools.	RIO is introduced across Barnsley Mental Health Services to ensure clinicians have access to level 1 Risk Assessment Tool (Assessment A Sainsbury Risk Assessment).	Clinicians awareness and ability to identify risk will be improved.	The level 1 (Assessment A Sainsbury Risk Assessment) has been introduced across Barnsley on the electronic system, RIO. Evidence is available via the electronic record to indicate if clinicians are completing the assessment. Awareness has been raised as demonstrated through increased referral into MARAC.	Green
	To ensure that staff have an increased awareness of issues relating to Domestic Abuse.	To provide information to all clinicians relating to Domestic Abuse.	Increased awareness of issues relating to domestic abuse.	Development of Policy, information provided on Trust Internal Intranet site, posters in clinical areas. Audit undertaken in relation to MARAC and Survey Monkey audit completed on staff understanding around issues relating to Domestic Abuse.	Green

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South West Yorkshire Partnership (NHS) Foundation Trust	School Nursing staff to be reminded of the need to record who is present at any contact.	Share lessons learnt from the review with all staff. Emphasise the importance of recording who is present during contact.	Records clearly show who is present at contacts.	Audit	Amber
	School Nursing staff to be reminded of the need to be mindful about domestic abuse, to ask direct questions when appropriate and record responses.	Share lessons learnt from the review with all staff. Emphasise the importance of asking direct questions and recording responses. Identify staff who need further training.	Records clearly show that domestic abuse has been considered and explored.	Audit	Amber
	Audit adherence to the above.	Develop an audit tool for establishing compliance. Audit practice every 4 months initially.	As above.	Audit tool in place and an initial audit carried out. However due to changes of senior staff in the service further audits have been missed.	Amber
	Incorporate good practice from Health Visiting SystmOne recording templates into School Nursing practice when this development work initiated.	Liaise and seek guidance from Health Visiting colleagues when developing processes etc for SystmOne implementation. Ensure assessment templates include fields for recording.	Records support good practice	School Nursing SystmOne unit mirrors Health Visiting and since the 0-19 Children's Service came into being there is increased integrated working.	Green
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	Recommendation 1				
Victim Support & Domestic Abuse & Sexual Violence Partnership (DASVP)	Victim Support should review, together with Barnsley Metropolitan Borough Council and other partner organisations and stakeholders, whether promotion and publicity for services to victims of domestic violence or abuse can be improved.	Barnsley Domestic, Sexual Abuse & Gender Based Violence Partnership (DSAGBVP) produced an Implementation Plan covering 2012/2015. Within the Implementation Plan were combined priorities for the group's membership. A number of the priorities focused on publicity and awareness raising. As a member of the DSAGBVP, Victim Support will continue to work to these priorities alongside organisational goals in the area of publicity and awareness raising. Alongside the priorities identified in the Implementation Plan, Victim Support in Barnsley continues to publicise its own services including DV provisions.	To raise awareness of Domestic violence and the services available to members of the Barnsley community who may benefit from support. In particular targeting GP and Dental surgeries	Victim Support in Barnsley continues to publicise its domestic abuse services by: Regularly attending the Domestic, Sexual Abuse & Gender Based Violence Partnership (DSAGBVP) Provide talks and presentation to agencies and community groups as appropriate Ensuring posters and publicity materials are present within GP and dentist surgeries Working with hard to reach communities eg Barnsley LGBT forum Attendance at relevant events and conferences	Green
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		Priorities include:		Reviewed by:	

		 Providing talks and presentations to community organisations Producing posters to put up in GP and Dentists waiting rooms Working with forums for hard to reach communities e.g. Barnsley LGBT forum Attending events and conferences e.g. Gender Equality Forum Launch 		 Monitoring attendance at DSAGBVP meetings (dates yet to be set for 2015) Monitor presentation content through staff one to ones Monitor attendance at relevant events and conferences Update November 2015; Barnsley commissioners are currently conducting a review of all domestic service provision and a request has been made to include an annual review of the publicity strategy with particular reference to health services for inclusion in the domestic abuse & sexual violence partnership (DASVP) action plan. 	
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	Recommendation 1				
Berneslai Homes	Recommend that staff continue to be regularly	Review Vulnerability Strategy.	Policies & procedures are fit for purpose and have	Review of strategy completed 14 December	Green

	updated on safeguarding issues and Berneslai Homes' role in identification, support, referral and partnership working (this is in line with our Vulnerability Strategy 'Something Doesn't Look Right').	Continue to work in partnership with appropriate agencies to ensure staff have appropriate training to identification, support issues and refer and work in partnership with appropriate agencies to deliver appropriate support to its tenants to minimise the risk of any safeguarding issues.	been adhered to.	Regular training/briefing takes place to updating front line staff with regard to identification of vulnerability issues as part of service delivery. Early identification of low level support, referral and partnership working are also core parts of our service delivery. Position at July 2015 Integral part of our Housing Management Ethos and individual case management. Strategy available on internal systems (Berneslai Homes Intranet). Case management monitored via Northgate & Civica management systems.	
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	Recommendation 1				
Pathways	Raise awareness of appropriate sources of support	Clearly displayed information which informs where help is available/helpline	Completed September 2013	Funding secured for another print run of Relationship Handbook	Green

		telephone numbers to both victims and perpetrators of domestic abuse. Target voluntary and statutory agencies waiting areas. GP surgeries and Medical Centres – distribution to be arranged through the hospital internal post system. Get it Right male perpetrator handbook finalise, print and distribute. Produce discreet ways to convey information, for example, by providing pens or key rings with a helpline number.	Completed September 2013	and new Safety Plan.	Green
Agency & Action Owner	Recommendation	Action Proposed	Defined outcome or Improvement	Evidence/Activity	Progress Rating R>A>G
		Produce 'Not what you expected' publicity material specifically for:- • Pregnant women • Families at Christmas			Green