

	Recommendation	Scope	Action to take	Lead Agency	Key milestones achieved in enacting recommendation	Target date	Status
1.	The Review recommends that the Home Office takes action to amend the wording of information leaflets and statutory Guidance relating to Domestic Homicide Reviews to reflect the increasing number of domestic abuse related suicides. Consideration should also be given to changing the title 'Domestic Homicide Review' to 'Domestic Abuse related Death Reviews.' This review is not unique in finding that the families of the deceased and her partner were confused by the title resulting in missed opportunities for the safety of future partners.	National	The Home Office is aware that some of the language used in leaflets and guidance does not necessarily apply to cases where the death was by suicide and is working to update this where appropriate. The Home Office however cannot commit to changing the title of DHR	Home Office CSP	The Home Office is currently working on revising the Statutory Guidance and rewording leaflets. Included in the CSP response to the Home Office consultation on DHR Statutory Guidance	August 2023	complete
2.	The Review Panel recommend that the new statutory Guidance relating to the conduct of Domestic Homicide Reviews clarifies that whilst pseudonyms for children should be gender neutral, the wishes of families should take precedence in accord with aim of current Guidance S6 para 53G	National	Continue to engage with Home Office on this action, when submitting completed DHR Overview Report and on publication.	Home Office	Safer Cornwall continues to pursue this aim with Home Office QA panel when DHRs are completed and submitted for feedback.	Ongoing	complete
3.	There is a need for further updated process, training and guidance to be provided in relation to the sharing and recording of information that promotes effective risk assessment and risk management in the course of local authority interventions.	Local	Individual training locally to the area that coordinated Jayne's enquiry and countrywide continues to take place, whereby risk assessment and case recorded is a learning outcome. An independent Safeguarding Conference Chair was appointed in September 2021. There is a procedure for monitoring the incoming requests; ensure that conferences are prioritized according to risk.	Cornwall Adult Social Care	We have appointed Lead Locality Social Workers and Partnership Manager's to develop practices, including practice around risk assessment, not just within adult social care but across the locality care system. Supporting a placed based safeguarding offer and ensuring systems and process to support this are embedded. As part of this process the coordination role of adult social care will be better highlighted to ensure better engagement with partners in undertaking and sharing risk assessment responsibilities.	May 2022 Sept 2021	complete
4.	There is a need for the use of DASH Risk Assessments to be revisited within all agencies working with vulnerable adults so that they are offered support services and/or a safe passage out of an abusive relationship if needed by the early involvement of specialist domestic abuse services.	Local	Review and update multi-agency training. Improve processes regionally, in line with national research and development, beyond the DASH Risk Assessment to enable relevant professionals in agencies to appropriately identify significant risk beyond a high scoring DASH alone. Ensure staff have attended DASV training levels 1, 2 and 3 delivered by Safer Futures /Barnardo's Cornwall and that this is up to date.	DASV Cornwall Adult Social Care Cornwall Council Children and Family Services, Together for Families	Level 3 training delivered by Safer Futures throughout Cornwall reviewed to address inconsistencies in use of DASH between agencies.	Ongoing	complete
5.	Children and Family Services are working directly with Local Domestic Abuse services to introduce Family DASA's (Domestic Abuse Support Advisors) into front line social work teams. The role is to support referral pathways for adults and children impacted by domestic abuse leading to stronger safety planning where children are living with domestic abuse.	Local	Recruit to Family DASA post	Cornwall Council Children and Family Services, Together for Families. Children & Family services	Family DASA role recruited to and practitioner in post.		complete

6.	When notifications of concern are received from outside organisations for closed cases, the duty worker must seek supervision before deciding action. If the agreed action is that we request a referral (e.g. for health assessment), be followed up to ensure a referral has been received. If the referral has not been received in a timely way, the team manager should have initial discussions with the referring agency to identify if this has been offered to the family. Team manager to consider using the professional differences policy if needed.	Local	Process to be shared with practitioners and team manager.	Cornwall Council Children and Family Services Together for Families Children's Community Health Services	Supervision records will reflect that practitioners are seeking support on closed cases.	Ongoing	complete
7.	Continue to deliver DASV and MARAC training to all reps and wider partner service staff – to maintain understanding of the process and the quality of referrals into MARAC.	Local	Continuing to deliver MARAC rep training and multi-agency MARAC lunch and learn sessions to raise awareness.	Cornwall MARAC	Two training sessions per year and MARAC lunch and learn (91 people in 2022, 145 people in 2023 trained across the system, from different agencies)	Ongoing	complete
8.	Teams should ensure where safeguarding concerns are raised, they liaise with the integrated safeguarding service to develop a safety plan, this can incorporate actions from all services involved with the person. (Presumptions should not be made that if a safeguarding referral is in place that it incorporates all relevant information - all new concerns should be escalated.)	Local: Cornwall Partnership NHS Foundation Trust (CFT)	Emphasis that Safeguarding is everyone's responsibility is highlighted in CFT comms and discussed in supervision. Training on raising concerns to be covered by Safeguarding Training. Dissemination of Safeguarding Flowchart. Safeguarding Newsletter produced and circulated	Safeguarding Team ICMHT/ACAH Team Managers ICMHT/ACAH Team Managers Safeguarding	Safeguarding Intranet Supervision Records Training Figures Safeguarding Flowchart Newsletter	Nov 2021 Ongoing Nov 2021 Dec 2021	complete
9.	The Acute Care at Home staff to receive extended safeguarding training. All other Teams to complete the Mandatory Safeguarding Training	Local: CFT	ACAH to receive. Level 2 Safeguarding – online training, Level 3 Safeguarding - via teams, Barnardos 1 day domestic abuse training, Learning Lessons Training provided by Safeguarding Team around care management and domestic abuse (1hr each session). All other front-line teams to ensure they are compliant with Safeguarding Training in line with the Training Needs Analysis	ACAH Team Manager Education & Training Team monitors compliance	All team members have been booked onto training as recommended. Safeguarding training around silent 999, RE, Think Family, Care Management and liaison with other services around Safeguarding concerns and where to escalate concerns. Monitored through training statistics monthly.	Ongoing	complete
10.	It is recommended that the officers who dealt with incidents involving Jayne and Martin without fully following relevant Force policies would benefit from advice on the need to follow Force policy for the benefit of future victims of domestic abuse.	Local: Devon & Cornwall Police	The informal management advice has been given and is subject to review by the relevant line managers of the necessary departments. Additional organization-wide training is already scheduled which will further reinforce this advice. This is scheduled for January and February 2022 and is targeted training aimed at 'DA Champions' in key roles and supervisory functions.	Devon and Cornwall Police	The Officers were reminded of Force policy for dealing with domestic abuse. Supervisor contact has been initiated with the officers involved in those interactions that were identified where a different service could have been offered. Management advice has been given to encourage a more holistic approach to cases of DA and for lateral thinking/professional curiosity to be adopted and applied consistently. They have been reminded of the force DA policy D34 and the National Crime Recording Standards.	20/01/2022	complete
11.	Secure funding for a second IDVA to broaden the scope of this area of the service to include inclusion of community hospitals and to offer a more county wide service.	Local	Funding secured	First Light	Recruitment process in place Appointment complete.		complete

12.	Pilot Scheme “Summer Policing” Working in partnership with the Police and Devon DASV to provide advice and support immediately following a Domestic incident. This has resulted in improved communication and stronger links with agencies in neighbouring counties, enabling further service users to access health care within those counties.	Devon and Cornwall wide local		First Light / Safer Futures Devon DASV and Devon and Cornwall Police	Summer policing - is a continuing initiative. This relates to two separate initiatives – so it is slightly inaccurate. One was a DA car and one was an IDVA crisis line which involved an IDVA being placed into the Police control room during specified times. This was OPCC funded initially, and learning has been shared with IDVA services should they want to progress enhanced services in the future. DCP will of course engage with or consider similar initiatives in the future but have limited influence on IDVA service progression going forward.		complete
13.	To ensure safe contacts with service users, agencies referring to Safer Futures need to provide accurate information regarding the service user's situation. Accuracy of information provided by referring agencies.	Devon and Cornwall wide	D&C Police are in the process of implementing a new information sharing system which will improve the quality of the information provided to enable safe contact with those who are referred to the service.	First Light and Devon and Cornwall Police	This relates to DCP moving towards NICHE information management system in Autumn 2022. DCP identified that IDVA services receive varying levels of information. The information provided by DCP from Autumn 2022 to IDVA services will be at the same level as currently agreed and if there is an opportunity to provide an enhanced level in the future through NICHE then this will be explored. Any future sharing will of course have to take into account the capacity of IDVA services to receive this additional information in the form of medium and/or standard DASHES. Ongoing monitoring of referrals by Safer Futures and issues arising from NICHE implementation	Ongoing	complete
14.	The GP Practice should consider sharing the details of good practice in house- to encourage all clinicians to understand safeguarding processes in a clinical context.	Local Named GP Practice	To be developed by GP Management team and to be cascaded by Cornwall CCG to other Cornwall GP practices	Named GP Practice and NHS Kernow	The GP practice has updated their safeguarding policies and processes and is regularly reviewing these. The key learnings from this DHR have been shared with key members of staff, and all staff are aware of the Safeguarding policies and where these can be accessed on the internal network. Dr Ben Hall is the Safeguarding lead. Dr Harvey is the deputy lead. We also have a care co-ordinator in post who manages both our safeguarding and MDT complex care meetings and minutes from this meeting. In response to learning from this DHR and changes in the visibility of GP practice records since November 2023 the GP practice has processes to identify key safeguarding risk information and capture it on the clinical record. This includes use of relevant safeguarding SNOMED codes (updated in 2023) and to also ensure that information about safeguarding risks	April 2023	complete

					are not visible to the patient via the NHS app. All staff have completed Safeguarding for Adults and Children. Clinical staff to Level 3, Non-clinical staff to Level 1 or 2, depending on the role. This is mandatory for all staff to keep up to date and is clearly set out in our safeguarding policy. Reminders are sent to staff when they are due to update their training. Each year we also have September as our "Safeguarding month", where we promote and remind staff through posters and emails the importance of being in date with their training, raising awareness of and dedicating educational meetings to Safeguarding. We also have First Light GP DASA give domestic abuse training to staff on a regular basis. The last session was in Feb 2024. We are due to have a staff wide domestic abuse intervention training by First Light in November. Snomed codes have been assigned to patients with a safeguarding concern. These are managed by the GP leads and care coordinator. They and any relevant notes with concerns are hidden from view, so are not visible to patients. An audit of all the adult safeguarding patients was conducted in October 2023 ahead of the changes to access in November 2023. Completed NHS Cornwall and Isles of Scilly ICB have cascaded the learning to all GP practices in Cornwall and Isles of Scilly.	April 2023 October 2023	
15.	The Practice should consider the way it records details from the practice in-house safeguarding meetings -so that this information is available on the patient's notes.	Local Named GP Practice	To be developed by GP Management team and to be cascaded by Cornwall CCG to other Cornwall GP practices	Named GP Practice and NHS Kernow	The care coordinator manages the meeting invites. Any staff member / outside agency can add a patient of concern for discussion at this meeting. A list of patients for discussion is circulated using NHS numbers, initials and DOB prior to meetings. The care coordinator takes the minutes at the MDT meetings and safeguarding meetings, which includes a list of the attendees and their profession. The minutes document clearly the Patient details and summary of concerns, and action plan. The minutes note clearly who is responsible for following up on any actions. The care coordinator adds any relevant notes to the patient record. These are hidden from patient view, where appropriate. Any Snomed codes are added where there is a new safeguarding concern raised, and	April 2024	complete

					where appropriate to add further comment. Minutes from the meetings are shared across the MDT and are accessible to all staff through the internal network, saved in clearly marked folders, with year and files dated. Completed NHS Cornwall and Isles of Scilly ICB have cascaded the learning to all GP practices in Cornwall and Isles of Scilly.		
16.	The Practice should consider encouraging clinicians to record more details of social or safeguarding history enquiries made during clinical consultations - so that this is available on the notes for future clinicians and as a record that it has been undertaken	Local Named GP Practice	To be developed by GP Management team and to be cascaded by Cornwall CCG to other Cornwall GP practices	Named GP Practice and NHS Kernow	The learning from this DHR was shared with GP practice clinical leads. The key learning and reflection is about appropriate enquiry into domestic abuse for people who present with mental health issues, chronic pain. GP practice safeguarding training/policy includes reference to the NICE domestic abuse guidance about when to enquire about domestic use. The GP practice has completed DASA training which supports GPs to make enquiries into domestic abuse and sexual violence. The GP Practice last received DASA training in Feb 2024. The practice plans to conduct a practice wide training session with First Light DASA in November 2024 during a planned ½ day closure for training. We ask that our clinical staff review and discuss any updates on NICE guidelines during educational meetings, which are planned every 6 weeks. Clinical staff are noting any discussions of concern in the patient record and hiding from patient view where appropriate. They are referring patients to First Light, Mental Health worker or seeking advice from Social Prescribers, care coordinator or GP Lead where appropriate, and raising for discussion in MDTs where necessary (as above). Completed NHS Cornwall and Isles of Scilly ICB have cascaded the learning to all GP practices in Cornwall and Isles of Scilly	February 2024	complete

*NHS Kernow is now Cornwall and the Isles of Scilly Integrated Care Board (ICB)