



**Domestic Homicide Review
BDHR2013/14-04 Action Plan**

Overview Report Recommendations – Through Early Identification Victims of Domestic Violence and Abuse Are Effectively Safeguarded								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
1.	The Birmingham Community Safety Partnership should review how it produces current local domestic violence and abuse material, which is available to relatives, friends and colleagues and examine, if it provides information, which gives clear advice about what to do and how to do it.	Local	The general public, are supported by clear, awareness raising materials, to support, empower and protect victims from all communities. All information must include information and signposting to a range of services available.	Birmingham Community Safety Partnership	A major review of domestic violence is being undertaken. Communication is included as a strand of the review.	Ongoing 2016	Materials are available and distributed across Birmingham through the local community safety delivery groups.	



Individual Agency Recommendations – West Midlands Police								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
2.	West Midlands Police to undertake a review of homicide investigations covering 2015 to 2016 to determine that those investigations, where there were domestic violence related aspects, were recognised as such. The review should establish that the correct intelligence checks had been undertaken on all involved to retrieve all known background history.	Local	The West Midlands Police will provide assurance to the BSCP agencies that management oversight is exercised in all homicide investigations and will include monitoring evidence of domestic violence and abuse.	West Midlands Police	<p>1.1 An improvement in the completion of intelligence checks when a homicide has occurred to ensure that if domestic abuse has taken place between the nominals involved, it is recognised as such.</p> <p>1.2 To ensure that when a homicide occurs no investigative opportunities are missed or overlooked.</p>	Nov 2016	During 2015/2016, WMP recorded 30 homicides, a review of these has shown that all but 2 of the offences were solved and an offender brought to justice, with DA clearly identified where evident and resulting in appropriate referral in accordance with Home Office Guidance. Of the 2 homicides where an offender has not been brought to justice, one is deceased (suicide) and the other is known but has fled the UK and remains wanted. Accurate and thorough intelligence checks are evident in all of the offences.	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
					<p>Monthly DA audits by WMP Service Improvement Team (SIT) to ensure compliance with DA policy.</p> <p>Weekly Homicide Review Meeting chaired by Head of WMP Homicide; this includes attendance by a representative from the Homicide Intelligence Team.</p>		<p>Furthermore, to facilitate greater access to intelligence by response officers, all are now issued with hand held terminals and are provided with real time intelligence by Arctic.</p> <p>Arctic is a team within WMP Intelligence department who work 24/7 and monitor logs (calls for service) as they are reported, completing real time intelligence which officers at scenes have instant access to via their hand held terminals. This intelligence function is also supported by a dedicated Homicide Intelligence team who work solely within the homicide arena.</p>	Completed



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Individual Agency Recommendations – West Midlands Police								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
							<p>Guidance for the investigation of serious crime (to include homicide) exists in the form of the MIRSAP manual, College of Policing Approved Professional Practice and force policy.</p> <p>Oversight of all homicide investigations governed by a weekly FCID SLT meeting every Monday, and a monthly reporting to Crime and governance chaired by ACC Alex Murray who holds the portfolio for crime, and which is attended by representation from Homicide, Force Review, Criminal Justice and Office of Police and Crime Commissioner.</p>	



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							There is also a homicide on call Senior Investigating Officer available 24/7, 365 days a year to ensure that all reports for unexpected and suspicious death is afforded appropriate guidance from the outset.	



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3.	The Birmingham Community Safety Partnership must develop a Local Strategy under the umbrella of the national Violence against Women and Girls Strategy 2016-2020 to engage with private employers to promote knowledge of domestic violence and abuse and the implementation of policies and procedures to support employees.	Local	All private organisations have clear and consistent guidance that supports employers to respond effectively and safely to victims of domestic violence and abuse and their children.	Birmingham Community Safety Partnership	Included within local strategy.	Ongoing 2016	Prevention and early intervention in employment is now a key theme of the Domestic Abuse Prevention Strategy 2017-2020.	



Individual Agency Recommendations – The Employing Organisation – Through early identification victims of domestic violence and abuse are effectively safeguarded								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
4.	This report should be shared with the employing organisation formally by the BCSP to enable learning to take place in the organisation. The Employing organisation should be supported to develop and implement a domestic violence policy and procedure that ensures a safe, empowering and supportive response to victims, and assists work colleagues about what to do when domestic violence and abuse is identified or disclosed.				<p>The Organisation has embedded the learning from this DHR, and has clear and consistent guidance that supports Employers to respond effectively and safely to victims of domestic violence and abuse and their children.</p> <p>Copy of the Policy to be provided with an implementation strategy.</p>	August 2016		



Individual Agency Recommendations – Solihull Clinical Commissioning Group								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/RAG
5.	<p>The practice develops and puts into place a policy and procedure for domestic abuse.</p> <p>This policy should be linked to Solihull Community Partnership Domestic Abuse Standards, other safeguarding and relevant human resource policies and procedures.</p>	Local	To develop and put into place a policy and procedure for domestic abuse.	Practice Safeguarding Lead and Practice Manager	<p>To support practice decision making and response in respect of domestic abuse.</p> <p>Reporting to Solihull CCG Safeguarding Team whom will report progress on action plans into Solihull CCG Governance Committee's, exception reporting to Governing Body.</p>	Completed by end of Sept 2014	Completed and Closed 19.03.2015: A Safeguarding Children and Adults audit was completed that included Domestic Abuse. The practice had a DV policy in place as required.	Completed



Individual Agency Recommendations – Solihull Clinical Commissioning Group								
	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target Date	Outcome	Completion/ RAG
6.	The practice has systems in place to monitor and review that practice staff are consistent in applying the domestic abuse policies related to staff and patients.	Local	The practice has systems in place to monitor and review that practice staff are consistent in applying the domestic abuse policies related to staff and patients.	Practice Safeguarding Lead and Practice Manager	Established in-house systems to test compliance. Reporting to Solihull CCG Safeguarding Team whom will report progress on action plans into Solihull CCG Governance Committee's, exception reporting to Governing Body.	Audit Report and Reporting	Completed and Closed. 19.03.2015: Tested and closed as part of the audit undertaken. Note: the Primary Care Medical Service involved in this case no longer exists as a service.	Completed