

Warwick District Domestic Homicide Review SW01 – Single Agency Action Plan

Adult Social Care – Warwickshire County Council

Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
<p>Domestic abuse training for adult practitioners will be reviewed in the early part of the new calendar year including consideration of whether there could be a benefit of a more specific training menu for domestic abuse issues. The aim of the review is to ensure that awareness of domestic abuse and use of the CAADA DASH tool is fully embedded</p>	<p>Local</p>	<p>Review domestic abuse training needs and those around the DASH with Learning and Development and Social Care and Support. The training to include: understanding domestic abuse; identification and response; risk assessment and care pathways. CAADA DASH is included in the Managers Safeguarding training. A case example about domestic abuse could be included in the CAADA DASH element of the training.</p>	<p>Warwickshire County Council Learning and Development Manager in partnership with Social Care and Support – Service Manager for Safeguarding</p>	<p>Revised domestic abuse training specification in place</p>	<p>COMPLETED</p>	<p>COMPLETED</p> <p>The overall Learning & Development strategy for WCC linked to Violence Against Women and Girls Strategy is currently being developed further. A learning needs analysis to all partners is being sent out in September 2015, with a view to a strategy being developed by the end of the calendar year. Specific Risk Training for Social Care and Support will be an integral part of this. It is envisaged there will be an awareness level for all staff in WCC and then different programmes for specialist groups of staff. Learning from DHRs will contribute to the development and content of the training.</p> <p>Social Care and Support is also re-writing it's guidance currently in this area which Jas Dhadli is completing. This will then also inform the specific training for Social Care and Support Staff. The current Safeguarding Adults Training refers to the CAADA tool as a reminder/signpost to staff. As an interim measure there is training available via Sue Ingram's team and she will be putting on some additional training at an awareness level.</p> <p>Since 2014 the Adult Social Care newsletter for all staff, which is completed by the Head of Service has included articles on Domestic Violence on the 3rd October 2014, the 9th May 2015 and the 26th June 2015.</p> <p>I would suggest we can close off the two actions that are</p>

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						assigned to WCC Adult Social Care in the single agency action plan actions. These actions have been achieved. The previous update wording suggests things are still in motion needed to complete the actions. Work is still in motion, as we will always be working on these types of areas, but the specific actions outlined have been achieved.
As part of the requirements of the Care Bill, revise the Safeguarding Vulnerable Adults Policy to include the development of care pathways for domestic abuse victims/perpetrators and with reference to existing ADASS/LGA Guidance	Local		Service Manager for Service Development/Head of Policies Procedures and Governance	Revised policy in place	COMPLETED	<p>COMPLETED</p> <p>We now have a refreshed policy, post Care Act. We have taken this forward as part of a West Midlands collaboration and it covers the West Midlands area. Work is still ongoing to refine it and the associated local protocols, as better understanding of the Care Act and associated regulations and guidance emerges.</p> <p>The Warwickshire Adult Safeguarding Board also agreed that after the initial work to review purpose / function / membership post Care Act, that it would also undertake a piece of work jointly with other relevant boards, to better scope out the appropriate communications / interfaces between the boards. For example, WSAB, Children's Safeguarding Board, Community Safety, Violence Against Women and Young Girl's Board etc. This work is to be initiated shortly and a lead manager has been identified.</p> <p>I would suggest we can close off the two actions that are assigned to WCC Adult Social Care in the single agency action plan actions. These actions have been achieved.</p> <p>The previous update wording suggests things are still in</p>

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						motion needed to complete the actions. Work is still in motion, as we will always be working on these types of areas, but the specific actions outlined have been achieved.
Warwick District Council – Housing Department						
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
Domestic Abuse Policy for Warwick District Council (with appendices to cover specific services within the Council to be written. This will be written by Sustaining Tenancies Manager but will require support from across the Council and therefore the date for completion of the Policy will be June 2014	Council wide	<ul style="list-style-type: none"> Set up meeting of relevant Senior Managers Write Policy Policy to be agreed by Senior Management team See also action below- re partner agencies 	Sustaining Tenancies Manager	<ul style="list-style-type: none"> Policy written and shared with Domestic abuse Manager at WCC before implemented Evidence of achievement to be agreed by Senior Managers (see actions to take) Discussion at staff team meetings, one to ones and appraisals 	November 2014 This has been completed and front line staff are currently going through a programme of attendance on the Freedom programme and Domestic abuse awareness.	This is on-going with a completion date of 2016, to work along other policy and legislation changes.
The Senior Housing Officer to make contact with partner agencies and agree the correct referral process. This should be done by March 2014.	Council wide – will also feed into Domestic Abuse Policy	<ul style="list-style-type: none"> SHO to contact the relevant agencies and compile details 	Sustaining Tenancies Manager	<ul style="list-style-type: none"> Training via staff meetings One to ones appraisals 		Ongoing
When the HomeChoice application form is reviewed, to consider whether it is appropriate to include a section asking if the application is suffering domestic abuse. To explore future housing options /alternatives that could be offered to individuals who have complex needs who become homeless.	HomeChoice is a district wide Housing register used by the Council and all the Housing Associations with properties in the Warwick District area.	<ul style="list-style-type: none"> Homeless Advice Manager to write Policy which will include consultation with the Warwick District Housing Sounding Board 	Housing Advice Manager Housing Advice Manager To be included in the current review of the Homeless Strategy	<ul style="list-style-type: none"> Feedback from Housing Sounding Board Staff Team Meetings Homeless Strategy documentation		<p>We have reviewed the current HomeChoice application and it was concluded it was not appropriate to include this section on the form. We have reviewed our application and we are devising an online form that applicants are able to complete in a confidential and secure manner.</p> <p>It was agreed that the current approach to Domestic Abuse cases is the most efficient and secure way. It was agreed that making a homeless application due to domestic abuse face to face with an officer was a more consistent, efficient and transparent approach and showed more compassion and empathy for the customer.</p> <p>This is currently an action to be carried out in our first year of our homelessness Strategy 2015-2017.</p>

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Domestic Abuse training to be arranged for all frontline housing staff, with invitation to other frontline staff within the Council. The training will be delivered by CAADA (Co-ordinated action against domestic abuse). It is called – on the frontline: practical risk training and is suitable for frontline professionals who come into contact with victims of domestic abuse in their day to day work.	Housing and Property Services staff at Warwick District Council with invitation to other frontline	Book training and ensure attendance is recorded and that further training is delivered on cyclical basis – every 3 year	Sustaining Tenancies Manager	The impact of this training will be measured at staff one to one, especially with those case managing- supervision and half yearly appraisals.		On-going to accommodate changes in legislation and policy.
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University Hospital Coventry and Warwickshire

Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
The Trust will continue their training schedule throughout 2014/15 to ensure all the key staff (ED /maternity/paediatrics,) are aware of their responsibilities for recognising, reporting and referring appropriately in cases of known and suspected DVA and recommends that this is regularly monitored as part of the quality and audit process. <i>NB-*REACT is a therapy team located and working in adult ED, who also receive the local induction training, therefore, receive this very specific training. Outpatient staff and the acute based therapy teams do receive the mandatory level 1 safeguarding adult training which does include information relating to DVA, including what to look for and their role and responsibility for reporting or getting appropriate advice and support.</i>	Local	DVA training sessions (Scars of Quiet Denial) for ED, Paediatric and Maternity staff will be provided as a minimum 3 times a year. <i>In addition to this all of the ED nursing staff (and REACT*) receive the triage competency training which includes a section on the identification and assessment of possible DVA</i> <i>NB – The above training and the local triage competency training in ED includes information about the DASH risk assessment process, similarly the midwifery induction programme also includes this in this training.</i>	UHCW – Child Protection lead Nurse/Safeguarding Adult Lead Nurse	A minimum of 60% of Band 6 and above staff in Adult /Paediatric ED and Midwifery will have completed this specific training (Scars of Quiet Denial) in 2014/15 <i>NB –This figure should allow at least 1 member of staff on duty per shift with this training in ED and in midwifery</i>	March 2015	<ul style="list-style-type: none"> • Training on the recognition and actions to take around Domestic Violence continues. Scars of Denial training has ceased, however it is replace by a robust training session. • Level 3 Child Protection training includes Domestic violence training usually provided by Coventry Domestic Violence and Abuse Support Services. This level of training is required by all Paediatric and Emergency registered staff.
DVA Quality Audit will be carried out twice annually as routine.	Local	1a) DVA Quality Audit programme developed and implement every six months, January and July. 1b) Quality Audit results to be monitored via UHCW Safeguarding Vulnerable Adults and Children’s Committee (SVACC) twice a year as routine. Any remedial actions required as result of this quality monitoring will be agreed by the committee.	1a)UHCW Child Protection lead Nurse/Safeguarding Adult Lead Nurse 1b) UHCW - SVACC	1a) 2 Quality Audits have been completed by June 2014 1b) Quality audit demonstrates a sustained improvement in the quality of DVA reporting and interagency referral by July 2014	1a) June 2014 1b) July 2014 <i>NB – The dates have been amended to reflect your concerns</i>	Audit continues to be carried out 6 monthly and action plan drawn up from learning.

The Recovery Partnership

Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
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Cascade recommendations and learning points through Addaction Local and National Operational and Clinical Social Governance Meetings across Coventry and Warwickshire	National (to Addaction) Local (The Recovery Partnership)	Table summary report in Clinical and Social Governance Group	Service Manager	Uptake of learning and recommendations via local operational meetings.	COMPLETED National CSGG meeting. 13/02/2014 Local CSGG 06/03/14	COMPLETED Recommendations continue to be cascaded.
Cascade recommendations to front-line staff in Alcohol and Drug Services across Coventry and Warwickshire	Local (The Recovery Partnership)	Produce summary of key learning points and recommendations; presented at TRP next monthly Operational and Clinical and Social Governance Group within the incident dashboards and cascaded throughout teams and to front line staff.	Service Manager	Uptake of learning and recommendations via local operational meetings. Evidenced in Monthly Governance Dashboards	COMPLETED Local CSGG 06/03/14 1 st January and 01 st February 2014 Governance Dashboards	COMPLETED Initial finding disseminated through Dashboards in Nov/Dec 2014.
Improve record keeping and record management standards: specifically in monitoring Domestic Abuse Managers.	Local (The Recovery Partnership)	<ul style="list-style-type: none"> Ensure case management is currently carried out on a 6 weekly basis. Monitor clinical records, ensuring management standards are being maintained. Audit Measure with specific attention to timelines of recording TRP. 	TRP Locality Managers and Team Leaders	Improvement in identifying risks of Domestic Abuse and Violence. Increased reports of referral to DV support Services and DV assessments	COMPLETED Annual Case Management/Record Management Audit to be carried out across TRP services Audit compliance against aforementioned standards by 30 th April 2014.	COMPLETED Internal audit carried out in all sites. Complete Case management takes place with each worker monthly.
Maximise service user engagement opportunities: Information detailing the services which TRP offer available in outreach sites e.g. Hospitals, Prisons etc.	Local (The Recovery Partnership)	Staff will be informed of the importance of ensuring that this information is always available and up to date.	TRP Locality Managers and Team Leaders	Monitored to in 4/6 weekly supervision with outreach staff.	COMPLETED	COMPLETED All outreach workers have been informed the importance of carrying Information on accessing treatment Services. Compliance with this is being monitored through supervision
Maximise service user engagement opportunities: Review risk assessment and domestic violence assessment tools Ensure that all clients are asked about domestic abuse.	Local (The Recovery Partnership)	Review risk assessment and domestic violence assessment tools and staff training needs. Training Needs Analysis for TRP staff on DV	Service Manager	Updated risk Assessment Increased numbers of DV cases identified Post review findings- develop new and/or improved questions on <i>pro formas</i> to encourage staff members to be more 'professionally curious' about domestic violence	COMPLETED	COMPLETED DV discussed at assessment stage and captured on risk assessments / risk management plans. Mandatory face to face training available for all staff to complete to support identification and actions required. Complete

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Maximise service user engagement opportunities: Introduce Brief Intervention for victims of DV abuse and/or violence	Local (The Recovery Partnership)	Roll out 3 session brief intervention module for use with service users who are victims of domestic abuse.	Service Manager Community Engagement Co-ordinator	Increased numbers of DV cases identified and offered Brief Intervention Increased numbers of DV referrals into specialist DV services and MARAC	COMPLETED	COMPLETED DV module available for use by all staff. Mandatory face to face training available for all staff to complete.
Improve communication and DV outcome; With other agencies ref sharing information and referral routes when DV risk (Current or Historic) is identified	Local (The Recovery Partnership)	All Risk Assessments and Management Plans are shared between services including probation and TRP treatment services and monitored via supervision	TRP Locality Managers and Team Leaders	Monitored to in 4/6 weekly supervision with TRP Staff including Criminal Justice and other specialist role.	30 th April 2014.	ONGOING Area improved significantly and sharing of risk assessments takes place.
Review current risk assessment and confidentiality processes: Criteria required to seek information from the police ref domestic abuse?	National (To Addaction) Local (The Recovery Partnership)	Address at the Organisational Social and Governance Group	Service Manager	Minutes of meeting	COMPLETED	COMPLETED
Improve joint working with police around DA incidents: Seek police assistance in steering victims and perpetrators into treatment	Local (The Recovery Partnership and Police)	Seek authorisation at senior level within West Mercia Police for local arrangement	Service Manager	Response from senior West Mercia Police representative	COMPLETED	COMPLETED Agreed at local level with SH Warwickshire Police Referral pathway in place via PVP dept.
Ensure community treatment orders are not issued without the individual being assessed: Standard and accepted procedures to be adhered to.	Local (The Recovery Partnership, Probation, Court Officials)	Identify Probation and Court Lead(s) to hold stakeholder meeting	Service Manager	Minutes of meeting and correct procedures followed in the future	COMPLETED	COMPLETED All orders that commence only follow assessment.

South Warwickshire NHS Foundation Trust

Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
Review of SWFT Emergency Department (ED) documentation to include a prompt for staff to investigate the possibility of domestic abuse.	Local	Introduction meeting to be arranged to discuss the need for the review Review of documentation to be conducted - as the IMR highlights opportunities were missed	Safeguarding Adults Lead in conjunction with Matron for Emergency Department	Minutes of Meetings Drafts of review Document Final revised document	COMPLETED	COMPLETED Meeting set in January 2014 to begin process Documentation reviewed by A&E department and amendments made. A&E Lead for safeguarding attended DA training external with safeguarding lead, training in development for all front line staff

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Targeted training for the SWFT Emergency Department on domestic abuse/Safeguarding Adults. This training is to include 'the case finding question', DASH Assessment and follow up actions	Local	Targeted training to be devised that meets the needs of the ED Onsite training to be held in the ED Training sessions to be booked Alternative E learning package to be developed	Safeguarding Adults Lead in conjunction with Matron for Emergency Department	Developed training package Training attendance logs Developed E Learning package Completion of ELearning records MARAC referrals	COMPLETED	COMPLETED Policy amended and approved at Policy Group May 2015
Swanswell						
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
Domestic Abuse Policy and Guidelines to be written	National	Create documents	Swanswell	The documents will be launched through our Team Brief which is a monthly communication tool. All team members will have to complete a survey to state that they have read and understood the documents and will implement in their practice. The docs will be disseminated in the April Team Brief.	The documents are complete and are undergoing amendments following expert review prior to dissemination to team members in the April Team Brief	Policy and guidelines created, awaiting expert review AWAITING UPDATE MAY 2016
New archiving system	Organisational	Implement new archiving system to make review easier	Swanswell Information Systems Manager	Swanswell are using the system now and it is fit for purpose.	Complete	COMPLETED
Audit to be completed on all recorded patients where domestic abuse has been recorded	Organisational	All thematic audits are co-ordinated through the Clinical Governance Team. Criteria attached Recommendations will feed in to the individual case file audits undertaken by our Senior Practitioners. Each team member has at least two case files audited each month.	Swanswell	The audit findings are given to the Executive Team. It is then the responsibility of the Regional Directors to address the recommendations through their team members.	End of April 2014	Criteria and standards in development AWAITING UPDATE MAY 2016
Warwickshire Probation Trust						
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress

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Additional Domestic Abuse Checks should be requested by Offender Managers when significant new concerns are identified. Staff to recognise/consider that the offender is not always the perpetrator of domestic abuse – but may be the victim.	Local	Re-issue to Probation staff guidance contained in this Domestic Abuse checklist for offender Managers. To reviewed/record at Team Meeting and reviewed every 6 months by SPO.	Head of Coventry, Solihull & Warwickshire National Probation Service	Updated guidance was cascaded to all staff under the auspices of the old Probation Trust.	COMPLETED	COMPLETED This guidance has been carried into both the NPS and CRC post the split of Probation
Undertake home visits when DV concerns are identified. Home visits provide valuable information that would contribute to the management of offenders. Even when the offender is not assessed as High or Very High Risk of Serious Harm.	Local	Re-issue to Probation staff guidance contained in this Domestic Abuse checklist for offender Managers. To reviewed/record at Team Meeting and reviewed every 6 months by SPO.	Head of Coventry, Solihull & Warwickshire National Probation Service	The Probation Trust guidance on Domestic Abuse case management made it clear that Home Visits should be undertaken in DA cases where the offender was either a potential victim or perpetrator. Audits were established to confirm this was happening.	COMPLETED	COMPLETED NPS staff are aware of the need to Home Visit in cases where there is potential for domestic abuse indicated. The published NPS guidance on the management of DA cases supports this. This action plan has been communicated to the CRC following the split of Probation.
Warwickshire Police						
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
Review Police working practices in relation to the cross-identification of individuals who have complex needs (for example a combination of Domestic Abuse, alcohol misuse and Adult Safeguarding vulnerabilities) which when taken together exposes them to High Risk. Introduce a process for the escalation of such cases into an appropriate multi-agency arena for assessment/management	Warwickshire, but considered as part of the Alliance approach between Warwickshire Police and West Mercia Police	<ol style="list-style-type: none"> 1. Review current practice/process 2. Devise method of identification of relevant individuals 3. Agree escalation process 4. Implement new practice/process 5. Audit/Review new practice 	Head of Protecting Vulnerable People	<ol style="list-style-type: none"> 1. Method of identification devised 2. Escalation process agreed 3. New practice/ process implemented 3. Audit completed 	<p>*September 2014</p> <p>Audit by December 2014</p>	<p>COMPLETE</p> <p>(A) The implementation of Warwickshire Police moving to use West Mercia’s IT systems (CRIMES & GENIE) was completed in August 2014 and were embedded throughout 2015. These systems bring together Warwickshire Police information into a more centrally held location that makes it easier for staff within the Control Room and Harm Assessment Unit (HAU) to identify cross-related safeguarding concerns.</p> <p>(B) Subsequent to Warwickshire Police moving onto West Mercia’s IT platform, both Forces are now jointly acquiring a brand new bespoke IT system known as ATHENA that will replace CRIMES/GENIE and will be fit for purpose moving forward.</p> <p>(C) A significant amount of training of staff has been completed and remains ongoing, which relates to identifying, risk assessing and managing safeguarding and</p>

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						<p>vulnerability concerns.</p> <p>(D) Staff in the Control Room and Harm Assessment Unit (HAU) are fully aware of the need to consider and identify cross-related safeguarding concerns when assessing incidents and crimes.</p> <p>(E) Warwickshire has now launched a Multi-Agency Safeguarding Hub (MASH), which will be all-age and all-vulnerability. This is a significant step in protecting the most vulnerable and especially those with complex needs. Warwickshire Police have moved their HAU to be entirely embedded as part of the MASH so that all necessary safeguarding and vulnerability information and concerns can be shared directly with partners and decisions can be made jointly in a timely manner about how best to protect and safeguard individuals and families. This new arrangement significantly improves access to and sharing of multi-agency information that will allow the identification of cross-related safeguarding concerns.</p>
<p>Review Police working practices in relation to the identification of repeat Domestic Abuse incidents risk assessed as Standard/Medium, which when taken together could be collectively considered to be High Risk. Introduce a process for the escalation of such cases into MARAC.</p>	<p>Warwickshire, but considered as part of the Alliance approach between Warwickshire Police and West Mercia Police</p>	<ol style="list-style-type: none"> 1. Review current practice/process 2. Devise method of identification/ assessment of relevant cases 3. Agree escalation process 4. Implement new practice/process 5. Audit/Review new practice 	<p>Head of Protecting Vulnerable People</p>	<ol style="list-style-type: none"> 1. Method of identification/ assessment devised 2. Escalation process agreed 3. New practice/ process implemented 3. Audit completed 	<p>COMPLETED</p> <p>*September 2014</p> <p>Audit by December 2014</p> <p>(*Note: As a result of the Police alliance, new IT systems are being implemented in Warwickshire with effect from 1st April 2014. New processes need to take into account these new systems and therefore implementation of a new process cannot sensibly be commenced until those systems are in place. Hence the target date)</p>	<p>COMPLETE</p> <p>(A) The Warwickshire MARAC protocol sets out the agreed MARAC repeat criteria as a case which has been previously referred to a MARAC and at some point in the twelve months from the date of the last referral a further incident of the following type is identified which, if reported to the police, would constitute criminal behaviour:</p> <ul style="list-style-type: none"> • Violence or threats of violence to the victim (including threats against property), or • A pattern of stalking or harassment, or • Rape or sexual abuse

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						Processes have been put in place within the PVP Harm Assessment Unit (HAU) to identify cases that meet this criteria and for referrals to be made to MARAC accordingly. (B) Staff within the PVP Harm Assessment Unit (HAU) and Domestic Abuse Unit (DAU) are fully aware of the need to consider escalating risk when assessing reported Domestic Abuse incidents Furthermore, Warwickshire has now launched a Multi-Agency Safeguarding Hub (MASH), which will be all-age and all-vulnerability and includes Domestic Violence and Abuse. This is a significant step in protecting the most vulnerable and especially those with complex needs. Warwickshire Police have moved their HAU to be entirely embedded as part of the MASH so that all necessary safeguarding and vulnerability information and concerns can be shared directly with partners and decisions can be made jointly in a timely manner about how best to protect and safeguard individuals and families.
Review Police working practices to ensure that Custody Staff accurately record injuries to detainees.	Warwickshire, but considered as part of the Alliance approach between Warwickshire Police and West Mercia Police	1. Review current practice/process 2. Appropriately revise or reinforce practice/process 3. Audit/Review practice	Head of Judicial Services	1. Current practice/process reviewed 2. Practice/process revised or reinforced as appropriate 3. Audit completed	COMPLETED	COMPLETE The Head of Custody (Chief Inspector REYNOLDS) has addressed this issue at the performance meeting with the current service provider 'Primecare.' The learning has also been fed into the Custody training programme.
Coventry and Warwickshire NHS Partnership Trust						
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
The importance of accessing specialist domestic abuse supervision (available via the safeguarding team) to be reiterated to staff who hold complex domestic abuse cases	Local	The availability of specialist domestic abuse supervision to be reiterated via the following channels: 1) CAADA/DASH training (Now delivered with Level 2	Coventry and Warwickshire Partnership Trust Named Professional for Domestic Abuse	1) Inclusion in DASH training slides and on information sent out to candidates 2) Inclusion in Scars of a Quiet Denial training and on information sent out to	COMPLETED 1) February 2014 2) February 2014 3) March 2014	COMPLETED 1. The Availability of specialist domestic abuse supervision is included in DASH training and sent out to candidates prior to

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		<p>Safeguarding Training) 2) Scars of a Quiet Denial training 3) Link group</p>		<p>candidates 3) Inclusion on Link Group Minutes 4) Supervision Policy in place</p>		<p>training in course pre-reading.</p> <p>2. Availability of specialist domestic abuse supervision is discussed in Scars of a Quiet Denial training during 'Roles of Professionals' session.</p> <p>3. Domestic Abuse (Clinical) Policy states that a discussion around domestic abuse, including attitudes and behaviours relevant to safeguarding, should be included in clinical supervision</p> <p>1) The importance of the considering Domestic abuse is now embedded in training and can be found at the following reference points.</p> <p>'Toxic trio' is included in DASH training (slide 72) and is a theme throughout 'Scars of a Quiet Denial' training particularly in 'Impact of Domestic Abuse on the Family' session. It is also included in Level 2 Child and Adult Safeguarding Training (slide 14)</p> <p>Consideration of domestic abuse during assessment is evidenced in Level 2 Adults and Children safeguarding (slide 14 – lessons learned from local serious case reviews includes think family, domestic abuse and professional curiosity).Also slide 31 "staff should routinely ask about abuse" refers to all types of abuse including domestic abuse.</p> <p>Three of the four case studies used during Level 2 training require candidates to consider domestic abuse as part of their assessment of the family. Slide 61 (DASH training) relates to asking about domestic abuse as part assessment and reminds staff to revisit the risk during further assessment/reviews. In 'Scars' the importance of</p>
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						<p>asking about abuse is considered in the 'Role of Professionals' exercise.</p> <p>Since Jan 2014 CWPT have trained over 2200 staff in Level 2 safeguarding children and adults.</p>
Scars of a Quiet Denial and CAADA/DASH risk assessment training to be reviewed to ensure that issues identified above, including the importance of considering domestic abuse during any assessment, and awareness of the toxic trio, are included.	Local	The importance of considering domestic abuse during assessment, and awareness of the toxic trio, to be included in Scars of a Quiet Denial and CAADA/DASH training.	Coventry and Warwickshire Partnership Trust Named Professional for Domestic Abuse	Inclusion in CAADA/DASH and Scars of A Quiet Denial training slides and on information sent out to candidates.	COMPLETED	COMPLETED CAADA/DASH training and Scars of a Quiet Denial training is already available to CWPT staff, training slides and information sent out to candidates to be amended to include the importance of considering domestic abuse during assessment, and awareness of the links between alcohol, substance misuse and domestic abuse (toxic trio) by February 2014.
Post learning audit to be conducted to establish effectiveness of training	Local	Effectiveness of training to be ascertained via: 1) Supervision 2) Referrals to MARAC 3) Referrals to specialist services	Coventry and Warwickshire Partnership Trust Named Professional for Domestic Abuse	<ol style="list-style-type: none"> 1) Supervision to include targeted questions to ascertain clinicians knowledge of domestic abuse policies, procedures and resources post training. 2) Referrals to MARAC by CWPT staff to be recorded on DVA database 3) Random audit of clinicians across service areas to ascertain number of referrals made to specialist services 	Action 3 – August 2016	<p>ACTION 1 & 2 COMPLETED</p> <p>1) CWPT employ a Named Professional for Domestic Abuse who does offer supervision specific to domestic abuse if requested or considered as required on review of a DASH risk screen. This supervision includes targeted questions to ascertain clinicians knowledge of domestic abuse policies, procedures and resources.</p> <p>2) The CWPT Safeguarding Team monitor referrals to MARAC by CWPT staff. These are recorded on DVA database. The Designated Lead for Safeguarding in CWPT is a member fo the MARAC steering in which referral rates are reviewed.</p> <p>3) Audit of clinicians across service post training to ascertain knowledge of referral process to specialist services including completion of DASH</p>

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						and referral to MARAC is scheduled in the Safeguarding Audit programme and is scheduled to be completed by 31st August 2016.
Health (CCG and NHS England)						
Recommendation	Scope of recommendation i.e. local or regional	Action to take	Lead agency and Responsible Officer	Evidence of Achievement	Target date	Progress
Recommendation to incorporating Domestic Abuse/Domestic Violence into the 'Making Every Contact Count' Agenda	Local & Regional	Work in partnership with Public Health Warwickshire County Council. Public Health West Midlands. Public Health England and Learning Pool Warwickshire Interactive Learning Management System (WILMA providers) and NHS England to: Develop and implement effective domestic abuse training for GPs which will enable them to: <ul style="list-style-type: none"> Recognise Domestic abuse; Effectively and sensitively ask questions to affect disclosure and/or respond to disclosure; Understand the complexities of domestic abuse and its impact on health; Refer into relevant specialist support e.g MARAC, IDVA, refuges 	Lead Nurse Safeguarding Adults Warwickshire. Coventry & Rugby CCG. In conjunction with: Learning and Organisational Development Manager (Social Care) Warwickshire County Council. Domestic Abuse Manager Communities Group Warwickshire County Council NHS England	<i>This recommendation has been put forward to the Work Force Development Sub Committee of the Warwickshire Safeguarding Adults Board and is now on the agenda.</i> Domestic Abuse Training programme for GPs Target numbers of GPs to be trained per annum to be determined by NHS England. Monitoring of numbers of referrals into MARAC, and DA specialist services.	COMPLETED Ongoing on a quarterly basis	COMPLETED It was discussed at the Work Force Development Sub Committee on 9 th April 2014. It was felt that DV agenda is too large to be added into 'making every contact count'. The preferred option was to include IRIS (Identification and Referral to Improve Safety) which is a general practice based DV and abuse training support & referral programme within all protected learning time sessions for GPs.
Develop domestic abuse policy and procedural guidance	Local		NHS England Designated Nurse Warwickshire	Implement best practice guidance; disseminate to GP practices through CCG website and other means.	COMPLETED	COMPLETED Domestic Abuse Policy and Procedural Guidance has been developed and disseminated.
To introduce a system where DA cases are identified on GP electronic systems to assist effective identification and information sharing	Local	Audit general practices in Warwickshire on the use of "flagging systems" for domestic abuse and as appropriate feedback to practices on how to implement such a system	NHS England	System in place	COMPLETED	COMPLETED GP's are now flagging on the records any DVA notifications.