



**Domestic Homicide Review
BDHR 2012/13-05 Action Plan**

Overview Report Recommendations								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
1.	The CSP should review the effectiveness of domestic violence communication strategies across different cultural and religious communities in the city and the extent to which they are represented in strategic partnerships.	Local	Review use of services, public awareness and strategic representation	Birmingham Community Safety Partnership	Undertake review. Strengthened awareness of domestic violence services. <ul style="list-style-type: none"> A major review of domestic violence to be undertaken 2015, to include communication as a strand of the review. Increased demand for services across Birmingham's population. 	March 2016	A major review of domestic violence was undertaken in Birmingham early in 2016. It found that there had been an increased demand for services across Birmingham's diverse populations and that all communities were well served by the specialist domestic violence services. Representation was extended in the Violence Against Women and Children Strategic Group to include a major BME DV service. Recommendations have been made to ensure that future public information reaches as wide and diverse an audience as possible, when resources allow.	Completed



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2.	The Community Safety Partnership should satisfy itself that all Birmingham services featured within this review have clear working definitions and policy supported by robust audit about what constitutes domestic abuse and have arrangements in place for promoting and monitoring participation in training and development. This should take account of action taken in response to a previous review (BDHR2012/13-04).	Local	Agency audit	Birmingham Community Safety Partnership	<p>Section 11 Review Domestic Abuse Standards Review Common understanding and domestic violence standards in place across organisations.</p> <ul style="list-style-type: none"> DV Standards adopted across Birmingham agencies. Audit and review of services and training included specifically in Section 11 and 175 audits of schools. 	Sept 2015	<p>Each of these elements now feature in the statutory safeguarding audit (Section 11) which is undertaken on an annual basis.</p> <p>They have also been included in the new West Midlands Domestic Violence and Abuse Standards for the region and arrangements are being put in place to introduce self-assessment against these standards.</p>	Completed



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	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
3.	The Community Safety Partnership should seek further information from the local law society as to whether accessing legal aid by the victims of domestic abuse is a barrier to using civil proceedings to restrain perpetrators of domestic abuse.	Local	Liaison with Law Society	Birmingham Community Safety Partnership	<p>Clear pathway for domestic violence victims seeking civil protection. Improved communication and oversight of arrangements for the administration and enforcement of civil orders providing protection to domestic abuse victims referred nationally if concerns.</p> <p>Civil Orders pathways secured in Domestic Abuse Strategy.</p>	March 2016	There is now a clear pathway for domestic violence victims seeking civil protection in Birmingham that includes civil orders gained through the National Centre for Domestic Violence, the Women's Safety Unit and Birmingham City Council.	Completed



Overview Report Recommendations								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
4.	The Community Safety Partnership should ensure that further discussion takes place with local courts in regard to the learning regarding the application for, and processing of, court orders designed to protect victims of domestic abuse.	Local	Liaison with the local courts	Birmingham Community Safety Partnership	Clear pathway for domestic violence victims seeking civil protection	March 2016	The Birmingham Women's Safety Unit is located at the Magistrates Court, providing support to victims of domestic abuse and liaison daily with the court.	Completed



Overview Report Recommendations								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
5.	The Community Safety Partnership should receive further information regarding the circumstances and effectiveness of local risk assessment tools and frameworks to identify risk and are able to provide effective multi-agency intervention and protection. The review should determine whether these need to be simplified into one risk assessment model.	Local	Review risk assessment	Birmingham Community Safety Partnership	<p>Shared multi-agency understanding of risk. Encouragement of multi-agency use of local risk assessment tools and framework undertaken to:</p> <ul style="list-style-type: none"> Review at regional level of Domestic Violence Risk Indicator. Model/Joint screening assessment of children Review at national level of DASH by the College of Policing. 	Nov 2015	A review at national level is being undertaken of DASH by the College of Policing and Birmingham will align to those recommendations.	Completed



Overview Report Recommendations								
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6.	Training for key individuals, in certain organisations, in how to use a <i>Risk Identification Checklist</i> must be in place, so that professionals can recognise high risk characteristics such as separation. Training should include how to develop a robust safety plan for victims who are intending to leave an abusive relationship.	Local	Training for key individuals.	Birmingham Community Safety Partnership	Assurance gained from organisations that relevant staff are trained to standard required.	April 2017	<p>All staff undertaking risk assessments in domestic abuse are trained and able to support and protect women and children in their safety planning, particularly at higher risk times such as separation.</p> <p>Audit undertaken by Birmingham Safeguarding Children Board under Section 11 demonstrates training regime now in place for agencies working with families experiencing domestic abuse.</p>	



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	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
7.	The CSP should consult with the Birmingham Safeguarding Children Board about any additional contact and action that is required in regard to any schools that are independent of the local education service where there may be concerns about the policy and professional development in regard to safeguarding that includes domestic abuse	Local	Implement domestic abuse element within section 175 and section 11 audits. Audit to include training, supervision and Policy development across agencies and schools.	Birmingham Community Safety Partnership	All Schools have a policy which defines domestic violence and abuse which sets the agency commitment to promote the safety of women and children. Pathways and procedures guide staff in the identification and responses to domestic violence and abuse. The policy and procedure extend to all staff who may be victims. Inclusion of domestic violence in Section 175 audits of schools.	June 2015	Awareness raising and training events facilitated. Domestic violence and abuse feature in Section 175 Audits and include supervision and policy development	Completed



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8.	The CSP should hold discussions with local faith leaders with a view to facilitation and support of further guidance and professional support in regard to divorce or separation involving domestic abuse	Local	Guidance to faith networks	Birmingham Community Safety Partnership	Mediation is not offered as a remedy where domestic violence is known. Guidance provided and endorsed by Birmingham Faith Network	June 2015	Birmingham City Council organised workshops on both safeguarding and domestic abuse with the Birmingham Faith Network to provide guidance on domestic abuse.	Completed



Overview Report Recommendations								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
9.	The Community Safety Partnership should initiate discussion with the local law society about the best approach and strategy to developing closer links between solicitors and local professional safeguarding networks to improve communication and oversight of arrangements for the administration and enforcement of civil orders providing protection to victims of domestic abuse.	Local	Initiate discussion with the local law society about the best approach and strategy to developing closer links between solicitors and local professional safeguarding networks to improve communication and oversight of arrangements for the administration and enforcement of civil orders providing protection to victims of domestic abuse.	Birmingham Community Safety Partnership	Training for local magistrates courts	June 2015	There is now a clear pathway for domestic violence victims seeking civil protection in Birmingham that includes civil orders gained through the National Centre for Domestic Violence, the Women's Safety Unit and Birmingham City Council.	Completed



Individual Agency Recommendations – Birmingham and Solihull Mental Health NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
10.	All clinicians should routinely enquire about domestic abuse at initial assessment and review this throughout their care episode.	Local	1. Routine enquiries in relation to domestic abuse should be recorded within BSMHFT assessment documents.	Birmingham and Solihull Mental Health Foundation NHS Trust: Head of Safeguarding; Head of Care Programme Approach	BSMHFT increase the identification of domestic abuse which enables more accurate and robust risk management and care planning to be achieved. A continuous Care Programme Approach Audit will be conducted to monitor the level of documentation of “routine enquiry” will be commissioned and this will be reported to the Safeguarding Committee. There will be an increase in the recording of routine enquiry will be evident with the audit	April 2014	BSMHFT have a continuous CPA Audit programme in place which monitors whether there is routine inquiry into violence and abuse as a standard – this is a requirement of the national minimum data set.	Completed



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	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
	All clinicians should routinely enquire about domestic abuse at initial assessment and review this throughout their care episode.	Local	2. All clinical staff should be aware of the appropriate actions to take when a disclosure is made by either victims or perpetrators of domestic abuse. This would include following the BSMHFT guidance ‘Women with Complex Needs – Good Practice Guidelines and Pathways for Working with Domestic Abuse (2010)’	Birmingham and Solihull Mental Health Foundation NHS Trust: Head of Safeguarding; Head of Care Programme Approach	Instigation of mandatory training	April 2014	Since the instigation of mandatory training on domestic abuse the prevalence of identification and instigation of actions regarding domestic abuse has increased and this is evidenced in safeguarding data.	Completed



Individual Agency Recommendations – Birmingham and Solihull Mental Health NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
			and to follow the corresponding section within the Safeguarding Vulnerable Adults Policy					
	All clinicians should routinely enquire about domestic abuse at initial assessment and review this throughout their care episode.	Local	3. The Safeguarding Vulnerable Adults Policy will need to be amended to incorporate this guidance	Birmingham and Solihull Mental Health Foundation NHS Trust: Head of Safeguarding; Head of Care Programme Approach	Safeguarding Vulnerable Adult Policy amended	April 2014	Complete	Completed



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	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
	All clinicians should routinely enquire about domestic abuse at initial assessment and review this throughout their care episode.		4. The routine enquiry of element of documentation to be included in the CPA audit	Birmingham and Solihull Mental Health Foundation NHS Trust: Head of Safeguarding; Head of Care Programme Approach	Routine enquiry now included in CPA Audit	April 2014	Complete	Completed



Individual Agency Recommendations – Birmingham and Solihull Mental Health NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
11.	The overall circumstances of this case reaffirm the need to explore issues of domestic abuse. Best practice recommends that all services users and carers should be given the opportunity of being seen alone and this should be reinforced through local care management processes.	Local	All service users are given a safe opportunity to disclose domestic abuse.	Birmingham and Solihull Mental Health Foundation NHS Trust: Medical Director; Head of Safe-guarding; Named Nurse for Adults at Risk.	To utilise Live Feedback questionnaire and Nursing Matrix	January 2014	A poster and screen saver campaign was delivered to reinforce this requirement.	Completed



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	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
	The overall circumstances of this case reaffirm the need to explore issues of domestic abuse. Best practice recommends that all services users and carers should be given the opportunity of being seen alone and this should be reinforced through local care management processes.	Local	1. A briefing will be disseminated to all lead clinicians, service development managers and clinical governance leads to remind all clinical staff that it is best practice that all service users and carers have an opportunity at every consultation to be seen alone to enable disclosure.	Birmingham and Solihull Mental Health Foundation NHS Trust: Medical Director; Head of Safe-guarding; Named Nurse for Adults at Risk.				



Individual Agency Recommendations – Birmingham and Solihull Mental Health NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
	The overall circumstances of this case reaffirm the need to explore issues of domestic abuse. Best practice recommends that all services users and carers should be given the opportunity of being seen alone and this should be reinforced through local care management processes.	Local	2. A poster campaign will be instigated to remind service users that they have the right to be seen alone. 3. Amend Safeguarding Vulnerable Adults Policy to reinforce importance of seeing service user alone.	Birmingham and Solihull Mental Health Foundation NHS Trust: Medical Director; Head of Safe-guarding; Named Nurse for Adults at Risk.				Completed



Individual Agency Recommendations – Birmingham and Solihull Mental Health NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
12.	The Accessing Interpreting Services Operational Policy should be reviewed including the monitoring of its implementation.	Local	<ol style="list-style-type: none"> 1. If a clients' first language is not English, the use of an interpreter should be considered/ offered in line with BSMHFT 'Accessing Interpreters Policy 2009' the outcome should be documented. 2. Monitor implementation of the policy. 	Birmingham and Solihull Mental Health Foundation NHS Trust: Medical Director	To be included as part of Trust Audit programme.	April 2014		Completed



Individual Agency Recommendations – Birmingham and Solihull Mental Health NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
	The Accessing Interpreting Services Operational Policy should be reviewed including the monitoring of its implementation.		3. Interpreters are used in line with Trust policy and consideration should be given to using interpreters with training in Domestic Abuse as research has shown that this is best practice.					



Individual Agency Recommendations – Birmingham and Solihull Mental Health NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
13.	The RAID interface with acute services must be clarified at referral and discharge.	Local	The RAID interface with acute services must be clarified at referral and discharge.	Birmingham and Solihull Mental Health Foundation NHS Trust: Associate Director for RAID; RAID Service Manager; Local RAID Managers in liaison with acute hospitals	There is an effective referral route and interface between services which is understood and actioned by all parties. Partnership audits are conducted to evaluate the efficacy of the arrangements and this is reported to the Clinical Governance Committee.	April 2014		Completed



Individual Agency Recommendations – Birmingham and Solihull Mental Health NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
14.	<p>BSMHFT to ensure that clinicians understand the impact of domestic abuse and coercion on our service user, carers and their families.</p> <p>1. To support clinicians in understanding the cultural dynamics of abuse.</p> <p>2. To enable clinicians to make assessments, both CPA and Care Support which are sensitive to diverse beliefs and values</p>	Local	<p>1. To support clinicians in understanding the cultural dynamics of abuse.</p> <p>2. To enable clinicians to make assessments, both CPA and Care Support which are sensitive to diverse beliefs and values</p>	Birmingham and Solihull Mental Health Foundation NHS Trust; Medical Director in conjunction with Spiritual Team	<p>All clinicians are able to effectively and sensitively work with service users who are victims or perpetrators of domestic abuse with an understanding of the impact of the diverse belief, value and gender dynamics which may be involved.</p> <p>When reviewing policy robust assurance monitoring arrangements need to be agreed.</p>	April 2014		Completed



Individual Agency Recommendations – Birmingham and Solihull Mental Health NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
15.	If ability to fully assess Service Users on Care Support is limited due to systems/processes this should be highlighted to the Clinical Director. Current service provision is being reviewed and will address these issues.	Local	If ability to fully assess Service Users on Care Support is limited due to systems/processes this should be highlighted to the Clinical Director. Current service provision is being reviewed and will address these issues.	Birmingham and Solihull Mental Health Foundation NHS Trust: Medical Director/ Associate Director	When reviewing policy robust assurance monitoring arrangements need to be agreed.	April 2014		Completed



Individual Agency Recommendations – Medical Centre								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
16.	Medical Centre to develop a policy on domestic abuse which reflects the recent guidelines from the Royal College of General Practitioners.	Local	Medical Centre to develop a policy on domestic abuse which reflects the recent guidelines from the Royal College of General Practitioners.	Medical Centre – Practice Manager and Practice Safeguarding Lead	For staff to be fully conversant with DV guidelines and how to support patients that disclose DV. Guidelines/Policy in place.	July 2013	Practice became an IRIS accredited practice December 2015	Completed
17.	Medical Centre to source training for staff on domestic abuse.	Local	Medical Centre to source training for staff on domestic abuse.	Medical Centre Practice Manager	For staff to have a clear understanding of DV. All relevant staff access training.	Dec 2013	Practice became an IRIS accredited practice December 2015	Completed



Individual Agency Recommendations – Medical Centre								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
18.	Medical Centre to identify named leads for domestic abuse and to establish clear pathways for responding to concerns and assessing level of risk. This should include identifying and managing potential risks to any children as well as the victim.	Local	Medical Centre to identify named leads for domestic abuse and to establish clear pathways for responding to concerns and assessing level of risk. This should include identifying and managing potential risks to any children as well as the victim.	Medical Centre – Practice Manager and Practice Safeguarding Lead	For staff to have a clear lead to share concerns and to ensure staff compliance with guidelines, training etc. Named lead to be notified to CCG.	July 2013	Practice became an IRIS accredited practice December 2015	Completed
19.	Medical Centre to make information on domestic violence available and accessible to patients. Posters and information available in practice to provide patients with information.	Local	Medical Centre to make information on domestic violence available and accessible to patients. Posters and information available in practice to provide patients with information.	Medical Centre Practice Manager	For patients to have access to DV support services. Materials available in Practice.	July 2013	Practice became an IRIS accredited practice December 2015	Completed



Individual Agency Recommendations – Birmingham Community Healthcare Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
20.	To review multi-agency policies and procedures for Safeguarding Children and domestic homicide to incorporate good practice.	Local	DA training to be reviewed and updated. DA Policy to be written.	Birmingham Community Healthcare Trust	DA training reviewed and updated to incorporate learning from recent DHRs. DA Policy in process of ratification.	Sept 2013	DA training part of safeguarding level 3 menu of training available. DA Policy in ratification process.	Completed
21.	BCHC School Health team to incorporate psychological/emotional factors as part of the assessment of enuresis in children.	Local	Enuresis assessment tool to be reviewed and psychological/emotional factors to be added as part of the assessment.	Birmingham Community Healthcare Trust	Psychological/emotional factors now a routine part of the assessment made by the school health practitioner as part of the enuresis assessment.	July 2013	Completed.	Completed



Individual Agency Recommendations – Heart of England NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
22.	Clarify the referral pathway for RAID and make explicit expectations in relation to recording of the referral; meet with BSMHFT to clarify the referral pathway; produce and circulate guidance in relation to recording of referral to RAID.	Local	Clarify the referral pathway for RAID and make explicit expectations in relation to recording of the referral: Meet with BSMHFT to clarify the referral pathway; Produce and circulate guidance in relation to recording of referral to RAID.	Heart of England NHS Foundation Trust – Head of Safeguarding	Referral pathway clarified within HEFT and with RAID. Electronic system used in ED to capture referral to RAID. Reliable documentation of referral to RAID achieved.	Sept 2013	New referral recording for RAID established on ED electronic recording system.	Completed
23.	Conduct a review of the content of training in place for ED and AMU in relation to the new Self Harm Policy (2013) to ensure that the following aspects are adequately covered: *Referral criteria and referral process for RAID; *Use of SAD score;	Local	Conduct a review of the content of training in place for ED and AMU in relation to the new Self Harm Policy (2013) to ensure that the following aspects are adequately covered: *Referral criteria and referral process for RAID; *Use of SAD score;	Heart of England NHS Foundation Trust	Staff within ED & AMU will have a clear understanding of how to manage patients that present with Self Harm, how to escalate concerns, manage risk and how to make appropriate referrals. Evaluations from training Monitoring of incidents Feedback from Local Authority Safeguarding teams.	Sept 2013	Self-Harm and Enhanced Observation Policies Revised AMU safeguarding offer developed. Enhanced Observation/Self Harm Bundle developed and implemented. Regular reminder of compliance requirements sent to staff.	Completed



Individual Agency Recommendations – Heart of England NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
	*Actions to take if a patient leaves the department without having had mental health assessment; * Related safeguarding considerations; * Language/ interpreting issues; * Escalation of risk associated with ending of relationships where there is history of violence.		*Actions to take if a patient leaves the department without having had mental health assessment; * Related safeguarding considerations; * Language/ interpreting issues; * Escalation of risk associated with ending of relationships where there is history of violence.	Heart of England NHS Foundation Trust				Completed



Individual Agency Recommendations – Heart of England NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
24.	Conduct a baseline compliance audit into the numbers of patients presenting with overdose that are seen by RAID. Design an audit tool to test compliance with specialist mental health assessment following overdose. Complete audit. Formulate findings.	Local	Conduct a baseline compliance audit into the numbers of patients presenting with overdose that are seen by RAID. Design an audit tool to test compliance with specialist mental health assessment following overdose. Complete audit. Formulate findings.	Heart of England NHS Foundation Trust, Adult Safeguarding Lead	The audit will have been undertaken and results analysed. Audit completed.	Sept 2013	Compliance with RAID assessment assured.	Completed
25.	Amend the Self Harm and Missing Person Policies to ensure that they reflect the issue of self harm and requirements for specialist mental health assessment (RAID).	Local	Amend the Self Harm and Missing Person Policies to ensure that they reflect the issue of self harm and requirements for specialist mental health assessment (RAID).	Heart of England NHS Foundation Trust, Adult Safeguarding Lead	Policies will have been reviewed and launched. Incident monitoring Working relations with RAID & Mental Health teams' feedback.	Sept 2013	Policies amended. Bundle created of all necessary documentation in these instances.	Completed



Individual Agency Recommendations – Heart of England NHS Foundation Trust								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
26.	<p>Inform all clinical staff in the ED of the need to record whether or not an interpreter is required when assessing patients.</p> <p>Include this in the next version of 'Risky Business'.</p>	Local	<p>Inform all clinical staff in the ED of the need to record whether or not an interpreter is required when assessing patients.</p> <p>Include this in the next version of 'Risky Business'.</p>	Heart of England NHS Foundation Trust	<p>Staff compliant with the interpreting policy.</p> <p>Included in Risky Business in 2015.</p> <p>New Interpreting Policy in place 2016.</p>	Sept 2013	Renewed Policy in place.	Completed



Individual Agency Recommendations – West Midlands Police								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
27.	WMP should review DASH policy to determine whether discretion not to complete an assessment in all DA cases should be withdrawn.	Local	To ensure that all incidents of DA are correctly recorded and the risk identified.	West Midlands Police	Work is being undertaken at a national level in respect of DASH, awaiting outcome of strategic meeting.	July 2015	<p>WMP have made a commitment towards Regional and National DA Standards, and have also signed up to the PVVP Board that governs these standards; we continue to push the boundaries in relation to the RESPECT principles.</p> <p>WMP Force DA Policy has been reviewed and it has been determined that WMP will await the outcome and be guided by the national review of DASH and College of Policing.</p>	Completed



Individual Agency Recommendations – West Midlands Police								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
28.	DA and Safeguarding officers to receive training in respect of their roles under Working Together 2013 and recommendations from HMIC 2014.	Local	DA and Safeguarding officers to receive training in respect of their roles under Working Together 2013 and recommendations from HMIC 2014.	West Midlands Police	The rationale behind the recommendation is to allow for DA Team staff to fulfil their responsibilities in respect of child protection in DA and allow for effective joint working with Health & CSC. Mandatory training package to be implemented.		All specialist PPU officers defined by their role have received appropriate training around DA/CA as part of Operation Sentinel training and Supervisor training in 2016. All front-line officers have already received the training.	Completed
29.	The Force to review whether it is feasible to enable DASH to be electronic – attached to Crimes Portal. This ensures the report cannot be filed without supervisor endorsement.	Local	To ensure compliance with WMP Policy that DASH is properly endorsed by supervisors.	West Midlands Police	Changes to IT systems need to be agreed.		WMP are currently undertaking a radical change programme called WMP2020. A major part of the programme is Operation Policing Solutions which addresses the future IT rebuild for WMP. This is an ongoing project; therefore it is not feasible to make the DASH electronic at this time.	Completed



Individual Agency Recommendations – West Midlands Police								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
30.	To ensure that there is a clear policy in respect of non-molestation orders.	Local	To ensure that there is a clear policy in respect of non-molestation orders.	West Midlands Police	An informed and consistent response from police officers. Including in domestic abuse policy.	January 2014	This has been included in the Domestic Abuse Policy which was amended in January 2014.	



Individual Agency Recommendations – Birmingham City Council – Children’s Social Care								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
31.	Improvement of the functionality of the electronic social care system to include the use of chronologies on all cases.	Local	Improvement of the functionality of the electronic social care system to include the use of chronologies on all cases.	Birmingham City Council – Children’s Social Care	Addressed under the improvement plan for Children’s Services.	June 2013	New IT system commissioned and being rolled out April 2018.	
32.	Training and improvement activity to ensure that the quality of social care recording is improved.	Local	Training and improvement activity to ensure that the quality of social care recording is improved.	Birmingham City Council – Children’s Social Care	Addressed under the improvement plan for Children’s Services.	June 2013	Practice evaluations evidence improvement in case recording.	
33.	A review of the assessment process to introduce a single assessment model in line with the revised Working Together Statutory Guidance 2013.	Local	A review of the assessment process to introduce a single assessment model in line with the revised Working Together Statutory Guidance 2013.	Birmingham City Council – Children’s Social Care	Addressed under the improvement plan for Children’s Services. Family assessment now in place.	June 2013	The family assessment is now in place and meets the requirements of Working Together 2013.	



Individual Agency Recommendations – Birmingham City Council – Children’s Social Care								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
34.	The need to ensure allocated workers undertaking assessments where domestic violence is a significant feature have received adequate and specific training in this area.	Local	The need to ensure allocated workers undertaking assessments where domestic violence is a significant feature have received adequate and specific training in this area.	Birmingham City Council – Children’s Social Care	<p>The need for workers to be adequately trained in domestic violence and abuse now forms part of the Section 11 safeguarding assessment which all services working with children are required to complete. It seeks all agencies to work towards achieving, Safeguarding Children Board.</p> <p>“There is a Senior Designated Staff Member, with responsibility for domestic violence and abuse, who has received training by a specialist domestic violence service and attended multi-agency 41 training.</p>	June 2013	<p>Specialist Trainer commissioned and briefed re Birmingham’s DVA standards.</p> <p>96 practitioners accessed the training.</p> <p>Training embedded into the L&D core offer.</p>	Completed



Individual Agency Recommendations – Birmingham City Council – Children’s Social Care								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
					<p>All staff at every level receive training in domestic violence and abuse in relation to their role and responsibility, and where possible attend multi-agency training.</p> <p>All commissioned training is provided by a specialist domestic violence service and addresses issues of victim blaming in line with Birmingham domestic violence standards.</p>			



Individual Agency Recommendations – Birmingham City Council – Children’s Social Care								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
					<p>The agency can demonstrate the impact of training and improved practice as a result of the training e.g. strong evidence of staff taking appropriate action, making referrals for domestic violence and engagement in the MARAC”.</p> <p>Progress on this is monitored by Birmingham Safeguarding Children Board.</p>		<p>The BSCB has commissioned in 2017/18 multi-agency training ‘Understanding the impact of domestic violence and abuse on children’. The 10 sessions will provide 280 training places for front-line practitioners, to complement and build upon single agency training.</p> <p>The BSCB Learning and Development (L&D) Sub-Group monitor the extent, scope and quality of safeguarding training delivered by agencies.</p>	



Individual Agency Recommendations – Birmingham City Council – Children’s Social Care								
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35.	A review of multi-agency joint domestic violence screening process (currently underway).	Local	A review of multi-agency joint domestic violence screening process (currently underway).	Birmingham City Council – Children’s Social Care	External evaluation completed by Birmingham University. Joint screening for domestic abuse now sits alongside MASH and includes specialist domestic violence workers.	June 2013	Since the completion of this DHR, further work has been undertaken to review DA screening at the front door.	
36.	The need for clearer protocol for liaison with the Police in respect of open cases, where domestic abuse is a feature.	Local	The need for clearer protocol for liaison with the Police in respect of open cases, where domestic abuse is a feature.	Birmingham City Council – Children’s Social Care	Collaborative working at locality level has been improved, assessment teams now contributing to MASH.		ASTI Teams work closely with the police within the MASH.	



Individual Agency Recommendations – Birmingham City Council – Children’s Social Care								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
37.	The need to ensure interpreters are used when speaking with someone who has a significant role in a case and English is not the first language.	Local	The need to ensure interpreters are used when speaking with someone who has a significant role in a case and English is not the first language.	Birmingham City Council – Children’s Social Care	Social workers have ready access to commissioned interpreting services, evidence to show significant increase in demand.		Social workers have access to interpreters and work with them as and when appropriate.	
38.	To ensure checks are undertaken on significant adults where mental health issues are identified.	Local	To ensure checks are undertaken on significant adults where mental health issues are identified.	Birmingham City Council – Children’s Social Care, Operational Assistant Directors	Addressed under the improvement plan for Children’s Services.		Mental health workers are present within the MASH and have information as and when appropriate.	



Individual Agency Recommendations – Birmingham City Council – Children’s Social Care								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
39.	To ensure cases have effective management oversight in line with policies and procedures.	Local	To ensure cases have effective management oversight in line with policies and procedures.	Birmingham City Council – Children’s Social Care, Operational Assistant Directors	Addressed under the improvement plan for Children’s Services. Management and supervision arrangements around domestic abuse are now part of Birmingham’s Section 11 Safeguarding assessment which all services working with children are required to complete. The assessment requires that, “...There is an overarching strategy for identifying and protecting victims of domestic violence and abuse. There is a robust domestic violence and abuse policy and procedure that is reviewed regularly.		Improvements have been sustained in relation to management oversight i.e. signing off assessments <ul style="list-style-type: none"> • Regular supervision • Evidenced in practice evaluations • Recent Ofsted feedback and diagnostic reviews undertaken with support from Essex Improvement Partners. 	



Individual Agency Recommendations – Birmingham City Council – Children’s Social Care								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
					<p>The policy provides a clear definition of Domestic Violence and Abuse which includes coercive control.</p> <p>The policy is in line with BSCB multi-agency procedures and Birmingham’s Domestic Violence Standards. The agency effectively cascade and embed recommendations from domestic homicide reviews. All staff are made aware of, actively contribute to, and comply with the policy and procedure. Domestic violence and abuse is raised as appropriate at staff meetings”. Progress on this is monitored by BSCB.</p>			